Adolescent Health and Well-being

Working Group 3 Presentation
Overview: key issues in adolescent health and wellbeing

Leading causes of death among adolescents

- Road traffic injuries
- Lower respiratory infections
- Suicide
- Diarrheal diseases
- Drowning
- Complications from pregnancy & childbirth (For girls 15-19)

- 1.2 billion adolescents in the world today
- Development during adolescence underpins well-being throughout life
- 3,000 adolescents die every day from preventable causes
Evidence-based approaches to addressing these issues

- Multi-stakeholder and cross-sectoral approach
- Meaningful adolescent and youth engagement
- Continued and sustained investment

Esther Moraes, YP Foundation, PMNCH AY constituency
PMNCH contribution to EWEC targets

By 2020...

- At least 10 youth-led coalitions supported in advocacy and accountability capacity development
- Increased engagement of AY movements with skills & knowledge to exercise their rights to make informed choices about their health
- Advocacy Roadmap developed and executed at global, regional and national levels
- Improved capacity of AY movements to mobilise, advocate and engage in decision-making bodies for SRMNCAH policies and programs
- Increased political commitment and financing for multi-sectoral rights-based national plans for adolescents
- PMNCH resource materials and tools reach more than 50,000 adolescents and youth

National stakeholders meeting
Yaoundé, Cameroon, December 2017
What is PMNCH’s added value?

PMNCH’s contributions can be grouped into four broad categories:

- Managing knowledge and evidence
- Empowerment & Advocacy to catalyse social change
- Movement building
- Tracking and reporting
Working group discussion: key questions

1. Recognising the cross-sectoral nature of adolescent health and wellbeing in the SDG era and the role adolescents can themselves play in promoting this issue, identify 2 to 3 frontier issues that should be given priority by PMNCH. Why should they be given priority? Keeping in mind the 4As (Alignment, analysis, accountability, advocacy), what role do you envision PMNCH would play in raising the visibility of these issues?

2. What suggestions do you have for sharpening the proposed deliverables for the adolescent health and wellbeing workstream to ensure PMNCH delivers on the partner-centric approach and moves towards achievement of the EWEC targets?

3. How can PMNCH best foster cross-constituency collaboration and harness the full potential of youth engagement to deliver on the adolescent health and wellbeing work stream, with the meaningful engagement of adolescent and youth organisations?

4. Noting that adolescents are not just beneficiaries but agents of change as well, what are opportunities to optimize collaboration between the adolescent health and wellbeing work stream and the 5 other thematic work streams? Or the cross-thematic work streams (i.e. political commitment and partnership development, seed grants program and accountability)?