

*ACTION
for
Adolescent Health
Towards a Common Agenda
Recommendations from a joint Study Group*



WHO



UNFPA



UNICEF

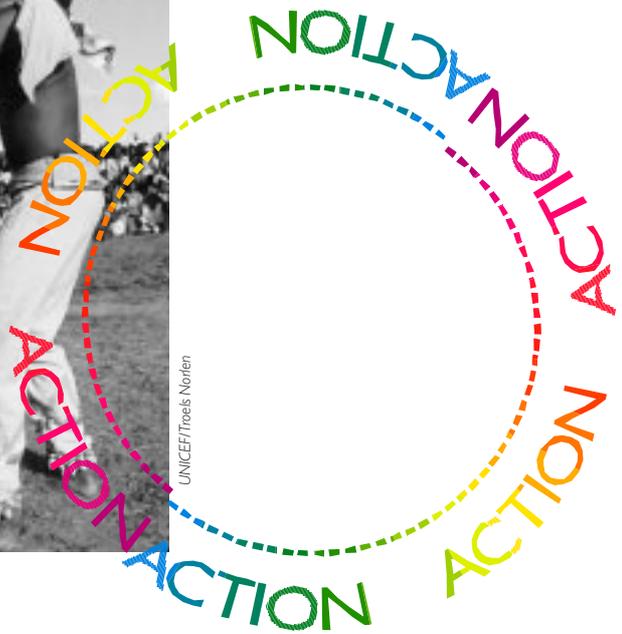
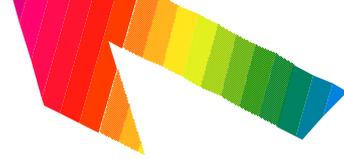
Foreword

In November 1995, the World Health Organization, the United Nations Population Fund and the United Nations Children's Fund jointly convened a Study Group* on Programming for Adolescent Health. On the basis of current experiences, especially in developing countries, the Study Group:

- reviewed the scientific evidence regarding the effectiveness of key interventions for adolescent health;
- highlighted the essential factors and strategies needed to establish, implement and sustain programmes for adolescent health;
- developed a common framework for country programming;
- recommended priority actions to accelerate and strengthen programming for adolescent health, including the global and regional support needed for country-level programming.

This brochure reflects the recommendations of the Study Group.

* Study Group is a meeting of experts which reviews the latest knowledge and makes recommendations on major subjects of public health importance.



Introduction

No longer children, not yet adults. Adolescence is a period of rapid development when young people acquire new capacities and are faced with many new situations. This presents not only opportunities for progress but also risks to health and well-being. As adolescents face the challenges of the second decade of life, a little help can go a long way in channeling their energy towards positive and productive paths. Neglect of adolescents can lead to problems, both immediately and in the years ahead. One of the most important commitments a country can make for future economic, social and political progress and stability is to address the health and development needs of its adolescents.

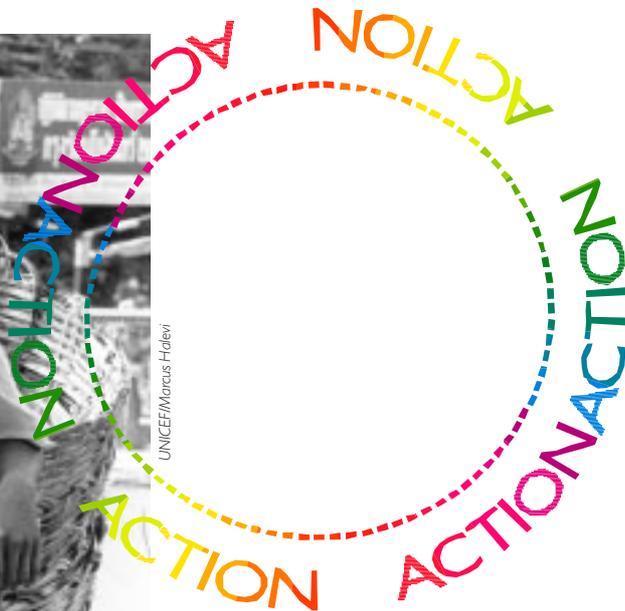
Today's world offers adolescents both remarkable opportunities and risks to their health.

