



# MAKE ADOLESCENT WELLBEING A PRIORITY **AN URGENT CALL TO ACTION**

Draft Version 3.0 For Consultation



**THE GLOBAL GOALS**  
For Sustainable Development



WE SUPPORT  
**EVERY WOMAN  
EVERY CHILD**  
FOR HEALTHY AND EMPOWERED WOMEN,  
CHILDREN AND ADOLESCENTS

“ As a second sensitive development opportunity after early childhood, adolescence represents an optimal period in life to learn healthy behaviors, acquire social and labour skills, and realize human rights protections that have an impact throughout the life-course. Investment in adolescent health, wellbeing and development generates a “triple dividend of benefits” and determines both the present and future health of individuals, as well as that of generations to come ”

## WHY DO WE NEED ACTION?

**Achieving the 2030 Agenda**, including Universal Health Coverage (SDG Target 3.8), requires keeping adolescents informed and healthy, both to survive and thrive now and in their adulthood. The UN Strategy for Women’s, Children’s & Adolescents’ Health recognises this, but to keep the promises made in the SDGs, further support and commitment is required to deliver for adolescents – especially those who are most at risk of being left behind.

**There are 1.2 billion adolescents (10-19 years old) worldwide today and this number will rise through 2050.** Nearly nine out of ten adolescents live in low- and middle-income countries. The health and wellbeing of adolescents now and in their adult lives greatly depend on key opportunities for education, skill development, employability, access to quality health services and a supportive environment that can help them stay healthy, empowered, embracing gender equality norms and demanding rights.

**Adolescents have a right to information and services that holistically meet their unique needs.** This includes noncommunicable diseases, injuries, healthy eating and nutrition, mental wellbeing, risk of tobacco and other substance abuse, physical activity, social support and the cultivation of healthy relationships, in a manner consistent with adolescents’ evolving capacity, that are mutually enforcing and free of stigma and discrimination, and uphold their sexual and reproductive health and rights.

**Adolescents face multiple barriers in accessing the knowledge, information, health care services and commodities they need,** even though the majority of their health and wellbeing issues are preventable or treatable. The provision of appropriately tailored care and services for adolescents is either weak or absent. In addition, service providers often have limited understanding of their specific needs. Age-specific challenges can be exacerbated by sex, ethnicity, religion, disability, location, level of education, wealth, marital status, sexual orientation and gender identity, migratory status and other characteristics.

**Adolescents have not experienced the same reduction in mortality seen in younger children.** While deaths in children under five halved during the Millennium Development Goals period, progress in adolescent mortality has stalled. Each year there are more than 1.1 million adolescent deaths, with some of the major contributors including road traffic injuries, suicide, interpersonal violence, HIV/AIDS and diarrhoeal diseases.

**Investment in adolescents delivers the “triple dividend”** - improving health and wellbeing now, enhancing it throughout the life-course and contributing to the health and wellbeing of future generations.

**A thriving adolescent population fuels economic growth** by contributing to increased productivity, reduced health expenditure, and ensuring reducing inequities across generations.

- For every dollar invested in selected adolescent health interventions, there is an estimated ten-fold health, social and economic return.<sup>1</sup>
- Investing in best-practice programmes to end child marriage, at approximately \$3.80 per person, could bring an almost six-fold return on investment and cut child marriage by around a third.<sup>2</sup>
- Today, some 130 million girls around the world between the ages of 6 and 17 are still not in school - 75% of whom are adolescents. Research from the World Bank shows that every year of secondary school education is correlated with an 18 percent increase in a girl’s future earning power.<sup>3</sup>

<sup>1</sup> Sheehan P, Sweeny K, Rasmussen B, Wils A, et al. Building the foundations for sustainable development: a case for global investment in the capabilities of adolescents. Lancet 2017; 390: 1792–806.

<sup>2</sup> Ibid.

<sup>3</sup> <https://www.worldbank.org/en/news/press-release/2018/03/07/world-bank-invests-us32-billion-in-adolescent-girls-education-in-2-years>

## WHAT NEEDS TO BE DONE?

To ensure that every adolescent can make informed choices about their lives, and fulfil their rights to attain full health and wellbeing we, the signatories of this call to action, call on governments, donors and the international community to:



### Engage adolescents in all legal, policy, and programme processes that affect them:

- Place **adolescents at the forefront** of this Call to Action and all its related components.
- Strengthen national platforms for increased and **equitable adolescent engagement** in developing policies and programs that impact them.
- **Empower young people** to demand their rights and hold national systems and institutions accountable so that their distinct and diverse needs are met.



### Go beyond the health sector by developing strong multisectoral, whole-of-government policy approaches that truly address adolescent health and wellbeing:

- **Develop a framework for adolescent wellbeing**, using a multisectoral and multi stakeholder lens, to improve the programming and measurement of adolescent wellbeing.
- **Prioritize collecting more and higher-quality data** about adolescents that can be disaggregated by age, gender and other characteristics to guide action and define who they are and what they want.
- **Strengthen partnerships at all levels** that ensure linkages between the adolescent health and wellbeing agenda with broader efforts to address young people’s livelihoods, education and skills, as well as productivity.



### Strengthen political commitment and funding for adolescents to accelerate action towards 2030:

- **Increase and make more effective domestic and donor spending** on adolescent health, in line with commitments made on UHC and beyond the health sector, to **cover all adolescents with mandatory, prepaid, pooled funding** for services that comprehensively address adolescent needs.
- Commit to prioritise Adolescent Health and Wellbeing, in resolutions submitted at the **World Health Assembly** in 2020 and beyond.
- Mobilise efforts towards a first ever **global summit on Adolescents** in 2022, aiming to increase significantly the levels of commitment and global funding for adolescents and accelerating action towards 2030.

## YOU CAN TAKE ACTION TODAY BY:



**SIGNING THE CALL TO ACTION AT:**  
[www.unmgcy.org/call-to-action-on-adolescent-health](http://www.unmgcy.org/call-to-action-on-adolescent-health)



**SHARING IT WITH YOUR PROFESSIONAL NETWORKS, FRIENDS AND FAMILY**



**LEARNING MORE ABOUT HOW ADOLESCENT HEALTH CAN BE THE CORNERSTONE OF BOTH UNIVERSAL HEALTH COVERAGE AND PROSPEROUS SOCIETIES:** [www.unmgcy.org/call-to-action-on-adolescent-health](http://www.unmgcy.org/call-to-action-on-adolescent-health)





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