“Never before have there been so many young people – never again is there likely to be such potential for economic and social progress” - Dr. Babatunde Osotimehin, UNFPA’s Executive Director

Introduction
Sexual and reproductive health (SRH) is a core indicator of balanced overall health, yet major discussions are not often centered around it. Challenges to SRH can include lack of information and education, risks of sexually transmitted diseases, poor access to health services (especially contraception and safe abortion), gender inequalities, sexual coercion, and domestic violence. The neglect of sexual and reproductive health education and services among the youth, coupled with inadequate healthcare investments, has significantly negative consequences on their physical and mental well-being, making them more of a liability than an asset to their respective countries development. Hence, the failure to address these issues has significant economic implications, as the human capital of any economy plays a vital role in ensuring a quality labour force that translates to economic growth. This article will focus on the vulnerability of young people and the need to prioritize their sexual and reproductive health for economic prosperity.

Breaking Taboos, Building Futures
Many factors have been identified to influence health-seeking behaviors regarding SRH, and one that is particularly relevant to this discourse is age. Focusing on the adolescent groups who are vulnerable and likely to act more discreetly out of embarrassment, fear, and judgmental attitudes of service providers or even the society at large, it is evident that more efforts need to be made to increase the confidence of the younger generations in being proactive about their sexual lives. Adolescence is a crucial transitional stage wherein behaviors and choices can determine future health and well-being. However, these young people continue to be victims of sexually transmitted infections, HIV/AIDS, unwanted pregnancy, and abortions due to unprotected sex. Many adolescents in the region

From Risk to Resilience: Prioritizing Adolescent Sexual and Reproductive Health for Economic prosperity
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are exposed to health-damaging habits, such as substance abuse and smoking, which continue into adulthood.

Various alarming statistical findings evidence the effect of poor sexual health-seeking behaviours amongst adolescents. For instance, HIV/AIDS is one of the commonest infectious sexually transmitted diseases, which has remained a disease of global health concern. In some countries, there has been limited progress in response to HIV among young people aged 15 - 24 years. Knowledge about HIV prevention among young people has remained stagnant over the past 20 years. Nationally representative surveys conducted between 2012 and 2019 revealed that only 34% of young men and 28% of young women in sub-Saharan Africa had a basic knowledge of how to protect themselves from HIV.¹

Nevertheless, according to the Centre for Disease Control, about 50,000 people are infected with HIV yearly. A quarter of this number is youths and adolescents between 13 and 24 (which invariably makes them the age group with the most HIV diagnosis). Another disturbing fact from the statistics is that almost half of these highly susceptible populations don’t know they have the virus!

At the National level, the HIV prevalence in adolescents in Nigeria is estimated to be 3.5%, the highest amongst countries in West and Central Africa and the second globally, after South Africa².

Nigeria has the largest population of youths in the world, with about 70% of the total population under 30 years³. The youths who represent a nation’s future and are expected to be the main drivers of change and prosperity are encountering setbacks in their sexual and reproductive lives, as indicated by the disturbing figures aforementioned. This will have some economic implications since the human capital of any economy plays an essential role in assuring quality labor forces that translate to economic growth.

The chronicity and life-threatening nature of the HIV/AIDS infection makes the number of infected persons significant, regardless of the affected population. Interestingly, there has been an increment in treatment coverage among adolescents living with HIV and plunging rates of new infections. However, the need for intensified efforts on political willpower, strategic partnerships, and resource mobilization for relevant programmes to mitigate the disease burden remains.

Another pertinent consideration that would go a long way in addressing the problems of sexual and reproductive health amongst adolescents is the appropriation of healthcare financing. In a recent article, the International Financing Cooperation (IFC), a World Bank Group state rather bleakly that “healthcare in Sub-Saharan Africa remains the worst in the world, with few countries able to spend the $34-$40 a year per person that the World Health Organization considers the minimum for basic health care.”⁴ This submission admits our reality and earnest interventions must be implemented to redeem the situation. Additionally, lack of access to healthcare and other necessities can lead to malnutrition, stunted growth, and chronic illnesses, which can have long-lasting effects on a person’s physical and mental well-being. This, in turn, can have significant economic consequences for the country, as unhealthy individuals may be less productive and have higher healthcare costs.

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² [https://theconversation.com/amp/nigerias-larg-youthful-population-could-be-an-asset-or-a-burden-186574](https://theconversation.com/amp/nigerias-larg-youthful-population-could-be-an-asset-or-a-burden-186574)
³ [https://bmjpublichealth.biomedcentral.com/articles/10.1186/s12889-019-7890-y#:~:text=Among%20children%20aged%200E2%80%9314%20years%2C%20the%20proportion,The%20proportion%20of%20women%2C%20aged%200E2%80%9314%20years%2C%20who%20have%20been%20tested%2C%20is%203.5%25%5B6%5D](https://bmjpublichealth.biomedcentral.com/articles/10.1186/s12889-019-7890-y#:~:text=Among%20children%20aged%200E2%80%9314%20years%2C%20the%20proportion,The%20proportion%20of%20women%2C%20aged%200E2%80%9314%20years%2C%20who%20have%20been%20tested%2C%20is%203.5%25%5B6%5D)
Conclusion
All hands must be on deck to ensure continuous education and awareness about sexual and reproductive health, improved availability and accessibility to necessary sexual and reproductive health services, and institution of scalable and high-impact programmes. There is also the need to promote the involvement of young people in the design and implementation of programmes and policies that affect their sexual and reproductive health and rights. With increased political willpower, strategic partnerships, resource mobilization, and healthcare financing, we can make significant strides in promoting adolescent health and well-being, which is essential for future prosperity.