HIV prevalence remains generally higher in urban areas.\textsuperscript{35} Adolescent girls and young women appear to be at particular risk because of poverty, which drives many to commercial sex, and exposes them to a higher incidence of sexual exploitation and forced sex.\textsuperscript{36} A 2010 review of estimates from more than 60 countries found that while the HIV infection rate had stabilized or decreased in most countries, including those worst affected, it had risen by more than 25 per cent in seven – Armenia, Bangladesh, Georgia, Kazakhstan, Kyrgyzstan, the Philippines and Tajikistan. In these countries, the epidemic is concentrated among people who inject drugs, people who engage in commercial sex and men who have sex with men.\textsuperscript{37} Young people form a significant portion of the affected populations. In Kazakhstan and the Philippines, they make up 29 and 26 per cent, respectively, of all people aged 15 years and older living with HIV.\textsuperscript{38} For most of them, infection with HIV is a result of a chain of disadvantages extending back into childhood: violence, exploitation, abuse and neglect – in other words, failures in protection and care.

A 2009 study of adolescents living on the streets of four cities in Ukraine found that more than 15 per cent injected drugs, nearly half of these sharing equipment; almost 75 per cent were sexually active, most having started before the age of 15; close to 17 per cent of adolescent boys and 57 per cent of adolescent girls had received payment for sex; and more than 10 per cent of boys and over half of girls had been forced to have sex.\textsuperscript{39} Despite these clear vulnerabilities, the same adolescents who are at greatest risk of HIV infection are often the most likely to be excluded from services. Often, social stigma or barriers created by policies and legislation prevent those adolescents most at risk from obtaining preventive services.

### Mental Health

Urban life can also have a negative effect on the mental health of children and adolescents, particularly if they live in poor areas and are exposed to the dangers of violence and substance abuse.\textsuperscript{40} Children living in urban poverty experience levels of depression and distress that are higher than the urban average. A review of social determinants of health in the United States concluded that children in neighbourhoods with lower socio-economic status had more behavioural and emotional problems.\textsuperscript{41} According to a number of studies, mental health problems experienced during childhood and adolescence may significantly affect growth and development, school performance, and peer and family relationships, and may increase the risk of suicide.\textsuperscript{42} One factor often cited by children and observers as a cause of mental distress is the stigma that comes with being seen as a child of the underprivileged.

Children and adolescents in urban areas are likely to have greater access to alcohol and illegal drugs than their counterparts in rural areas. They may resort to these substances as a means of coping with stress or as an outlet for idleness and frustration in the absence of employment or opportunities for recreation such as sports and youth clubs.

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**Figure 2.5. In urban areas, access to improved water and sanitation is not keeping pace with population growth**

*World population gaining access to improved drinking water and sanitation relative to population increase, 1990–2008*

![Figure 2.5](image-url)