



COMMITTING TO ADOLESCENT WELL-BEING

PMNCH Health Care Professional Associations Constituency (HCPA) COMMITMENT

PMNCH Health Care Professionals Associations (HCPAs) bring together the voice and commitment of millions of healthcare professionals across the globe. We consider prioritization of adolescent health and wellbeing critically important for young people across the life-course, and for achieving maternal, newborn and child health (MNCH) and sexual, reproductive health and rights (SRHR) outcomes. Investing in adolescent health and well-being affects adolescents' present health, their future adult health and their children's health and wellbeing.

On behalf of the PMNCH Health Care Professional Associations constituency, and specifically, Council of International Neonatal Nurses (COINN), International Federation of Gynecology and Obstetrics (FIGO), International Association for Adolescent Health (IAAH), International Confederation of Midwives (ICM), International Council of Nurses (ICN) and International Pediatric Association (IPA), in addition to our association individual activities and commitments, we commit to:

1. Initiate and strengthen collaboration by our member national health-care professional associations to prioritize and work together to improve adolescent health and well-being by:
 - Coordinating national convenings to discuss the current situation and agree on priorities for improving adolescent health in specific national contexts;
 - Encouraging our national associations to engage with local and national governments to advocate for improved adolescent health policies, increased budget allocations, and improved service delivery¹;
 - Collaborating with each other to promote joint guidelines and best practices recommendations and accountability mechanisms to ensure adolescent care addresses young people's needs.
2. Ensure respectful care, including confidentiality and anonymity, respectful treatment in particular for adolescents in vulnerable situations, or from marginalized groups (teenage mothers, LGBTQ+ adolescents, and adolescents from BAME communities, from poorer socio-economic contexts or on sensitive topics, such as sexual and reproductive health and rights etc.).
3. Explicitly include adolescents in HCPA global and national strategies and work plans and bring the voices and interests of adolescents into the development and review of such strategies, as well as practice guidelines.
4. Advocate for capacity building and on-going training opportunities across different disciplines to ensure a strong and effective task force of healthcare professionals across disciplines able to provide adolescent-appropriate services by:
 - Establishing or enhancing joint e-learning programs, peer-to-peer exchange opportunities, shared digital community of practice platforms etc.);

¹ Including but not limited to services to provide evidence-based preventive care, environmental health, access to emergency, medical and surgical care for all adolescents, to address mental health, and to address teenage pregnancies, support young pregnant women, and provide culturally sensitive and comprehensive SRHR for young people, including abortion, and vaccination against HPV



- Sharing latest evidence on adolescent well-being (including the conceptual framework, outcomes of What Young People Want as well as country-specific evidence, data, lived experiences and case studies) to equip health care professionals with latest evidence and information.
5. Invest in early leadership (establishing different discipline student engagement at congresses, Young HCPA leadership programs, mentorship programs, and cross-disciplinary young professional advocacy opportunities)
- Bringing young leaders together in the Youth HPCA group;
 - Including the young professionals in the decision-making process;
 - Engaging young professionals in the board meetings;
 - Supporting and empowering the young health care professionals in various national and international programs with a new framework plan each year;
 - Training young professionals to be advocates, followed by engaging them with different advocacy groups.
6. Advocate to ensure universal access to SRH care services, and integration of reproductive health into national strategies and programmes, including:
- For an age-appropriate evidence-based comprehensive sexual and reproductive health training/education in the curriculums to be delivered in schools and communities;
 - To ensure the availability and affordability of a variety of contraceptives for adolescents, and remove legal and policy barriers, and address bottlenecks that may prevent adolescents from accessing contraception;
 - Raise awareness about the importance of adolescent sexual and reproductive health and advocate for increased investment in this area;
 - Prioritize efforts at the community, national, and international levels among professional societies to reduce stigma and misinformation.

[\[LIST the supporting documents, including relevant policies, action plans, implementation strategies, agreements, frameworks, financial documents, etc.\]](#)

[FIGO Strategic Plan 2021-2030](#)

[Leadership For Change™ \(LFC\) | ICN - International Council of Nurses](#)

[IPA Call To Action and Commitment](#)

[\[Please SPECIFY which of the below domains link to the above commitments\]](#)

Our commitment is directly aligned to the health and nutrition domain of the [Adolescent well-being framework](#), as improved health services for adolescents directly impact these components. In addition, youth and young professional involvement in these activities addresses the agency and resilience domain.

[\[Please SPECIFY which of the SDGs link to the above commitments\]](#)

Our commitment is aimed at accelerating progress towards SDG 3, good health for all including, SDG 3.7- Ensure universal access to sexual and reproductive health-care services. Our commitment is also aimed at accelerating progress towards SDG 17, partnership towards the goals. In addition, addressing the workforce affects SDG 4 (quality education) inclusion of environmental health affects SDGs 7 (clean water) and 13 (climate action), and the commitment to inclusion of marginalized populations as well as



all youth, and to reproductive health and rights addresses SDG 10 (reducing inequality) and SDG 5 (gender equality), respectively.

[\[Please SPECIFY which of the accountability mechanisms you will employ to track progress on the commitments\]](#)

By making this commitment we agree to [register](#) our commitments on the [SDG Summit Acceleration and Accountability Platform](#). We commit to systematically report on the implementation of these commitments through existing follow-up and review processes including working with the commitment maker HCPA organizations to develop and use a reporting format to successfully track actions by our members and collaborative national activities in support of this commitment, with individual and joint reporting of participation with each other within national activities, and with their own member state governments. Our reporting will include both quantitative assessment of activities in support of this commitment, and qualitative case studies of successes and challenges within individual member states.