

SAHM 2018 REPORT- 50TH ANNIVERSARY OF SAHM IN SEATTLE, WASHINGTON

THEME: GLOBAL ADOLESCENT HEALTH EQUITY

Too many adolescents and young adults throughout the world encounter great challenges in attaining health, safety, well-being and their full human potential. The conference discussed what existing structures within and between countries contribute to these challenges and how we can positively change and create new structures that result in respect, dignity and equity for all. In this meeting, diverse multidisciplinary adolescent health professionals from throughout the world came together to share, discuss, critique and generate strategies that ensure that all young people have full and equal access to opportunities that enable them to achieve healthy, productive and meaningful lives.

The first plenary lecture focused on pursuing UNFPA's transformative goals, which are cemented in their new Strategic Plan 2018-2021: ending preventable maternal deaths, ending unintended pregnancies by meeting the demand for family planning, and ending gender-based violence and harmful practices, such as female genital mutilation and child marriage, by 2030.

This plenary session also focused on global strategies and initiatives aimed at achieving equality and equity for women and girls. This was delivered by Dr Susan Petroni, Founder and Principal of Gender Equality Solutions. She provided strategic advice and consultation services to help donors, governments and civil society design and implement outstanding and gender-equitable global health and development programs

The 2nd plenary lecture by Professor George Patton focused on emerging global knowledge about the challenges and opportunities to promote equity in the attainment of health, safety, and well-being among adolescents and young adults throughout our world. Comparative country data was presented around various risk behaviours

The 3rd plenary lecture by Dr Janine Jones from the University of Washington, Seattle focused on key components of psychological and emotional well-being and how adolescent health and medicine professionals can optimally promote psychological well-being among adolescents and young adults in clinical and non-clinical settings.

She discussed assessing psychological well-being in relation to the global burden of diseases among adolescents. She identified three priority mental health issues affecting adolescents and youth and discussed how to prepare primary health care providers to integrate effective psychological well-being interventions into health systems accessible by youth. Finally she discussed appraise task-shifting as an approach to promoting psychological well-being in low resource settings. We were reminded of the 7 Cs to promote Resilience – Caring, Competence, Connection, Confidence, Coping, Contribution, Control which she re looked at in a cultural context including being empowered for community, giving back and building spirituality. She spoke to the fact that Resilience based Interventions that were most effective had a combination of Spirituality, Informal and Formal Kinship connections.

ALL the following HOT TOPICS I attended were extremely relevant and useful

Opioids, Youth, and the Evolving Global Public Health Emergency

Boston University School of Medicine

1. Detailed how the global opioid crisis affects adolescents and young adults, including epidemiology of use, opioid use disorder, and overdose mortality.
2. Identified how gaps in addiction treatment challenge health equity for adolescents and young adults with opioid use disorder, with a focus on disparities in access to care according to race and ethnicity.
3. Determined how practitioners with medical, nursing, psychology, social work, and other professional backgrounds can address opioid use disorder in their own clinical practices using evidence-based strategies.

Empowering Adolescents to Prevent Rape and Sexual Assault: Rigorous Results from Randomized Trials

Michael Baiocchi, PhD

Stanford University

1. Enumerated pathways targeted in programs that have shown efficacy in lowering the rate of rape in adolescents.
2. Described risk factors of sexual violence in youth and how the impact of assaults can have life-long, even intergenerational, impact.
3. Discussed some of the challenges to implementing sexual assault prevention programs given logistical and cultural constraints.

He presented a large cross-sectional study done in Kenya and Afghanistan. Control and Intervention group similar to the Child Resiliency Program mbut done in school

Understanding and Improving the Health Status of Adolescent Refugees Resettling in High Income Countries

Princess Margaret Hospital for Children

Summarized the global trends of forced displacement and discussed the reasons and implications of the limited availability of statistical data for adolescent refugees and asylum seekers.

Reviewed the medical and psychosocial health problems that are prevalent among adolescent refugees resettling in high-income countries and discussed the socioeconomic, medicolegal and ethical issues that impact the health status of this cohort.

Described strategies for clinicians and healthcare services to optimize multidisciplinary healthcare delivery to ethnically diverse resettling adolescent refugees.

