



Summary of Adolescent Health: Think, Act, Grow (TAG) Announcement at the American Public Health Association (APHA) Annual Meeting

November 17, 2014 – New Orleans, LA

In partnership with the American Public Health Association (APHA), the Office of the Surgeon General, the Society for Adolescent Health and Medicine (SAHM), and the Jim Casey Youth Opportunities Initiative, the Office of Adolescent Health (OAH) announced a new stakeholder engagement effort, “Adolescent Health: Think, Act, Grow (TAG).” TAG is a call to action for multiple sectors to engage and advocate for the health and positive development of young people from adolescence through young adulthood. Public health has historically been an interdisciplinary field, extending into and establishing partnerships with diverse sectors. This history made the APHA 2014 Annual Meeting and Exposition a natural venue for launching TAG.

This session was opened by APHA’s Regina Davis-Moss and moderated by OAH Director Evelyn Kappeler with presentations from acting Surgeon General Rear Admiral Boris Lushniak, SAHM’s Dr. Carol Ford, and the Jim Casey Youth Opportunities Initiative’s Lynn Tiede. Below is a summary of the main points from each of the presenters, as well as the questions that arose from the audience, and responses from the panel. To see the discussion on Twitter, see the [Storify of the TAG session at APHA](#).

Presentation from Acting Surgeon General Lushniak

As a parent of two teenagers, the health challenges facing America’s 42 million adolescents hit close to home for acting Surgeon General Lushniak. He said he was proud to be part of TAG, noting that adolescence is a critical period and that the good and bad habits and behaviors developed in adolescence are linked to a healthy or unhealthy adulthood. The launch of TAG is an exciting time to establish partnerships across all government levels (federal, state, and local) and across sectors to successfully support adolescents in this critical period of development.

Surgeon General Lushniak chairs the National Prevention Council, which developed the National Prevention Strategy that uses four strategic directions to improve people’s health:

- Healthy and safe communities
- Clinical and preventive services
- The elimination of health disparities
- Empowered people

For him, the last priority area in particular speaks to the heart of TAG. “We need to make [adolescents] into thinkers so they can make the right choices,” he said. Empowerment means giving adolescents information and resources to make choices and take responsibility for their actions. The National Prevention Strategy focuses on seven priority health areas ranging from tobacco-free living to mental

and emotional well-being. Surgeon General Lushniak emphasized that each priority area affects adolescent health. For example, 90 percent of adult smokers started before age 18, and if current smoking rates continue, 5.6 million children are projected to die prematurely from smoking-related diseases. Based on these statistics, interventions would ideally begin in middle school or even primary school and last through age 26—in short, zeroing out smoking means focusing on adolescents.

Surgeon General Lushniak concluded that the future of the country and the health of the nation depend on how well we support the health and development of today’s adolescents. As such, “[the launch of TAG] is the beginning of a change in the interest rate for adolescent health.”

Presentation from Dr. Carol Ford, President of the Society for Adolescent Health and Medicine

Dr. Ford’s presentation showed the potential changes we could achieve in the future based on the progress made for adolescent health in the last 25 years. Her work in pediatrics and research on targeted interventions have given Dr. Ford significant experience documenting the progress made in adolescent health and the needs of adolescents.

She highlighted the immense progress in adolescent health over the last 25 years, including more than 50 percent reductions in teen motor vehicle deaths, teen smoking, and teen pregnancy. In fact, out of the 21 critical national health objectives for adolescents set in 2010, two were achieved and significant progress was made on 10. The progress has not been limited to the United States. Across the globe, there has been increased attention to the health of adolescents aged 10-19, including a report from the World Health Organization on the importance of the second decade of life.

Some of this progress can be attributed to advancements in science and our understanding of adolescents. Research has provided insight into the changes occurring in the adolescent brain and how puberty affects genetic expression. Additionally, there has been increasing research into the effects of technology, including the development of interactive models of learning. Together, the research has helped balance how we frame adolescent health: adolescence is not just a time of risk, but can be a period of opportunity to focus on positive development.

Dr. Ford concluded by highlighting what can be accomplished through TAG. In particular, she stressed that the research community needs to continue posing questions and conducting research to better understand adolescents. This will involve translating science into practice. In support of TAG, SAHM and the Society for Research on Adolescence are planning to develop a national research agenda for adolescent health.