Adolescents (85% of whom live in developing countries) make up about 20% of the world's population. More than ever before, adolescents are able to attend school and benefit from technological progress. Yet at the same time, the lives of millions of adolescents are marred by poverty, inadequate education and work opportunities, exploitation, war, civil unrest and ethnic and gender discrimination. Rapid urbanization, telecommunication, travel and migration bring both new possibilities and new risks to young people. These conditions may directly jeopardize health and may also undermine the traditional social support that helps young people prepare for, negotiate and explore the opportunities and demands of their passage to adulthood. Moreover, society's expectations of behaviours, roles, access to resources and prospects for development vary for adolescent boys and girls. Decreasing influence of family and culture, earlier puberty and later marriage - all these extend the risks of unprotected sexual activity in unmarried adolescents in many parts of the world. In some countries, early marriage and childbearing lead to high maternal and infant mortality rates. In others, sexually transmitted diseases, including HIV/AIDS, pose enormous health risks to adolescents. Potentially harmful substances - tobacco, alcohol and other drugs - are now more readily available to adolescents and threaten their health in both the short and long term. Violence inflicted by and on young people is a growing phenomenon. Young men frequently take part in acts of violence, including wars. Suicide attempts appear to be on the increase among the young and many are the victims of violence, including sexual abuse, often perpetrated by adults.

Adolescence: a gateway to the promotion of health. Many of the behavioural patterns acquired during adolescence (such as gender relations, sexual conduct, the use of tobacco, alcohol and other drugs, eating habits, and dealing with conflicts and risks) will last a lifetime. They will affect the health and well-being of future children. Adolescence provides opportunities to prevent the onset of health-damaging behaviours and their future repercussions. Fortunately, adolescents are receptive to new ideas; they are keen to make the most of their growing capacity for making decisions. Their curiosity and interest are a tremendous opening to foster personal responsibility for health. Furthermore, engaging in positive and constructive activities provides occasions to forge relationships with adults and peers as well as acquire behaviours that are crucial to health.



UNICEF/Marcus Helevi



Health problems of adolescents are interrelated.

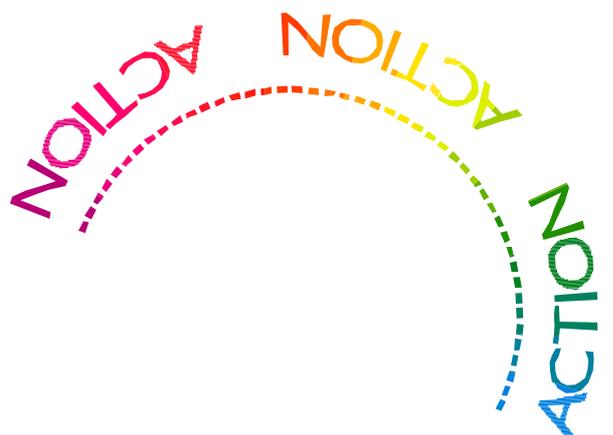
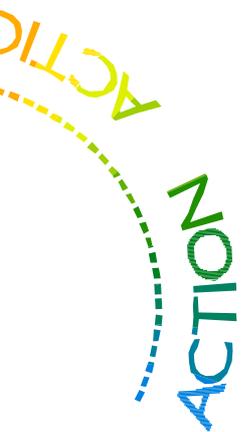
Many of the factors that underlie unhealthy development in adolescents stem from the social environment. They include poverty and unemployment, gender and ethnic discrimination and the impact of social change on family and communities. While programme efforts for adolescent health cannot directly focus on inequities and injustices in society, it must be recognized that these conditions are real constraints to improving the health and well-being of adolescents. The attitudes and behaviours programmes seek to influence (eg. sexual behaviour and gender relations, use of substances, dealing with conflicts and risks), often arise from and feed off one another. For example, the use of psychoactive substances alters judgement and thus makes aggressive acts, unprotected sex and accidents more likely. Moreover, the preventive interventions for these behaviours are the same and all contribute to positive personal growth and development.



