Broadening the horizon
Balancing protection and risk for adolescents

Department of Child and Adolescent Health and Development
Family and Community Health
World Health Organization, Geneva
Adolescence is a period of rapid development when young people acquire new capacities and are faced with new challenges. It is a time of opportunity but also of vulnerability to risk behaviours which can have lifelong consequences, especially for health.

Health risk behaviours may undermine adolescent health and development. For example, unprotected sexual relations may lead to unplanned pregnancy or a sexually transmitted infection, including HIV.

So far, programming for adolescent health and development has focused mainly on providing information and services to reduce risk behaviours and mitigate their consequences. But this is not enough. The evidence now shows that enhancing protective factors, in addition to reducing risk, is equally important. Programming strategies need to strike a balance, addressing both risk and protective factors.

What do adolescents need?

"A world fit for children is one in which ... all children, including adolescents, have ample opportunity to develop their individual capacities in a safe and supportive environment".

Whether in Beijing, Berlin, Cairo, Kathmandu, Kingston or Lomé, adolescents say they need an environment which reduces risky behaviour and supports their development.

Such an environment consists of:

- Meaningful relationships with adults, peers and partners.
- Structure and boundaries for behaviours.
- Encouragement of self-expression.
- Educational, economic and social opportunities.
- Opportunities for participation with their contributions being valued.
- Minimal risk of injury, exploitation, or disease.

Adolescents matter because:

1. They are a demographic force
   Adolescents comprise one-fifth of the world’s population, or 1.2 billion people.

2. They are an economic force
   Adolescents contribute significantly to their families and communities through paid and unpaid labour.

3. They are the future health
   Adolescence is a formative stage which presents a unique opportunity to shape young people’s health behaviours and social attitudes.

4. They have a right to participate
   "...Adolescents are capable of helping to build a better future for all. We must respect their right to express themselves and to participate in all matters affecting them, in accordance with their age and maturity."

A world fit for children is one in which all children, including adolescents, have ample opportunity to develop their individual capacities in a safe and supportive environment.
Why focus on adolescents?

We asked:
Why it is that most adolescents grow up healthy, while some engage in behaviours that jeopardise healthy development? What accounts for these differences?

We found:
Certain risk and protective factors can explain the differences in adolescent behaviour and health outcomes, even after accounting for age, socio-economic status, sex, and ethnic group differences.

The following tables present results from studies of risk and protective factors in 53 countries from all regions of the world. The three health risks presented can lead to devastating health consequences for adolescents:

- **Early sexual initiation** is associated with unprotected intercourse, which can lead to unplanned pregnancies and to sexually transmitted infections, including HIV.

- **Substance use**, including tobacco, alcohol and other psychoactive drugs, can lead to illness and even death, and is also related to unsafe sex, accidents, violence and loss of productivity.

- **Depression** affects the capacity to function, is associated with the use of alcohol and other psychoactive drugs, and can lead to loss of productivity and even suicide.

The health consequences of these three health risks combined account for one quarter of the burden of disease among adolescents.

Our data come from:

Antigua and Barbuda, Austria, Bahamas, Bangladesh, Barbados, Belgium, Bosnia and Herzegovina, Brazil, British Virgin Islands, Canada, Chile, China, Colombia, Czech Republic, Denmark, Dominica, England, Estonia, Finland, France, Germany, Ghana, Greece, Greenland, Grenada, Guyana, Hungary, India, Indonesia, Isarel, Jamaica, Latvia, Lithuania, Micronesia*, Northern Ireland, Norway, Paraguay, Peru, Philippines, Poland, Portugal, Republic of Ireland, Russia, South Africa, St. Lucia, Thailand, Togo, Tonga*, United States of America, Vanuatu*, West Bank and Gaza, Zambia, Zimbabwe

*HBLPY surveys run by UNICEF

The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines represent approximate border lines for which there may not yet be full agreement.
What do these findings on depression tell us?

- **Families matter:** Adolescents who have a positive relationship with parents, and whose parents encourage their self-expression, are less likely to experience depression. However, adolescents in families where there is conflict are more likely to experience depression.

- **School matters:** Adolescents who like school and who have educational goals are less likely to experience depression.

- **Community connections matter:** Adolescents who have a positive relationship with other adults in the community are less likely to experience depression.

- **Beliefs matter:** Adolescents who have spiritual beliefs are less likely to experience depression.

