



Erasmus + VET Strategic Partnership

IENE 8 - Empowering migrant and refugee families with parenting skills

Bite sized Learning Tool no. 2.4.

**TITLE OF THE TOOL –SEXUAL & REPRODUCTIVE HEALTH
& TECHNICAL SKILLS**

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TITLE: 2.4. SRH AND TECHNICAL SKILLS (12-18 YEARS OLD)

2.4. SEXUAL AND REPRODUCTIVE HEALTH AND TECHNICAL SKILLS

LEARNING OBJECTIVES

1. The first objective of this bite-size learning module is to present the key aspects of sexual and reproductive health for people aged 12 to 18 years old.
2. The second objective is to identify the basic principles of sexual and reproductive health in order to provide specific knowledge and skills.
3. The third objective of this bite-size learning unit is to raise awareness regarding the aspects of sexual and reproductive health, along with some basic technical skills.

WHAT IS SRH?

Sexual and reproductive health (SRH) is a significant public health need in all communities, including those facing emergencies. Read the Integrating sexual and reproductive health into health emergency and disaster risk management policy brief.

(https://www.who.int/hac/techguidance/preparedness/SRH_policybrief/en/).

The relevance of the above element to IENE 8 project, resides in the importance of these issues in the context of assisting refugee and migrants parents with parenting skills.

SRH

Emergencies have a disproportionate effect on the poorest and most vulnerable, particularly women and children. Eight of the ten countries with the highest maternal mortality ratios in the world are in fragile circumstances and are affected by current or recent conflict. Neonatal mortality rates are highest in areas affected by humanitarian emergencies.

Sexual and reproductive health (SRH) is a significant public health need in all communities, including those facing emergencies. As stated in the outcome document of the Rio+20 United Nations Conference on Sustainable Development, universal access to reproductive health, including family planning and sexual health, is needed and should be integrated into national strategies and programmes.

In emergency situations, there is often a lack of access to SRH services. These services need to be strengthened in preparation for future events to reduce SRH-related morbidity and mortality in times of emergencies.

In addition to general messages that relate to the promotion of good sexual and reproductive health, there are specific and important health messages that relate to particular sexual health issues that should be communicated to young people. This topic provides information and suggested messages for young people about some of the key sexual and reproductive health issues that they are likely to have to deal with. They are covered under the following sub-sections.

Sexually Transmitted Infections, including HIV/AIDS. Sexually transmitted infections (STIs) are diseases that can be transmitted from one person to another by sexual contact. STIs can cause pain, and some cause infertility and death if not treated. Some common curable STIs are gonorrhoea, trichomoniasis, chlamydial infection, and syphilis. AIDS refers to Acquired Immune Deficiency Syndrome. AIDS is caused by

the Human Immunodeficiency Virus (HIV). HIV can be transmitted by sexual contact, by blood and from a pregnant woman to her child during pregnancy, childbirth, or, occasionally, by breastfeeding. As of 2000, AIDS has no definite cure. However, treatments have improved the quality and length of life for people with HIV/AIDS, and there is a vast amount of research going into the development of new treatments including anti-retroviral drugs. Adolescent girls are physiologically more susceptible to STIs than older women. The cervix and vagina of an adolescent is different from that of an older woman and makes her more vulnerable to contracting STIs when exposed. Increased likelihood of tearing the vagina during sex further augments this risk. Many adolescent girls do not recognise the symptoms of an STI or do not know where to seek treatment. Additionally, many STIs in women are asymptomatic, making it difficult for them to know when they may have an STI.

Early/Unplanned Pregnancies. Adolescent girls in traditional societies are often bound by cultural norms that equate marriage and motherhood with female status and worth. Even the youngest brides and grooms often face enormous pressure to prove their fertility soon after marriage through the birth of a child. In other cases, cultural traditions encourage young women to prove their fertility before marriage. In some refugee and returnee situations, land/living space is allocated on the basis of numbers of families. This situation can result in adolescent girls being pushed into early child-bearing and/or marriage in order to secure more living space, or to replace the losses that the family has experienced due to conflict or war. Although adolescent girls are mature enough to have sexual intercourse, their young bodies are not necessarily sufficiently developed to be able to carry a pregnancy safely through nine months to the birth of the child. Both the mother and the child are more at risk than they would be if pregnancy was delayed for some years. Children born by adolescent mothers often experience higher risks of death during the first five years of life.

Unsafe Abortions. An unsafe abortion is an abortion that has not been carried out in a safe environment by a health professional. Unsafe abortions include taking of poisons or other potentially harmful substances; or inserting twigs or sharp objects into the womb. Deaths from complications resulting from unsafe abortion account for a significant percentage of all maternal deaths, although accurate data are difficult to obtain. Adolescent girls are often the victims of rape, one of the serious consequences of which is unwanted pregnancy. As many women and girls find little support and limited options in dealing with this problem, many resort to unsafe abortions. As mentioned at the beginning of this topic, sexual and gender-based violence, including rape, is one of the major sexual and reproductive health issues for young people.

