A call to action to promote the health of America’s
42 million adolescents


This document is available at: https://www.hhs.gov/ash/oah/sites/default/files/playbook.pdf

For further information and resources from Adolescent Health: Think, Act, Grow®:
www.hhs.gov/ash/oah/TAG

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Adolescent Health: Think, Act, Grow® (TAG) is a national call to action to improve health, to reduce risky behavior, and to promote engagement and healthy development among young people. The adolescent years (ages 10-19) and the transition to young adulthood are important times for promoting current and life-long health.

TAG uses a strengths-based, positive youth development framework to encourage youth-serving professionals, families, and youth themselves to take steps toward promoting better adolescent health. While teens are generally healthy, behavioral and mental health problems, alcohol and drug misuse, injuries, violence, obesity, and other challenges sideline too many young people. TAG calls for adults from all walks of life to make the health, safety, and development of adolescents a high priority. TAG is aimed at helping ensure achievement of national health objectives set forth in Healthy People 2020, the National Prevention Strategy, and other national plans.

TAG provides a framework for action.

The Office of Adolescent Health (OAH) in the U.S. Department of Health and Human Services systematically gathered input from national leaders working in out-of-school time or community programs, education, faith-based organizations, health care, public health, and social services who reach a large number of adolescents. These leaders developed the elements of the Five Essentials for Healthy Adolescents. With additional input from groups representing parents, families, and teens, the national organizations’ leaders crafted action steps appropriate for their field to use as they work with adolescents. In this updated version of the Playbook, you will find new sections on youth in the workforce and youth with disabilities, as well as action steps built on updated research findings, best practices, and experience from previous initiatives aimed at improving adolescent health.

Adolescence is a time of rapid change and development. It is the time for adults and all organizations that serve youth to be involved and stay involved. Just as good health means that adolescents are ready to learn and grow, meaningful, supportive relationships, places, and experiences can help prevent risky behavior and provide opportunities for swift intervention when problems emerge.
Five Essentials for Healthy Adolescents

The leading causes of death and disability for adolescents and young adults are largely preventable. The game plan is clear. Experts convened by the Office of Adolescent Health agree that adolescents flourish when they have:

Positive connections with supportive people

Adolescents thrive in safe, stable, and nurturing relationships with supportive adults, whether those are parents, coaches, neighbors, grandparents, teachers, program leaders, or mentors. These types of connections are important for all teens and may be difficult for at-risk youth to find and sustain.

Safe and secure places to live, learn, work, and play

Schools, neighborhoods, and community settings can foster and support healthy adolescent development across the spectrum, including physical and mental health, social interactions, and cognitive growth. Adolescents also benefit from safe places to congregate, enjoy social, athletic, and other recreational activities, and just be with their peers.

Access to high-quality, teen-friendly health care

Adolescents benefit from access to high-quality medical and dental care, mental and behavioral health services, and health care providers who understand adolescent health and development. Young patients prefer health services that are youth-friendly, culturally competent, affordable, convenient, and confidential. Health care that is adolescent-centered and involves parents, but allows for increased autonomy as adolescents reach their late teens, is ideal.

Opportunities to engage as learners, leaders, team members, and workers

Active youth involvement with people and programs is important for promoting healthy adolescent development. This includes activities at school, at home, or in the community, such as school clubs, sports, music, visual and performing arts, or out-of-school time programs, volunteer or paid jobs, and activities at places of worship. Adolescents also benefit from opportunities to shape programs and activities, which can improve the programs, provide valuable leadership skills, and build confidence.

Coordinated adolescent- and family-centered services

Adolescents enter health and social service systems in many ways and at different stages. Integrated and coordinated services can help ensure better health outcomes and support healthy development for adolescents. Unfortunately, the systems for providing services and supports to adolescents are often fragmented, spread across government agencies, nonprofit organizations, health care providers, businesses, and faith-based organizations. A more coherent, integrated approach to fostering health and healthy development would benefit all teens.
THE PLAYERS:

Today’s Adolescents

There are 42 million adolescents between the ages of 10 and 19 in the United States. That’s one out of every eight Americans. According to U.S. Census data, about 51 percent of adolescents are male and 49 percent are female. Nearly half of adolescents are between ages 10-14 (49.8%) and slightly more than half are between the ages of 15-19 (50.2%).

Nationally, the United States is undergoing a demographic shift. The overall proportion of adolescents who are a racial or ethnic minority is increasing. For example, it is projected that by 2060, about one in three adolescents will be Hispanic. The graphic below represents the racial/ethnic background of adolescents in the United States.

Many teens live in metropolitan areas. Just over three in ten adolescents (31%) lived in the main city of a metropolitan area. Nevertheless, more than one in six adolescents (17%) lived in a nonmetropolitan area.

Nearly 8.2 million adolescents between the ages of 12 and 17 are estimated to have special health care needs or disabilities, ranging from chronic health conditions such as asthma and attention deficit disorder to severe physical and developmental disabilities.

Beyond the Numbers

Social and economic factors, such as education and income levels; health behaviors, such as tobacco use and diet and exercise; access to high-quality health care; and healthy and safe environments all contribute to an adolescent’s overall health. For all teens, positive influences and relationships during the adolescent years can set a course for good health throughout life.

Members of racial and ethnic minority groups, in general, are more likely to lack a usual source of health care, experience more serious health conditions, and have higher rates of mortality than whites. It is critically important to address health disparities related to race and ethnicity now to ensure a healthy America in the future.

Any young person can be vulnerable to adverse health outcomes, and those living in poverty are particularly at risk. Roughly one in five adolescents (18%) between the ages 10-17 lived below the federal poverty line in 2016.

Although high school graduation rates have increased since the 2011-2012 academic year, from 80 percent to 84 percent (see graph on page 4); in 2016, six percent of all 16- to 24-year olds had dropped out of school without earning a diploma or GED.

Race/Ethnicity of America’s Adolescents


- **White**: 54.1%
- **Black**: 14%
- **Hispanic**: 22.8%
- **Asian**: 4.7%
- **Multiracial**: 3.4%
- **HPI alone**: 0.2%
- **AIAN alone**: 0.9%

Hispanics/Latinos can be of any race. As listed, all race categories, except for Hispanic and multiracial, exclude Hispanics/Latinos. AIAN stands for American Indian Alaska Native. HPI stands for Hawaiian or Other Pacific Islander.
Who do America’s adolescents live with

69% Live with both parents
4% Live with neither parent
27% Live with one parent

Public high school graduation rates
(from 2017 National Center for Education Statistics Dropout/Completer Data Tables, 2015 Digest of Education Statistics)

Don’t Leave Youth on the Sidelines

Youth who are children of immigrants or refugees, or who are homeless, living in foster care, involved with the juvenile justice system, or identify as lesbian, gay, bisexual, transgender, or questioning (LGBTQ), may need special support and attention to their health care and development.

Juvenile justice system. There were nearly one million juvenile delinquency cases in 2014, and over 900,000 youth between the ages of 10-17 were arrested in 2015. Youth involved with the juvenile justice system are considered a high-risk population who often have unmet physical, developmental, and mental health needs. Their poorer health status may result from living in impoverished or abusive environments or may be due to acquired health problems that are neglected or remain undiagnosed.

Foster care. In 2017, about 40 percent of the nearly 430,000 children in foster care in the United States were between the ages of 10 and 20. Many children and teens have experienced sporadic health care prior to entering foster care, and around 80 percent have experienced at least one traumatic event. Additionally, youth may deal with traumatic events as they leave foster care, as about 30 percent of youth reported their worst trauma took place after the age of 16. Approximately 50 percent of adolescents in foster care have chronic physical conditions, and nearly 10 percent are considered medically fragile.

