

Being, Belonging, Becoming:



Minnesota's Adolescent Health Action Plan



Executive Summary
Minnesota Department of Health



Being, Belonging, Becoming:

Minnesota's Adolescent Health Action Plan
Executive Summary · 2002

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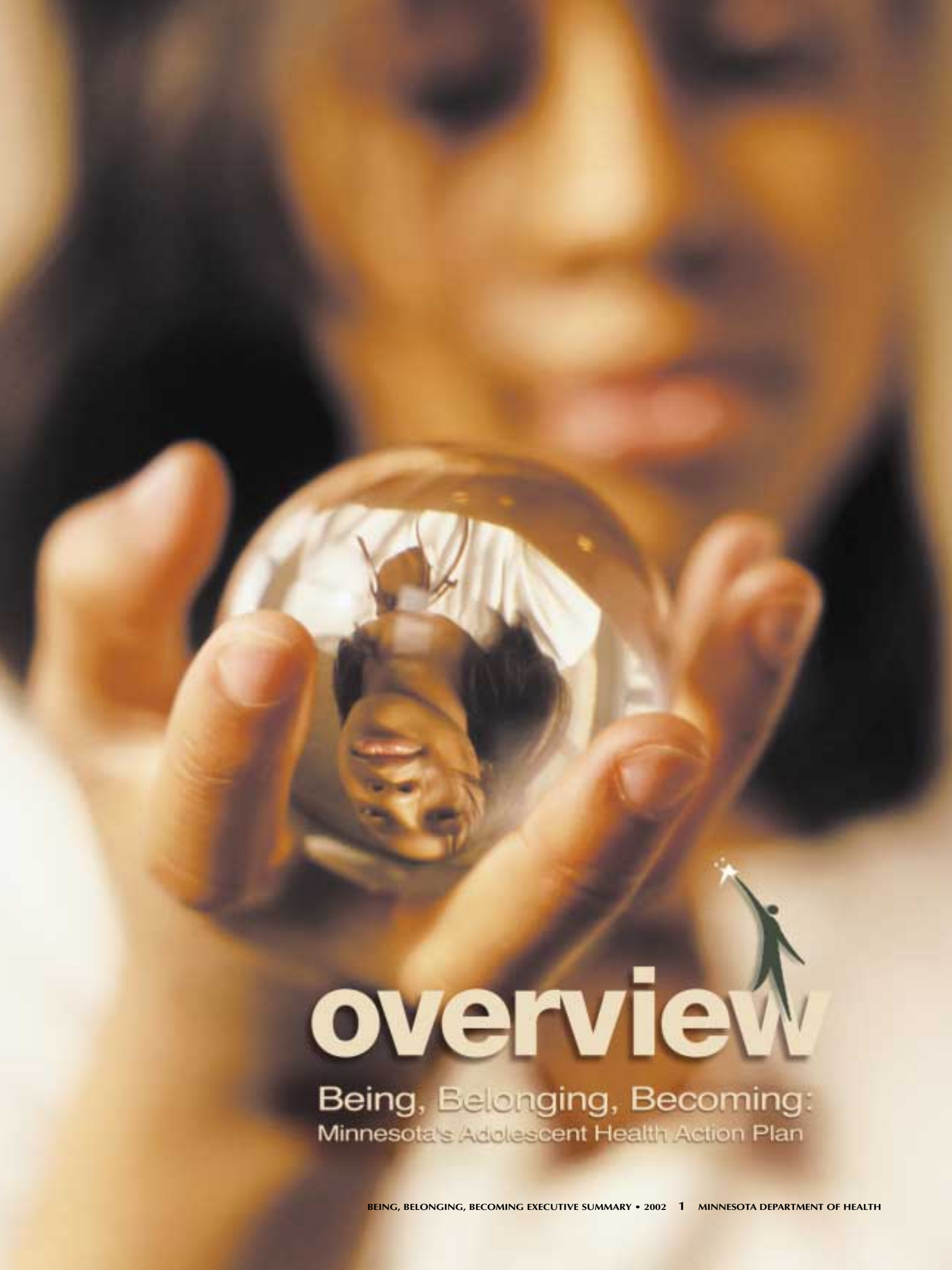
To request this material in another format contact:



