



Editorial

Adolescents' Sexual and Reproductive Health and Rights: What Has Been Achieved in the 25 Years Since the 1994 International Conference on Population and Development and What Remains to Be Done?



In 1994, more than 10,000 participants, including representatives from 179 governments, United Nations agencies, as well as nongovernmental and civil society organizations convened in Cairo (Egypt) for the International Conference on Population and Development (ICPD). The conference adopted a forward-looking Programme of Action (PoA) that continues to serve as a comprehensive guide to development policies and programs that are centered around the improvement of people's health and well-being and the reduction of inequalities [1]. The PoA underscored the centrality of ensuring the sexual and reproductive health and rights (SRHR) of all people in the pathway to sustainable development [1]. The PoA also gave prominence to adolescents' SRHR and served as an impetus for increased investments and programs aimed at improving their health and well-being.

In the 25 years following the ICPD, there has been increased international commitment to improving the health of adolescents (aged 10–19 years) and, in particular, their SRHR as evidenced by increased investments in adolescent SRHR programming. This supplement to the *Journal of Adolescent Health* brings together four papers that summarize the milestones that have been achieved in efforts to improve adolescent SRHR in the 25 years since the ICPD and the gaps that need to be addressed over the next 25 years. The first paper by Liang et al. [2] examines trends in key indicators of adolescents' SRHR and social and economic determinants of their SRHR during the 25 years since the ICPD. The second paper by Chandra-Mouli et al. [3] complements the first and provides an overview of policy and programmatic responses over the last 25 years by focusing on six aspects of adolescents' SRHR: pregnancy, HIV, child marriage, violence against women and girls, female genital mutilation, and menstruation.

Collectively, these two papers highlight the significant progress that has been made in enhancing adolescents' SRHR. For example, there is evidence of significant declines in adolescent pregnancy [4], child marriage [5], and female genital mutilation [6]; increased funding for programs and research targeting adolescents; and a significant growth in the number of evidence-

informed policies, normative documents, and guidelines on adolescent-responsive SRHR programming. Despite the progress, several critical gaps remain. First, there remain substantial inequalities across and within countries in key indicators of adolescent health [2]. Second, some indicators such as intimate partner violence and reproductive cancers have worsened [2]. Third, efforts to implement adolescent SRHR policies and programs are impeded by extensive resistance to the provision of comprehensive SRHR information and services to adolescents because of social norms and taboos around adolescents' sexuality [3]. Fourth, the multiple factors that drive adolescents' SRHR demand complex programs that are often challenging to implement. Finally, an issue that remains largely silent in these papers is the limited focus on adolescent boys despite the PoA's emphasis that "Special efforts should be made to emphasize men's shared responsibility and promote their active involvement in responsible parenthood, sexual and reproductive behavior, including family planning; prenatal, maternal and child health; prevention of sexually transmitted diseases, including HIV; prevention of unwanted and high-risk pregnancies" [7].

The third and fourth papers are forward looking and outline some of the actions that need to be taken to address existing gaps. Engel et al. [8] focus on shortcomings at service delivery level and note that adolescents "still risk falling into a policy and service-delivery gap where their specific SRHR health needs are overlooked." To overcome the obstacles to efforts to enhance ASRHR, Engel et al. [8] emphasize the need for a comprehensive approach that addresses the broader social and economic determinants of SRHR to achieve sustainable impact. In their paper, they build on the Guttmacher-Lancet Commission for SRHR report [9] to outline specific recommendations to mainstream adolescent-responsive interventions at the legal, policy, systems, and community levels. In the fourth paper, Plesons et al. [10] highlight key challenges that impede adolescent-responsive actions at country level and some of the emerging opportunities that countries can leverage to overcome these challenges. They then outline five strategic actions that need to be taken to achieve progress: use political, governmental, and social support to strengthen adolescent SRHR

programs; use available resources effectively and demonstrate impact; ensure that enabling laws and policies are widely communicated and applied; use available data and evidence to inform policies and programs; and manage implementation at scale with quality and equity.

All four papers in this supplement reinforce the need for multisectoral interventions to address the wider social and economic determinants of adolescents' SRHR. Although the importance of multisectoral action is not in question, collaboration across multiple sectors is a complicated undertaking, and countries need practical guidance and support to create, implement, and assess multisectoral programs. The *Global Accelerated Action for the Health of Adolescents (AA-HA!): Guidance to Support Country Implementation* [11] provides guidance for multisectoral programming at country level. However, most countries, particularly those in low- and middle-income settings, are likely to require both technical and financial support to implement this guidance particularly for programming on a sensitive topic such as adolescent SRHR. Furthermore, countries must be supported to generate rigorous data and evidence to inform these programs. It is the editor's hope that as countries and key stakeholders reflect on the progress in the 25 years since the ICPD and chart the way forward, this supplement stimulates further investments to enable countries to implement evidence-based comprehensive SRHR programs and policies that will enhance the health and well-being of adolescent boys and girls.

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