



In the Name of God, the Compassionate, the Merciful

Address by

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to the

**REGIONAL WORKSHOP ON ADOLESCENT SEXUAL AND REPRODUCTIVE
HEALTH RESEARCH: TRANSLATING RESEARCH FINDINGS INTO ACTION**

Tunis, Tunisia, 14–17 June 2010

Your Excellency, Dear Colleagues, Ladies and Gentlemen,

I have great pleasure in welcoming you to this regional workshop on adolescent sexual and reproductive health research: translating research findings into action, starting today in this lively city of Tunis.

At the outset, I would like to express my sincere gratitude to His Excellency Mr Mondher Zenaïdi, Minister of Public Health, and the Government of Tunisia for kindly hosting this workshop and providing us with yet another opportunity to come together and learn from the experiences of each other. I would also like to extend my warm welcome to the participants and representatives of sister UN agencies and international organizations for joining us in this endeavour. Special thanks go to our colleagues from WHO headquarters for their valuable support and contribution in bringing about this important activity.

Ladies and Gentlemen,

Adolescence is a time when young people, who are no longer children and are not yet adults, experience new ideas, new relationships and new lifestyles. The difficulties of this transitional age, combined with risky environmental conditions, lead some to experimentation and adoption of behaviours and practices that have lifelong consequences. For young people who survived the risks of diseases of infancy and childhood and are generally considered healthy in the conventional sense, sexual and reproductive health emerges as an important issue that has a critical impact on their physical, mental and social well-being. During these formative years, adolescents become subjected to many influences dominating their internal and external environment including: their parents, their peer groups and the media.

Unfortunately, in traditional societies there is, usually, a delay in offering appropriate information to teenage girls and boys that can help them to understand the biosexual changes they are undergoing and, consequently, enable them to act in a responsible manner in their communities.

It is a reflection of the time-honoured traditional values and beliefs of the Region that the incidence of sexually transmitted diseases, common among adolescents in other parts of the world, remains relatively low. However, any sense of complacency should be guarded against. The gradual decline of the family influence, the proliferation of the nuclear family, rapid urbanization and the massive increase in exposure to the mass media are factors that are contributing to major changes in the social behaviour of adolescents. At the same time, national data on adolescent sexual and reproductive health in Member States are insufficient, and when available they are inadequately utilized in advocacy, health education and programme development. Furthermore, situational analyses undertaken in Eastern Mediterranean Region countries have demonstrated the inadequacy of conventional health systems in meeting the sexual and reproductive health needs of adolescents. There is also insufficient awareness among health care providers of the psychological, social and biophysiological aspects of sexual and reproductive health of adolescents. Research based on scientific approaches would generate reliable information, which in turn would help identify and prioritize areas of action in response to sexual and reproductive health of adolescents.

I would like here to emphasize the urgent need to create a database on important issues such as: types of reproductive risky behaviours among adolescents; availability of essential components of sexual and reproductive health care for adolescents; appropriate ways of disseminating information to key players, partners and adolescents themselves for promoting their reproductive health; and enabling the roles of families and communities in enhancing positive behaviours among adolescents and in acting as agents of change. At the same time, information on adolescent sexual and reproductive health in Member States needs to be efficiently channelled into the formulation of appropriate policies and programmes.

Ladies and Gentlemen,

Let me conclude by wishing you all the very best in the deliberations of this workshop. I am confident that this activity will achieve its objectives with admirable success and provide future direction to our activities in the crucial area of adolescent reproductive health research.