

Medicus Mundi Schweiz Netzwerk Gesundheit für alle Réseau Santé pour tous Network Health for All

MMS Bulletin #132

"Nicht ohne uns!" - Jugendliche und die sexuelle und reproduktive Gesundheit in der internationalen Zusammenarbeit

The experience of a Honduran Red Cross – Swiss Red Cross project

Preventing teenage pregnancies in Honduras

Von Sandra Dominguez O'Hara

Teenage pregnancies are factors not only of sexual and reproductive health determinants but also of social, cultural, political and economic considerations. Priority must be given to the development of an integrated strategic approach. The adolescent population requires educational, recreational, labour and health opportunities and needs answers to questions of access to and use of sexual and reproductive health resources. A project of the Honduran Red Cross addresses these different levels.



Honduras is located in Central America and has a population of 8 million. Of those, 1,905,610, or 24 per cent, are adolescents, according to official figures from the National Statistics Institute. Honduras has the second highest fertility rate among adolescents, at 102 per 100,000 live births, of all Latin American countries, and adolescents in Honduras face the same reality as elsewhere in Latin America. To start, teenage pregnancy must be viewed as a social problem, for when a teenager becomes pregnant, all society should mobilize. Indeed, teenage pregnancies affect the development of adolescent boys and girls, who are confronted with new situations that frustrate or modify their life plans, especially in terms of study, professional careers and achievement of personal goals.

Teenage pregnancies

This paper discusses activities carried out in Pespire Municipality, in Choluteca Department, Honduras. Pespire has 29,694 inhabitants and 6,055 dwellings; 6,181 inhabitants (21% of the population) are between 10 and 19 years old, which is roughly in line with the national average (24%). However, 25.44% of the town's female inhabitants aged between 10 and 19 have been pregnant at some point; either they are already mothers or they are expecting. This is higher than the national average of 22 per cent. In addition, the pregnancy rate is higher in rural communities than in urban areas.

The high teenage pregnancy rate is related to various factors. One important factor is limited access to sex education and integrated health services, the lack of age-appropriate programmes to delay the start of sexual activity or avoid a first pregnancy. Studies have also identified associated factors, such as a history of sexual abuse, myths, beliefs and religious precepts limiting the use of contraceptives, poor or insufficient knowledge among parents of their own sexuality that is passed on to the next generation and results in fathers and mothers being uninvolved in the emotional lives of their children, or simply the absence of sex education in families. Another factor is domestic violence and a hostile home environment, prompting young people to leave home and create a new family of their own. The intergenerational pattern of pregnancy is another important factor, with adolescents following in their parents' and grandparents' footsteps. In terms of public health services, the current service model does not guarantee fulfilment of adolescent rights and does not facilitate access by or meet the specific needs of adolescents.



Strategies for action and cross-cutting approaches

The prevention of teenage pregnancy should not be considered in isolation, but rather in integrated fashion and not just in relation to health or health activities. The cross-cutting approaches used to implement the strategy are aligned with those established in the national strategy for the Accelerated Reduction of Maternal and Child Mortality (RAMNI, in Spanish),

which comprises health sector reform tackled from various angles (expanded coverage, resultbased management, intersector focus, investment harmonization and alignment, gender equality and equity, rights-based and intercultural approach).

These reference frameworks and cross-cutting approaches will be incorporated into the activities carried out at institutional level (Health Secretariat and others) to prevent teenage pregnancies. In addition, the Millennium Development Goals and national and international commitments requiring state and private entities to implement strategies aimed at reducing teenage pregnancy rates should be an integral part thereof, taking account of the problems, interests and initiatives of this sector of the population and offering economic, social and cultural development alternatives.

Principal project activities

Using funds provided by the Swiss Red Cross, the Honduran Red Cross has been active in community health in the area since 2009. Its work is based on health situation findings identifying the population's low level of health education, limited self-care practices and, among other issues, high rate of teenage pregnancies. In view of this situation, priority was given to implementation of a project with an integrated health focus, encouraging the IFC (individual, family, community, pdf) strategy and working with different methods adapted to each of those levels, including door-to-door home visits to reach everyone, specifically very remote homes and families without access to health services or information.

The dynamic play methods used were also adapted to each population group (school-age children, adolescents, men and women, families, community organization leaders), covering all issues of sexual and reproductive health. In the past, greater emphasis had been placed on women, but experience had shown that it was imperative to have adolescent boys reflect on their sexuality and masculinity, in a strategic and preventive approach that serves to heighten awareness of sexually responsible behaviour among men as well. The fact that all key stakeholders were involved – the Health Secretariat, the Education Secretariat, municipal mayors, health committees, parents' associations, midwives, and above all peer groups – has proven to be a very important strategy.

