

The Role of Health Organizations in Muslim Youth Welfare – A Sri Lankan Perspective

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The World Health Organization defines youth as those in the age group between 15 to 24 years. World population statistics reveals that more than 50% of the population is less than 25 years of age. In Sri Lanka the estimated Muslim youth population is 300,000 to 500,000. Youth issues began to be addressed constructively after the International Conference on Population and Development (ICPD) in 1994 which placed issues of youth at the top of its agenda. The ICPD labeled youth as 'Parents of the Next Generation'. This brought to the forefront an important demographic issue which had been dormant for many years.

For youth to take on the responsibilities expected of them it is important that they first mature socially, culturally, economically and spiritually, in a way which benefits them as individuals and enables them to take on the responsibility in guiding their communities. In order to do so they should be given the opportunity to attain a state of well-being without the presence of disease or infirmity - that is to have good health.

Sri Lankan Islamic organizations in the fields of health, education and social welfare can be used as vehicles to reach the youth. They can create the background for youth to attain their aspirations in an Islamic and Sri Lankan background. The paper analyses the problems of Sri Lankan Muslim youth and the role played by social institutions - particularly health institutions-in mitigating the identified problems. Youth in refugee camps, mainly have problems concerning their health and nutritional status and the lack of opportunity to education and employment. The youth in urban slums have issues mainly concerning individual and social integration. The paper draws up a frame work for activities which can be employed to address issues of Muslim youth based on national guide lines formulated by the Ministry of Health and the author's views and experience with Muslim youth.

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