Successful programmes require support to expand their reach. While interventions still need refinement, enough is known to act now. Programmes must provide the support and opportunities for adolescents to:

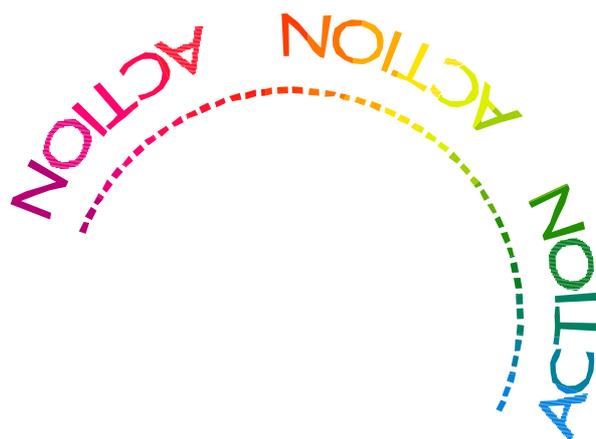
- acquire accurate information;
- build skills;
- obtain counselling (especially during crises);
- have access to health services, including those for reproductive health and;
- live in a safe and supportive environment.

The social environment must foster personal development and encourage young people to adopt healthy behaviours. Policies and the media can strengthen and communicate positive norms for both adult and adolescent behaviours, such as those related to equality and gender equity. Adolescents can be entrusted to gradually take on adult responsibilities through participating in decisions that effect their lives and by making contributions to their families and communities. Meeting basic needs for safety, belonging and self-esteem as well as mastering key skills for living improves the overall development of adolescents. This will enable adolescents to avoid health risks, and provide motivation to practice healthy behaviours. Programme efforts need to take into account that adolescents are not alike and that interventions and the way they are delivered will vary according to differing needs and circumstances.



Impetus and direction for increased action for adolescent health come from many sources. The basic rights and obligations related to the promotion and protection of the health of adolescents are articulated in the United Nations Convention on the Rights of the Child, as well as the earlier Convention on the Elimination of All Forms of Discrimination against Women. Further elaboration and support come from recent international conferences and statements such as the 1994 International Conference on Population and Development, the 1995 Fourth World Conference on Women and the United Nations World Programme of Action for Youth to the Year 2000 and Beyond. Moreover, explicit measures to support, stimulate and strengthen national laws, policies and programming for adolescent health have been adopted by WHO, UNFPA and UNICEF.

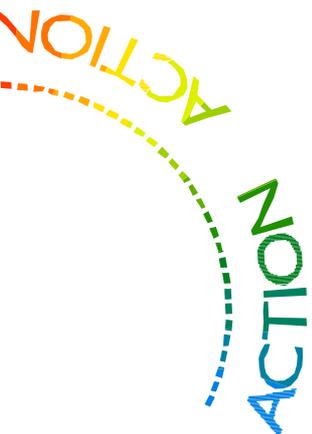
The time has come for countries, with support from the international community, to make a concerted effort to plan, monitor and strengthen their activities for adolescent health.





*Laying the groundwork:
the Study Group called for action by
WHO, UNFPA & UNICEF to*

- **Promote the use of the Framework for Country Programming for Adolescent Health.** The framework is a graphic summary of the elements which need to be considered in programming for adolescent health in countries. It also highlights the key challenges in the programming process.
- **Develop clearly defined goals** for the activities the agencies will undertake in support of the acceleration of national programming for adolescent health, and a system for monitoring the ways the agencies work together.
- **Strengthen and expand collaboration** in countries with other United Nations organizations and agencies (eg. UNDP, UNDCP, UNESCO, UNHCR and the World Bank) and relevant partners including multi/bilateral donors, nongovernmental organizations and the private sector to support action for adolescent health.
- **Support country programming** based on individual country priorities and situations and work through existing processes to coordinate operational activities of the UN system.
- **Bring this Common Agenda** and related issues to the attention of the governing bodies of the three organizations, and act on the recommendations, taking into consideration each organization's respective mandate, structure and comparative advantage.