Addressing Racism with Youth of Colour in our daily interventions: Reclaiming their Right to Dream

Hennepin County Medical Center (HCMC)

She defined racism and its presentation in structural, personally mediated and internalized levels.

Discussed the impact of racism on the health and well-being of youth, presenting a conceptual model that describes its potential chronic source of trauma.
She described clinical interventions based on trauma-informed principles to address racism within a positive youth development framework.

Identification of Commercially Sexually Exploited and Sexually Trafficked Youth

Medical College of Wisconsin

Identified the risk factors and red flags for youth involvement in sexual exploitation and trafficking
Identified the medical needs of sexually exploited and trafficked youth
Integrated screening questions, tools and resources into medical settings to better identify sexually exploited and trafficked youth

"I See a Lot of People Scared to do Things, Because They Feel Like They Might Get Deported": The Changing Immigration Policy in the United States and Its Impact on the Health and Well-Being of Youth in Immigrant Communities

University of California San Francisco

Examined the effects of the current U.S. political environment on the health and well-being of youth in immigrant communities
Described how shifts in immigration policy shape the concerns of immigrant youth related to family stability and future opportunities
Identified implications of the current immigration policy environment for adolescent health and well-being across multiple outcomes

Internet Addiction or Teens Being Teens? Recognizing and Responding to Problematic Interactive Media Use (PIMU)

Boston Children's Hospital

Here we recognized the signs and symptoms of Problematic Interactive Media Use (PIMU), manifesting as compulsive gaming, social media use, pornography, and video/information-bingeing;
Integrated PIMU awareness in standard of care medical history, health risk prevention and anticipatory guidance
Identified underlying psychiatric diagnoses including ADD, anxiety, and depression presenting as PIMU; Treat PIMU with established, evidence-based treatment strategies for these psychiatric conditions integrated in PIMU therapy
Developed team treatment plans for patients and families, multilevel care options with criteria for raising and stepping down level of care, and outcome goals; collected data characterizing PIMU and evaluated therapy with quantified outcome measures

THE WORKSHOPS ATTENDED

Workshop 1 ADOLESCENT TRAINING PROGRAMS

This workshop gave exposure to different modalities of training programs in adolescent health (long-term post-graduate courses; intensive short-term courses; simulation-based workshops; internet-based self-education programs).

We looked at understanding barriers to the establishment of training programs in adolescent health and the need for a stepwise approach in the development of such programs.

We had the opportunity to share views and start networking with international professionals who have already gained experience in developing educational programs in adolescent health.

Workshop 2 "Socioeconomic Disparities: Prevention and Treatment of Obesity in Adolescents"

Childhood and adolescent obesity continues to be one of the most important international and national public health concerns. In the United States, poor diet coupled with a sedentary lifestyle is now the leading cause of preventable death. According to the National Health and Nutrition Examination Surveys (NHANES), approximately 20% of American adolescents are obese. Although reports from the Centres for Disease Control and Prevention (CDC) suggest that the youth obesity epidemic in the United States has plateaued, this trend masks a growing socioeconomic gap: According to NHANES and the National Survey of Children's Health, the prevalence of obesity among high-socioeconomic status adolescents has declined over the past decade, whereas the prevalence of obesity among their low-socioeconomic status peers has continued to increase. This workshop highlighted these data trends and explained causes of the growing disparities in adolescent obesity, including issues such as food deserts and decreased physical activity disparities in lower socioeconomic populations. The workshop presented a practical and evidenced-based approach on how to identify vulnerable adolescents and to promote a healthy lifestyle, including a discussion of the 5-2-1-0 Plan (5 servings of fruit, 2 serving of veg, 1 carb and zero sugar) and physical activity recommendations.

