A STANDARDS-DRIVEN APPROACH TO IMPROVE THE QUALITY OF HEALTH-CARE SERVICES FOR ADOLESCENTS

IMPLEMENTATION OF GLOBAL GUIDANCE IN THE REGION OF THE AMERICAS

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## CONSIDERATIONS

1. Mid-term evaluation of the Regional Strategy and Plan of Action for Adolescent and Youth Health 2010-2018

2. Preliminary results indicate limited progress in the improvement of the health situation of adolescents in the Region

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<th>Goals</th>
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<td>Reduce adolescent and youth mortality</td>
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<td>Reduce unintentional injuries</td>
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<td>Reduce violence</td>
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<td>Reduce substance use and promote mental health</td>
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<td>Ensure sexual and reproductive health</td>
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<td>Promote nutrition and physical activity</td>
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<td>Combat chronic diseases</td>
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<td>Promote protective factors</td>
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The mortality rate in adolescents and youth remained stable among males and females during the period 2008-2012.

Mortality rates in young males are three times higher compared with females.
Crude Mortality Rate of young persons (10-24 years) By Country And Sex (All Causes, Latest Year Available) (Source: PAHO, CHA/HA)
Suicide rate by sex and country (15-24 years), 2009-2011 (Source: PAHO, CHA/HA)
• The estimated fertility rate among adolescents (number of births per 1,000 women aged 15-19 years) in Latin America and the Caribbean is among the highest in the world, at 69, only surpassed by Sub-Saharan Africa (108).

• The global average is 45.

(Source: WHO)
Specific Adolescent Fertility Rate (15-19 yrs.) 2009-2013
(Source: World Bank)
Prevalence of overweight and obesity among adolescents 13-15 years, 2009 -2013
Source: Global School-Based Health Survey (GSHS)
Proposed Regional Strategy for Dissemination and use of the Global Tools

• Dissemination in English and Spanish of both documents (Spanish translation & printing in progress)

• Global Standards:
  o Regional adaptation for SRH facilitated by UNFPA
  o Regional advocacy through PAHO structures.
  o Pilot review of policies, programs & systems (1-2 countries in 2015, additional countries in 2016), support follow-up & share experiences.
  o Pilot implementation of quality and coverage measurement surveys in 2-4 countries (interested?)
  o Direct support to countries for (pilot) implementation: updating of norms, standards, SOPs
  o Anything else?
Core Competencies

• Wide dissemination in progress (great response!)
• Country-level dissemination by PAHO country offices in progress (stakeholder meetings, etc.)
• Incorporation in PAHO Human Resources for Health strategy: working with educational institutions to incorporate core competencies in pre-service curricula
• Support to partners for incorporation of Core Competencies in existing post-graduate training (Chile, ARG Diplomado)
• Partnership with UWI for development of CAR Adolescent Health Diploma Training
• Anything else?
THANK YOU