New PAHO Adolescent Health Book Provides Decision-Makers with Policy Directions

**DECISION-MAKERS**

Youth: Choices and Change is a journey into the world of young people, beginning with preadolescence and continuing through to early adulthood. It describes how adolescents and youth think and feel, what their basic needs and wants are, what they like and dislike, and why—of most interest to decision-makers and policy developers—some decisions and policies designed for their safety, protection, health, and well-being are effective, while the large majority fall short of their proposed goals.

This publication is guaranteed to find resonance among all those who make decisions affecting the lives of adolescents. This large and diverse group includes all those who plan and carry out health promotion interventions and programs for adolescents; schoolteachers, administrators, and principals; others who determine educational curricula suitable for adolescent-age students, as well as those who develop university-level materials focusing on this stage in life; local and national legislators; members of the law enforcement and criminal justice systems; those who create mass media trends and those who select media content for adolescent consumption; and members of the corporate community who target their products and services to the youth market; among others.

**Youth: Choices and Change—What Is New?**

The Pan American Health Organization (PAHO), Regional Office for the Americas of the World Health Organization, is pleased to present a unique contribution to the study of adolescent health and development. The chief focus of Youth: Choices and Change is how to create opportunities leading to positive and sustained behavior change and to the conscious adoption by youth of lifelong health-promoting lifestyles. For all those who work with and for adolescents, this focus translates into empowering adolescents from an early age to become mentally and physically healthy and economically productive as adults by better preparing them to be full participants in social, political, and capital-producing opportunities in the communities and countries where they live, grow up, and begin planning their future. The book breaks new ground by utilizing a cross-cutting approach that interconnects a series of analytical factors previously considered in isolation or in fragmented fashion. These factors include those that predispose, enable, and reinforce lifestyle choices and/or shape environmental living conditions in ways that affect the health and well-being of individuals as well as populations as a whole.

The authors, Cecilia Breinbauer and Matilde Maddaleno, specialists in child and adolescent psychiatry and pediatrics, respectively, provide a backdrop for the introduction of the book’s new knowledge by presenting a compendium of the major behavioral change theories and models that have been employed by social sciences researchers over the past several decades. Decision-makers who are unfamiliar with these theoretical frameworks will find them useful in policy formulation aimed at encouraging
safe and healthy lifestyles in the four broad adolescent behavioral areas this publication addresses: protection of sexual and reproductive health; tobacco, alcohol, and drug use prevention; physical activity and nutrition; and violence prevention and peaceful conflict resolution.

Youth: Choices and Change furthermore removes much of the guesswork as to the relative effectiveness of the theories and models—each meriting its own separate chapter—by zeroing in on the findings of the application of each of these to the specific case of adolescents (versus other age groups, or the population at large). The book marks the first time study results, as specifically related to adolescent behaviors, have been systematically collected and reported together in a single source. Nor has the conceptual analysis of these classical theoretical concepts incorporated a developmental perspective when applied to adolescents, meaning that differences in behavioral and socio-emotional capabilities between 13-year-olds and 18-year-olds, for example, have not been formally identified and addressed. The publication’s inclusion of this perspective facilitates the analysis of universal changes in the mind and body and of the emotional, social, and sexual needs and wants that distinguish each of the four stages\(^1\) of human growth and development during life’s most profoundly evolutionary period.

Cultural, ethnic, and gender differences also are given special consideration, as are the role of poverty and the ability of some adolescents to secure physical and emotional well-being despite circumstances of adversity. In addition, much of the information included in Youth: Choices and Change regarding critical developmental distinctions between the preadolescent and early adolescent stages, while gleaned by clinicians through years of experience working with these two age groups, has never been compiled and presented in published form until now.

