

Ministerial Declaration on adolescent-responsive health systems

e, the Ministers of Health of Member States of the WHO South-East Asia Region, gathered at the Seventy-seventh Session of the WHO Regional Committee for South-East Asia;

Recognizing that adolescents, representing a substantial segment¹ of the population of the Region, require special attention and inclusion in national health and development policies due to their distinctive physical, cognitive, social, emotional and sexual developmental needs as well as for the fulfillment of their human rights;

Noting the triple dividend for strategic investment in adolescent health and well-being through the yield of immediate, future and intergenerational benefits and the contribution to sustainable socioeconomic development;

Expressing concern over the health status of adolescents in the Region, and their high exposure to preventable health risks; as well as the outstanding health inequities among adolescents, leaving vulnerable adolescents lagging behind in health status;

Reaffirming and taking cognizance of the Regional Parliamentarians' Call to Action on Women's, Children's and Adolescents' Health in 2018, the Political Declarations from the UN General Assembly on universal health coverage, and Regional Committee resolutions SEA/RC74/R3 (*Revitalizing the school health programme and health-promoting schools in the South-East Asia Region*) and SEA/RC76/R3 (*Delhi Declaration on strengthening primary health care as a key element towards achieving universal health coverage*);

Appreciating the Outcome Document: Pact for the Future, Global Digital Compact, and Declaration on Future Generations; adopted at the Summit of the Future held at the Seventy-ninth United Nations General Assembly on 21–23 September 2024;

Acknowledging the need for an equity-driven, gender-responsive life-course approach, as well as for whole-of-government and whole-of-society approaches for comprehensive packages of interventions and services, including multisectoral efforts to herald safe and supportive physical, social and digital environments, and promote health literacy actions to address adolescent health;

Realizing that adolescent-responsive health systems are necessary to ensure that adolescents can access high-quality, inclusive and respectful health services they need, any where and without restrictions²; and that primary health care, when strengthened, could be the approach to provide such comprehensive packages of health services that are contextualized to respond to the specific developmental stages of adolescents, and their needs and preferences, and while addressing the recognized public health priorities;³

Recalling the need to promote people-centred health systems to address different health needs across the lifespan as part of UHC, and to institutionalize adolescent-friendly elements⁴ and their application through the gender lens, as appropriate, into health systems development, as well as to address multiple barriers for adolescents in accessing health care that often entails the experiencing of discrimination and stigmatization;

Concur and decide to pledge to

- 1. **PROMOTE** cross-sectoral commitment to bolster the physical, mental and social well-being of the adolescent population, particularly in building protective factors and addressing preventable risk factors, and protecting vulnerable adolescents;
- 2. ENHANCE national and subnational financial and human resource mobilization and allocation; including investment for accelerated actions for adolescent health and well-being through effective adolescent health programmes, cost-effective interventions including school health programmes, adolescent-friendly health services, comprehensive health education⁵, mental health support and optimal use of digital technology including the enforcement of relevant laws and regulations;
- 3. **ENSURE** the leadership of the health sector, at all levels, in coordinating with other relevant sectors, including through the establishment and strengthening of national and subnational coordination mechanisms; the

¹ Adolescent population in South-East Asia represent 27% of the global adolescent population, and 17% of the region's total population 2 Global Accelerated Action for the Health of Adolescents (AA-HA!): guidance to support country implementation, second edition. Geneva: World Health Organization; 2023

³ Common public health priorities among adolescents in SEA Region include, but not limited to, injuries and violence (road traffic injuries, inter-personal violence, gender-based violence), mental health (stress, anxiety, depression, suicide), triple malnutrition (underweight, overweight, micro-malnutrition), Sexual and reproductive health (Menstrual management, Pregnancy, STI, HIV, teenage pregnancies), and addiction and substance use (tobacco, alcohol, illegal drugs, screen and gambling)

⁴ Adolescent-friendly elements, as documented in World Health Organization 2015. Global standards for quality health-care services for adolescents: a guide to implement a standards-driven approach to improve the quality of health care services for adolescents. Volume 1: Standards and criteria

⁵ Comprehensive health education, with focus on public health priorities, including lifeskills and sexual and reproductive health.

development and renewal of national policies/guidelines; and through strengthening the designated authorities for adolescent health at all levels to effectively manage adolescent health programmes and related activities;

- 4. COMMIT to adopt adolescent-responsive health systems as a crucial strategy to strengthen PHC-oriented health systems and achieve universal health coverage, and to integrate health considerations for adolescents in all aspects of health system development, to ensure their access to quality, inclusive and respectful health services without any restriction;
- 5. STRENGTHEN the capacity of the health systems in responding to the demands of adolescent populations, including through the expansion of the essential services package considering the key areas of services and types of care outlined in the global guidance⁶; the development and implementation of national standards for the provision of quality adolescent-responsive health services, especially addressing common public health priorities, strengthening of health workforces including of community health workers, and strengthening referral mechanisms for services and care within the health system and also with other relevant sectors;
- 6. **PROMOTE** meaningful whole-of-society participation of and contribution from stakeholders, including adolescents, families and communities, on an inclusive and mutually respectful basis, in raising public awareness, and promoting adolescent health throughout the programme cycle, right from planning to implementation, and monitoring progress;
- 7. INCLUDE adolescent health monitoring frameworks, as appropriate, including adolescent-specific indicators in routine health management and information systems; ensure that data is regularly collected, analysed and utilized for policy and programmatic improvement at all levels, as well as regular comprehensive analysis of health systems responsiveness to address the health needs of adolescents;
- PROMOTE research studies to integrate evidence-based, adolescent-responsive or adolescent-friendly elements
 into health systems at the primary, secondary and tertiary levels, and strengthen subnational, national and
 regional mechanisms for knowledge management and collaboration to facilitate cross-sharing of learnings and
 experiences; and
- 9. **CALL UPON** WHO, Specialized Agencies of the United Nations and other development partners to provide strategic and synergized support to SE Asia Region Member States in their efforts to secure, promote and improve the health and well-being of adolescents in the Region.

6 Including the Global Accelerated Action for the Health of Adolescents (AA-HA!): guidance to support country implementation, second edition. Geneva: World Health Organization; 2023

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