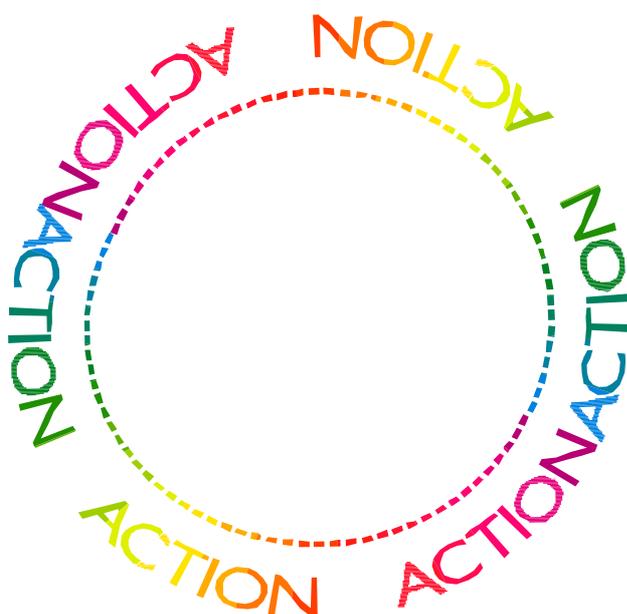


Country level actions

- **Make the case for adolescent health.** Advocate the need for adolescent health policies and programmes, including sexual and reproductive health, on the basis of the public health and economic benefits which accrue from investing in the health and development of young people.
- **Describe needs and generate commitment.** Cosponsor situation analyses and planning activities, with the meaningful involvement of young people, such as creating multisectoral national task forces or convening national workshops, in order to forge coalitions with interested organizations and develop common plans of action.
- **Build capacity.** Initiate collaborative training and sensitization for country nationals (including young people) and agency staff to improve and sustain programming for adolescent health.

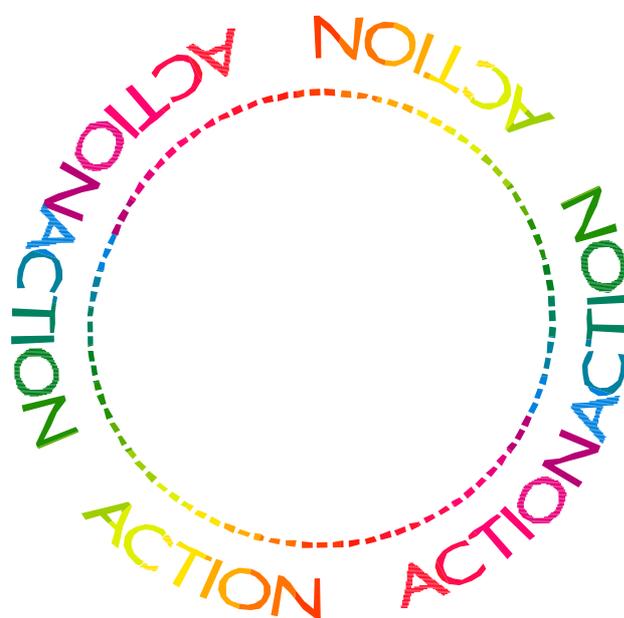


- **Sustain action.** Support the implementation of country action plans and/or other clearly focused activities, mobilizing local resources and building on existing infrastructures within the public, NGO and private sectors.
- **Demonstrate feasibility.** Support those approaches which have the potential to be taken to scale in cost-effective and sustainable ways. In order to study the lessons learned, carry out joint programme reviews, complementary to programming processes.
- **Share the knowledge.** Intensify means used to share information within the country that focuses on health status of adolescents and successful programming experiences.
- **Understand and evaluate.** Support the monitoring, evaluation and operations research of programmes, including the use of appropriate indicators, putting this information to use to inform the community and improve the quality and coverage of programmes.



