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In 1976 the Executive Committee at its 76th Meeting and the Directing Council at its XXIV Meeting approved resolutions designed to encourage Member Governments to conduct intersectoral programs to meet the health and welfare needs of young people.

To this end, the Pan American Health Organization was requested to provide technical cooperation in, among other areas, the analysis of the available information and the design of a strategy for the realistic programming of the services required, with special emphasis on multidisciplinary training for the requisite personnel.

The cooperation activities that the Pan American Health Organization has been conducting have been institutionalized in programming and budgetary terms with the launching of a regional project (AMRO-1379). The purpose of this project is to provide technical advisory services and support to training and operational research in the area of health and youth.

In this stage the project is certainly no more than a catalyst that will help expand the country activities now under way in this field, frequently under programs already receiving support from other international agencies--mainly UNICEF and UNFPA in specific projects of integral development and community promotion, and of family planning, respectively--and placing special emphasis on youth groups.

To expedite and coordinate the technical support that the Organization will have to provide in the health and youth field to countries that expressly request it, and in order to strengthen activities for the promotion, dissemination and exchange of experiences on the subregional and regional levels, the Director of the Pan American Sanitary Bureau has set up an interdivisional working group in Headquarters.

A priority task of this group is to analyze the basis for a program strategy that can be applied progressively in a manner suited to the problems of each country in the Region. The basic elements of this strategy, which are in line with the recommendations made by the Committee of Experts of WHO (Geneva, 1976), should include at least the following:

- Formulation of a national and intersectoral policy for safeguarding the health of young people as part of the promotion of family and community welfare. This would mean enlisting the participation of other sectors, in addition to that of health, such as education, social security and labor, for joint action under overall socioeconomic development plans. At the same time, basic legislation to institutionalize the process would have to be drafted or improved.

- Incorporation of youth health activities, at some level, into the general health programs of every country. It is well to bear in mind here that most of the health needs of young people can be met through the primary care services, particularly in the urban-fringe and rural areas, at which level the young people themselves will have to be involved, as a major factor, in the care of their own health and of that of their families and communities.

- Inclusion of health care activities, wherever possible, in specific services and programs, such as those for maternal, infant and school-child health and occupational medical care. In any case, referral systems are only conceivable in terms of multiprofessional teams; the accessibility of these systems can only be guaranteed by proper regionalization of the care structure.

Much of the pathology of young people is linked to the values, traditions and, in general, the socioeconomic and cultural structures of the various societies, including the phenomena of migration and unemployment. To prevent and control the impairment of health by these phenomena, this process has to be considered as a single whole. An example is the significant prevalence among young people of attitudes of inappropriate psychosocial behavior in respect of sexual activity, leading to unwanted early pregnancies, promiscuity, abortion, prostitution and sexually transmitted diseases, and of distorted family and community living patterns which generate violence, alcoholism, smoking and drug addiction.

Thus it is essential to bring about conditions in which young people can learn about circumstances that favor their normal physical and psychic development, motivate them toward responsible parenthood and, in general, put them on the road to family life and involvement in community development work.

With a view to all this, work must be started toward providing young people with more facilities for recreational and athletic activities, for educationally and culturally appropriate vocational counseling, for their protection as workers, and for their participation in civic life.

- Personnel training is of utmost importance. It will call for curricular, methodological and technological innovation in the teaching-learning process, including the acquisition by personnel of skills that will enable them to gain the confidence of young people. In this way it will be possible to expand the services for youth, a function and responsibility not reserved exclusively to professionals and officials in the health sector, but one in which members of educational institutions and labor organizations, community leaders and, particularly, young people and their families, must also participate.

- The chief research activities are those for improving the available information on the health needs of young people and the magnitude and epidemiology of the problems. The services to be performed can then be organized properly and standards for care in high-risk situations adopted, and the effectiveness and cost-benefit ratios of the programs can be evaluated.

Following these general guidelines, the Pan American Health Organization will go on providing the technical cooperation requested by the Member Governments, subject to its budgetary limitations and to the mandates of its Governing Bodies, to meet the specific needs of health activities aimed at young people.

This cooperation includes the following:

- Promotional and advisory services in the establishment of national, and later of subregional, working groups on health care of young people.

- Cooperation in improving the information available in each country on the health problems of young people, and the selective dissemination of literature.

- Advisory services in the development and training of the appropriate human resources and in relevant biomedical social research.

- Collaboration with a view to institutionalizing the coordination of the above-mentioned programs both with related national intersectoral activities and with those going forward under international collaboration projects.

The foregoing considerations were submitted to the Executive Committee at its 78th Meeting for consideration and analysis. The consensus was to emphasize, among other aspects, those relating to the need both to improve and disseminate the available information and to contribute to the strengthening of programs of education in family and community life. It was felt that an appropriate strategy in this direction could be to set up national and intersectoral working groups on the level of the countries and subregions.