Minnesota Department of Health
P.O. Box 64975
St. Paul, MN 55164-0882

651-215-8960 *PHONE*
651-215-8990 *TDD/TTY*
800-627-3529 *MINNESOTA RELAY SERVICE TTY*

adolescenthealth@health.state.mn.us
www.health.state.mn.us

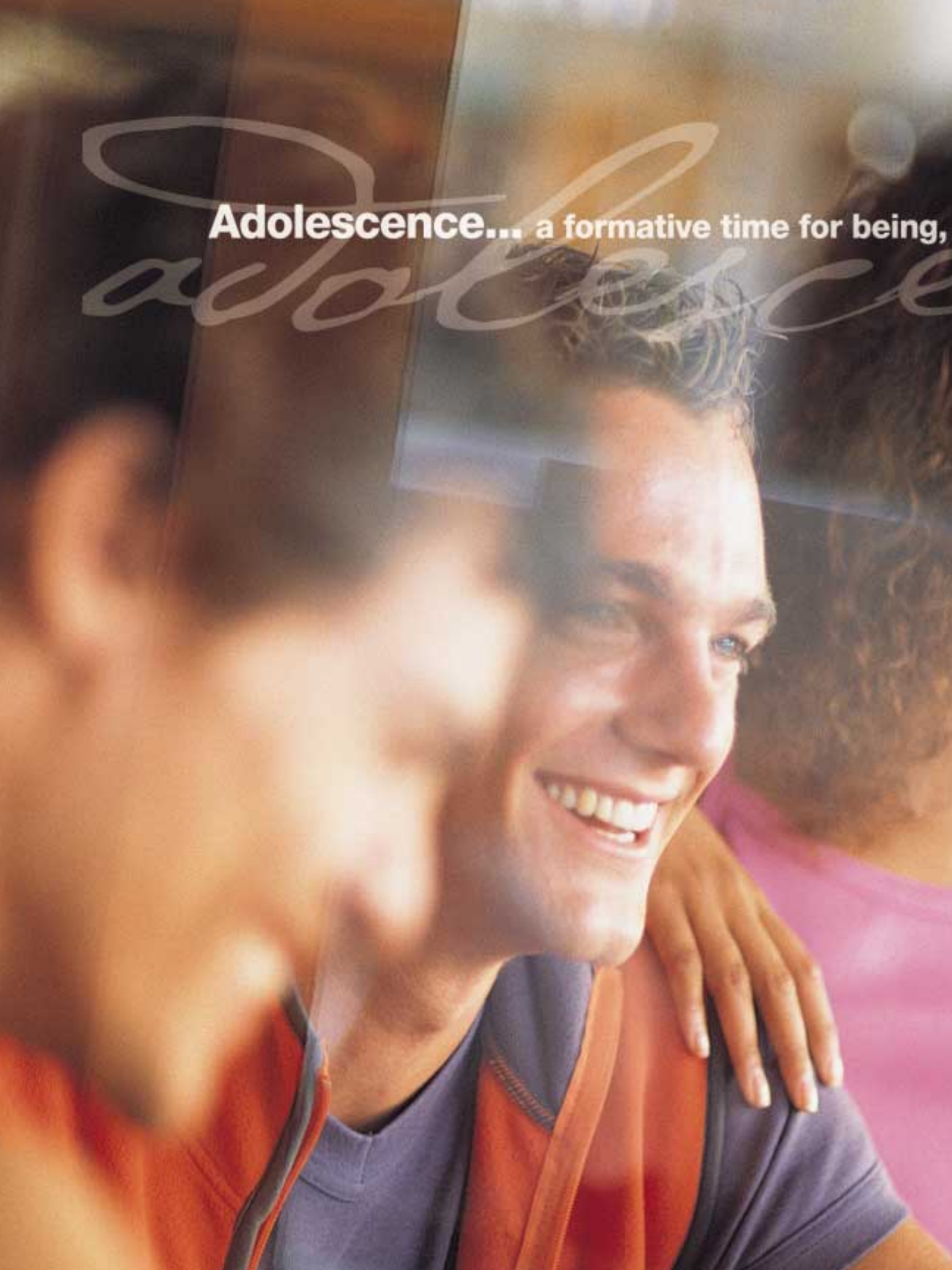


overview

Being, Belonging, Becoming:
Minnesota's Adolescent Health Action Plan

Adolescence... a formative time for being,

adolescence



belonging, becoming.

ance

This period of life is characterized by significant change and transition. The health and well-being of adolescents is shaped by the world in which they grow and the people that surround them.

As young people navigate the changes of adolescence, it is critical that they receive the **guidance, support** and **encouragement** that fosters healthy development.

Choosing the right course of action is daunting because health is a complex issue. Therefore, it is important first to clearly identify the factors that affect the health of adolescents and define what teens need to develop in healthy ways.

This information can be used to guide decisions about the best strategies and actions to support healthy youth in Minnesota.

Being, Belonging, Becoming





Adolescence

Adolescence provides a unique opportunity to invest in the health and well-being of youth. Good health (physical, emotional, social and spiritual) enables young people to make the most of their teenage years while laying a strong foundation for adult life. Lifestyle behaviors developed during adolescence often continue into adulthood and influence long-term prospects for health and risk of chronic disease. Thus, investment in health during adolescence has long-term benefits.

