The health of young people in developing countries is improving. They are making the transition to adulthood with better chances of surviving into old age. At the same time, HIV/AIDS and maternal mortality and morbidity continue to threaten young people’s sexual and reproductive health.

**Age of Puberty Is Declining**

Evidence from various parts of the developing world indicates that the age at puberty has been falling for both boys and girls, due mostly to improvements in nutrition.

**Age of Sexual Initiation Remains Stable, Age of Marriage and Premarital Sex Are Increasing**

Contrary to widespread belief, sexual initiation is not occurring at younger ages relative to the past in most countries. Delays in the age of marriage, however, have meant that there is a greater likelihood that first sex will be experienced prior to marriage.

**Young People Are Faced With Sexual Coercion**

Sexual coercion appears to play a considerable role in the sexual relations of both young men and women. The magnitude of sexual coercion varies across countries but appears to be somewhat lower in Asia compared with sub-Saharan Africa and Latin America.

**Knowledge and Use of Contraception Is Increasing**

More than nine in every 10 women ages 15 to 24 know about at least one contraceptive method and most know more than one, according to most surveys conducted in the past five years. Contraceptive use is increasing among sexually active young women, especially those who are unmarried. Rising contraceptive use is most evident in Latin America and the Caribbean and in Eastern and Southern Africa.

**Youth Account for Significant Share of HIV Infections**

About one-half of all new HIV infections are now among youth. Globally, an estimated 12 million people ages 15 to 24 were living with HIV/AIDS in 2002. Three-quarters of these live in sub-Saharan Africa. Girls and young women face a higher risk of infection, due to physiological, social, and cultural factors. HIV/AIDS is the leading cause of death for women ages 15 to 29 in sub-Saharan Africa and one of the leading causes of death for men in the same age group.

Since most HIV infections are sexually transmitted, the vulnerability of young people is strongly influenced by sexual behavior and their ability to protect themselves. Early age at sexual initiation, early marriage, risky sexual practices, and commercial sex are all contributing factors.

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**Percentage Distribution of Deaths at Ages 15-29 by Cause, According to Sex and Region**

<table>
<thead>
<tr>
<th>Region</th>
<th>Sex</th>
<th>Cause of Death</th>
<th>Maternal Mortality</th>
<th>HIV</th>
</tr>
</thead>
<tbody>
<tr>
<td>WORLD</td>
<td>Females</td>
<td>15.4</td>
<td>30.3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>0.0</td>
<td>17.3</td>
<td></td>
</tr>
<tr>
<td>Sub-Saharan Africa</td>
<td>Females</td>
<td>16.6</td>
<td>57.8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>0.0</td>
<td>43.1</td>
<td></td>
</tr>
<tr>
<td>Southeast/Southwest Asia</td>
<td>Females</td>
<td>16.7</td>
<td>11.8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>0.0</td>
<td>13.2</td>
<td></td>
</tr>
<tr>
<td>North Africa/Middle East</td>
<td>Females</td>
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<td>7.2</td>
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<tr>
<td></td>
<td>Males</td>
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<td>5.0</td>
<td></td>
</tr>
<tr>
<td>Latin America</td>
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<td>7.1</td>
<td></td>
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<tr>
<td></td>
<td>Males</td>
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<td>6.0</td>
<td></td>
</tr>
<tr>
<td>East Asia</td>
<td>Females</td>
<td>6.1</td>
<td>1.8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>0.0</td>
<td>3.0</td>
<td></td>
</tr>
</tbody>
</table>

Maternal Deaths and Disabilities Are a Major Concern

Most studies show that women younger than age 18 or 20 who bear a child face a greater risk of dying of maternal causes and have more health risks than women who become mothers at slightly older ages. Very young women who become pregnant and give birth may also suffer health consequences such as preterm labor, obstructed labor, and permanent damage to reproductive organs.

Policy Recommendations

A panel of international experts convened by the National Research Council has made the following policy recommendations for improving youth sexual and reproductive health. These recommendations are based on the data gathered by the panel, highlighted in this fact sheet:

- Make providing general health information and sex education a priority. Increase the availability of services for the sexually active.
- Design multipronged and multisectoral programs to reduce risky and unprotected sex among young people. The approach must include active collaboration between the health and education sectors.
- Focus programs on improving negotiating skills and making sex, among those who do engage in it, wanted and safe.
- Provide appropriate family planning services for young women and men, both married and unmarried. There are still large proportions of young women in some countries who do not use contraception despite a preference to delay or avoid pregnancy.
- Reduce the disparity in maternal risk between developing and developed countries with appropriate interventions. These include the use of skilled attendants at delivery and access to emergency obstetric care for the treatment of pregnancy, delivery, and postpartum complications to reduce maternal health risks. Safe abortion in countries where it is legal and post-abortion care everywhere are essential to maternal health programs.

Call to Action*

In order to achieve a world where young people can live healthy, productive, and fulfilling lives, governments, civil society, and young people themselves must promote policies and programs that support access to comprehensive sexual and reproductive health information and services for youth.

Governments Should:

- Include young people on local, state, national, and international decisionmaking bodies that directly affect youth reproductive and sexual health policies and programs.
- Pass legislation and commit funds to increase access to comprehensive sexual and reproductive health information and services for youth.
- Commit funds to support multipronged and multisectoral programs for youth such as comprehensive sex education, youth development, and youth employment programs.

Civil Society Should:

- Demand laws and funds to ensure access to comprehensive sexual and reproductive health information and services for youth.
- Sponsor young people as members of decisionmaking bodies affecting young people’s access to sexual and reproductive health information and services.
- Involve young people in developing and implementing programs designed to improve access to sexual and reproductive health information and services.

Young People Should:

- Speak out for their right to comprehensive information on sexual and reproductive health and access to services.
- Lobby governments to pass legislation and allocate funds that ensure access to comprehensive sexual and reproductive health information and services for youth.
- Monitor and voice any problems with implementation of national policies as well as relevant international commitments, such as those made at the International Conference on Population and Development (ICPD) and the UN General Assembly Special Session on HIV/AIDS.

*Developed by Advocates for Youth, the Call to Action is based on the data and policy recommendations included in Growing Up Global.

Additional Resources

Population Reference Bureau’s World’s Youth 2006 Data Sheet: www.prb.org/pdf06/WorldsYouth2006DataSheet.pdf

Advocates for Youth’s Fact Sheet on Youth and the Global HIV/AIDS Pandemic: www.advocatesforyouth.org/publications/factsheet/fsglobalHIV.pdf

Advocates for Youth’s Fact Sheet on the Sexual and Reproductive Health of Youth: www.advocatesforyouth.org/publications/factsheet/fsglobal.pdf


Copies of the full report (720 pages) are available from the National Academies Press, 500 Fifth St., NW, Lockbox 285, Washington, DC 20055; (800) 624-6242 or (202) 334-3313 (in the Washington metropolitan area); www.nap.edu.