Workshop 3 Tackling the Global Problem of Adolescent Opioid Use Disorder

Opioid use represents a significant threat to adolescent health. Drugs are now the leading cause of death for people under 50 and opioids are responsible for 40% of overdose deaths. Opioid misuse is associated with a significant increased risk of heroin use with four out of five new heroin users reporting they started with misusing opioid analgesics (Jones, 2013; Martins et al., 2017). Effective treatments are available but underused, particularly for adolescents and young adults. This workshop provided us with the basic information & tools needed to treat adolescents and young adults in an outpatient setting with a focus medication assisted treatment (MAT). Multiple learning strategies were taught about medication approaches as well as best practices regarding care coordination and counseling for MAT patients. More understanding in how to prescribe buprenorphine is needed

Workshop 4 Mobilizing the Adolescent Health Community to Address the Health Needs of Commercially Sexually Exploited Youth

In this workshop we discussed commercial sexual exploitation of children (CSEC) as a serious and urgent global adolescent health issue. It has been estimated that at least 26 million persons worldwide are victims of human trafficking and approximately 27% of those victims are children. In 2013 The Institute of Medicine Committee on Commercial Sexual Exploitation and Sex Trafficking of Minors in the United States recommended that health care professionals recognize and treat the myriad medical and mental health needs of minors who are victims or survivors of commercial sexual exploitation and sex trafficking.

Workshop 5 Does One Size Fit All? How School-based Clinics in an Urban School District are Screening for Trauma and Providing Culturally Appropriate Interventions

In this workshop we looked at trauma as an international issue, as evidenced by a record number of 65.6 million forcibly displaced people worldwide. Of these, 22.5 million are officially recognized refugees, over half of them under the age of 18. Across the US, adolescent providers are increasingly seeing youth impacted by trauma, locally or from their country of origin. Trauma exposure is highly prevalent among adolescents seeking care in community settings, with over 90% of adolescents in one diverse urban school district endorsing trauma exposure. There is a need for developmentally and culturally appropriate screening for trauma exposure and trauma-related symptoms. Although there are national recommendations for screening all youth for depression and substance youth, there are currently no national guidelines for trauma screening, nor are there recommended algorithms for follow-up. Alameda County, one of the most diverse counties in the US with 29 school-based health centers, has been the site of a learning collaborative for trauma screening and care in schools and school-based health centers, particularly in an urban school district with 72% eligible for free and reduced lunch, 30% English language learners, and over 2000 newcomers from other counties in the 2016-17 academic year. We looked at ACE (Adverse Childhood Events) screening tools currently in use in these settings, the logistics of school-wide screening for trauma, current efforts to validate adult tools in this population, and multi-level interventions that comprise trauma-informed care in this setting.

We discussed the levels of follow-up services needed after trauma screening, including coping skills, intensity of services, and advantages of group vs. individual follow-up as the approach in the Child Resiliency Programme

Workshop 6 Novel Strategies to prevent gender based violence among adolescents: Case studies from Kenya, Pakistan, Afghanistan, and the United States

Gender-based violence exacts a high price on the health and well-being of adolescents worldwide. It frequently causes physical and emotional injury, severe stigma, and reduced life-long education attainment and economic potential. It can also result in unplanned pregnancy and sexually transmitted infections, including HIV. The conference theme, “Global Adolescent Health Equity” was directly aligned with this institute, focusing on the human rights and well-being of adolescents in diverse global settings. In order to achieve global adolescent health equity, we must also recognize the role of gender equity.. Increasingly, there is recognition that equity is not possible without addressing GBV explicitly, as it is an important factor in many other negative physical and mental health outcomes. In this workshop we described the adverse effects of gender-based violence on

the physical and mental health of adolescents, especially in global settings, including the impact on life-course. Shared findings in preventing and researching GBV, both in the US and globally.

SIGs (Special Interest Groups)

Spirituality: Spirituality, Religion, and Providing Care to a Global Adolescent Population

Questions involving Spirituality and Religion have been intimately involved in many adolescents' sense of health and wellness, and have also had an impact on questions surrounding Global Adolescent Health Equity (the 2018 SAHM meeting theme). The impact of an individual's sense of spirituality, and of a culture's religious identity, have been viewed as sources of internal strength and resilience, as well as sources of stress and external control. This was discussed from a global health perspective, to see how Spirituality and Religion impact patient's lives, our personal experiences, and our ability as health care professionals to provide care for an increasingly global patient population.

Sports Medicine

. This SIG included a lively review of current science and practice that explored the concept of "Exercise is Medicine." The review stimulated discussion about sports, exercise and physically active recreation as they relate to clinical practice in all domains of adolescent health, from mental health to preventive medicine including Violence Prevention Initiatives