Adolescence is defined by the World Health Organization as the period of life between the ages of 10 to 19.¹ It is a time characterized by distinct and dramatic developmental changes such as **physical changes** due to puberty; **social changes** related to social roles and expectations, and changing roles in relationships; and **emotional** and **intellectual changes** in a transition from concrete to abstract thought and reasoning. The rate of these developmental changes is second only to infancy. Experimentation and exploration are hallmarks of adolescence as young people seek to find their “fit” in society. This is a time of redefining and developing relationships, with parents, family and peers. It is important to understand adolescence in the continuum of the lifespan. The experiences of childhood have a significant impact on adolescence, while adolescence lays a foundation for the experiences of adulthood.



Investment in health during adolescence has long-term benefits.

The Cost of Not Investing in Health of Adolescents

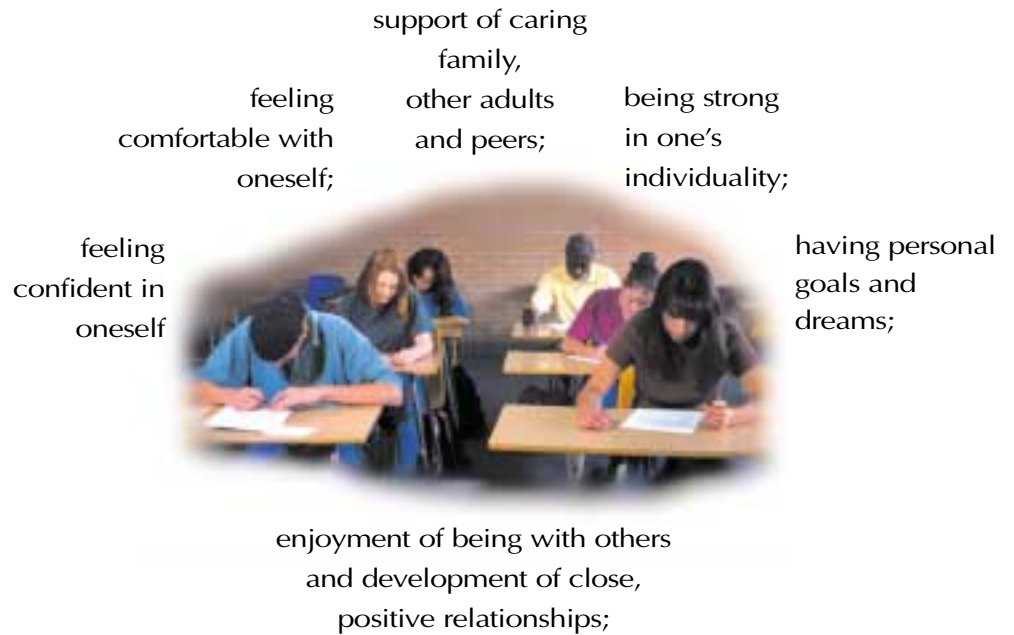
The cost of not investing in Minnesota youth is staggering in economic, social and humanitarian terms. At the same time, there are significant benefits of investing in the health of Minnesota adolescents. Young people who are well-educated and healthy are more likely to become contributing members of society and contributors to our economic prosperity. It is also more effective to prevent problems before they start, especially in childhood and adolescence. How Minnesota collectively invests in their success and well-being reflects who we are as a society.

