

## policies on adolescent health and development

a guide for policy-makers



value adolescents invest in the future



#### Message from the Regional Director

Adolescents are like butterflies. They go through a transition period that is full of potential, yet fragile. They need nurturing and care, and a safe and supportive environment to grow and develop.

Like the colours of the butterfly's wings, adolescents too are "colourful"- they have boundless energy, ideas, enthusiasm, ambition and potential. They are important assets and resources; they are our future.

There have been great improvements in the status of health and development in the Western Pacific Region. Yet, a lot more effort still needs to be made to protect and promote adolescents' needs and rights.

Healthy adolescents have a better chance of becoming healthy, responsible and productive adults. Thus, promoting the healthy development of adolescents is one of the most important investments that any society can make. To do that, we must work together to meet their multiple needs.

The WHO Western Pacific Regional Office will continue to work in close collaboration with partners, particularly its Member States and other United Nations agencies, to improve adolescent health and development in the Region.

Value adolescents. Invest in the future.

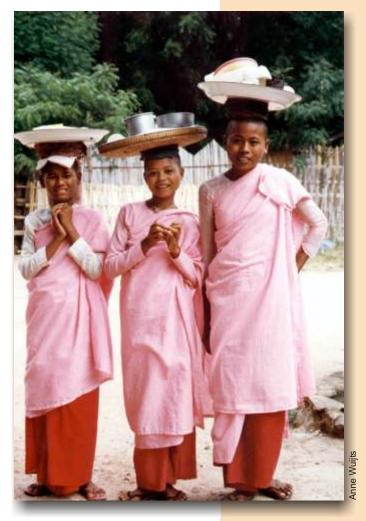


Shigeru Omi, MD, Ph.D. Regional Director WHO Western Pacific Region

## Why invest in adolescent health and development?

#### 1. Investing in adolescent health and development yields benefits for the adolescent and for society

- Adolescents represent over 20% of the total population in most countries of the Western Pacific Region. They are a vast current and future resource for their countries.
- Ensuring the survival of children to adolescence represents a considerable societal investment. Without a corresponding investment in adolescents, earlier societal investment in child survival may be wasted.
- Adolescence carries the highest risks of morbidity and mortality from certain causes, including accidents and injuries, early pregnancies and sexually transmitted infections. This is an important reason to focus health prevention efforts on adolescents.
- Lifestyle diseases are responsible for 58.4% of morbidity and 68.4% of mortality



globally<sup>1</sup>. Many of these - smoking, risky sexual behaviour, alcohol and drug dependency - have their roots in adolescence. Preventing risky behaviour and promoting healthy choices among adolescents can yield positive health outcomes, not just during adolescence, but also during adulthood.

• Healthy and developed adolescents have a better chance of becoming healthy, responsible, and productive adults, leading to greater skills, fewer work days lost to illness, longer working lives and increased productivity and progress.

<sup>&</sup>lt;sup>1</sup>World health report 1999. Geneva, World Health Organization, 1999.

### 2. Investing in adolescent health and development promotes equity and social justice

Efforts to achieve health for all must address the specific needs of adolescents because:



- Adolescents' health needs are qualitatively different from those of other age groups. They face puberty, rapid emotional development, increasing independence, and a range of new choices.
- Adolescents are a heterogenous group who live in varying situations and have different needs.
- Poverty forces a significant proportion of adolescents in the Region to drop out of school and contribute to family income by taking up jobs that are frequently lowend, low-skilled and insecure. Adolescents, especially girls, may be exposed to abuse, sexual harassment and exploitation. Poverty may also dilute some protective factors associated with promoting adolescent well-being, such as safe and protective environments.
- Gender inequalities can influence the pace and quality of adolescent health and development. For example, household-level, gender-based discrimination in health and nutrition can result in anaemia, a prevalent condition among young girls in the Region. In settings where early marriage is the norm, early and repeated pregnancies put adolescent girls' health and survival at risk. At the same time, ideals of "macho" behaviour may expose adolescent boys to greater risk of violence and injury.

An adolescent health and development policy can systematically analyse the diverse situations and needs of all adolescents, and identify appropriate approaches and resources.

### 3. Investing in adolescent health and development promotes human rights

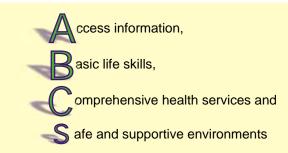
- Adolescents have basic rights to health and development. These rights are, on their own, an important reason to invest in adolescents.
- Giving attention to the health and development of adolescents promotes the realization of their rights in other areas too, including their rights as children, women and workers.
- Addressing and protecting the rights of adolescents can enable countries to deliver on their commitments under various international agreements such as the Convention on the Rights of the Child (CRC), the Convention on the Elimination of Discrimination Against Women (CEDAW), the International Conference on Population and Development (ICPD) Programme of Action, and the Beijing Platform for Action, and labour-related conventions.