Female Genital Mutilations (FGM). Sexual and reproductive health programmes should encompass strategies to discourage female genital mutilation, emphasising the link between the practice and poor reproductive and sexual health and general health in women and girls. It is vital to understand the reasons for the practice before embarking on information campaigns. Efforts by health workers for the elimination of female genital mutilation can be greatly enhanced by enlisting the support of responsible community members for its elimination.

Substance Abuse. The issue of substance abuse should be covered in programmes which focus on sexual, and reproductive health, as it obviously relates to a young person's ability to make informed decisions about their behaviour. Substance abuse is a major factor often linked to unwanted/unplanned pregnancies and associated consequences.

Nutrition. All young people benefit from good nutrition. For young people, when they are changing and growing at a very fast rate, good nutrition is especially important. Additionally, for adolescent girls, it is during this period that their bones are growing and forming. Under-nourished girls may develop very

narrow pelvises so that child-bearing will become difficult or dangerous for themselves or for their children. Adolescent girls who are either pregnant or breast-feeding need to eat well. Appropriate information about nutrition, exercise and rest should be included in a sexual and reproductive health programme.

Key among the issues and concerns are human rights related to sexual health, sexual pleasure, eroticism (see below), and sexual satisfaction, diseases (HIV/AIDS, STIs, RTIs), violence, female genital mutilation, sexual dysfunction, and mental health related to sexual health.

KEY POINTS

Regarding key aspects of SRH

1. Adolescent SRH services therefore aim to provide information, education and health services to adolescents to help them understand their sexuality and protect them from unintended pregnancy and/or sexually transmitted infections including HIV/AIDS.
2. Key Components of sexual and reproductive health care include: family planning, sexual health, and maternal health.
3. Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes.
4. The direct medical benefits of preventing unintended pregnancies, improving maternal health and preventing, diagnosing and treating sexually transmitted infections including HIV/AIDS are well-known; however, the economic and social benefits are no less real, even if they are more difficult to measure.
5. The need for a reproductive health approach. A reproductive health approach recognizes that the foundations of women's health are laid in childhood and adolescence, and are influenced by factors such as nutrition, education, sexual roles and social status, cultural practices, and the socioeconomic environment.

Please also refer the relevant PowerPoint presentation for this bite-size learning unit.

ACTIVITY

QUESTIONS REGARDING SRH

1. What is reproductively healthy society?
2. What is adolescence reproductive health?
3. What Is Safe Motherhood?

REFLECTION ON ONE ISSUE FROM THIS BITESIZED TOOL

Use this space to write down your answers to the questions of the above activities.

SELF ASSESSMENT

Think of young girls aged 12 to 18 living in temporary accommodation facilities, or a camp setting, being refugees and migrants. In your opinion, why is women's reproductive health important?

REFERENCES

1. WHO reproductive health strategy:
https://apps.who.int/iris/bitstream/handle/10665/68754/WHO_RHR_04.8.pdf?sequence=1
2. Womens reproductive health:
<https://www.cdc.gov/reproductivehealth/womensrh/index.htm>
3. Components and attitudes on SRH:
http://www.genderhealth.org/the_issues/comprehensive_sexual_and_reproductive_health/components_and_attributes/
4. WHO SRH guidelines:
https://www.who.int/reproductivehealth/publications/maternal_perinatal_health/anc-guidelines-development/en/
5. WHO simplified SRH guidelines:
<https://www.gfmer.ch/SRH-Course-2010/course-files/pdf/WHO-SRH-guidelines-Bathija-2010.pdf>
6. UNFPA Technical Specialist, Sexual Reproductive Health/Family Planning:
<https://www.unfpa.org/jobs/technical-specialist-sexual-reproductive-healthfamily-planning-srhfp>
7. Development for marginalized rural areas - SRH:
<https://damramalawi.weebly.com/improving-srh.html>
8. MdM Greece Open Learning course on SRH:
<http://mdmelearning.gr/course/view.php?id=2>
9. MdM Greece SRH Best Practice Guide:
<https://mdmgreece.gr/app/uploads/2016/07/05-SRH-BEST-PRACTISE-GUIDELINES.pdf>

ANSWERS TO QUESTIONS IN ACTIVITY SECTION:

A/A	ANSWER
1	Reproductive health refers to a total well-being in all aspects of reproduction, i.e., physical, emotional, behavioural and social. Our nation was the first nation in the world to initiate various action plans at national level towards attaining a reproductively healthy society.
2	Protecting adolescent sexual and reproductive health. Adolescent sexual and reproductive health refers to the physical and emotional wellbeing of adolescents and includes their ability to remain free from unwanted pregnancy, unsafe abortion, STIs (including HIV/AIDS), and all forms of sexual violence and coercion.
3	Safe motherhood is one of the subareas found in the women's health part of the sexual and reproductive health (RH) section of the database. Over time, policies and strategies to achieve safe motherhood have changed as knowledge and understanding about the determinants of maternal health have become clearer.

ANSWER FOR SELF ASSESSMENT ACTIVITY:

A woman's reproductive system is a delicate and complex system in the body. It is important to take steps to protect it from infections and injury, and prevent problems—including some long-term health problems. Taking care of yourself and making healthy choices can help protect you and your loved ones.