Lesbian, gay, bisexual, transgender, and questioning (LGBTQ) adolescents. Among adolescents ages 12-18, about 12 percent of females and 4.5 percent of males identify as LGBTQ. Most LGBTQ youth are healthy, but some are more likely than their heterosexual peers to experience negative health and life outcomes. LGBTQ youth are at increased risk for experiences with violence, such as bullying or physical assault.

Homelessness. In the 2014-2015 school year, over 1.2 million students between the ages 6-18 were homeless. Homeless youth often have a greater number of physical and mental health problems than their peers who are not homeless. In addition, they often face unique barriers to accessing health care, including lack of insurance and a need for parental consent.

Disabilities. Among youth under the age of 18, adolescents ages 12-17 have the highest prevalence of special health care needs (18%). A higher percentage of males under the age of 18 are estimated to have special health care needs than females (17% versus 13%). See page 14 for more information about youth with disabilities.

AVERAGE FRESHMAN GRADUATION RATE (%)

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<tbody>
<tr>
<td>80%</td>
<td>81.4%</td>
<td>82.3%</td>
<td>83.2%</td>
<td>84.1%</td>
<td></td>
</tr>
</tbody>
</table>

*The number of students who graduated that year divided by the number of freshmen four years earlier.
A Day in the Life

The way adolescents spend their time can strongly influence their health later in life. For youth to achieve a healthy future, they need plenty of sleep; good nutrition; regular exercise; and time to form relationships with family, friends, and caring adults. Additionally, the time adolescents spend in school and in after-school activities with peers and adults can advance healthy academic, emotional, social, and physical development. Adolescents also are influenced by their exposure to media and their increasing use of social media.

How do U.S. high school students spend their time each week? The detailed information in the American Time Use Survey, collected by the U.S. Bureau of Labor Statistics, provides a picture of a day in the life of a high school teen, comparing time on a typical school day and time on a weekend day during the school year.

All Adolescents

<table>
<thead>
<tr>
<th></th>
<th>Weekdays</th>
<th>Weekends</th>
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<tbody>
<tr>
<td>Sleep</td>
<td>8.9 hours</td>
<td>11.0 hours</td>
</tr>
<tr>
<td>Education</td>
<td>6.7 hours</td>
<td>1.2 hours</td>
</tr>
<tr>
<td>Media/Communications</td>
<td>2.6 hours</td>
<td>4.4 hours</td>
</tr>
<tr>
<td>Leisure</td>
<td>1.4 hours</td>
<td>1.0 hours</td>
</tr>
<tr>
<td>Eating/Drinking</td>
<td>0.9 hours</td>
<td>0.7 hours</td>
</tr>
<tr>
<td>Playing Sports</td>
<td>0.9 hours</td>
<td>0.7 hours</td>
</tr>
<tr>
<td>Grooming</td>
<td>0.7 hours</td>
<td>0.3 hours</td>
</tr>
<tr>
<td>Religious Activities</td>
<td>0.8 hours</td>
<td>0.8 hours</td>
</tr>
<tr>
<td>Working/Volunteering</td>
<td>0.5 hours</td>
<td>0.1 hours</td>
</tr>
<tr>
<td>Other</td>
<td>2.0 hours</td>
<td>2.6 hours</td>
</tr>
</tbody>
</table>

Adolescents spend a substantial amount of time on media and communications activities, including watching TV, playing video and computer games, surfing the Internet, listening to or playing music, and using cell phones to call or text friends and others – many of these at the same time.

While high school males spend more time on the computer than high school females, all adolescents spend most of their media/communications time watching TV and videos. On an average weekday, both females and males watch 1.4 hours of TV and videos. On an average weekend day, females watch 2.4 hours and males watch 2.6 hours.
We know that good health enables adolescents to learn and grow. Although adolescents are generally healthy, they must learn life skills such as managing mental health issues, substance use, obesity, and peer and romantic relationships as they transition into independent adulthood. Here are some of the health issues adolescents will encounter as young adults and throughout life.

Physical Health and Nutrition
In 2015, male high school students were more likely than female high school students to report getting the recommended 60 minutes of physical activity on five or more days a week. Approximately one in ten females (11%) and almost two in ten males (17%) in grades 9-12 were categorized as obese according to CDC growth charts. Being overweight can increase the risk of numerous health problems, such as cardiovascular disease, Type 2 diabetes, high cholesterol, and asthma.

Mental Health
A high number of students report mental health issues such as anxiety and depression during adolescence. Female high school students were almost twice as likely as male high school students to report depressive symptoms.

Reproductive Health
Teens who delay first sex are more likely to use contraception and have fewer sexual partners, which lowers their risk of teen pregnancy and sexually transmitted diseases.

Substance Use
Among 8th, 10th, and 12th graders, alcohol use and binge drinking continued to show a significant five-year decline. Opioid use (narcotics other than heroin) dropped significantly over the last five years among 12th graders and reflects a long-term decline from a peak of 11 percent in 2003.

Use of traditional cigarettes has continued to decline to the lowest levels in the history of the national Monitoring the Future survey.

While these outcomes show promising changes in substance use among adolescents, use of tobacco, alcohol, and drugs continues to be associated with numerous adverse health outcomes.

Educational Attainment
Good health promotes education and education promotes good health. Healthy students are generally better learners than their peers who lack healthy behaviors. In addition, youth who perform better in school and complete more education are healthier over the course of their adult lives. They engage in fewer risky behaviors such as smoking and binge drinking and participate in healthier behaviors such as exercise, which helps them to live longer.

Healthy Relationships
Intimate partner violence is associated not only with physical injury, but also with emotional and behavioral problems. In 2015, one in 10 high school students who had dated in the 12 months before the survey reported that they were hit, slapped, or physically hurt on purpose by their partner.

Bullying is associated with a number of serious health issues, including substance use and emotional problems, and even suicide.

Community Support
The actual or perceived safety of neighborhoods can influence health directly or indirectly. If safety concerns restrict opportunities to get physical exercise, for example, adolescents’ health can suffer.

Supportive neighborhoods—where people look out for each other’s well-being, and families can rely on neighbors’ help—contribute to social and emotional health.
Experimentation and risk-taking are a part of life and play a role in adolescent development. Taking some chances helps adolescents establish their identities. Experiencing success allows teens to learn what worked well. A failure or disappointment gives them a chance to think through what they might do differently next time. Adolescents have limited life experiences, so a disappointment or embarrassment may seem overwhelming. When something does not go as planned, having a trusted adult to talk to can help a young person figure out how to make it right or bounce back.

When it comes to adolescent health, the focus is often on preventing potentially harmful behavior. Yet, adolescent development experts point out that there are positive risks teens should take. Trying out for a team, joining a new club or activity, volunteering or working, taking a harder class in school, and making new friends are all examples of positive risk-taking and are usually a healthy part of growing up.46, 47

Teens who are engaged in learning and in meaningful activities, who have a good self-concept and have control of their emotions, who live in stable situations, and who are healthy and safe benefit from protective factors or strengths, which help them learn and grow when they take positive risks.

Then there are negative risk factors, such as alcohol, tobacco and drug use; unsafe driving; violence; sexual activity; and mental health problems that leave parents worried and communities troubled. Indeed, studies suggest that half of all behavioral risks first appear during adolescence.48 Yet statistics do not give much sense of what is going on with an individual young person or what's happening in a school or neighborhood.