# The goal of adolescent health and development policies

When countries decide to invest in adolescents, they need to develop an adolescent health and development policy to serve as a framework for action.

The goal of an adolescent health and development policy is to promote and protect the needs and rights of adolescents to





Anne Wuijts

These are the ABCs of adolescent health and development policy.

## Guiding principles of adolescent health and development policies

- Involve major stakeholders, particularly adolescents, in all stages of policy development, implementation and evaluation, and establish multisectoral partnerships and mechanisms to address the wide-ranging issues related to adolescent health and development.
- Adopt a comprehensive and integrated approach to promoting adolescent health and development. The underlying causes (poverty, gender-based discrimination, etc.) and immediate causes (lack of information, services, etc.) of adolescent health and development issues and problems are closely connected. The solutions, therefore, should also be similar and interrelated. They can be addressed most effectively by a combination of mutually supportive interventions that promote healthy development.
- Ensure that adolescent health and development policies are accompanied by a plan of action and appropriate budget allocation for implementation that builds on already existing resources and structures.
- Ensure that adolescent health and development policies complement and strengthen other national and social policies (education, job-training, social service, justice, etc.).

## **Policy** options for adolescent health and development

The policy adopted for each country depends on the social, cultural and political contexts in which it is developed and implemented. This document presents three options for adolescent health and development policy formulation, with examples from different countries.

Option National adolescent health and development policy

### This option involves the formulation of an independent and comprehensive adolescent health and development policy.

A national adolescent health and development policy implies that adolescents are a priority population. Thus, it provides a framework for focused action and facilitates resource mobilization for the comprehensive promotion of healthy development of adolescents.

#### Australia<sup>2</sup>

The national "Health of Young Australians" policy represents a commitment by Commonwealth, State and Territory governments to work cooperatively to promote, maintain and improve the health status of all Australian children and young people. Key areas for action include:



- promotion of healthy, supportive environments for children and young people;
- commitment to the participation of young people and families in decisions about their health and health care;
- achievement of a balance between health promotion and treatment of ill-health;
- improved access to health services for young people and a reduction of inequities;
- greater coordination and collaboration within the health sector and between health and other sectors;
- regular monitoring of the health of children and young people, complemented by research on priority issues; and
- a knowledgeable and skilled workforce of health care providers for children and young people.

<sup>&</sup>lt;sup>2</sup> The health of young Australians: a national health policy for children and young people. Australian Health Ministers' Conference, 15 June 1995.

#### Malaysia<sup>3</sup>

The Ministry of Health, together with its partners in various government agencies and non-governmental organizations (NGOs), initiated the formulation of an Adolescent Health Policy.

The policy aims to encourage and ensure the development of adolescents in realizing their own responsibilities for health. Through their active participation, it also aims to empower adolescents with the appropriate knowledge and assertive skills to enable them to practice health-promoting behaviour.

The objectives are:

- 1. to support the development of resilient adolescents through promotion of health and responsible living;
- 2. to prevent the health consequences of risky behaviour through promotion of wellness and provision of appropriate health care services; and
- 3. to promote active adolescent participation in health promotion and preventive activities.

The strategies include:

- provision of an accessible and appropriate range of preventive and curative health care services;
- health promotion with emphasis on individual and societal action;
- research and development;
- human resource development, involving training of all categories of health care workers on adolescent health;
- development of strategic alliances with related agencies, including establishment of a mechanism at national level to improve and strengthen coordination and collaboration among partners;
- creation of an adolescent health information system to track adolescent health and development and generate evidence for programme planning; and
- development of legislation to benefit adolescents and support policies that promote their health.





<sup>&</sup>lt;sup>3</sup> Ministry of Health, Malaysia, 2001.



The draft National Programme of Action for Children (including an adolescent component) aims to protect and promote the health and development of schoolchildren and adolescents. The programme's objectives are:

- to strengthen school health curricula and teaching methodology;
- to increase the number of health-promoting schools;
- to reduce the prevalence of common diseases and disabilities and improve monitoring of adolescent health;
- to strengthen the participation of adolescents, families, communities and institutions in adolescent health and development; and
- to enhance technical capacity for promotion of the health and development of schoolchildren and adolescents.

