

INAUGURAL SESSION  
(0900 HRS-0930 HRS, THURSDAY, 11 JULY 2024;  
HOTEL DUSIT PRINCESS KATHMANDU, LAZIMPAT)

Shaping the Future

SOUTH ASIA REGIONAL DIALOGUE ON ADOLESCENT PREGNANCY  
KATHMANDU; THURSDAY, 11 JULY 2024

OPENING REMARKS

BY

H. E. MR. MD. GOLAM SARWAR  
SECRETARY GENERAL OF SAARC

Dr. Chuman Lal Das Kebrat, Joint Secretary, Ministry of Health and Population of the Government of Nepal;

Dr. Saima Wazed, Regional Director, WHO South East Asia Regional Office in New Delhi;

Dr. Sanjay Wijesekera, Regional Director, UNICEF South Asia Regional Office in Kathmandu;

Dr. Aleksandar Sasha Bodiroza, Deputy Regional Director, UNFPA Asia Pacific Regional Office in Bangkok;

Esteemed Delegates from the Member States of SAARC;

Ladies and Gentlemen;

Good Morning!

It is indeed an honour and a privilege for me to extend a warm welcome to the dignitaries, seated on the Dais, and to the distinguished audience before me, to this Inaugural Session of the South Asia Regional Dialogue on Adolescent Pregnancy being held in this beautiful city of Kathmandu.

We look forward to benefitting from insightful presentations from the distinguished speakers from the Government of Nepal and the UN Agencies.

I convey warm greetings to the esteemed colleagues from the WHO South East Asia Regional Office in New Delhi and the UNFPA Asia Pacific Regional Office in Bangkok, who are joining us virtually. We are eager to hear and learn from their messages.

The distinguished delegates from the Member States of SAARC deserve a special word of welcome for making it convenient to attend this Regional Dialogue in person. With the extensive knowledge and experience that you bring to this Dialogue, I am confident of its fruitful outcome under the technical guidance from experts from our partner organizations.

On this note, I thank UNICEF, UNFPA and WHO, all of which are SAARC's active partners, for supporting this Dialogue technically and financially. This is indeed a timely meeting and we look forward to such collaborative opportunities in future as well.

Distinguished Delegates,

As you are aware, adolescents, aged between 10 to 19, make up nearly one-quarter of South Asia's population. This represents over 600 million young people, whose health and well-being largely depend on the extent of their access to information and services that help them make informed decisions about their health. Ensuring easy access to information and services, therefore, is not just a moral imperative for our Governments, it is a sine-qua-non for the sustainable development of our nations.

And yet, there are significant weaknesses in the policy as well as legal and societal obstacles across South Asia, creating barriers for youth to acquire knowledge about adolescent health. Lack of confidentiality and judgmental attitudes from service providers further discourage youth from seeking the information and care they need on sexual and reproductive health, mental health, nutrition and substance abuse.

At the same time, limited integration of youth-friendly services in health systems, inadequate financing, and shortage of sufficiently-trained health workers, among others, restrict the supply as well as quality of services. Entrenched sociocultural norms hinder open discussions around puberty, sexual health and risky behaviours.

The consequences of these obstacles are severe and impose immense socioeconomic costs on our region. Increased risk of unintended pregnancy, sexually transmitted infections, substance abuse, malnutrition, and mental health issues not only jeopardize the health of our youth, but also prevent them from reaching their full potential.

South Asia should not and cannot afford to diminish its demographic dividend by failing to invest in the health and development of its young people. We must critically examine the policy and legal frameworks that strengthen adolescent-friendly services in our health systems and communities. And we must work together to change societal attitudes and create an enabling environment where adolescents can openly discuss their health needs.

Ladies and Gentlemen,

As a regional organization comprising the eight Member States of South Asia, SAARC attaches high priority to the promotion and protection of children and youth. During successive Summits, the SAARC Leaders have unequivocally underscored the importance of promotion and protection of children, which culminated in the adoption of the SAARC Social Charter, incorporating a broad range of targets to be achieved across the region in poverty eradication, population stabilization, empowerment of women, youth mobilization, human resource development, promotion of health and nutrition, and protection of children.

The SAARC Convention on Regional Arrangements for the Promotion of Child Welfare in South Asia provides a framework to enable the children to fully exploit their potential, and enjoy their every right.

The mechanism of the Ministerial Meetings on Women and Health, assisted by the Technical Committee on Women, Youth and Children, provides policy guidance in furthering SAARC's agenda on women, youth and children.

Distinguished Delegates, Ladies and Gentlemen,

The most important cause for adolescent pregnancy in South Asia is Child Marriage. It is still at endemic level in our region, as 1 in 4 young girls in South Asia were married before their 18<sup>th</sup> Birthday. As such, time is ripe to take action resolutely to address the root causes of this social menace. It is imperative for the region to review age criteria for child marriage and revise policies on access to reproductive health information and education, and to ensure confidentiality in service delivery. There is also the need to increase domestic financing on health services and education campaigns for adolescents. Measures like building a cadre of adequately-trained health workers; imparting the right knowledge, skills, attitudes and values that help adolescents to protect their health and promote their welfare. Making the voices of youth heard in formulating the health policies and programmes meant for them, should deserve our immediate attention. And finally, if sexual education is truly a taboo at our homes and in our schools and societies, let this Dialogue chart out a regional campaign to deter such a delusion.

Only by breaking down the policy, legal and societal barriers, we can secure a brighter, healthier future for the young people of South Asia. We must demonstrate steadfast commitment to the region's greatest strength – its youth. And we must sustain this commitment to ensure a better home for them - that is South Asia.

Ladies and Gentlemen,

While the SAARC Region has achieved some progress in promoting the welfare of youth and children, a lot more remains to be done. Attended by high-level officials from the SAARC Member States and distinguished specialists from the UN Agencies, this Dialogue is best placed to define what more needs to be done and its way forward.

I am confident that outcome of this Regional Dialogue will prove to be instrumental in shaping the future of South Asia by achieving Zero Adolescent Pregnancy before it is too late.

Once again, I thank UNICEF, UNFPA and WHO for joining hands with SAARC to organize this very important event and wish this Regional Dialogue great success.

Thank you!

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