Further analysis of the risk factors included in the 2015 Youth Risk Behavior Surveillance System data provides some interesting insights, for example, about half of high school students reported engaging in zero or one risky behavior(s) during the prior year.49 On the other hand, one in four (26%) reported engaging in four, five, or more risky behaviors during the same period (see graph on the right).50

It is challenging for caring adults to figure out how best to respond to an individual or small group of young people when negative behavior occurs. Is the behavior an issue that if caught early will not reoccur, or is it a warning sign of a much more serious problem? There are no easy “one-size-fits-all” answers, but some clusters of risky behaviors should alert adults to the possibility of negative outcomes.

For example, among the four percent of teens (9th through 12th grade) who reported in 2015 that they had sexual intercourse before age 13 for the first time, 23 percent were in one or more fights in school during the past year, four percent reported carrying a weapon to school, 30 percent reported feeling persistently sad or hopeless, 14 percent reported having unprotected sex, 33 percent reported currently drinking alcohol, 22 percent reported currently using marijuana use, and six percent reported ever using hallucinogenic drugs.51 However, the rates of some risky behaviors are down among adolescents; the percentage of adolescents ages 12 to 17 who smoked one or more packs of cigarettes per day was lower in 2015 (7.8%) than in 2002 to 2011, according to the National Survey on Drug Use and Health.52

Figuring out which teens are engaging in negative risks is complex. A teen with many risky behaviors may be one who needs serious attention from caring professionals, and who may benefit from behavioral counseling and coordinated follow-up services.
Trends for the Current Season

Efforts to improve health outcomes for adolescents are occurring against a backdrop of evolving policies and practices, demographic changes, and other trends.

Health care. Access to and use of health care can significantly improve adolescent health and prevent the onset of some problems in the future. Continuous health insurance coverage, with access to preventive and behavioral health services, can mean better control of chronic problems and prevention or management of issues that can disrupt school attendance or healthy development.

Health care systems are increasingly focused on ways to increase the efficiency and quality of health care. Initiatives such as establishing medical homes for youth with special needs, better integrating and coordinating health care with mental health and social services, and giving increased attention to managing transitions from pediatric to adult health care can benefit young patients.

Prevention. Preventive health care services during adolescence can help protect youth and identify problems early. In 2016, nearly one in five adolescents (18%) did not receive any preventive medical care visits. Research shows that even those who saw a health care professional for medical care did not always receive all the recommended screenings and anticipated guidance on relevant health behaviors for this age group. Rates for immunizations, dental care, and screening for smoking and other risky behaviors remain low. Risk assessments delivered in health care settings can quickly screen teens for multiple risks, and the provider can use patient responses to focus care.

Health insurance. Most young people under age 18 have health insurance, and access to health coverage for millions of young adults expanded with implementation of the Affordable Care Act. About nine out of 10 white, black, Asian, and Hispanic adolescents had insurance health coverage in 2016.
Health plans offered in the Health Insurance Marketplace include mental health and substance abuse care, and vision and dental care for children under age 19 along with benefits such as medical visits and hospital care. Patients cannot be turned down for insurance due to a pre-existing medical condition, and insurers cannot impose annual or lifetime dollar limits on care.59

As teens approach adulthood, many still lose health care coverage if they cannot stay on a parent’s plan until age 26, or if they live in a state that has not extended Medicaid coverage to childless adults. This gap in coverage also affects populations such as young adults who “age out” of foster care and youth who are disconnected from care by immigration status or other circumstances.

Social media and technology. The increasing use of social media permeates the fabric of adolescents’ daily lives, affecting where they get information and how they spend their time. The effects of social media on adolescent development are not yet fully understood. With improved ability to connect and share information using new technologies, there are more opportunities to break down silos and collaborate across health care, social services, education, or other sectors. Concerns about teens’ social media and technology use include texting while driving, exposure to mature content, and the psychological effects of limiting personal interaction.

Community prevention. Many communities are creating opportunities for prevention. There is increased attention to fitness and healthy eating, clean air and water, and safe, affordable housing. There is community-wide planning to implement policies and practices that support healthy living, including ensuring tobacco-free environments, initiatives that support walking and biking, and efforts to prevent injuries.

Fitness and nutrition. Our understanding of nutrition and what is needed to support life-long physical fitness and health is changing. Major efforts are underway that are raising awareness, increasing opportunities, and developing policies to support better physical fitness and nutrition for all Americans, especially younger children and adolescents.

Physical activity guidelines for children ages 6-17 recommend at least one hour a day of physical activity that includes aerobic activities and activities to strengthen muscles and build strong bones.60 In 2016, about 93 percent of school districts had adopted a policy stating that high schools will teach physical education.61

Schools increasingly play a role in making sure children are well-nourished and eating healthy foods. Schools with low-income students provide food to eligible students through the school meal programs, which in some areas continue during school and summer breaks.62 For some youth, these programs are their primary source of nourishment. Some schools are increasing access to healthier foods through initiatives ranging from planting gardens to upgrading foods in the cafeteria, and changing suppliers to bring in fresh foods that are prepared on-site.

Education. Educators, health care professionals, parents, and others are increasingly recognizing the connection between healthy students, a healthy school climate, and academic outcomes. As one report notes, healthy eating and physical activity are linked with academic achievement.63 Although some schools face significant financial and staffing challenges, others provide a school nurse or health aide and a counselor along with educational staff. Requirements for school health professionals vary across states, and this lack of standard credentials may affect the services available at schools. Most school systems offer health education classes; however, there is wide variation in the curricula for health education across schools, districts, and states.64

In addition, a school’s environment, such as air quality or the location, age, condition, and physical layout of the building can affect student health.
**Work.** There are nearly 5.5 million young people between ages 16 and 24, who are disconnected from school, work, or the military. These “opportunity youth” have the potential to succeed in various settings with appropriate supports. Work can be an important part of healthy adolescence and yield multiple benefits for youth and society in general. In addition to economic benefits and job-related skills, work experiences provide teens with opportunities to engage in key developmental tasks, such as decision-making, building social skills, and taking on new levels of responsibility. Working during high school has benefits now and into the future; it’s associated with a lower likelihood of dropping out of school and higher employment rates and better wages in adulthood.

Unfortunately, in recent years, youth unemployment rates have reached their highest level in over fifty years. As a result, there is increased attention on improving work opportunities for young people. For example, implementation of the federal Workforce Innovation and Opportunity Act is focused on increasing access to employment, education and training, and support services for young people ages 16-24, especially youth who are homeless, in foster care, involved with the juvenile justice system, pregnant or parenting, low-income, not in school, or disabled.

Public agencies, employers, youth-serving organizations, and other community partners are working to create job training opportunities and a continuum of work experiences for youth, including volunteer or community service, internships, and work-study jobs, as well as full- or part-time employment. Professionals who employ or prepare and train youth for the workforce are not only helping young people now with additional income and job skills, but they are also improving their employment and career prospects. This has positive implications for individual youth, families, and society at large.
Checking the Score

Beginning in 1980, the United States established national health objectives each decade to guide action to improve health and to track progress. Healthy People 2020 is the current centerpiece of efforts to improve and measure health outcomes in the United States. For the first time, Healthy People includes a set of objectives aimed at improving the healthy development, safety, and well-being of adolescents and young adults. Progress toward achieving the objectives is routinely tracked and reported. TAG is one activity focused on helping achieve these important national objectives.