Definition of Health

Health is an optimal state of well being in all areas of life – physical, emotional, social and spiritual. By using this broad definition of health, adolescents are healthy when they:

- 1) engage in healthy behaviors that contribute to a healthy lifestyle;
- 2) have the capacity to thrive in spite of stressors in life (resiliency);
- 3) successfully engage in the developmental tasks of adolescence; and
- 4) experience a sense of wholeness and well-being.

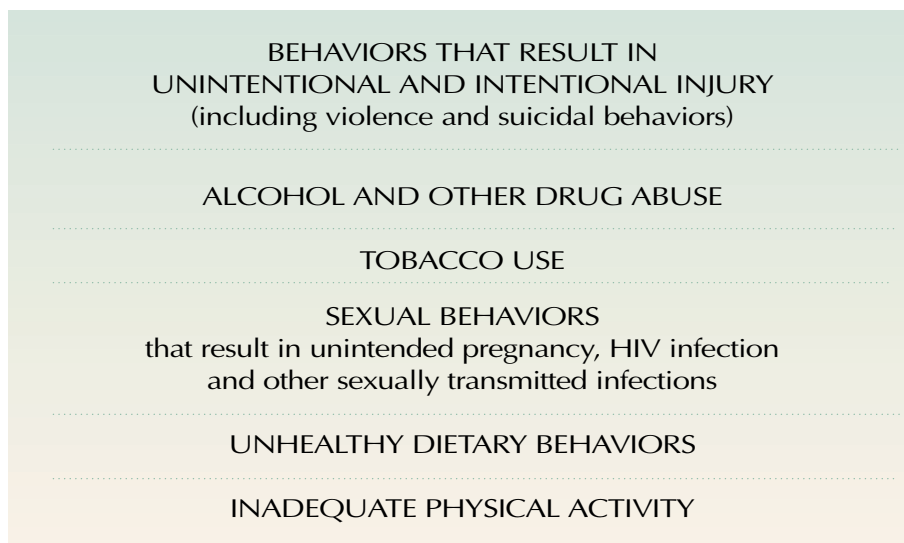
Minnesota youth have defined health in a similar manner:

