

ADOLESCENT GIRLS' HEALTH AND PROTECTION IN PERU



© UNICEF/2021/LANZA



© UNICEF/2021/LANZA



© UNICEF/UN0434495/Vela

GOAL

Improve the capacity of services to respond to the health needs of adolescents, in particular adolescent girls, in a timely manner and prevent all forms of violence in schools and other services.

FUNDING: US\$750,000 to UNICEF USA

WHO WILL BENEFIT



Adolescents, especially girls, must have opportunities to empower themselves so they can speak up for their rights and develop the self-confidence and autonomy needed to take control of their lives and bodies. Significant inequities based on gender, age, geographic location, ethnicity and income persist for many Peruvian adolescents. Indigenous adolescent females living in a rural area are most likely to be impacted with various conditions of exclusion. UNICEF is therefore supporting the development of protective and healthy environments for adolescents—particularly adolescent girls—including at schools.

Four key regions were selected due to high levels of vulnerability, limited capacity of local services and operators, and geographic diversity: Amazonian (Ucayali and Loreto), Andean (Huancavelica) and Northern Lima (rural/urban). The project is expected to reach 50,364 adolescents (24,829 girls) in these four regions.

SPECIFIC OBJECTIVES

The program aims to achieve two primary outcomes:

1. Health sector provides quality and comprehensive adolescent care with an emphasis on strengthening resilience and violence prevention and develops pilot program to support adolescent parents and prevent a second pregnancy.
2. Protection and education sectors have improved their abilities to promote health and prevent violence in schools.

PROJECT HISTORY AND TIMELINE



FAST FACTS

- 40% of Peruvian adolescents between 12 and 17 years old experienced domestic violence in a one-year period, while 44% experienced school violence.
- 30% of Peruvian children and adolescents (from the age of 8) experience physical punishment in schools.
- In 2020, national coverage of comprehensive health care for adolescents dropped by 63% compared to the coverage achieved in 2019. National coverage of adolescents who received mental health care fell by 50%.
- Ucayali, Loreto and Huancavelica were among the eight regions with the highest rates of child marriage and early unions. They also have higher rates of adolescent pregnancy and corporal punishment.
- The national average of sexual violence cases reported is 16.6% with Loreto (33.8%) and Huancavelica (19.8%) reporting the highest rates.
- 82% of sexual violence cases are reported by girls, who also report higher levels of online violence.

STRATEGIES FOR SUCCESS

- Develop intercultural and gender-sensitive guidelines and/or protocols to address adolescent mental health problems.
- Strengthen the competencies of health personnel in the mental health and violence prevention guidelines and protocols.
- Provide in-service technical support in mental health care of children and adolescents for health personnel in Huancavelica.
- Implement a communication strategy to improve adolescents' access to information and services related to their health, development and violence prevention in Loreto.
- Design and apply an adolescent parenting and second pregnancy prevention intervention program in Loreto.
- Implement strategies that promote healthy lifestyles and environments in prioritized secondary schools.
- Incorporate UNICEF's Violence Prevention Model into the Ministry of Education's national strategy to reach schools with the highest level of violence.
- Build a parenting strategy to strengthen families' ability to provide positive discipline, promote gender equality and manage stressful situations in collaboration with the private sector.

Adolescents, especially girls, in Peru have traditionally faced limitations in accessing sexual and reproductive health services and comprehensive sex education, but these limitations have been exacerbated by the pandemic.

EXPECTED OUTCOMES



Health services are strengthened to provide comprehensive, culturally relevant and gender-sensitive health care for adolescents, with an emphasis on addressing their mental health and preventing violence.



Adolescent parenting intervention is piloted to inform the development of public policies and programs.



Cross-sectoral, gender-sensitive and culturally relevant strategies implemented and evaluated to promote health and prevent and address all types of violence in schools.



160 health personnel are trained in strengthening resilience and violence prevention guidelines and protocols.



12 schools (benefiting nearly 6,000 students) will have institutionalized health promotion activities that promote healthy lifestyles and environments.



30 schools will implement the School Violence Prevention Model.



10 schools will implement school program to promote the safe and responsible use of information and communications technology.