The resulting thoroughness and clarity of this book’s analysis sheds new light on why some health promotion interventions aimed at positive adolescent behavior change produce the desired results, while others fail. This thoroughness extends to the diversity of geographical settings that provide a backdrop for the studies cited: from Africa to the United States, Canada to Jamaica, Brazil to the Netherlands, El Salvador to Japan, and India to Mexico, name only a few. As is noted in a number of these studies, the most effective interventions are those which include interpersonal-, community-, and policy-level components to facilitate and support behavior change at the individual level.

The most quintessential message of Youth: Choices and Change is that the cornerstone for success in instilling lifelong healthy behaviors is early intervention, beginning in the preadolescent years, instead of waiting until later, when health-compromising behaviors have already begun and may be well entrenched. This lesson forms the underpinning of the Youth: Choices and Change Model created by PAHO and being presented for the first time in this book. By following the steps in this tool, planners and developers of adolescent health programs can help young people achieve the developmental goals appropriate for their age group, better manage social and environmental risks, take advantage of opportunities for self-improvement, express their

\(^1\) Preadolescence, and early, middle, and late adolescence
needs and wants through positive and healthy channels, and master the necessary skills and assets to achieve their self-set goals for the future.

**Building the Momentum for Positive Adolescent Behavioral Change**

Health services, schools, recreational and sports facilities, community organizations, government agencies, and business and political leaders are all part of the community where the adolescent develops, grows, studies, plays, works, and seeks advice and services. These entities and individuals are essential stakeholders who can play a pivotal role in promoting healthy behaviors and lifestyles among adolescents. As decision-makers whose actions affect the lives of young people, they will discover a large body of evidence-based findings in *Youth: Choices and Change* that can serve as a compass in orienting future directions for their work.

The community level theories and models described in this publication should help decision-makers to better understand how best to promote social and environmental change that make healthier choices easier choices to make. At the same time, these theoretical constructs represent a meeting point for health education approaches and policy, economic, regulatory, and other environmental interventions. As researchers Lawrence Green and Marshall Kreuter note in *Health Promotion Planning: An Educational and Ecological Approach* (1999), “Health education provides the consciousness-raising, concern-arousing, action-stimulating impetus for public involvement and commitment to social reform essential to its success in a democracy. Without health education, health promotion would be a manipulative social engineering enterprise. Without the policy support for social change, on the other hand, health education is often powerless to help people reach their health goals even with successful individual efforts.”

Of perhaps most interest to decision-makers will be *Youth: Choices and Change*’s discussion of the Diffusion of Innovations Theory, behavior change communication models, and social marketing techniques, given the potential of each of these constructs to appeal to and simultaneously influence large target groups of adolescents. The application of the Diffusion of Innovations Theory is described principally within the school environment, where it has been most utilized to scale up HIV/AIDS and tobacco initiation prevention programs as part of the educational curriculum. As the book notes, the focus of contemporary research on the diffusion of school health promotion interventions has gradually shifted from the attributes of the particular innovation and the characteristics of the target audience to the planning behavior, thought processes, and actions of schoolteachers, with regard to the proposed innovation. Particularly in the case of sexual education programs, a number of recent studies indicate that personal beliefs of teachers may interfere with the fidelity of the curricula implementation.

In contrast to innovations diffusion within the school classroom, behavior change communication and social marketing have been widely used to disseminate health promotion messages through multimedia channels (television and radio programs,
newsletters, magazines, comic books, games, community mobilization campaigns, etc.)
that adolescents find attractive and to which they often turn as a source for entertainment
and reliable information. “Entertainment-as-education” has been identified as a
particularly effective communications technique due to its focus on both the emotional
and cognitive factors that influence behavior and because its content is always closely
aligned with the customs, norms, and narrative forms that are familiar to the selected
target audience.

The authors take special care to point out that “some of the key characteristics of
innovations in the Diffusion of Innovations Theory, such as the innovation’s relative
advantages, compatibility, complexity, trialability, and observability, have been
successfully applied to social marketing strategies. On the other hand, while
entertainment-education interventions with social change messages have been shown to
be effective, this approach has yet to be introduced in any significant way in the school
setting, even though adolescents often tend to complain about the lack of novelty and
creativity in traditional educational approaches.” Based on the book’s research findings,
however, Breinbauer and Maddaleno conclude that “a more synergistic approach—one
which integrates effective multimedia social campaigns with the scaling up of evidence-
based interventions in the school environment and at the community level—holds
promise as a possible best practice for the future.”

