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WHO APPROACHES TO HEALTH IN ADOLESCENCE



ADOLESCENT HEALTH PROGRAMME
FAMILY HEALTH DIVISION
WORLD HEALTH ORGANIZATION

GENEVA
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WHO APPROACHES TO HEALTH IN ADOLESCENCE

OBJECTIVES

The long-range objective of this programme is to promote the health and development of adolescents and youth (10-24 years) worldwide, but with special emphasis on the needs of developing countries. Health entails physical, mental and social well-being, accompanied by behaviour and attitudes consistent with cultural values. The behaviour of young people is key to their own present health, their subsequent health and longevity and the health of their future children. Although health problems take many forms in different cultures, the underlying bases of these problems are often common as is the promotion of healthy development.

The immediate objectives of the programme are to help:

- obtain and instill technically sound and culturally appropriate knowledge in adolescents and influential key adults.
- train and sensitize adolescents and key adults in the skills needed to promote effective health care and healthy behaviour.
- create an appropriate climate for policy and legislation to better meet adolescent health needs.
- contribute to better provision for and by young people of effective and accessible information, guidance and services for the promotion of health, the prevention of problems, and the treatment and rehabilitation of those in need.
- facilitate the application of effective evaluation.

To achieve these objectives WHO provides technical and limited financial support to:

- government
- non-governmental organizations
- academic and professional communities

to undertake:

- planning
- research
- training
- advocacy and sensitization
- programme development and evaluation

by means of:

- technical consultations and meetings
- the collection, review and dissemination of information
- the development and adaptation of special methodologies

WHO recognizes that every young person has the right to develop fully in a healthy way. This requires a judicious combination of a supportive and nourishing environment together with appropriate and timely opportunities to learn, work, play, be creative and contribute to society. The approaches and methods developed and used by the programme involve a high level of participation by people, including the young, in their own cultures to prioritize, plan and implement activities for health.

ACTIVITIES: PAST, CURRENT AND PLANNED

PLANNING ACTION AT COUNTRY LEVEL

1. A methodology called The Grid Approach has been developed to plan and prioritize action. Specific stages and events in adolescent reproductive (or general) health are examined from the perspectives of different disciplines using a grid format. Working groups systematically identify problems, the ways in which they are currently being addressed, and action needed. The action identified is then prioritized and project plans developed. This approach has been used with participants from more than 50 countries and has led to a variety of country projects.

RESEARCH

1. A methodology called The Narrative Research Design has been developed which makes use of storytelling and role play by young people as natural devices for building a questionnaire to identify adolescent behavioural patterns of relevance for reproductive health.

2. Studies of behavioural patterns in young people undertaken by youth organizations to create a sound basis for action to sustain healthy behaviour or modify unhealthy patterns.

3. Studies of behaviours and beliefs of schoolgoers and educators.

4. Studies establishing the timing of the onset of menarche and spermatarche in diverse cultures.

5. Exploration of methods to improve our knowledge of the occurrence of pregnancy, induced abortion and sexually transmitted diseases in the young population .

6. Studies of the outcome of pregnancy comparing women below 18 with those between 18 and 25 to establish differential risks.

7. Establishment of psychosocial norms in the adolescent population to help identify needs and problems and provide markers for healthy development.

TRAINING

1. A methodology has been developed called The Counselling Skills Training Module which is designed to enhance interpersonal communication skills in sensitive subjects such as sexuality and the prevention of childbirth among unmarried young people. It consists of three segments a) information provision, discussion and role play on subjects of sexual and reproductive health; b) the psychodynamic and service issues in providing counselling; and c) training by practice in the microskills of communication using culture specific situations. It can be used for sensitization in other subject areas such as alcohol and drug use, as well as training of specific skills for those in relevant sectors including health, education, youth and social welfare. This

method has been used with participants from Asia, Africa, Latin America and the Caribbean and has led to the strengthening of counselling training and services.

ADVOCACY AND SENSITIZATION

1. A method has been elaborated for The Use of Drama by young people as a technique for research, increasing awareness, and educating. Measures of the audience's values, beliefs and attitudes are taken before and after a performance of a play (or between scenes) on adolescent health issues. The audience can consist of any of the key groups which affect adolescent health including young people themselves, policy makers, health workers, teachers, parents, religious figures, etc. This technique is particularly powerful for illustrating and reducing barriers of interaction and communication between young people and others.

2. A method is applied for facilitating changes by policy makers and other key decision-makers called The Gatekeeper Design. Key people are asked a series of questions which explore their beliefs and their perceived needs for information in regard to the policies and programmes for which they are responsible. The policy makers in turn send the investigators to the managers and administrators who in turn open the gateway to the service providers. This mechanism of eliciting ideas, opening doors, and providing feedback can be an effective way to increase awareness and change opinion.

PROGRAMME DEVELOPMENT AND EVALUATION

1. Technical support is provided to innovative projects which offer information, education, guidance, counselling, and/or health services by government or non-governmental organizations especially where the experiences are likely to be of value in other countries. These projects incorporate procedures for evaluation and may also have components of research and training. Priority is given to those projects which include the involvement of young people in planning and implementation.

2. A method called The User/System Interaction has been adapted which provides a simple way of evaluating services used by young people in which subjective perception of providers and users together with objective data about the system are combined to identify areas for improvement.

3. Indicators of health are identified as well as ways to facilitate their measurement in order to evaluate policies and programmes in all relevant sectors as they affect adolescent health.

DISSEMINATION OF INFORMATION

WHO has a series of documents, publications and a data base on issues of young people's health including nutrition, oral health, injury prevention, use and abuse of tobacco, alcohol and other drugs, sexual and reproductive health, sexually transmitted diseases, HIV infection leading to AIDS, mental health and health education and promotion. Technical support is available in all these areas for the promotion of adolescent health.

INITIATION OF ACTION WITH WHO

WHO is a specialized agency of the United Nations responsible for health. It is primarily a technical agency, however, limited funds are available for projects. Contact your WHO Country Representative who may be able to identify sources of funds if financial help is required. The WHO Representative will also forward requests for technical and financial support to the WHO regional offices and headquarters.

WHO REGIONAL OFFICES AND HEADQUARTERS

HEADQUARTERS

Adolescent Health Programme, Family Health Division
World Health Organization, CH-1211, Geneva 27.

AFRICA

World Health Organization, Regional Office for Africa, P.O.Box No. 6, Brazzaville, Congo

AMERICAS

World Health Organization, Regional Office for the Americas/ Pan American Sanitary Bureau, 525 23rd Street, N.W., Washington, D.C. 20037, U. S. A.

EASTERN MEDITERRANEAN

World Health Organization, Regional Office for the Eastern Mediterranean, P.O. Box 1517, Alexandria-21511, Egypt.

EUROPE

World Health Organization, Regional Office for Europe, 8 Scherfigsvej, DK-2100, Copenhagen O.

SOUTH-EAST ASIA

World Health Organization, Regional Office for South-East Asia, World Health House, Indraprastha Estate, Mahatma Gandhi Road, New Delhi 110002, India.

WESTERN PACIFIC

World Health Organization, Regional Office for the Western Pacific, P.O.Box 2932, 1099 Manila, Philippines.