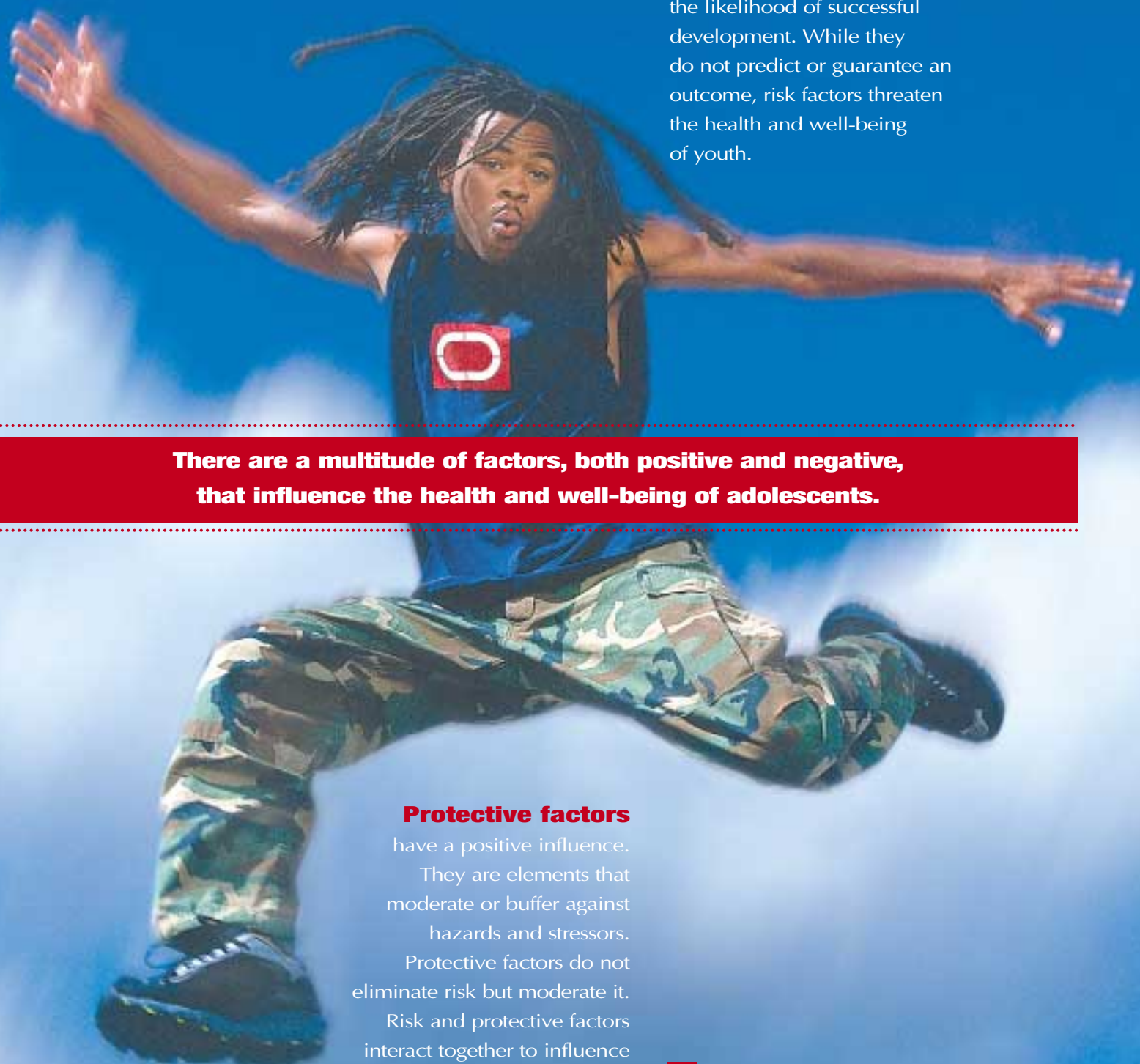


Factors That Affect the Health of Adolescents

The health of adolescents is affected by a complex interplay of factors between the young person and their social environment. Their health is shaped by parents and families, peers, neighborhoods and communities, schools, community organizations, faith communities, health care systems, media, employers, and social norms, policies and laws. These factors impact young peoples' sense of health and well-being by affecting their capacity to withstand life stressors, their ability to transition in developmentally appropriate ways, and their ability to make decisions about health behaviors.

There are a small number of behaviors that negatively affect the health of adolescents. In fact, 70% of adolescent death and illness are caused by six categories of risk behavior, listed to the right.





Risk factors

are elements that raise the odds that a poor outcome will occur and diminish the likelihood of successful development. While they do not predict or guarantee an outcome, risk factors threaten the health and well-being of youth.

There are a multitude of factors, both positive and negative, that influence the health and well-being of adolescents.