In addition to the adolescent health objectives shown below, there are additional objectives on related topics, such as reducing deaths from vehicle crashes or reducing the proportion of adolescents who report binge drinking.

Healthy People 2020: Adolescent Health Objectives

**INCREASE THE PROPORTION OF ADOLESCENTS WHO:**

- Had a wellness checkup in the past 12 months
- Participate in extracurricular and/or out-of-school activities
- Are connected to a parent or other positive adult caregiver
- Transition to self-sufficiency from foster care

**REDUCE:**

- The proportion of public schools with a serious violent incident
- Adolescent and young adult perpetration of, and victimization by, crimes
- The proportion of adolescents who have been offered, sold, or given an illegal drug on school property

**INCREASE:**

- Educational achievement of adolescents and young adults
- The proportion of schools with a school breakfast program
- The proportion of adolescents whose parents consider them to be safe at school
- The proportion of middle and high schools that prohibit harassment based on a student's sexual orientation or gender identity
Spotlight: Youth with Disabilities

Adolescents living with disabilities face many health challenges. If these youth receive adequate supports and appropriate health care, they can thrive in adolescence and into adulthood.

What is a Disability?

The definition of disability includes physical or mental health conditions as well as limitations in conducting routine activities of daily life. The HHS Maternal and Child Health Bureau defines children with special health care needs as “those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.” Although youth with disabilities have impairments or limitations in functioning, their life experiences can vary greatly depending on social and environmental barriers they encounter.73

Adolescents with Disabilities: What’s the Score?

Among children ages zero to 17, adolescents have the highest prevalence of special health care needs.70 The National Survey of Children with Special Health Care Needs identified nearly 1 in 5 children ages 12-17 as having special health care needs,71 and the American Community Survey estimates that more than 1.3 million young people ages 16-20 have a disability.72

Unfortunately, youth with chronic conditions and disabilities have more complex health care needs, are more likely to have their needs go unmet, and experience more barriers—including social stigma—to full participation in activities than youth without such conditions.73

Youth with disabilities face many social inequities that affect their health and well-being. For instance, youth receiving special education services are more likely to live in low-income households, experience bullying, and be suspended from school. They are less likely to participate in school sports, spend time with friends regularly, expect to enroll in post-secondary education or training, and have recent paid work experience.74

Leveling the Playing Field: Your Role

Many youth with special health care needs need help with navigating complex health and service delivery systems. The youth, their family, the health system, and the community all have a role to play in promoting the health and resilience of adolescents with disabilities.75

• Coordination. Three-quarters of parents of youth with special health care needs report needing help with coordination of care or services, but only a little more than half of these parents had that need adequately met.76

Many parents learn to advocate for their adolescent with disabilities, but finding the time for this is a challenge for working parents. Parents must navigate the policies and bureaucracies related to their child’s needs, including the complex special education and disability benefits systems, and many families don’t have the financial resources to hire an attorney or professional advocate to help.

• Health care transition. Making the transition from pediatric to adult health care can be especially difficult for youth with disabilities. Many youth and young adults—particularly those with complex health conditions, mental health problems, or behavioral health needs—can experience serious gaps in care when they transition to the adult health care system.77 Transition issues may include confidentiality, reducing risky behaviors, and how to obtain and sustain health insurance coverage.78 Of note, the 2016 National Survey of Children’s Health showed that 17 percent of youth with special health care needs and 14 percent of 12-17 year old youth without special health care needs received transition supports.79

• Accessibility. Often, modifications are needed to ensure that youth with disabilities can access services in medical, educational, and recreational settings. Examples include having information available in Braille or sign language, providing ramp access to facilities, allowing extra time or quiet spaces for taking tests, and providing assistive technology. It also can involve providers taking time to present age appropriate health information in a way that matches a youth’s developmental stage.

• Education. Youth in grades K through 12 with certain types of disabilities can obtain an Individualized Education Program (IEP) or a “504 Plan.” These plans are created by the school, parents, health care provider, and the young person working as a team. IEPs are developed according to provisions of the Individuals with Disabilities in Education Act (IDEA) and 504 plans are developed according to Section 504 of the Rehabilitation Act of 1973. These plans typically outline supports and services available to assist the child at school, together with regular assessments to track progress toward goals. Additionally, 504 Plans are generally intended for children and youth with less severe disabilities, and are
subject to fewer formal safeguards, but must also include classroom and other school accommodations appropriate to the student’s unique needs. States and school districts vary greatly in how they address these requirements and many states need assistance to meet requirements established by the U.S. Department of Education.\(^8\)

**Winning Plays to Support Youth with Disabilities**

There are a few promising practices that can help youth with disabilities achieve improved health and healthy development.

One is a medical home, which is a health care delivery model developed by the American Academy of Pediatrics that provides family-centered, comprehensive, and culturally informed primary care.\(^9\) This approach facilitates partnerships between patients, their health care providers, and, when appropriate, the patient's family in a health care setting. Evidence suggests the medical home model can lead to improved health outcomes for children with special health care needs.\(^8\) One example of this approach is the Mount Sinai Adolescent Health Center, which integrates physical health, mental health, and social services at one location that is free, accessible, and welcoming to all young people.

Another promising model for adolescent health care that can support adolescents with disabilities is school-based health centers. These centers have been found to increase access to care and improve mental health, resilience, and use of contraceptives.\(^9\) Health Centers in Schools is one example of an innovative, integrated school-based program aimed at improving student health in Baton Rouge, Louisiana.

An additional way to support youth with disabilities is to encourage them to advocate for themselves. Youth with disabilities can join organizations for self-advocacy support and mentoring. Some resources to explore include: Autistic Self Advocacy Network, Family Voices, The ARC, Eye to Eye, and Partners for Youth with Disabilities.
Get into the Game!

Improving adolescents’ health and supporting their healthy development is a team effort.

TAG calls upon organizations and individuals working with adolescents in health care, public health, out-of-school or community, education, faith-based, social service, and workforce development settings, along with families and youth, to prioritize activities that improve adolescent health. The Office of Adolescent Health obtained the input of professionals from multiple youth-serving sectors to identify the following action steps. These steps, which some organizations and individuals are already engaged in, will strengthen collaborations and support better health outcomes for youth.

Action Steps for Health Care Professionals

Health care professionals are on the front lines for ensuring adolescent health and development, and can adopt several strategies for improving adolescent health outcomes.

Make health care offices friendly and welcoming. Consider using patient portals or other ways to communicate confidentially with adolescent patients. Consider adolescents when selecting décor, furniture, and reading materials for your office. Set office hours to accommodate busy school schedules. Bring services to schools whenever feasible. Train all staff, including clerical and paraprofessionals, in how to welcome and interact with adolescents.

Ask hard questions and use risk-screening tools. Use screening protocols to ask adolescents about sensitive topics, such as weight; sexual orientation or behavior; mental health issues; drug, alcohol and tobacco use; and violence or victimization. Use assessments that identify strengths as well as risky behaviors. Integrate confidentiality policies into health care practices to improve patient care. Establish and implement follow-up procedures to see if patients obtain the referred services and how they are doing.

Make preventive services a priority. Ensure adolescents receive recommended clinical preventive services, including immunizations, screenings, and counseling about behavior that supports their health. Adapt office systems, including patient portals, reminders, standing orders, and other means, to ensure that recommended preventive care is delivered. Establish policies and procedures for delivering brief interventions.

Maintain referral sources for youth with chronic conditions, special needs, and mental health issues. Know who in your community can help with mental health issues, substance use, eating disorders, and other challenges. Make referrals to available services in the community and make sure that some of the services accept Medicaid or have sliding fee scales. Establish and implement follow-up procedures to see if the patient obtained the services and how they are doing.