Regional level actions to reinforce country efforts

- **Support programmes.** Cosponsor and support regional networks for training and exchanging ideas and information.
- **Understand and evaluate.** Collect and analyse information on the health status of adolescents and country efforts in programming for adolescents health. Support operations research of programming to distil best practices.
- **Share the knowledge.** Organize and facilitate study visits of policy makers, religious leaders and programme managers to successful programmes, especially those that demonstrate the meaningful involvement of young people. Produce programming guidelines, increase the dissemination and availability of successful programme resource materials and provide support for their adaptation.
- **Build capacity and commitment.** Organize interagency staff meetings to inform and mobilize personnel, extend consensus, identify priorities for action within and between agencies and facilitate access to regional resource persons.



Global level actions to extend quality and reach of programming

- **Strengthen the rationale for adolescent health.** Reinforce the public health and economic evidence and arguments for adolescent health programming which will help increase the investment of resources in programming activities.
- **Measure.** Develop appropriate indicators and approaches for their measurement, for use in planning, monitoring and evaluating programmes in countries.
- **Demonstrate feasibility.** Information is urgently needed on how programming can be taken to scale in cost-effective and sustainable ways. To bring focused, timely attention to this key point, agencies should make a concerted effort to support and study the experiences of 4-6 countries that indicate readiness to expand critical aspects of their adolescent health programming to significant scale over the next 2-3 years.
- **Extend knowledge.** Synthesize information and give examples of the best practices for adolescent health programming. Identify cost-effective and sustainable approaches for taking programming to scale through support of research. Develop practical tools to assist programme development and implementation.
- **Share the knowledge.** Manage information needed for programme acceleration, including use of new technologies such as CD-ROM and the Internet. Set up a system to monitor the status of adolescent health for inclusion in the Progress of Nations and other publications.



*Adolescent Health & Development Programme
Family & Reproductive Health
World Health Organization*

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Framework for Country Programming for Adolescent Health

Challenges

Building political commitment

- * "youth are healthy"
 - but behaviours starting during adolescence are crucial to current & future health
- * "the issues are too sensitive"
 - but the stakes are too high to ignore & there are those able to act
- * "youth make economic & political demands"
 - they are also a great resource for social & economic progress
- * "there's no money"
 - much can be done with better use of existing resources

Intervention Settings

- * home
- * school
- * health centre
- * workplace
- * street
- * community organization
- * residential centre
- * media/entertainment
- * political & legislative systems

Challenges

Identifying priorities for action

- * collect & analyse data by age & sex
- * compile data from different sectors
- * involve youth systematically
- * determine target groups

Guiding Concepts

- * adolescence - a time of opportunity & risk
- * not all youth are equally vulnerable
- * adolescent development underlies prevention of health problems
- * problems have common roots & are interrelated
- * social environment influences adolescent behaviour
- * gender considerations are fundamental

Programming to

Promote healthy development to meet needs

- * Safety,
- * Belonging,
- * Self-esteem,
- * Caring relationships

& build competencies

- * Physical eg eating habits,
- * Psychological eg empathy,
- * Social eg communication,
- * Moral eg personal responsibility,
- * Vocational eg entrepreneurial skills.

Prevent & respond to health problems from

- * Early, unprotected, unwanted sex,
- * Use of tobacco & misuse of alcohol & other substances,
- * Accidents,
- * Violence,
- * Poor nutrition,
- * Endemic diseases.

Major Interventions

- * create safe & supportive environment
- * provide information
- * build skills
- * provide counselling
- * improve health services

Challenges

Monitoring & evaluation

- * establish & use indicators
- * track quality & coverage in multiple settings
- * understand the impact of youth participation throughout programming

Keys to Success

- * put youth at the centre
- * address multiple health problems
- * build on & link existing interventions in various settings
- * combine interventions
- * respect cultural diversity
- * strengthen programme management
- * encourage positive adult attitudes & behaviours

Challenges

Maintaining implementation

- * foster adult-youth partnerships
- * reorient & sustain existing interventions through training
- * coordinate activities in multiple settings
- * continually recruit young people as human resources
- * achieve large-scale programming

Key Health Problems: unwanted, unsafe pregnancy; maternal mortality and morbidity; infant mortality, abortion, STDs, HIV, RTI; cancers; homicide; suicide; injuries; disabilities; anaemia; obesity; dental caries; tuberculosis; malaria; schistosomiasis; intestinal helminths.