Adolescent Friendly Health Services



An Agenda for Change



World Health Organization

Adolescent Friendly Health Services — An Agenda for Change written for the WHO by Peter McIntyre, Oxford, UK, with support from Department of Child and Adolescent Health and Development, WHO Geneva, Glen Williams, Oxford, UK, and Siobhan Peattie, Save the Children, UK. Designed by Peter McIntyre and Alison Williams.

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An agenda for change

dolescents complete their physical, emotional and psychological journey to adulthood in a changing world that contains both opportunities and dangers.

Most adolescents are full of optimism and represent a positive force in society, an asset now and for the future as they grow and develop into adults. When supported, they can be resilient in absorbing setbacks and overcoming problems.

However, adolescents are exposed to risks and pressures on a scale that their parents did not face. Globalisation has accelerated change while the structures that protected previous generations of young people are being eroded. Adolescents receive contradictory messages on how to address the daily choices which have lifelong consequences for healthy development. Millions are denied the essential support they need to become knowledgeable, confident and skilled adults. They miss out on schooling for economic reasons or because their communities are displaced or disrupted by war or conflict.

And, while most young people have loving families who protect and care for them, many grow up with no adults committed to their welfare or where the ability of caring adults to support them has been damaged.



Adolescents are at risk of early and unwanted pregnancy, of sexually transmitted infections (STIs) including HIV and AIDS, and vulnerable to the dangers of tobacco use, alcohol and other drugs. Many are exposed to violence and fear on a daily basis. Some of the pressures adolescents are under, or the choices they make, can change the course of their young lives, or even end them. These outcomes represent personal tragedies for young people and their families. They are also unacceptable losses that put the health and prosperity of society at risk.

Addressing the needs of adolescents is a challenge that goes well beyond the role of health services alone. The legal framework, social policy, the safety of communities and opportunities for education and recreation are just some of the factors of civil society that are key to adolescent development.

However, within an integrated approach, health services can play an important role in helping adolescents to stay healthy and to complete their journey to adulthood; supporting young people who are looking for a route to good health, treating those who are ill, injured or troubled and reaching out to those who are at risk.



Adolescence — for some a time of play, for some a time of work, for most a period of optimism, but for some a time of dashed hopes. Photo: WHO

Effective health services reach adolescents who are growing up in difficult circumstances as well as those who are well protected by their communities. Health services need to link with the other key services for adolescents, so that they become part of a supportive structure that protects young people against dangers, and helps them to build knowledge, skills and confidence.

This is far from being the case in many countries. Health services often regard adolescents as a healthy group who do not need priority action, and so provide a minimum subset of adult or paediatric services with no adjustments for their special needs.

There is evidence that many young people regard such health services as irrelevant to their needs and distrust them. They avoid such services altogether, or seek help from them only when they are desperate.

This document explains why it is important that service providers address the problems of adolescents to make health services relevant and attractive. It shows how some professionals are breaking down barriers between health services and young people to enlist adolescents as champions of their own health.

Summary

- Adolescents represent a positive force in society, now and for the future.
- They face dangers more complex than previous generations faced, and often with less support.
- The development needs of adolescents are a matter for the whole of civil society.
- Health services play a specific role in preventing health problems and responding to them.
- Many changes are needed in order for health services to become adolescent friendly.

'Adolescent friendly' health services meet the needs of young people in this age range sensitively and effectively and are inclusive of all adolescents. Such services deliver on the rights of young people and represent an efficient use of precious health resources. Their characteristics are further spelled out in this document.

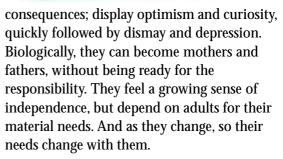
Who are adolescents?

he World Health Organization defines adolescents as young people aged 10-19 years. There are about 1.2 billion adolescents, a fifth of the world's population, and their numbers are increasing. Four out of five live in developing countries.

Adolescence is a journey from the world of the child to the world of the adult. It is a time of physical and emotional change as the body matures and the mind becomes more questioning and independent.

The second decade of life is a period of personal development almost as rapid as the first. Ten-year-olds are still children, although many are already exposed to challenges from the adult world. By the age of 20, young people are contributing members of society, acquiring rights at a variety of ages to marry, vote, drive, have sex, fight for their country — or to go to prison.

Adolescents are no longer children, but not yet adults, and this period of change is full of paradox. Adolescents can seem old beyond their years, but need adult support. They can put themselves at risk without thinking through the



- Early adolescence (10-13) is characterised by a spurt of growth, and the beginnings of sexual maturation. Young people start to think abstractly.
- In mid-adolescence (14-15) the main physical changes are completed, while the individual develops a stronger sense of identity, and relates more strongly to his or her peer group, although families usually remain important. Thinking becomes more reflective.
- In later adolescence (16-19) the body fills out and takes its adult form, while the individual now has a distinct identity and more settled ideas and opinions.

These changes take place at a different rate for each individual and can be a period of anxiety as well as pride. Part of the challenge for health



services is to recognise that adolescents have a range of needs based on individual circumstances. Those who are especially vulnerable and hard to reach, include young people who:

- are denied the opportunity to complete their education;
- have no stable homes or support, living rough in towns and cities, exposed to risks of malnutrition, abuse, violence and disease;
- are vulnerable to sexual abuse or violence, or are sexually exploited by people who are older

Summary

- About one fifth of the world's population are adolescents, aged 10-19 years.
- The majority of adolescents live in developing countries.
- Adolescents are no longer children but not yet adults.
- Adolescents have different needs according to their stage of development and their personal

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