Protective factors

have a positive influence.

They are elements that moderate or buffer against hazards and stressors.

Protective factors do not eliminate risk but moderate it.

Risk and protective factors interact together to influence the health of youth.



It is not just the presence of factors but more importantly the complex balance and interplay between them that affects health.



Spheres of Influence

To better understand the affect of risk and protective factors, they can be organized within spheres of influence:



Individual Adolescent (Youth)

There are factors within the individual adolescent that affect the young person's health and well-being. Some factors are biologically determined while others are social in nature, including a young person's view of self, their attitudes and beliefs, their sense of future and their ability to interact socially with others.

Family

Family plays a critical role in the health and well-being of adolescents. Teens supported by a caring family are most likely to develop in healthy ways and less likely to engage in problem behaviors. Young people who grow up surrounded by family discord, conflict, instability and lack of supervision are at higher risk for poor health outcomes.

Peers

The influence of peers on health can be direct (attitudes and behaviors of peers) or indirect (a young person's perception of their peer group's attitudes and behaviors).

School

School has a powerful influence on the health and well-being of adolescents. Young people who feel connected to school are less likely to be involved in problem behaviors. Adolescents who struggle in school (being old for grade, being retained in grade, failing in school, dropping out) tend to be at higher risk for problem behaviors.

Community Society

Young people who feel a sense of belonging to a community that offers support and opportunity are fostered to grow and develop in healthy ways. This support can be provided through caring adults, community organizations, faith communities, other community institutions, and opportunities for authentic involvement. Youth surrounded by communities characterized by poverty, chaos, disconnection and violence tend to be at higher risk for problem behaviors and poor outcomes.

The Connection Between Healthy Development and Adolescent Health

There are specific developmental tasks that all youth need to accomplish in order to enter adulthood well prepared. These tasks are best described by the theme of

being,
belonging
and **becoming.**



Being refers to “defining who I am” and has to do with personal values, attitudes, knowledge and behaviors. These developmental tasks revolve around defining a clear sense of identity, a positive sense of self worth and control over one’s life.



