

Adolescent Reproductive Health in Malawi

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Reproductive Health is defined as a state of complete physical mental and social well-being, and not merely the absence of disease or infirmity, in all matters related to reproductive system and to its functions and processes" - (WHO).

Adolescence is a time of transition. Hormonal changes trigger the development of secondary sex characteristics (changes in voice, hair growth etc). Hormones also mediate rapid mood changes and what appear to be overly emotional reactions. These reactions may be confusing to the adolescent as well as to those around.

The socio-economic crisis effecting the African continent has not spared the adolescent, who is as exposed as everybody to ignorance, poverty, unemployment, malnutrition, disease and lack of shelter.

All these factors combine to encourage rural-urban migration and a consequent social dislocation and breakdown of the family unit. In these circumstances adolescents are at risk of sexually transmitted infections, early and/or unwanted pregnancy, unsafe abortion and HIV-AIDS. And a new problem that has appeared is drug abuse and illicit drug trafficking.

The family is the fundamental unit of society that provides the basic material and moral support to the adolescent while also exercising a high degree of control. The stability of the African family has been seriously eroded by the socio-economic crisis and its resultant social ills. The average per capita income and the average nutritional intake levels have declined, while the number of single parent families has increased.

How often do we hear it said: *'Twelve million children die of poverty each year.''The gap between the world's rich and poor is widening.''Over-population, over-consumption of energy and environmental destruction threaten the earth's survival.'* Unfortunately most of us in developing countries cannot think about these facts often or long. But if our attention is constantly diverted these problems will never be solved.

At Queen Elizabeth Central Hospital (QECH) in Blantyre, out of 11,924 women giving birth in a recent year 3,339 (28%) were adolescents. The risk of anaemia developing

during pregnancy, of intra-uterine growth restriction, of premature birth and of complications during labour are all significantly higher for an adolescent mother than for a woman in her twenties. The adolescent also faces a greater risk than others of dying during pregnancy or childbirth.

We in Malawi need *Harambe* ('let us pull together') to safeguard our vulnerable adolescents. Here are some ways we could achieve this:

- Involve parents, school teachers, religious leaders and popular social figures in the provision of correct and timely information to both boys and girls from the ages of 10-14 and 15-19 years, tailoring the style and content to the needs of the different age categories.
- Relevant information should be provided through public media, women's focus groups, men's clubs, political rallies, religious meetings, peer groups, adolescents themselves and youth clubs.
- The school curricula for primary, secondary and higher learning institutions should include adequate sections on reproductive biology and health, family planning, and prevention of STIs including HIV-AIDS.

When adolescents lack guidance and information, and when measures to prevent exposure to dangerous pathogens - especially HIV - are inadequate, they are at great risk of becoming infected. They are also less likely to seek timely professional medical help and more likely to undertake dangerous self-treatment. The consequence of this may be permanent impairment of health, infertility, psychological damage or even death, with long term effects not only on their immediate families but also on society as a whole.

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References

1. Tadesse E, Gudunfa A, Mengistu G. A survey of adolescent reproductive health in the city of Addis Ababa. *Ethiopian Journal of Health Development* 1996;10:35-39.
2. Kelsay A Harrison: Commentary: maternal mortality in developing countries. *British Journal of Obstetrics and Gynaecology* 1989;96:1-3.
3. Editorial. Maternal health in Sub-Saharan Africa. *Lancet* 1987; 223-257.

Erratum

In the last issue of MMJ we erroneously placed the letters ' NGO' above an article about the work of the Safe Motherhood Project. Safe Motherhood is in fact not an NGO but a Project within the Ministry of Health and Population. We apologise for this mistake