#### **The Philippines**<sup>5</sup>

The Adolescent and Youth Health Policy (Administrative Order 34-A, 2000), developed by the Department of Health, aims to ensure promotion of the total health, well-being and selfesteem of adolescents and youth. Implementation of the policy will strive to ensure that all adolescents and youth have access to quality comprehensive health services in a youthfriendly environment by: (1) promoting a safe and supportive environment; (2) providing information; (3) building skills; and (4) providing services.

The policy is based on the following guiding principles:

- Adolescents as a human resource
- Rights-based approach
- Diversity of adolescents' needs and situations
- Gender sensitivity
- Privacy and confidentiality
- Participatory and consultative

In addition, the Population and Sex Awareness (PASE)<sup>6</sup> programme was developed by the Department of Social Welfare and Development (DSWD) to address issues related to early marriage and unemployment among out-of-school young people. PASE is supported by an administrative order and is integrated into the human resources development programme for youth of the Department's Bureau of Youth Welfare.

<sup>&</sup>lt;sup>4</sup> Information from country profiles of selected countries. Manila, World Health Organization Western Pacific Regional Office, 2001.

<sup>&</sup>lt;sup>5</sup> The Department of Health, Philippines, 2000.

<sup>&</sup>lt;sup>6</sup> Op. Cit. Ref 4.



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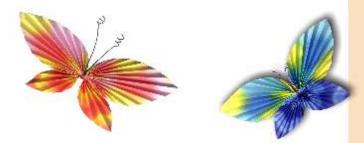
issues into

development

theme-specific

health policies

This option implies the integration of adolescent health and development issues, Mainstreaming needs and actions into theme-specific health policies and strategies.



One example is including policy on adolescents' access to family planning information and services in a national family planning or reproductive health policy and programme. Another example is preventing the sale of tobacco products to adolescents as part of a national tobacco control policy.

The benefit of this type of policy is that adolescent health and development issues are mainstreamed into existing policies and ongoing interventions. However, this option raises a number of issues, such as: (1) the cross-sectoral concerns of adolescents (e.g., the provision of comprehensive health services addressing a variety of issues) may be lost; and (2) issues such as violence and injury may not be addressed as countries are unlikely to develop specific policies on these issues.

#### **Fiji**<sup>7</sup>

Adolescent reproductive health needs are embedded in the national reproductive health policy. This is reflected in the Development Plan for Adolescent Health Programme and Services (1999-2003). The plan focuses on:

- 1. Community health services:
  - establishment of adolescent clinics;
  - peer education activities;
  - additional professional staffing (doctors, nurses, health inspectors, counselors) for adolescent reproductive health services; and
  - support vehicle, equipment and other logistics for adolescent activities.
- 2. Curative services:
  - inpatient counselling services; and
  - referrals.

<sup>&</sup>lt;sup>7</sup> Ministry of Health, Fiji, 2000.

#### The Philippines<sup>8</sup>

Addressing the sexual and reproductive health needs of adolescents is one of the five substrategies of the overall integrated reproductive health programme strategy. Coordinated by the Commission on Population, the adolescent-specific strategies consolidate the government and NGO efforts to promote the total well-being of young people, reduce



reproductive health problems, strengthen service delivery, and instill values of gender equity.

In addition, teaching of Population Education (POPED) in public and private elementary and secondary schools incorporates population subunits in five subject areas: social studies, science, health, mathematics and home economics. POPED is supported by a memorandum of the Department of Education, Culture and Sports, and is part of the overall plan of the country's Population Education Program.

#### Vietnam<sup>9</sup>

The needs and rights of adolescents to reproductive health services are included in the National Strategy on Reproductive Health Care and a Decree on Promulgating the Regulation of Technical Responsibilities in Reproductive Health Care within Health Facilities. The objective is to improve the sexual and reproductive health status of adolescents through education, counselling and provision of reproductive health care services suited to different age groups.

To implement the above Strategy and Decree, the Ministry of Health has developed national guidelines for improving the availability, accessibility and quality of adolescent-friendly sexual and reproductive health services at district health centres and the commune health stations.

Op. Cit. Ref 4.

Ministry of Health, Viet Nam, 2001.



Adolescent health and development within a broad national development policy This policy option implies the inclusion of adolescent health and development issues in broad national development policy.

Such incorporation supplements any existing adolescent health and development policy. However, on its own, this policy option may not provide a specific focus on adolescents, and may have to compete with other issues for resources.

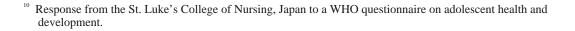
#### Japan<sup>10</sup>

A youth development policy has been formulated by the Management and Coordination Agency based in the Council for Adolescent's Problems. This policy aims to:

- establish healthy communities and families;
- promote school health; and

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• enhance employment opportunities.