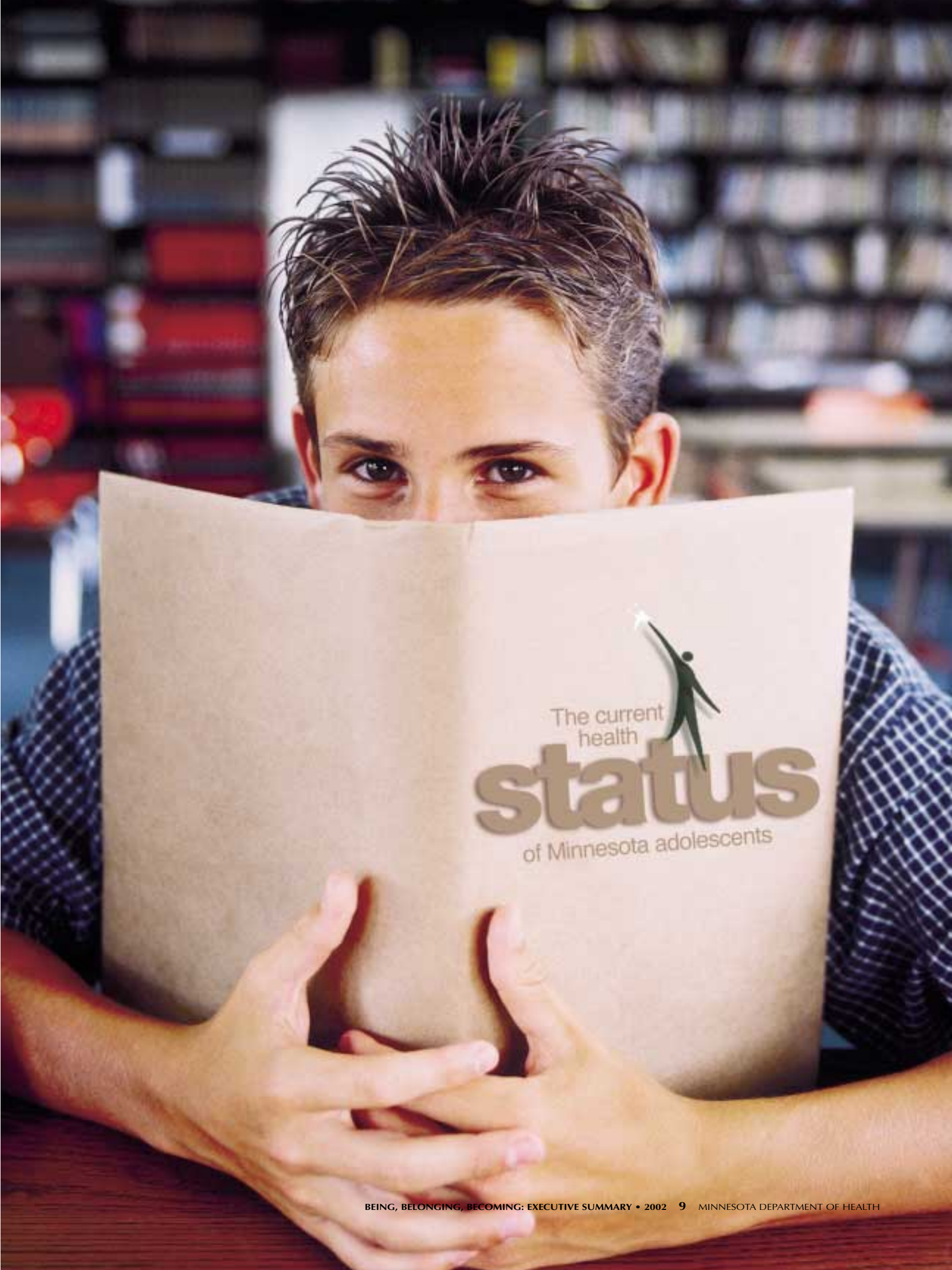
Belonging refers to “finding my place in the world” and has to do with a young person’s fit with their environment. These developmental tasks focus on the ability to form healthy relationships with others, using available support systems, finding a valued place in their world and finding ways to be useful to others.



Becoming refers to “achieving my personal goals, hopes and aspirations.” These developmental tasks include mastering social skills, developing lifelong learning habits, developing a sense of curiosity and exploration, seeing a promising future with real opportunities, acquiring skills to participate in our economy and establishing a respect for diversity.



Young people who are supported to complete these developmental tasks are better prepared to make a successful transition from adolescence into adulthood while young people who are *not* given healthy outlets for growth are likely to find potentially harmful alternatives. In general, adolescents need to be surrounded by safe places, challenging experiences and caring people to develop in healthy ways.



The current
health

status

of Minnesota adolescents

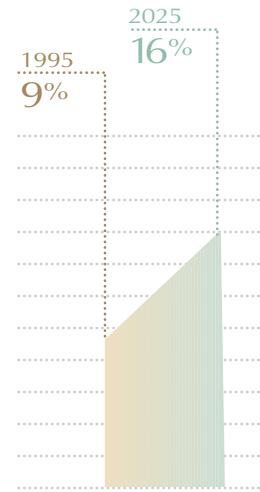


Developing effective strategies starts by assessing the current health status of youth.

This assessment includes examination of the key factors that affect youth health.

