Tackling exclusion: Strengthening SRHR among pregnant adolescents & adolescent mothers

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IRELAND’S MAGDALEN LAUNDRIES
AND THE NATION’S ARCHITECTURE OF CONTAINMENT

JAMES M. SMITH

“...the book offers a critical examination of society’s understanding of the Magdalen institutions and provides a means of understanding the ways in which memory, commemoration, and responsibility work in Irish society, especially in relation to these particular institutions. I have no doubt that this will be an important book. It will prove controversial, will challenge the debate on the Magdalen institutions in Ireland, and it should receive considerable publicity.” — Maria Ladd, University of Warwick

“...Irish Magdalen Laundries is the story of young women locked away for a lifetime, without due process appeal, for perceived acts of the flesh, a violation of a moral code established early by the government but by the most powerful force in the country, the Catholic Church. James M. Smith has provided the first comprehensive history of the Magdalen laundries, uncovering the secrets, dispelling the myths, and providing the context for a most unpalatable story that has yet to be told, but has yet to be told.” — Wren Kestel, Wiener Library

“...Jim Smith’s Ireland’s Magdalen Laundries offers a well-informed interdisciplinary study of an institution that has received a great deal of attention in recent years. Without excusing the crimes of those who administered the laundries, Smith’s balanced commentary does much to redress the distorted impressions created by the apologetic rhetoric of less sophisticated approaches.” — Michael Roach, Dublin City University

Focusing on the ten Catholic Magdalen laundries operating between 1922 and 1996, Ireland’s Magdalen Laundries and the Nation’s Architecture of Containment offers the first study of women entering these institutions in the twentieth century. Because the religious orders have not opened their archival records, Smith argues that Ireland’s Magdalen institutions continue to exist in the public mind primarily at the level of story (cultural representation and survivor testimony) rather than history (archival history and documentation). The book is addressed to academic and general readers alike.

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MURDER IN THE NAME OF HONOUR
THE TRUE STORY OF ONE WOMAN’S HEROIC FIGHT AGAINST AN UNBELIEVABLE CRIME

RANA HUSSEINI

WHEN A LIFE IS WORTH LESS THAN HONOUR
Maternal health service utilization of adolescent women in sub-Saharan Africa

...a significant number of adolescents in sub-Saharan Africa do not access & use maternity services during pregnancy. Several factors from individual to systematic levels contributed to low access & utilization. This implies that interventions targeting the women, their partners, health care professionals, communities & the organizations (local to national) are necessary to improve adolescent mothers’ engagement with maternity care in sub-Saharan Africa.
Maternal health service utilization of adolescent women in sub-Saharan Africa: a systematic scoping review

Teresa Melkonian, Tirashe Durc and Janette Petz

Fig. 3 Four or more ANC visits during pregnancy by adolescent mothers in Sub-Saharan Africa

Fig. 4 Proportion of adolescent women who accessed skilled care during delivery in Sub-Saharan Africa
Although a large proportion of west African adolescents use antenatal care for their first birth, they seek care later, make fewer visits during pregnancy, & receive fewer components of care than older first time mothers.

Governments must ensure that the pregnancy care accessed by adolescent mothers is of high quality & is tailored to their needs.
More than a third of women experience mistreatment & were particularly vulnerable around the time of birth. Women who were younger & less educated were most at risk, suggesting inequalities in how women are treated during childbirth.

Understanding drivers & structural dimensions of mistreatment, including gender & social inequalities, is essential to ensure that interventions adequately account for the broader context.
30% of women globally: have experienced physical &/or sexual violence by an intimate partner

Prevalence rates of intimate partner violence by WHO region*, 2010

* Regional prevalence rates are presented for each WHO region including low- and middle-income countries, with high-income countries analyzed separately.

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not be full agreement. © WHO 2013. All rights reserved.

Data Source: Global and regional estimates of violence against women. WHO. 2013.
YES WE CAN
Conclusions:
...multi-layered community-based interventions targeting young married women, their families & the health system can improve the utilization of reproductive health services among young couple in resource-constrained settings. ...
What Works

- **Targeted contraceptive services and information to first-mothers and inclusion of partners and families in contraceptive education**

  Services should be targeted during antenatal care, as well as before discharge from delivery facility, during immediate or early postpartum period, and during childhood immunization visits

- **Community-based social and behavioral change communication**

  Counselling and community education on: possibility of postpartum fertility return before the return of menses, importance of using contraceptives before menses return, benefits of healthy pregnancy spacing, use of contraceptives to prevent adverse outcomes

  Group discussions in homes of village leaders to encourage positive views of contraceptives & the use of communication skills to share learning with husbands
What Works to Address Rapid Repeat Pregnancy Among Adolescents (continued)

- Motivating, mentoring, and goal-setting interventions
- Interventions focused on “planning the next pregnancy” rather than on avoiding unintended pregnancy
  - Preparation of plans by adolescents to achieve short-term life goals (e.g., improved parenting) & long-term goals (e.g., education)
  - Use of a mentorship curriculum by “big sisters” in the community to adolescent mothers during home visits
  - Motivational interviewing that emphasizes goals & self-efficacy in relation to health behaviour
  - Skills training & job placement for adolescents over age 16 & educational support for mothers under age 16
Reaching First-Time Parents and Young Married Women for Healthy Timing and Spacing of Pregnancies in Burkina Faso

Key implementation-related findings from Pathfinder International’s “Addressing the Family Planning Needs of Young Married Women and First-Time Parents Project”
September 2015

INTERVENTIONS TO REACH MARRIED ADOLESCENTS FOR INCREASED CONTRACEPTIVE USE IN NIGER

![Graph showing intervention effectiveness]

**Control**: 17% (Baseline: 17.5%, p<0.001)

**Home Visits**: 29% (Baseline: 28.8%, p=0.01)

**Group Sessions**: 40% (Baseline: 31.5%, p=0.04)

**Both**: 44% (Baseline: 30.4%, p<0.001)

**Filename**
BMG Foundation supported
AYS RH Technical Assistance Coordination Mechanism

To deliver TA that countries need for designing, implementing, monitoring, reviewing and documenting their AYSRHR programmes*, in ways that are:

- **timely** (through a mechanism that can respond in a punctual manner);
- **effective** (from individuals with the right technical and practical experience in a similar context, with back-up from evidence-based programme-support tools);
- **efficient** (from experts located as close to the respective country as possible, using methods that are cost-effective); and,
- in ways that contribute to **strengthening national capacity**.

*While the focus of the TA coordination mechanism will be AYSRHR, particular emphasis will be placed on improving access to and use of contraception.*
Which countries have requested support thus far, and for what?

**AFGHANISTAN**
To strengthen the health system’s response to AYSRHR and stimulate stronger intersectoral collaboration by conducting a review of the health situation of adolescents and youth and developing a proposal improving priority health sector-led interventions for AYSRHR and linking them with the work of other sectors.

**MALAWI**
To strengthen the design and delivery of adolescent-friendly health services by reviewing the factors affecting the provision and use of AYSRHR services by different groups of young people, identifying appropriate and targeted service delivery models, and developing an operational plan.

**SIERRA LEONE**
To strengthen the national response to decreasing second pregnancies in adolescents by reviewing and refining draft national guidelines and developing proposals for their validation and operationalization.
These are some signs and symptoms to be aware of...

Danger signs in pregnancy

...and let’s talk about plans for where, when and how to go for help if needed