### EARLY SEXUAL INITIATION

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<th>Risk or protective factors for adolescents</th>
<th>Africa</th>
<th>Asia</th>
<th>Caribbean</th>
<th>South America</th>
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<td>Friends who are sexually active</td>
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### SUBSTANCE USE

*(tobacco, alcohol, and other psychoactive substances)*

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<tr>
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**Legend for all tables:**
- = not measured
- = protective factor

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**EARLY SEXUAL INITIATION**

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What do these findings on early sexual initiation tell us?

- **Families matter**: Adolescents who have a positive relationship with their parents are less likely to initiate sexual intercourse early.
- **Schools matter**: Adolescents who have a positive relationship with teachers are less likely to initiate sexual intercourse early.
- **Friends matter**: Adolescents who believe that their friends are sexually active are more likely to initiate sexual intercourse early.
- **Risk behaviours are linked**: Adolescents who engage in other risk behaviours, such as using alcohol and drugs, are more likely to initiate sexual intercourse early.
- **Beliefs matter**: Adolescents who have spiritual beliefs are less likely to initiate sexual intercourse early.

What do these findings on substance use tell us?

- **Families matter**: Adolescents who have a positive relationship with their parents are less likely to use substances. In addition, adolescents whose parents provide structure and boundaries are also less likely to use substances. However, adolescents in families where there is conflict are more likely to use substances.
- **Schools matter**: Adolescents who have a positive relationship with teachers, who attend school regularly, and who do well in school are less likely to use substances.
- **Friends matter**: Adolescents who believe that their friends are using substances are more likely to use substances themselves.
- **Beliefs matter**: Adolescents who have spiritual beliefs are less likely to use substances.

### DEPRESSION

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Legend for all tables:

- △ = risk factor
- ns = not significant
- = not measured

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= risk factor  
ns = not significant
What can we conclude?

Across cultures, health risk behaviours share many of the same risk and protective factors

<table>
<thead>
<tr>
<th>Risk or protective factors for adolescents</th>
<th>Early Sex</th>
<th>Substance Use</th>
<th>Depression</th>
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Families matter: Adolescents who live in a social environment which provides meaningful relationships, encourages self-expression, and also provides structure and boundaries, are less likely to initiate sex at a young age, less likely to experience depression, and less likely to use substances. On the other hand, adolescents who live in a family where there is conflict are more likely to experience depression and use substances.

Schools matter: Adolescents who have a positive relationship with teachers, and who have positive attitudes toward school are less likely to initiate sexual activity early, less likely to use substances, and less likely to experience depression.

Community connections matter: Adolescents who have positive relationships with adults in the community are less likely to experience depression.

Beliefs matter: Adolescents who have spiritual beliefs are less likely to initiate sexual intercourse too early, less likely to experience depression and less likely to abuse substances.

Risk behaviours are linked: Adolescents who engage in other risk behaviours (such as substance use) are more likely to initiate sexual activity early.

Adolescents whose environment includes positive relationships with adults at home and in the broader community, a positive school environment, and peers who have prosocial attitudes and behaviours, are less likely to initiate sexual activity early, less likely to use substances, and less likely to experience depression.

It is not only providing information and services that matters. There is a link between the social environment and health outcomes. The protective factors in the environment tip the balance in favour of adolescent health!
How do we translate this knowledge into action?

- By focusing on strategies which enhance the protective factors in the adolescent environment.

Actions to enhance protective factors do not replace risk-reduction, information, and service-provision strategies. They complement these strategies, because protective factors work in three ways:

1. Encourage and sustain positive behaviours
2. Reduce the risk of negative health behaviours and outcomes
3. Diminish the effect of, and support recovery from, negative health outcomes

Caring and meaningful relationships
Structure and boundaries
Opportunities for participation and contribution
Encouragement of self-expression

Enhancing protective factors promotes the healthy development of all adolescents!

"Accordingly, we resolve to achieve...

Development and implementation of national health policies and programmes for adolescents, including goals and indicators, to promote their physical and mental health."


In support of this goal, WHO will:

- Develop interventions and policies to strengthen the capacities of families and communities to protect adolescents and support their healthy development
- Increase the capacity of policy-makers and practitioners to implement activities for enhancing protective factors
- Support efforts to measure the delivery and effectiveness of interventions
- Support interventions and policies which provide basic social services, including access to quality education, health services, and counselling for all adolescents.