Reaffirming the commitment made in the 2030 Agenda for Sustainable Development, including Goal (3) on Good Health and Wellbeing and other health-related SDGs;

Guided by The Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030) which envisions a world in which every woman, child and adolescent everywhere realizes their rights to physical and mental health and well-being; and to guide the implementation at country level through applying the Global Accelerated Action for Health of Adolescent (AA-HA) implementation guidance¹.

Guided by the global, regional and national, strategies, commitments and action plans to all health-related goals, targets and plans especially those with specific relevance to adolescent and youth health and well-being.

Recognizing that appropriate evidence is required for all decisions that influence and affect the health and wellbeing of adolescents and youth.

We call on national and local governments in the region to:

- Identify adolescent and youth health and development priorities based on the context of each country.
- Ensure that national policy frameworks recognize the importance of the meaningful engagement of adolescents and youth, and have regular platforms for their engagement and two-way communication.
- Approach the rights and the needs of adolescents and youth in an integrated, comprehensive, age-appropriate manner, promoting multi-sectoral collaboration and coordination between health and non-health sectors such as education, nutrition, child protection, legislative sectors.
- Remove the financial barriers for the poorest adolescents and youth to access health, educational and other resources to build their future.
- Consider a gradual introduction of acceptable and applicable services provision for adolescents and youth (adolescents and youth friendly spaces and services).
- Review the current status of school health based strategies and initiatives, and curricula to ensure they reflect the latest evidence in adolescent and youth health, and meet the mental and physical health needs of adolescents and youth.
- Ensure that all school systems implement a comprehensive health and life-skills’ and comprehensive family life (reproductive education) that is age appropriate, inclusive, evidence based and refreshed on regular basis.
- Reverse the neglect of adolescent and youth programming in humanitarian and fragile settings.

• To recognise that Adolescent and youth health needs intensify in humanitarian and fragile settings, including from burdens related to: mental health and psychosocial support (MHPSS), malnutrition; disability; unintentional injury; violence; sexual and reproductive health needs, water, sanitation and related health needs.

• Develop adolescent-competent health\(^2\),\(^3\) and non-health workforce in all sectors to be able to understand, address, and provide adolescent and youth-targeted services.

• Build an environment of trust with adolescents and youth, supporting initiatives that are adolescent and youth-led, youth-centred, peer-education initiatives and ensure that their own voices are heard in all matters related to their health and wellbeing.

• Adapt all national policies and their implementation to meet the needs and aspirations of adolescents and youth, monitor and evaluate them to ensure that they correspond to the global and regional initiatives already agreed to.

• Integrate interventions to promote mental health, prevent mental disorders in all strategies to address adolescent health with active involvement of all stakeholders including youth.

• Encourage adolescents and youth role in prevention and management of environmental hazards affecting their health.

• Address the leading causes of adolescent and youth mortality and morbidity and their risk factors, including but not limited to early, forced child marriage, violence, injuries, mental health, substance use, communicable and non-communicable diseases.

• Equip schools and health care facilities, representing the frontline entities to deal with issues related to adolescent health, with systems and practitioners that are able to deliver adolescent and youth friendly services (in and out of classrooms and clinics), on the health needs of adolescents and youth with appropriate measures of ethical practice, confidentiality and inclusiveness.

• Develop a comprehensive strategy to reduce road traffic accidents, the leading cause of death among youth, by including youth in road safety committees and raising awareness in and out of schools to reduce road traffic accidents and risky behaviors.

• Fund and support a comprehensive implementation research agenda to fully understand the perceptions, needs and priorities for and by youth, testing effectiveness of interventions and innovations, and nurture a culture of evidence-based decision making / policies.

• Generate data and measurements that are based on comprehensive health information systems, that are gender and age disaggregated, that are produced in a timely, continuous, and rigorous manner, and make it accessible.

• Ensure that adolescents and youth have access to healthy diets and nutrition education in and out of schools to ensure a life-long habit of healthy eating.

• Introduce/scale up Health promoting schools as well as learning networks among schools at the sub-national and national levels and ensure collaborative approach between ministries of health and education. Create comprehensive policies and maintain a culture against interpersonal violence, self-harm and bullying, including cyberbullying, harassment, with clear protection measures for adolescents and youth, and appropriate consequences for the perpetrators.

\(^2\) Global Standards for Quality Health-Care Services for Adolescents. Vol 1. WHO and UNAIDS. 2015

\(^3\) Core Competencies in Adolescent Health and Development for Primary Care Providers. WHO. 2015
• Cultivate a stronger emphasis on the prevention of non-communicable diseases and their risk factors, in part through dedicated health promotion activities in schools, and through well-aligned actions with appropriate municipal, local and national governments.

As researchers, practitioners, and students we commit to:

• Promote adolescents and youth participation to unlock their potential in all matters related to their health and wellbeing.
• Generate and carry out an interdisciplinary research agenda on adolescent and youth health, with a clear focus on equity issues.
• Promote a culture of use of evidence in all matters related to the development of policies, design of programs, plans, services and initiatives targeting adolescents and youth.
• Make sure to encourage positive communication in the family context, setting good examples and role models, maintaining respect for boundaries and privacy.
• Adopt an integrated approach to our support for adolescents and youth, including in humanitarian, fragile and conflict settings, aiming to breakdown sectional silos and promoting an interdisciplinary approach to adolescent and youth health.
• Advocate for a growing attention in the community and policy level to mental health issues experienced by adolescents and youth.
• Prioritize combatting early, forced child marriage, woman and child trafficking through an interdisciplinary, adolescent and family-centred approach. Ensure that early married women and mothers are well supported to become active members of society.
• Mobilize communities and civil society to play an active role in preventing and reducing outlawed harmful practices affecting adolescents and youth such as preventing and responding to sexual and gender-based violence.
• Maximize the role of academic institutions in developing and promoting adolescent and youth health disciplines, supporting research in this area, and incentivizing young researchers to engage in this field.
• Support the role of religious leaders and institutions to become safe and supportive non-judgemental spaces for adolescents and youth.
• Redouble our effort to strengthen exchange and dialogue among civil society, academia and other relevant stakeholders to reduce duplication of efforts and promote synergy.
• Promote physical activities for both boys and girls especially in schools, build a culture of physical activity and remove hurdles that limits its acceptance.