



Promoting Positive Adolescent Health Behaviors and Outcomes: Thriving in the 21st Century



Adolescence is a period of immense growth, learning, exploration, and opportunity during which youth develop the knowledge, attitudes, and skills that will help them thrive throughout life. While most youth traverse adolescence without incident, some need additional support to promote their optimal health.

Sometimes such support comes in the form of prevention or intervention programs designed to encourage healthy behaviors that will follow the adolescent through adulthood. The U.S. Department of Health and Human Services (HHS) asked the National Academies of Sciences, Engineering, and Medicine to appoint a study committee to identify the key elements that help make these programs effective in improving outcomes for youth.

While limited research prevented the identification of a set of key components, the committee's review of available evidence did reveal the strengths of population-wide programs that consider adolescent risk-taking as normative, support social-emotional learning and positive youth development, and are provided from childhood throughout adolescence. The committee's report urges HHS to support such programs and to fund further research to enable the identification of core components of effective interventions. The report also recommends that the Centers for Disease Control and

Prevention update and expand the Youth Risk Behavior Survey to gather more comprehensive data.

SUPPORTING THE SKILLS THAT UNDERLIE HEALTHY DECISIONS

Currently, few studies have examined the effectiveness of specific core components of programs for adolescents. However, research does show the strength of programs that support social-emotional learning and positive youth development as young people progress from childhood through adolescence. These programs aim to equip children and adolescents with the foundational skills they need—for example, self-awareness, self-management, and relationship skills—in order to make healthy decisions in a variety of situations. If learned successfully, such skills provide a foundation upon which other specific behavioral skills and services can be built.

Adolescence is a period when youth seek out novel experiences and make sense of their environments through exploration, experimentation, and risk taking. Doing so helps adolescents transition from dependence on parents or other caregivers toward independence and self-identity. Research supports an approach that understands risk-taking activities as a normal and necessary part of adolescence. Therefore, a focus on “discontinuation of risk” is applicable only to those unhealthy risk behaviors (e.g., substance abuse, unprotected sexual activity) that can lead to negative health outcomes (e.g., diseases, unintended pregnancy, STIs).

RECOMMENDATIONS

Based on the results of its review, the committee arrived at three recommendations.

RECOMMENDATION 1: The U.S. Department of Health and Human Services should fund additional research aimed at identifying, measuring, and evaluating the effectiveness of specific core components of programs and interven-

tions focused on promoting positive health behaviors and outcomes among adolescents.

RECOMMENDATION 2: The Division of Adolescent and School Health (DASH) of the Centers for Disease Control and Prevention (CDC) should

- update and expand the Youth Risk Behavior Survey (YRBS) to include
 - » out-of-school youth, (e.g., homeless, incarcerated, dropped out), and
 - » survey items that reflect a more comprehensive set of sexual risk behaviors with specific definitions; and
- conduct further research on the ideal setting and mode for administering the YRBS with today's adolescents.

RECOMMENDATION 3: The Office of the Assistant Secretary for Health within the Department of Health and Human Services should fund universal, holistic, multi-component programs that meet all of the following criteria:

- promote and improve the health and well-being of the whole person, laying the foundation for specific, developmentally appropriate behavioral skills development;
- begin in early childhood and are offered during critical developmental windows, from childhood throughout adolescence;
- consider adolescent decision making, exploration, and risk taking as normative;
- engage diverse communities, public policy makers, and societal leaders to improve modifiable social and environmental determinants of health and well-being that disadvantage and stress young people and their families; and
- are theory-driven and evidence-based.

PROMISING APPROACHES

The committee also suggested two promising approaches that deserve more meaningful attention in the design, implementation, and evaluation of adolescent health programs.

Promising Approach 1: Programs can benefit from implementing policies and practices that promote inclusiveness and equity so that all youth are able to thrive.

Promising Approach 2: Programs can benefit from including youth of diverse ages, racial/ethnic backgrounds, socioeconomic status, rurality/urbanity, sexual orientations, sexes/genders, and disability/ability status in their decision-making processes.

COMMITTEE ON APPLYING LESSONS OF OPTIMAL ADOLESCENT HEALTH TO IMPROVE BEHAVIORAL OUTCOMES FOR YOUTH

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For More Information . . . This Policy Brief was prepared by the Board on Children, Youth, and Families based on the Consensus Study Report, *Promoting Positive Adolescent Health Behaviors and Outcomes: Thriving in the 21st Century* (2019). The study was sponsored by the Office of the Assistant Secretary of Health in the U.S. Department of Health and Human Services. Any opinions, findings, conclusions, or recommendations expressed in this publication do not necessarily reflect the views of any organization or agency that provided support for the project. Copies of the Consensus Study Report are available from the National Academies Press, (800) 624-6242; <http://www.nationalacademies.org/adolescent-health>.

YOUTH RISK BEHAVIOR SURVEY

To better capture data on and understand the experiences of youth, changes should be made to the Centers for Disease Control and Prevention's Youth Risk Behavior Survey. For example, the survey should begin including out-of-school youth in the sampling design. Changes are also needed to the sexual behavior items included in the survey, which currently are neither specific nor comprehensive enough to provide the most accurate estimates of the sexual behaviors in which today's youth engage, or to represent the experiences of LGBTQ populations.