Improve and update training on adolescent health. Trainings should reflect the latest knowledge on adolescent health and development, risk and protective factors, and confidentiality laws, including interacting with adolescents who are over 18. Ensure that staff receive training and incorporate this knowledge into services.

Facilitate smooth transitions from adolescent to adult health care settings. Assist adolescent patients with transitions and ensure continuity and quality of care. If an adolescent with special needs or a chronic condition is making the transition to a different health care setting, make referrals to providers who can meet those needs and provide required medical records. Encourage youth and parents to plan for medical coverage during the transition to adulthood. Maintain release forms to allow information to be shared among providers.

Be a leader in building partnerships in the community with others who serve youth. Promote adolescent health by taking a lead role in coordinating care across systems, including health, education, social services, and other community partners. Identify and engage allies such as the school system, parent-teacher groups, youth groups, nonprofit youth-serving organizations, and senior citizens. At-risk youth are often served by multiple providers and systems. Get involved in community efforts to improve adolescent access to health and sex education information, programs that strengthen families and build youth skills, and health centers convenient to schools.
Action Steps for Public Health Professionals

As a public health professional, there are several key ways you can continue to contribute to improving the health and healthy development of America’s adolescents.

Provide leadership for developing community-wide approaches to promoting adolescent health. Partner with community organizations, schools, faith-based organizations, businesses, health care providers, local foundations, parents, grandparents, and teens to identify priorities for advancing adolescent health in the community (e.g., activities in parks, safe spaces for adolescents to gather for sports and social events). Leverage grant opportunities, trainings, and cross-sector programming to raise awareness across settings and increase attention to improving adolescent health.

Conduct or provide data for community health assessments. Use assessments to identify and describe adolescent health needs, including measuring and tracking adolescent health outcomes. Assessments of local needs may have been completed in response to grant requirements, by community-based initiatives, or by tax-exempt hospitals. Be sure to include adolescent health needs as assessments are conducted or updated. Use and refer to state and local health departments, which routinely collect and maintain data and have benchmarks for adolescent health trends. Use national objectives such as Healthy People 2020 and data on adolescent health that are readily available to inform local assessments and plans.

Focus on risk reduction activities for adolescents. These include approaches for smoking cessation, addressing substance use, mitigating sexual risks, treating mental health problems, identifying diabetes precursors, and reducing obesity. Ensure adolescents, parents and others working with adolescents understand risky behaviors and the benefits of early, brief, and sustained interventions. Identify resources that can help reduce risky behaviors, and refer teens as appropriate. Use evidence-based approaches when available.

Train staff on working with adolescents using the latest knowledge about what is effective. Provide training on cultural competency, trauma-informed care, working with vulnerable populations, awareness of LGBTQ issues, positive youth development, and what is appropriate for younger versus older adolescents. Encourage staff to use positive youth development strategies that support adolescents in their day-to-day lives. Specifically consider the needs of vulnerable adolescent populations, such as runaway, homeless, LGBTQ, immigrant youth, and youth with disabilities. Ensure staff working with teens are properly screened and are trained in safety and reporting requirements.

Promote a positive, strengths-based view of adolescents. Participate in public awareness campaigns with positive youth development themes. Join ongoing community efforts to encourage and support better adolescent health outcomes by providing appropriate settings, programming, youth engagement and leadership opportunities, and staff training. Look for ways to promote and build on adolescent successes through social and traditional media campaigns.

Help young people take responsibility for their own health and promoting healthy communities. Encourage older adolescents to navigate the health care system, and teach them how. Involve adolescents of all ages in creating and monitoring community programs and activities for adolescents. Support youth engagement and leadership development, which have the potential for creating career pathways into health. Provide internships for youth in public health and health care settings. Work with youth to ensure that strategies and services meet the needs of youth and are youth-friendly. Involve youth in the design of youth programming, materials, and media campaigns.
Action Steps for Out-of-school and Community-based Program Professionals

As an adult working with adolescents in after-school activities, summertime, or community settings, you can help contribute to adolescent health today and into the future.

**Help youth connect to supportive adults, positive peers, schools, and the community.** Encourage youth to connect with supportive adults such as program leaders, coaches, tutors, or mentors as well as peers who can also be mentors. Serve as a role model in your actions, behaviors, and speech. Be an individual resource to adolescents and provide access to space, equipment, or resources to support youth activities. Facilitate community service opportunities with senior citizens, schools and day care centers, and other community projects. Ensure that programs comply with guidelines and rules designed to protect adolescent's safety.

**Create a safe, warm, and enriching space.** Provide an attractive and safe environment to engage adolescents in positive activities and healthy relationships with peers. Create stability and consistency with well-trained staff, age-appropriate programs, and safe and secure settings. Teach about healthy relationships and encourage a sense of community. Support skill-building activities to contribute to adolescents’ overall sense of competence and their future accomplishments. Offer unstructured time where adolescents can just be together.

**Encourage physical activity and good nutrition.** Plan group activities that include physical exercise, such as hikes, bike rides, competitive sports, and noncompetitive play such as aerobic, muscle- and bone-strengthening, and cardio-respiratory fitness activities. Establish policies to encourage healthy snacks or meals and share tips for healthy eating.

**Be another set of eyes and provide a listening ear.** Keep a lookout for how adolescents are doing in terms of their health and healthy development. Reach out to a young person who seems disengaged, lonely, or sad. Listen to adolescents talk and help them think about what they could do or say in challenging situations. Guide them to community resources that can help. Maintain confidentiality within legal guidelines.

**Share local health resources with youth.** Identify health resources in your community and share them with the adolescents in your programs and activities. Encourage and highlight the importance of wellness visits, vaccinations, and dental health, and make sure teens know about suicide and other help lines. Provide individual or group learning sessions on health topics. Refer adolescents to programs or services beyond the scope of your activities (for example, mental health professionals or social service providers).

**Teach youth about staying healthy and safe.** Offer special sessions about health and healthy development. For example, bring in speakers and video presentations on online safety, texting, suicide prevention, and healthy relationships (with peers, romantic partners, family members, and mentors). Allow ample time for discussion, so teens can work out their opinions about a topic.

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**Youth (12-17) participation in after-school activities**
(from 2016 National Survey of Children's Health)

82% Participate in 1+ organized activities outside of school
18% Do not participate in any after-school activities

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FIND additional resources on the TAG website.
[www.hhs.gov/ash/oah/TAG](http://www.hhs.gov/ash/oah/TAG)
Action Steps for Education Professionals

Adults working or volunteering at school have many opportunities to support adolescent health and development.

Create a supportive and safe school climate. Develop an inclusive, caring, secure, and welcoming climate for adolescents and their families. Make certain that students of every race/ethnicity, gender, disability status, and sexual orientation feel safe and supported. Provide opportunities to participate in school leadership and honor youth voices and opinions. Foster a positive physical and psychosocial atmosphere and incorporate that approach into discipline and classroom management policies. Provide all school staff with information about community health resources, referral policies, legal reporting responsibilities, and confidentiality laws, regulations, and policies.

Strengthen or increase health curricula and activities that support healthy development. Build students’ knowledge, skills, and positive approaches toward health and infuse positive, healthy development into all aspects of the curriculum. Include lessons that teach the benefits of avoiding risky health behaviors and fostering lifelong healthy habits. Teach problem-solving, critical thinking, communication, and collaboration. Offer music, visual and performing arts, technology, foreign languages, and other courses that build healthy connections between students and their school. Offer physical exercise activities during and after school that can be enjoyed into adulthood and create partnerships with community-based nonprofits and volunteer groups to support them. Provide healthy options in school meal programs and vending machines.