## Elements of adolescent health and development policies



### Access to a range of information and health care services

- Make health information and a comprehensive range of preventive and curative services available, acceptable, accessible and affordable to adolescents.
- Ensure equity and quality of health services.
- Involve adolescents, parents, caregivers in decisionmaking, design and evaluation of health services.

#### Building skills and opportunities for adolescents to maximize their development

- Ensure adolescents have access to formal and informal education, develop life skills, vocational skills and employment opportunities.
- Create opportunities for adolescents to participate meaningfully in decision-making that affects their lives.
- Promote safe and supportive environments in schools and other educational institutions.



#### Building skills of health care workers, teachers and others who work with adolescents

- Improve the capacity of health care workers, teachers and others working with adolescents to provide wideranging preventive and curative services to adolescents through inservice and preservice training.
- Promote capacity-building of governmental and nongovernmental agencies.





#### Collaborative partnerships

- Develop partnerships between the health and other sectors; and between government agencies, international organizations, nongovernmental organizations, donors and the community.
- Strengthen public-sector and private-sector collaboration.



#### Collection of data

- Collect and utilize data for planning and evaluating • interventions.
- Develop coordinated information systems to support the implementation of the policy and monitor its impact.
- Research factors and issues affecting the health of adolescents (e.g., economic factors; health-seeking behaviour; use and effectiveness of health services in improving the health outcomes of adolescents).

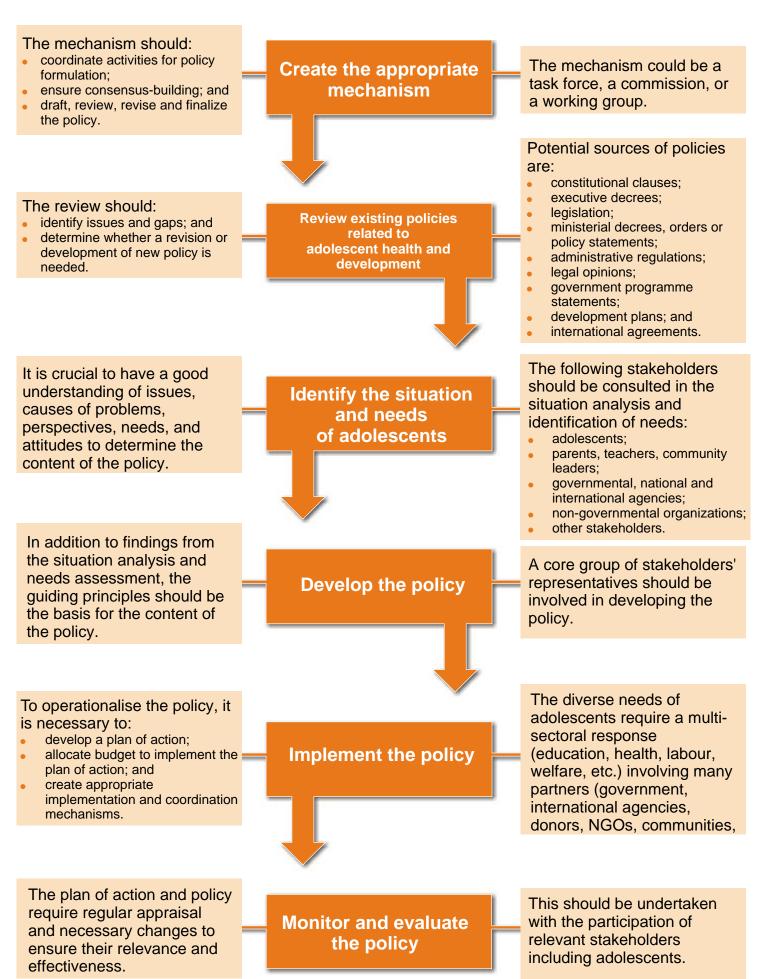
#### Safe and supportive environments

- Increase the role of parents, teachers, and community leaders and other relevant adults, and enable them to promote adolescent health and development.
- Improve the social and economic conditions of families by addressing their basic needs.
- Promote healthy lifestyles and create opportunities for adolescents to engage in healthy behaviour.
- Reduce exposure to unhealthy conditions and types of behaviour (e.g. exploitation, unsafe working environments, violence).





### The process of developing adolescent health and development policies



### value adolescents

### invest in the future

Promoting the healthy development of adolescents is an important long-term investment any society can make.





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