

Adolescence — the phase from 10 to 19 years of age — represents the critical time of transition from childhood to adulthood. It is marked by rapid cognitive, physical and psychosocial growth and development. During this period, adolescents will increase their bone mass by 40% and gain nearly 20% of their adult height and 50% of their adult weight. Adolescents also form decision-making skills and experience emotional growth, all of which will impact their future health and wellbeing. Adequate nutrition during this stage plays a pivotal role in ensuring healthy growth, preventing malnutrition and reducing the risk of chronic diseases in adulthood.

Girls experience increased nutritional needs, particularly during the onset of menstruation, when girls' iron requirements significantly increase. Other needs relate to their growing personal agency, desire for decision-making power and navigation of decisions around relationships and their reproductive health.

There are an estimated 60 million cases of anaemia in adolescent girls every year in Africa.² Approximately half of those anaemia cases are due to iron deficiency resulting from poor socio-economic status and intra-household food distribution that fails to compensate for increased iron requirements related to their rapid growth and menstrual loss. Iron-deficiency anaemia is also recognized as the number one cause of disability-adjusted life years

lost in adolescent girls globally. Anaemia impairs cognitive functioning, compromises school performance, reduces productivity and affects current and future reproductive health, which in turn keeps adolescent girls trapped in a cycle of poverty and inequality.

In sub-Saharan Africa, about one in 10 girls becomes pregnant before the age of 15 and about four in 10 becomes pregnant before the age of 18. Many have multiple children during adolescence. Pregnancy increases the risk of becoming anaemic for an adolescent and being anaemic puts pregnant adolescents at risk of poor maternal and neonatal outcomes for the mother and her infant. Anaemia increases the chance of an adolescent girl dying during pregnancy and delivery and stunts infant growth and cognitive development for life. Good nutrition during adolescence and waiting until the body is fully developed and healthy before bearing children will contribute to healthier future generations and better outcomes for the entire population.³

Eliminating anaemia and improving adolescent nutrition means removing one more barrier to gender equality for girls. With improved access to information about their own growth and development and improved access to health and nutrition services, adolescent girls will have greater agency to exercise their rights, feel empowered to make their own decisions and achieve their full potential.

THE SHE'LL GROW INTO IT CAMPAIGN

The African Union (AU) declared 2022 the Year of Nutrition, spurring action on malnutrition across the continent. In the Abidjan declaration of the Africa Year of Nutrition 2022, the AU member states committed to end malnutrition in all its forms by taking particular interest in the needs of all children, including adolescent girls.



In response to nutrition challenges facing adolescents and especially girls, the AU and Nutrition International launched the adolescent nutrition campaign With Good Nutrition, She'll Grow into It (SGII), in March, 2023. The campaign aims to improve the health, wellbeing and empowerment of girls in Africa through nutrition, by creating an environment for adolescent girls to raise and amplify their voices for their views, opinions, hopes and dreams to be heard.

The campaign highlights the critical link between good nutrition and gender equality and raises awareness about the importance of ensuring that girls are healthy and well nourished. The message is simple: girls can become anything and everything they want to be and good nutrition is critical to helping them get there.

She'll Grow Into It also calls on governments and key stakeholders to prioritize adolescent nutrition especially in policies, plans and increased investments.

EVIDENCE INFORMED STRATEGIES TO PREVENT ANAEMIA

- Gender responsive nutrition education can provide adolescents with the knowledge to increase their understanding of their growth, development, nutritional and health needs and empower them to make informed nutrition choices.
- Weekly iron and folic acid supplements (WIFAS) consisting of elemental iron and folic acid are oral supplements that prevent and reduce anaemia. The recent inclusion of WIFAS in the WHO's Essential Medicines List in July 2023 will ensure enabling environment to increase supply and catalyze increased scale up of WIFAS globally.
- Adolescent-responsive services and spaces that recognize their unique needs and vulnerabilities are required to address the health and nutrition needs of adolescents.
- Inclusion of adolescents in the formulation of multisector strategies and programs in health, agriculture and social protection will be a critical ingredient for success.
- Global, regional and national strategies and plans. Work is underway to develop a global anaemia reduction framework that will encourage a strengthened multi-sectoral response to anaemia to optimize women's, children's and adolescents' health and wellbeing. A continental anaemia strategy for Africa is also in early stages of development and will guide the region to better address the high prevalence of anaemia that countries face. With this guidance as a frame, there is also a need for national policies and development plans to address adolescent nutrition and anaemia through multi-sectoral and context-driven approaches.

In the Abidjan declaration of the Year of Nutrition 2022, Africa committed to taking action to end malnutrition in all its forms, taking particular account of the needs of all children, including adolescent girls.

By working together, we can build a stronger foundation for the future of Africa. Join us in calling for increased investment in anaemia prevention and building a more prosperous future for Africa.

REFERENCES

- 1 Norris SA, et al. "Nutrition in adolescent growth and development." The Lancet 2022; 399. 10320 (2022): 172–184.
- 2 This calculation includes estimated anaemia cases for 10–19-year-old adolescent girls in all 55 AU member states. Where data was unavailable for the age range 10–19, estimations were done using anaemia prevalence data for women of 15–49 years of age.
- 3 Norris, Shane A., et al. "Nutrition in adolescent growth and development." The Lancet 399.10320 (2022): 172–184.