Implement annual health and safety assessments and coordinate with community efforts. Conduct annual assessments to identify strengths and weaknesses of health and safety policies. Develop an improvement plan and collaborate with teachers, parents, students, public health agencies, and the community to promote health-enhancing behaviors that mitigate risk and maximize protective factors.

Support social and emotional development. Provide all school staff with training on the social and emotional development of adolescents. Teach students how to develop and maintain healthy relationships with peers and adults, which will help minimize bullying and other harmful interactions. Establish procedures that encourage safe reports of bullying and ensure policies are in place to handle these issues. Teach conflict resolution and anger management skills, which will also help mitigate behavioral challenges, and manage classrooms in positive ways.

Be a health resource for students and their families. Inform students of health resources available through the school. Encourage parent involvement and promote regular communication between school and home. Share information with families on developmental milestones for adolescents, how to encourage healthy behaviors, and how to help their children avoid risky behaviors. Provide this information in appropriate languages and reading levels through newsletters, emails, websites, sports teams, the parent-teacher association, and parent meetings.

Ensure schools are environmentally-healthy settings for learning. Regularly monitor the school’s environmental health to ensure it is free from toxins and other potential hazards, that it is clean, and that the building facilities and classrooms are safe and in good condition. Provide clean and safe water for drinking and washing, minimize unnecessary noise, and be certain indoor and outdoor areas are well-lit. Test air quality for carbon dioxide and dampness and, if possible, use green cleaning products.

Use open spaces to promote physical activity. In addition to physical education classes, use gyms and outdoor spaces such as fields, tracks, and paved areas to encourage physical activity, especially during breaks, lunchtime, and before/after school. Mark paved areas to encourage a variety of games, provide outdoor basketball hoops, and erect appropriate playground structures (especially for younger adolescents). Support community organizations in using the facilities for youth programs during evenings, weekends, and vacations.
Adults working with faith-based organizations can help improve adolescents’ health and promote their healthy development. Many groups that provide social services are faith-based and offer a range of services to youth and families regardless of their religious beliefs.

**Support adolescents’ spiritual growth.** Convey beliefs and values, recognize milestones, and help adolescents make connections within their religious community and to the larger world around them. For many youth, spiritual connection may be fostered by participation in community service and social activities that are sponsored by their faith community.

**Connect adolescents to adults.** Provide adolescents opportunities to meet and connect with members of the community, such as religious leaders or older adults, who can serve as role models or mentors. Offer activities, whether in worship, community service, outreach, music, or other ways, to help them connect with adults. Follow youth leader training and safety requirements of the sponsoring organization.

**Provide opportunities for adolescents to connect with peers in a safe environment.** Help adolescents establish a network of friendships that can be relied upon in good and bad times. Provide opportunities for youth to connect with peers through regular meetings, recreational and community service activities, and social media. Offer safe and fun spaces for adolescents to gather and share your space with out-of-school time programs and other community activities.

**Provide service opportunities.** Help youth grow in compassion and develop a sense of responsibility by providing opportunities to serve others in the community who are in need. Examples are providing child care while parents participate in worship or educational programs; packaging, delivering, or serving food to the hungry and homeless; and visiting homebound elderly people or people with disabilities.

**Support the role of families in healthy adolescent development.** Share ideas for strengthening families. Consider encouraging families to create special customs, such as family nights or holiday celebrations. Provide seasonal events for families to attend and/or family mission or community service opportunities.

**Connect young people to health information and resources.** Identify and share existing community resources with young people. Offer programs on various aspects of adolescent health, such as physical activity, nutrition, social media use or preventive health care. Provide brochures or host special presentations from local health clinics. Ask congregants who are health providers to speak or provide immunization clinics at your place of worship. Host a blood drive and get teens involved in staffing, publicizing and donating. Share health-related messages with teens and parents through Facebook, Twitter, blogs, or texts.

**Encourage healthy habits.** Offer some activities that have a physical exercise component, such as fitness classes. Engage youth in making the community “greener” and healthier. Provide healthy food choices. Get teens involved in planting and harvesting a community garden and sharing the bounty with community soup kitchens.

**Offer youth services or refer youth and their families to services.** As appropriate, offer direct services to youth and their families, including health care, mental health, foster care, refugee resettlement support, and education. Make referrals to community resources to help adolescents and their families meet pressing needs for food, shelter, mental health, or other health and social supports. Ensure that some of these services accept Medicaid or have a sliding fee scale.

**Facilitate opportunities for training and employment.** Provide leadership opportunities and training courses in resume writing and job search skills. Facilitate internships or entry-level jobs. Offer employment opportunities directly or reach out to congregants and local businesses for jobs for teens. Use social media and congregation email updates to publicize internship and job opportunities for youth.

**Percent of youth age 12-17 old who participated in any type of community service or volunteer work at school, church, or in the community**
(from 2016 National Survey of Children's Health)

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<th>Participated in community service</th>
<th>Did not participate in community service</th>
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<td>54%</td>
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Action Steps for Social Services Professionals

As a social service provider, you already understand the multiple needs of adolescents and the complexity of the systems available to protect and support them. Your work is important to the current and lifelong health of the young people you serve.

Encourage positive connections between youth and supportive adults. Help youth reach out to adults, such as teachers, coaches, religious leaders, relatives, family friends, or older adults, who can serve as mentors or informal counselors. Make referrals to mentoring programs and ensure that mentors are appropriately vetted to ensure youth safety. Encourage youth to participate in healthy extracurricular activities. Support educational and work opportunities for young people.

Ensure services and programs are welcoming and developmentally appropriate. Make sure services and programs are welcoming to adolescents, including youth with disabilities and chronic health conditions. Use a youth-friendly approach that recognizes teens’ need for guidance can be at odds with their growing desire for autonomy. Engage them when making decisions about their care.

Encourage adolescents to learn about their health and connect them with trusted health care professionals, including mental health providers. Provide adolescents with information to help them manage their medical and dental care and prepare for the transition to adult services. Teach them how to advocate for themselves. Point them to resources that will help them navigate the health care system, including online resources and teen-friendly apps related to chronic health conditions, disabilities, or mental health needs. Ensure that youths’ health needs are fully assessed and refer them to those who can help. Make sure that some of these referrals accept Medicaid or have sliding fee scales. Establish follow-up procedures to see whether the youth obtained the services and how they are doing.

Provide opportunities for youth to offer input and build leadership skills into program design and activities. Involve adolescents in designing and reviewing program materials to confirm that language and materials work for teens. Establish a youth advisory panel to solicit input on policies or programs. Encourage older youth to be mentors to younger adolescents, with appropriate adult supervision. Reach out to youth who may not participate without encouragement. Find small ways for teens who lack confidence to get involved.

Join with others in your community to improve and coordinate service delivery. Collaborate with providers, health professionals, education and community leaders, and others to coordinate the provision of services to adolescents, particularly those involved in multiple systems of care, such as child welfare, juvenile justice, special education, and mental health. Where possible, try to deliver services in places where young people are, such as schools, malls, home, after-school or summer programs, or faith-based organizations’ meeting places. Catalog existing services and programs in the community and address gaps by expanding the reach of current programs or assisting in implementing new ones.