Framing Models of Policy and Legislation Development for Healthier Adolescent
Lifestyles

Youth: Choices and Change also presents a practical discussion of the policy-
making process and the development of policy-setting agendas that will be of particular
interest to those who work within the policy advocacy arena. Policies are frameworks that
guide decision-making in an organization or government, are usually described in
statements of intended action, and sometimes constitute only one element in a network of
interrelated decisions, which together form a comprehensive approach or strategy in
relation to practical issues, such as health care delivery. The book highlights the various
stages in the policy-making process, including issue definition, setting objectives and
priorities, defining options, options appraisal, policy implementation, and policy
evaluation.

As the authors point out, public policies usually address complex realities, while,
at the same time, the policy-making process needs to be conducted in a style that
emphasizes flexibility, responsiveness, accountability, transparency, and broad public
participation. By virtue of the presence of these elements, according to Breinbauer and
Maddaleno, “a policymaker’s freedom to act will be constrained at various different
stages during the policy-making process, and policy development will be ultimately
determined by who influences whom in the making of policy, and how this comes about.”
Both macro policies, or high political issues which affect everyone, and micro policies, or
low political issues involving more localized, sectoral interests, are included in the book’s
discussion. Using the Hall Model (1975), the authors suggest that an issue only becomes
part of the macro policy agenda once it achieves high legitimacy, feasibility, and support. Also, in presenting the Kingdon Model (1995), they note that “governments pay attention to policies only when a major window of opportunity opens up simultaneously in each of three ‘streams’: the problem, the politics, and the policy,” and conclude that “the role of the policy advocate is to create, monitor, and capitalize on these opportunities.”

Ultimately, the authors stress, the responsibility for developing comprehensive, well-integrated health-promoting policies for adolescents will need to be shared among various community and national interests and/or sectors, including health, education, justice, finance, agriculture, sports and recreation, transportation and urban development, commerce and industry, housing, and labor. They suggest a number of areas for future work between policymakers and public health researchers, buttressed by a cross-section of interested stakeholders at all levels of society.

Bridging the Gaps: Where Is Future Work Needed?

Within the framework of community and policy level theories and models for promoting behavior change, *Youth: Choices and Change* offers a series of additional observations and recommendations of special interest to local and national decision-makers and leaders. For example, the level of policy and legislation development has been the most utilized to address adolescent behaviors, particularly those involving tobacco, alcohol, and drug prevention efforts, as well as unprotected sex behaviors. “Interestingly,” the authors note, “even though today we are witnessing an emerging epidemic of obesity among children and adolescents in some parts of the world, comparatively little research has been conducted on the promotion of physical activity and healthy nutrition at the community and policy and legislation development levels, despite the fact that studies abound describing the effects of interventions at these two levels designed to achieve the same results among the adult population.” Extensive literature reviews conducted by Breinbauer and Maddaleno also reveal “the research gap at these two levels regarding youth violence prevention, given the fact that the majority of instances of violence reported in the media occurs among adolescents and youth. Once again, research studies to date have tended to focus on the general population, and very few have attempted to address the needs of young people in this area.”