Project outcomes

The project's activities have contributed to a drop in teenage pregnancies in Pespire Municipality over the past five years, from 157 registered in 2009 to 47 in 2014, i.e. a decrease of 70.1 per cent, an achievement made possible thanks to close coordination and cooperation between all the above stakeholders.

Role and influence of national and international policies

A number of national and international commitments have been established that define the legal framework within which the Health Secretariat and the other stakeholders and strategic partners carry out the political, technical and administrative activities that help to reduce this major social and public health problem. The most important include the 1989 Convention on

the Rights of the Child, the 1994 International Conference on Population and Development, the 2000 Millennium Development Goals, and the 2005 Ibero-American Convention on the Rights of Youth. All recognise that it is crucial to reduce the high rates of teenage pregnancy in order to improve the lives of women, families and society in general.

At the national level, as a contribution to the Millennium Development Goals and in response to the situation, the Health Secretariat, through its Programme of Integrated Adolescent Care, is conducting intersectoral and interprogrammatic activities and has presented the National Strategy for the Prevention of Teenage Pregnancies in Honduras (the ENAPREAH, in Spanish, pdf), which describes the community and institutional activities to be implemented with a view to reducing this major health problem.



Recently, the President of the Republic of Honduras, at the initiative of the First Lady, launched the Plan to Prevent Teenage Pregnancies. The government's goal is to reduce the specific rate of teenage pregnancies from 101 to 76 per thousand women by 2018; specific objectives are to delay the start of sexual activity, raise secondary school attendance, ensure that sexuality is an integral part of the national curriculum, increase the prevalence of the use of modern contraceptive methods and reduce the level of violence in general, especially gender-based, sexual and domestic violence. As this is a very recent initiative, no plans have been published yet about the allocation of resources or implementation.

There is clear agreement at both national and international level on the need to improve sexual and reproductive health overall and among adolescents generally, but the resources required to translate words into action are lacking. In the case of the project area, were it not for the Red Cross, few concrete activities would be implemented under these policies.

Conclusions

It is important to bear in mind that teenage pregnancies are factors not only of sexual and reproductive health determinants but also of social, cultural, political and economic considerations. Priority must be given to the development of an integrated strategic approach. The adolescent population requires educational, recreational, labour and health opportunities and needs answers to questions of access to and use of sexual and reproductive health resources. The needs and human rights of adolescents must be tackled as a matter of urgency; adolescents are considered a relatively "healthful" sector of the population and their health needs are therefore often "overlooked". The plight of this population in Honduras is the same as elsewhere in Latin America: adolescents are affected by poverty, low rates of school attendance, lack of opportunities, conflictual family relations, limited access to health services, high pregnancy and maternal and perinatal mortality rates, sexually transmitted illnesses such as HIV, and violence in general, but especially gender-based, sexual and domestic violence.

The project's success is due to the joint work undertaken with the counterparts – the Health Secretariat, the Education Secretariat, mayors, community leaders through health committees, local emergency committees, midwives – with whom activities are carried out that have an integrated focus and involve key stakeholders throughout the process (school-age boys and girls, adolescents, men, women, the family and the community). This guarantees that adolescents will in future be better integrated into the education system and the labour market, ultimately improving the living conditions of the adolescent population.

The project's previous experience in the area clearly demonstrated that it could no longer focus as a priority on women to improve sexual and reproductive health. It is imperative to have adolescent boys reflect on their sexuality and masculinity, with a view to prompting them to engage in responsible sexual relations.

The **Honduran Red Cross** focuses as a priority on disaster management, basic health promotion, blood safety, social integration and the prevention of violence. Together with the Swiss Red Cross, it is currently implementing four projects, the biggest and most comprehensive of which is the Zona Sur basic health promotion and risk reduction programme, in the southern departments of Valle and Choluteca.



Die TagesWoche hat mit Sandra Dominguez ein Interview geführt: «Jugendliche brauchen Alternativen zur Schwangerschaft» Sexualbildung und Familienplanung in Drittweltländern sind wichtige Themen, gerade im Kontext der anstehenden Volksabstimmung über die Ecopop-Initiative. Doch wie sieht die Präventionsarbeit vor Ort aus? Davon erzählt Sandra Dominguez aus Honduras im Interview. Von Mara Wirthlin



Sandra Dominguez O'Hara is a trained primary school teacher and a certified social worker with practical experience in the fields of health education and health promotion. For the past four years she has headed the health component of the Honduran Red Cross project in southern Honduras. The priorities are basic health care, prevention of infectious

diseases and sexual and reproductive health.

Kontakt

Deutschschweiz Medicus Mundi Schweiz Murbacherstrasse 34 CH-4056 Basel Tel. +41 61 383 18 10 info@medicusmundi.ch

Suisse romande

Route de Ferney 150 CP 2100 CH-1211 Genève 2 Tél. +41 22 920 08 08 contact@medicusmundi.ch