Stay abreast of the latest research and implement best practices. Contact national resource and technical assistance centers for information and training. Learn about the latest research and best practices – including youth engagement and positive youth development – and train staff to provide and rigorously evaluate developmentally-appropriate services. Implement multi-pronged strategies to support youth in overcoming trauma and special challenges. Phase out programs that research has shown are not effective.

FIND additional resources on the TAG website. www.hhs.gov/ash/oah/TAG
Action Steps for Workforce Development Professionals

Organizations that help prepare and train youth for the workforce, and those that employ them, can adopt several strategies that benefit adolescents’ health today and facilitate young people’s transition to adulthood as healthy, productive employees.

Incorporate positive youth development into professional development training. Promote staff development that fosters holistic, strengths-based approaches to serving youth. Use training curricula and approaches that help adult professionals understand adolescent development and identify opportunities to foster resilience and promote healthy development. An increased awareness of the stages of adolescent development will help staff facilitate learning opportunities, promote meaningful youth engagement, and effectively teach the skills youth need to succeed in work, including academic, social-emotional, and practical life skills.

Identify services to meet the unique needs of opportunity youth. Educate local workforce boards about the unique needs and barriers to work for youth, especially youth who are homeless, parenting, low-income, LGBTQ, disabled, in foster care, or no longer in school. Support community-based organizations in providing housing, health care, trauma-informed services, and other assistance to these youth. Obtain input from teens on how to improve services and supports to be more teen-friendly and effective. When possible, bring the services to young people instead of asking them to come to you to get what they need.

Work with vocational rehabilitation partners. Strengthen pre-employment transition services for youth with disabilities. Assist educators with incorporating health and employment planning into Individualized Evaluation Plan (IEP) meetings for high school students with disabilities. Provide information about support services and job training opportunities to school districts so they can help all students, including students with IEPs, plan for their lives after graduation.

Facilitate mentoring opportunities. Connect young people to quality mentoring programs that acknowledge the individual differences among adolescents, including socio-economic status, race, gender, sexual orientation, and disability. Supportive, healthy relationships are critically important to positive youth development. Mentors, including peer mentors, can help youth grow and develop by teaching the value of work, helping them prepare for work, and serving as life coaches that help to manage challenging situations that may interfere with education or employment.
Action Steps for Parents, Grandparents, Families, and Caregivers

Parents, grandparents, other family members, and guardians may not know how best to promote the health of the adolescents in their care. While parents may sometimes feel irrelevant in the lives of their older children, adolescents who report they have parental oversight, connectedness, communication, and/or support are less likely to engage in risky behaviors.\(^{89, 90}\)

Ensure your adolescent receives health, mental health, and dental care services as needed. Make sure adolescents receive recommended preventive health care, including vaccinations and dental care, as well as care when they are sick. Be on the lookout for warning signs such as missing school, dropping out of extracurricular activities, abnormal weight loss, persistent sadness, or illegal drug use.

Start and keep the conversations going. Talk to your teen about health and developmental changes that occur during adolescence and into young adulthood. Keep lines of communication open, set boundaries, and monitor behavior while providing your teen with increasing autonomy. Encourage adolescents and celebrate their efforts and accomplishments. Share your family’s values with adolescents and let them know you will support them if they need to make difficult decisions (e.g., “You can always call or text us if you need help”). Role play with your adolescent to practice handling difficult situations. Be a good listener and support positive behaviors that reduce risks.

Provide opportunities to learn basic life skills. Give adolescents plenty of opportunities to learn how to do the laundry, empty trash, and change a light bulb. Gradually encourage them to manage their homework themselves. Show them how you handle finances, and discuss what things cost and how your family handles decisions about money. Encourage working or volunteering to gain experience.

Learn about adolescent development. Talk to your child’s health professional about the expected developmental, psychological, emotional, and physical changes of adolescence. Check out online resources such as those available on OAH’s website, talk to other parents, or attend classes for more information.

Be good role model. Model healthy behavior and habits including wearing a seat belt, driving safely, exercising regularly, healthy cooking and eating, limiting use of technology, not smoking, using alcohol in moderation (if at all), and not drinking and driving. Develop techniques to manage the stress in your life and talk about them with your adolescent.

Encourage exercise, sleep, and healthy eating. Encourage youth to be and stay active through at least 60 minutes of physical activity a day.\(^{91}\) Remind the adolescents in your life to limit the use of electronics and get enough sleep. Prepare healthy food and snacks and limit junk food. When possible, avoid keeping unhealthy, highly-processed food in the home.

Prepare adolescents for managing their health as they move towards adulthood. Teach your adolescents how to use the health care system, how to fill out the forms at medical offices, how to make appointments, how to get referrals (if needed), and where to get information online that can be trusted.

Make time for the adolescents in your life. Be available to talk and spend time with your teen. This can happen at unexpected times such as during a car ride, while washing the dishes, or when watching something on TV. Listen and let them sort out how to make good decisions as they manage peer pressure and conflict. Teach them about online privacy. Help them be connected at school and in your community. Support adolescents in building healthy relationships with peers and trusted adults in the family and community.\(^{92}\) Get to know their friends and their friends’ parents.
Action Steps Teens Can Take to Be Healthier

Being an adolescent is not always easy. While this period of life can be filled with fun, family, friends, and new adventures, sometimes the road to adulthood can be rocky. Some things you’ll encounter may feel outside your control, but there’s a lot you can do to support your health and happiness.

Go to the doctor and the dentist regularly. Medical experts recommend that teens get regular medical screenings, check-ups, and dental care. Making sure you visit your health care provider on a regular basis is part of being responsible for your health, whether you are living with your parents or are away at school. Be sure to learn about what immunizations you need and keep those up-to-date. Keep a record of your immunizations and be aware of your allergies to food or medications.

Learn how to use the health care system. Ask your parents, grandparents, doctor, school nurse, or another trustworthy adult to explain how to find doctors, make medical and dental appointments, read and understand billing statements and explanations of benefits, and complete forms. Ask them for resources you can trust to learn more about your health and preventing illness. If you’re away at college, make use of the college health services offered on campus. As you transition to adulthood and begin managing your own health care, be sure to check out www.gottransition.org for tips and resources.

Make healthy habits a priority. Exercise regularly and eat nutritious food. Being active physically can boost your positive mental state and give you more energy for school and other activities. Make time for sleep and keep a regular sleep schedule. Turn off your electronics an hour before going to bed, go to bed earlier than you think you need to and take naps if you need to catch up on sleep. Avoid high-risk behaviors, such as substance use or texting while driving.

Get involved. Join clubs, play on sports teams, sing in the choir, take an art or dance class, learn a skill, or get a volunteer or paid part-time job. If you’re a member of a religious community, get involved with activities offered by your synagogue, church, mosque, or other place of worship. Find something you enjoy doing and pursue it. Being involved in these types of activities is good for your mood and your health.

Find a trusted mentor, guide, or advisor. In addition to your parents and relatives, other supportive adults can offer helpful guidance and advice on school, work, and social life. Ask your school guidance counselor about mentoring programs that are available in your community.

Be there for others. Volunteer with local community organizations such as soup kitchens, or help out at a local child care center or retirement home. Be a good role model for your friends and peers. Consider becoming a peer counselor. You can make a difference in your own life, the lives of your friends and peers, and your school or community. If a friend is facing a serious issue or challenge, help them seek the help they need.

Make good choices. No one can make healthy choices for you. So, take care of yourself, and do things to make you happier and healthier. Don’t rush into serious relationships before you’re ready. Focus on developing your interests and hobbies and learning about future careers. Avoid illegal substance use (e.g., drugs, alcohol, and tobacco products if you’re under 18), and don’t text while driving or drive while impaired by drugs or alcohol. Don’t get in a car with someone who has been drinking or using drugs; find a safer way to get home.