The book also calls attention to the significant variance in the amount of research conducted on each of the four adolescent behavioral areas, a situation that might “serve to raise eyebrows in the public health and social sciences research communities, given the fact that often alcohol use, unprotected sexual activity, and interpersonal violence cluster together, not only among adults, but also among adolescents and youth.” The authors express concern regarding “ongoing and excessively fragmented research, in which experts in the various behavior specializations have failed to interact with colleagues focusing on other behaviors and thereby produce more interdisciplinary research.” At the same time, they say, many researchers have focused their behavioral change research on adult subjects, even though, as the book clearly demonstrates, the approaches that have proven most effective among one age group are not necessarily successful among
Youth: Choices and Change presents a convincing case for the need to further refine the dialogue—among local health promoters and practitioners, teachers and guidance counselors, police, judges, legislators, religious leaders; on national political agendas; and in the international community—about the need to promote and protect the health and well-being of young people everywhere, as today’s precious resource and a solid investment in tomorrow’s sustained socioeconomic development.
Box 23-1. The Diffusion of Innovations Theory: Key Theoretical Concepts in the Diffusion of Adolescent Health Promotion and Prevention Programs

characteristics of innovations
- relative advantages
- compatibility with target group
- complexity in adopting
- communicability of features
- trialability before adoption
- observability in others prior to adoption
- risk and uncertainty level
- reversibility
- time required to adopt
- commitment level required
- modifiability
- impact on social relations
- cost-effectiveness

communication channels
- media
- opinion (community) leaders

diffusion stages
- dissemination
- adoption
- implementation
- continuation

patterns of adoption
- innovators
- early adopters
- early majority adopters
- late majority adopters
- laggards

linkage system (liaison group)
- resource system: those who developed the intervention
- user system: those who will adopt the intervention
- linkage agent: person or group which facilitates the partnership between resource system and user system
Box 23-2. Behavior Change Communication: Best Practice Features

- The communication should be *personalized*.
- The messages should be *emotionally compelling*.
- The strategy includes a *role models component*.
- The messages must be *embedded in existing social and cultural norms and expectations*.
- There must be *recognition of impediments to and facilitators of new behaviors*.
Box 24-1. Summary of Policy and Legislation Effects on Adolescence Lifestyles

- According to research studies conducted in the United States, the two most effective policy and legislation actions to prevent youth smoking are the establishment of smoke-free environments and cigarette tax increases. There is also evidence to suggest that higher cigarette taxes decrease the intensity of marijuana use.
- Price is not significantly associated with tobacco experimentation, although it is an important factor for more advanced smoking behavior among adolescents.
- Policies aimed at reducing youth access to tobacco do not show strong evidence of effectiveness.
- Tobacco advertising increases tobacco consumption: a significant portion of youth experimentation with smoking can be attributed to tobacco marketing campaigns and promotional activities, particularly the provision of free tobacco samples, clothing, sporting equipment, and paraphernalia for outdoor activities.
- Comprehensive bans on tobacco advertising can reduce tobacco consumption by approximately 6%, but a limited and selective set of bans will have little or no effect at all.
- Adolescents have identified two policies as being potentially effective in encouraging them to stop smoking: a sudden and large price increase, and the listing of chemical additives on cigarette packaging and on displays where tobacco products are sold.
- U.S. studies have shown an inverse relationship between beer consumption, beer price, and the state’s minimum legal drinking age among young people.
- Increases in beer taxes and/or state minimum legal drinking age have been shown to significantly reduce youth motor vehicle fatalities.
- Price increases have a more pronounced effect on fairly heavy and heavy drinkers than on light drinkers.
- Increases in the price of alcohol have also been associated with reductions in the number of college students involved in violent acts.
- Policies designed to reduce alcohol consumption by increasing beer taxes have been associated with a reduced number of suicides among males ages 20–24.
- Increasing the legal minimum drinking age has been shown to reduce the prevalence of alcohol consumption among late adolescents, but at the same time it has been associated with a mild increase in the prevalence of marijuana use in this age group.
- Higher fines for marijuana possession and increased probability of arrest have been shown to be effective policies in decreasing the probability of marijuana use among young adults.
- Fear that the information they volunteer during counseling will not be kept confidential and that parents may learn of their visit is often cited by adolescents as a reason why they do not seek health services, especially those related to reproductive health issues.
- Making family planning services more available can increase contraceptive behavior, particularly among girls during middle and late adolescence.
- Most high school students in the United States favor the creation of more restrictive firearms policies.