

Outline
Adolescent Health Chapter
Disease Control Priorities
July 2004

Authors:

Elizabeth Lule, James E. Rosen, Susheela Singh, James C. Knowles, Jere Behrman

Section 1. The Nature and Causes of the Burden of Disease in Young People.

Introduction

1.A. Adolescent Health Challenges

Risky DALYS

1.B. The Burden of Disease in Adolescence

10-14 and 15-19 age group

5-14 and 15-29 age group

DALYS males vs. females

1.C Risk Behaviors Among Adolescents and Young People

Injuries

Mental Health

Smoking, Alcohol and Drug Use

Nutrition and Exercise

Sexual and Reproductive Behaviors and Risks

Sexual activity

Early Marriage

Pregnancy, abortion and childbearing

Contraceptive knowledge and use

Recent changes in timing of initiating sexual and reproductive behaviors

Sexually transmitted infections and HIV.

Coercion and sexual violence

1.D. Poverty and Adolescent Health

Youth in poverty

Poverty-health status

How poverty contributes to poor adolescent health

Section 2. Interventions.

2.A. Evidence on sexual and reproductive health interventions

- Life skills and health and sexuality education in the schools
- Peer education
- Mass media and community mobilization
- Youth development programs
- Provision of clinical health services
- Social marketing
- Workplace and private sector programs.

2.B. Evidence on other adolescent health interventions

- Nutrition
- Mass deworming
- Tobacco

2.C. Interventions with promising yet unproved effectiveness.

- Sexual and Reproductive Health Interventions
- Other adolescent health interventions
- The policy environment

Section 3. Intervention Cost and Cost Effectiveness.

3.A. Cost and cost-effectiveness analysis

- Sexual and reproductive health
- Other adolescent health interventions

Section 4. Cost-Benefit Analysis

4.A. The Economic Benefits of Interventions

- Approaches to measuring the economic benefits of interventions

- The macro approach
 - The micro approach

4.B. Cost-benefit analysis

- Iron supplementation administered to secondary school children

Tobacco tax

School-based reproductive health program to prevent HIV/AIDS

Section 5. Implementation of Programs and Lessons of Experience.

5.A. The implementation experience

5.B. Key principles in Adolescent Health programming

Recognize the diversity of the youth age group

Involve young people.

Make health services appealing to youth

Address gender inequality

Address the needs of boys.

Design comprehensive programs

Consider all important benefits

Address the many nonhealth factors that influence adolescent health

Address underlying risk and protective factors

5.C. Making a difference at a large scale

The Bangladesh Newlyweds Program

National suicide prevention program in New Zealand

LoveLife: Promoting Sexual Health and Healthy Lifestyles for Young People in
South Africa.

Sexuality Education in Mongolia

5.D. Addressing the health needs of poor youth

Targeting out-of-school youth

Improving education for girls and young women

Focusing efforts on vulnerable youth

Tailoring subsidized programs to poor youth

Strengthening postabortion care

5.E. Improving Health Systems to Meet Adolescent Health Needs

Strengthening human resource capacities

Information systems

Sustainable financing and equitable protection

Coordination function

Involving the private sector

Strengthening the stewardship oversight function of governments

Strengthening the monitoring and evaluation of programs and policies

Section 6. The Research & Development Agenda.

Documenting the effectiveness of current approaches
Testing new interventions
Better understanding of the risk and protective factors influencing young people's behavior
Better cost and cost-benefit analysis

Section 7. Conclusions

Figures, Tables, and Boxes

Figure 49-1: Premature Death and Burden of Disease Attributable to Risk Factors with Roots in Adolescence

Figure 49-2: THE NUMBER OF YOUNG PEOPLE AGED 15-24 YEARS LIVING BELOW THE POVERTY LINE (INCOME/CONSUMPTION OF LESS THAN \$1 PER DAY)

Figure 49-3. Rates of early childbearing across income quintiles

Table 49-1. Percentage distribution of disability life-adjusted years according to major categories of diseases and conditions, by sex for two age-groups, 5-14 and 15-29, 2002

Table 49-2: Indicators of sexual and reproductive behaviours during the adolescent years, based on Demographic and Health Surveys, of the late 1990s to the early 2000s.

Table 49-3. Effectiveness of Adolescent Sexual and Reproductive Health Programs, Low- and Middle-Income Countries

Table 49-4. Types of Effects of Adolescent Health Interventions Categorized According to the Degree to which they can be Easily Monetized

Table 49-5. Estimated benefit-cost ratios of some investments in youth in selected countries

Box: Important Influences on Adolescent Behavior.