Presentation from Evelyn Kappeler, Director of the Office of Adolescent Health

Director Kappeler introduced TAG as the beginning of the mobilization needed to improve adolescent health. She began by noting, “Too often, we look at what is wrong (in adolescence)...Overall, we hear too little about early intervention and prevention.” TAG is a call to action to encourage the public,

particularly adolescent health professionals, to see adolescence as a period of opportunity to improve lifelong health and to prepare for productive adulthood.

TAG is a comprehensive approach to improve adolescent health by raising awareness, spurring action, adding adolescent health to the national agenda, and engaging stakeholders. The latter is a particularly important component since it is not possible to do this work alone—“no one level of government or entity commands the resources to address all adolescent needs.” Director Kappeler emphasized that TAG is not a parent or youth campaign, a media or public health campaign, an effort solely focused on risky adolescent behavior or deficits, or a federal grant program.

What TAG does offer are concrete action steps that families, communities, educators, youth leaders, health care and public health providers, and young people can take to promote adolescent health. The TAG action steps, which originated through discussions with national leaders in the fields that serve adolescents, work together to promote Five Essentials for Healthy Adolescents:

- Positive connections with supportive people
- Safe and secure places to live, learn, and play
- Access to high-quality, teen-friendly health care
- Opportunities for teens to engage as learners, leaders, team members, and workers
- Coordinated, adolescent- and family-centered services

The TAG action steps – included in a TAG “Playbook” and a new section on the OAH website – are accompanied by a wide range of federal and non-federal resources that will help professionals, families, and adolescents take action to improve adolescent health.

Presentation from Lynn Tiede, Senior Associate Director for Policy, Jim Casey Youth Opportunities Initiative

While TAG is not a youth campaign, engaging youth is nonetheless an important part of ensuring that adolescents are healthy. The goal of the Jim Casey Youth Opportunities Initiative is to help “system-involved” youth many of whom are in foster care transition into young adulthood. Ms. Tiede works with youth to help them become experts and advocates for themselves. Based on Casey’s 15 years of youth engagement experiences, Ms. Tiede stressed the necessity of engaging youth in TAG efforts and strategies.

Ms. Tiede extended her colleagues’ focus by saying, “A positive youth development approach is a neurologic imperative.” She described research that indicates that the brain is not fully developed until the mid-20s and that this influences decision-making, problem solving, and planning. A positive youth development approach engages the brain by providing youth with opportunities to lead, contribute, and create. This approach develops youth assets by engaging youth and helping them learn from teachable moments and develop their passions.

Authentically engaging adolescents involves building partnerships, maintaining high expectations, and encouraging normative risks. It also requires giving adolescents responsibilities, while supporting them in those roles and reciprocal relationships. Ms. Tiede emphasized that part of seeing adolescence as a time of opportunity is remembering that becoming an adult is a risky process. Adolescents need to have the chance to step out into the world, but they do not need to do it alone. Ms. Tiede specified three youth engagement principles that adults should keep in mind when working with youth:

- **Preparation:** When adolescents are taking risks, they need to know what to expect and what they should consider to make decisions for themselves.
- **Support:** When adolescents take on these new challenges and risks, they need to be able to debrief and define the things that went well, the things that did not, and know that mistakes are okay.
- **Opportunity:** Building partnerships and engaging youth is more than just giving them a seat at the table. For authenticity, adults who work with youth need to intentionally define adolescents' roles and provide the space for adolescents to voice their opinions.

Question & Answer Session

- **How do we reach out to teen males? In particular, how do we engage fathers in mentorship?**
Adolescents need mentors, especially teen males. Some programs and resources are available to support those working with young men, such as the National Responsible Fatherhood Clearinghouse, My Brother's Keeper, and OAH's Pregnancy Assistance Fund program.
- **How have HHS and OAH engaged the Department of Education in supporting TAG?**
In the initial stages of development, when OAH was reaching out to different organizations and agencies, there was some formative work with other agencies. In addition, the Department of Education works closely with other federal cabinet-level departments implementing the National Prevention Strategy.
- **There are many organizations working with youth, but they don't work together. What can be done about it?**
Giving youth the chance to express their ideas can be a powerful solution. When young people are present and involved, it becomes difficult for adults representing different organizations to argue about turf.
- **Comment: Let's remember that parents matter and are important influences on adolescents.**
Those working with adolescents and their families have the responsibility of helping parents understand their role in their adolescents' lives.
- **How has TAG engaged youth in the development of this initiative?**
While the federal government does not have direct access to youth, OAH did work with groups like the Jim Casey Youth Opportunities Initiative, that have strong youth relationships, to make sure youth's views are heard.