Maintain positive relationships. Hang out with friends who are supportive of healthy choices and make you feel good about yourself. Spend time with your parents, siblings, grandparents, and other family members to build strong relationships with them. Be respectful to others, even when you disagree. Resources from federal agencies such as NIH and the HHS Office on Women’s Health have great resources for people looking to improve or maintain relationships.
The Game Plan for Engaging Youth


A Win-Win Strategy

In every field, there are innovative ways for professionals to engage with young people to promote adolescent health. What’s more, authentically engaging youth is a win-win strategy!

Engaging teens as learners, leaders, team members, and workers helps adult professionals and programs make their services and supports more adolescent-friendly and effective. It also helps adolescents develop positive relationships with adults, and these relationships are key protective factors that help them learn and grow.

Authentic leadership activities provide many benefits for young people. Specifically, youth engagement:

- Cultivates leadership and team skills and prepares young people to become future leaders,
- Offers opportunities to practice the problem-solving skills they will need in adulthood,
- Builds self-esteem and confidence; and,
- Increases their influence and personal stake in the community.

Ideas for Effective Youth Engagement

Health Care Professionals

- Invite teens to help make your clinic or practice teen-friendly. Connect with a local youth council in your area or reach out to some of your own adolescent patients. Ask them to help stage a “makeover” to make your office and services more welcoming to teenagers and ask them what policies and procedures their doctors should have in place.

Providers and Teens Communicating for Health Program (PATCH), features an innovative approach empowering teens to communicate with health care providers, while also training providers to communicate with teens more effectively on sensitive health topics.

- Ensure teens are fully engaged in their self-care. Train your entire staff on how to foster open communication and trust with the teens you serve so young people will feel comfortable talking about their health and wellness. Be sure all staff are up-to-date on policies for protecting teens’ privacy and confidentiality.

In New York, the Mount Sinai Adolescent Health Center provides high quality, comprehensive, and inter-disciplinary health and wellness services focused solely on the unique needs of adolescents and young adults. The center provides young people access to a wide range of services, including medical, reproductive health care, dental, optical, and mental health services as well as nutrition, fitness, and wellness programs.

Public Health Professionals

- Involve young people in developing public health strategies. Include teens in conducting community health assessments, reviewing data, and helping to identify adolescent health issues to address.

In Florida, the Birth to 22: United for Brighter Futures project, supports the healthy growth, development, and education of children and youth from the prenatal stage through young adulthood. Youth were trained and then co-facilitated community conversations to develop the Birth to 22 Youth Master Plan entitled, “Strengthening the Steps to Success,” which identifies common outcomes, data collection, and action steps for the community.
• Hire young people to staff projects that promote adolescent health. Train volunteer teens to reach other teens with health education or peer support.

The Houston Teen Community Health Workers program teaches youth about adolescent health resources and risks and how to share health information with their families, communities, and schools.

Out-of-school Time and Community-based Professionals

• Engage young people in evaluating and improving your program. Train and support teens to review and help interpret your program data, and then work together to develop ideas for program improvement.

Colorado 9to25 is a collective, action-oriented group of youth and adults working in partnership to achieve positive outcomes for all youth. The project works with youth to analyze service gaps, and develops plans to align youth-serving programs, practices, and policies across Colorado to address these gaps and promote positive youth development.

• Train youth to identify, share, and disseminate health resources. What’s on their minds when it comes to health? Work with them to learn more, locate resources, and determine the best ways to reach their peers.

Education Professionals

• Involve student leadership councils, or other groups of students, in implementing school-wide, youth-led programs that take a strengths-based approach to promoting adolescent health and mental health. Examples include peer tutoring, peer mediation, and peer support.

Sources of Strengths is a universal, peer-leadership approach to preventing youth suicide, bullying, violence, and substance use. The program trains peer leaders to use positive social norming methods to create healthy climate and cultural change in their school communities.

• Recruit and support youth to conduct an assessment of your school’s approach to promoting adolescent health.

Faith-based Community Professionals

• Sponsor meetings or retreats on adolescent health topics. Have youth select the topics and lead or co-lead the sessions.

Our Whole Lives is designed to provide accurate health and sexuality information in affirming and supportive settings with trained adult leaders. The accompanying resource, Sexuality and Our Faith, specifically puts the exploration of identity, relationships, and sexuality in the context of faith, worship, scripture, and sacred principles. This program is part of the United Church of Christ’s broad faith-based efforts to support justice, peace, and community building.

• Provide young people a leadership role in worship, in developing your youth programs, and in creating service projects. Ask them to help you create a welcoming environment where adolescents feel safe and supported.

Social Services Professionals

• Focus on the positive and encourage staff to regularly ask the youth about their strengths, interests, passions, and life goals. Support teens in finding ways to become learners and leaders in their own lives.

• Enlist the help of current or former youth recipients of services in staff training. Ask teens to provide advice on how staff can best develop relationships and build trust with youth, and how to create an environment where young people feel comfortable asking for help, trying new things, and making mistakes.

FosterClub, the national network for young people in and out of foster care, uses an innovative youth-led training approach. FosterClub trains young leaders to provide training to child welfare agency staff on working with young people in care.

Workforce Development Professionals

• Encourage local workforce boards to form a Youth Council to ensure the inclusion of diverse perspectives of out-of-school youth in community-based efforts to create job and career opportunities for young workers. Youth-serving organizations can assist in identifying youth participants and help train and prepare youth so they can succeed in this role. The U.S. Department of Labor’s fact sheet on the Youth Program of the Workforce Innovation and Opportunity Act (WIOA) offers useful information for youth-serving organizations. The Departments of Labor and Education have also issued technical assistance resources to support local workforce development efforts to engage out-of-school youth.
The 42 million adolescents living in the United States today present 42 million opportunities to improve the health and development of a young person, not only today but into the future.

Information and materials produced by Adolescent Health: Think, Act, Grow® can be used by everyone who cares about adolescents and their health.

TAG identifies concrete, viable actions steps we can take individually and collectively to improve adolescent health outcomes in the United States. Responsibility for adolescent health is not just in the hands of the health care providers, schools, or social service agencies. We all have a role to play.

More information and resources can be found on the TAG website at:
www.hhs.gov/ash/oah/TAG

• Resources to help you implement the action steps
• Current adolescent health data
• Links to health and social services by zip code
• Free materials you can download and share with friends and colleagues
• TAG Talk videos featuring adolescent health experts
• Webinars and TAG in Action: Successful Strategies—one pagers that profile successful program strategies
• TAG information for your newsletter and website
• Tips on how to follow TAG via social media using #TAG42mil
• Sample social media posts about adolescent health you can share with your colleagues or with teens
• Links to the footnotes referenced in this document
About the Office of Adolescent Health

“Leading the nation to ensure that America's adolescents thrive and become healthy, productive adults.”

The HHS Office of Adolescent Health (OAH) is dedicated to improving the health and well-being of adolescents. OAH leads through promoting strength-based approaches, bolstering multi-sector engagement, and bringing in youth voices to support healthy development and transitions to productive adulthood. OAH supports research, services, prevention and health promotion activities, training, education, partnership engagement, national planning, and information dissemination activities. OAH facilitates the Adolescent Health: Think, Act, Grow® effort.

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Find the references for the TAG Playbook online at https://www.hhs.gov/ash/oah/tag/resources/footnotes

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