Population of Adolescents

The number of adolescents age 10-19 and their percentage of the total population in Minnesota is expected to decline from 1995 to 2025. At the same time, adolescents will become more racially and ethnically diverse. In 1995, youth of color (age 10-19) represented 9% of all adolescents in Minnesota – they are expected to comprise 16% in 2025.²



CURRENT HEALTH STATUS OF MINNESOTA ADOLESCENTS · CURRENT HEALTH STATUS OF MINNESOTA ADOLESCENTS

Challenges to Health

In conversations with Minnesota youth age 12 to 21, they identified the following as the most significant challenges to their health:



- 1. TRADITIONAL PROBLEMS**
Alcohol and other drug use; Sexual activity, pregnancy and issues of sexuality; Depression and suicide
- 2. STRESS AND DISTRESS**
- 3. INADEQUATE RESOURCES FOR YOUTH:**
Inadequate “fit” between schools and youth; Inadequate recreational opportunities for youth
- 4. YOUTH DISCONNECTION FROM ADULTS:**
Adult stereotypes about youth and lack of respect for youth; Problems with parents and families; Problems with adults
- 5. SOCIETAL PROBLEMS**
Violence, racism, poverty, homelessness, unhealthy neighborhoods, people who are disconnected

Factors that Affect the Health of Minnesota Adolescents:



Health Care

Too few adolescents have access to appropriately designed and delivered health care services.

Challenges include:

- 1) lack of health care providers who understand adolescent health and enjoy working with teens;
- 2) lack of coordination of health care services;
- 3) lack of access to services at convenient times and locations;
- 4) lack of confidentiality for sensitive services; and
- 5) difficulties in financing of health care services when youth seek services outside of the traditional health service system.

Family

A large proportion of teens believe that their family cares about them and are able to talk with their parents about problems.³

CURRENT HEALTH STATUS OF MINNESOTA ADOLESCENTS · CURRENT HEALTH STATUS OF MINNESOTA ADOLESCENTS

Individual Adolescent

Youth in grades 6, 9 and 12 generally have positive feelings about themselves.³

Peers

Peers can have a strong impact on the health of teens. In Minnesota, friends are the number one source of happiness for adolescents in public schools.³ Nationally, teens who spend significant amounts of time “hanging out” with friends, especially those who are involved in specific risk behaviors, are more likely to be involved in these behaviors themselves.⁴

School

School has a powerful influence on the health and well-being of adolescents. Yet an alarming percentage of students report cutting or skipping school and there are significant disparities in school completion by race and ethnicity.^{3,5}

Community/Society

In a 1999 national public opinion poll of Americans, a strong majority of adults describe teens negatively, using words such as rude, irresponsible and wild. Only 38% believe that today’s youth, once grown, will make the United States a better place. Despite their pessimism about teens, adults believe that helping youth get a good start in life is one of the most important issues facing the country, even more important than creating jobs or reducing crime.⁶

Minnesota Adolescent Health Behaviors and Outcomes



I**NJURY AND VIOLENCE** Youth age 10-19 represented 16% of all motor vehicle crash deaths and 23% of all motor vehicle crash injuries in 1999.⁷ An alarming percentage of high school students report driving after use of alcohol or other drugs and riding with others who have used these chemicals.³ For 15-19 year old youth, homicide and suicide combined accounted for one quarter of deaths in this age group in 1998.⁸

On average, a classroom of 30 high school students will have at least 2 or 3 youths who have been sexually abused.³

Nationally, adolescents experienced the highest rates of violent crime in 1999.⁹

T**OBACCO, ALCOHOL AND OTHER DRUGS**

More than 1 out of 3 high school students and 1 out of 8 middle school students are current tobacco users. Most young smokers say they would like to quit and many have tried to quit unsuccessfully.¹⁰

Alcohol is a commonly used chemical among Minnesota adolescents. Between 1992-1998, marijuana use increased while alcohol and other drug use decreased slightly among 9th and 12th graders.³

N**UTRITION AND PHYSICAL ACTIVITY** There are limited data about nutrition and physical activity among Minnesota adolescents. Only a small percentage of 6th, 9th and 12th grade students participate in physical activity on a regular basis and eat adequate amounts of fruits and vegetables every day. Weight and appearance are a source of worry for a large percentage of high school students.³



M**ENTAL HEALTH & SUICIDE**

An alarming percentage of Minnesota teens report feeling pervasive sadness, high levels of stress, feelings

of hopelessness/discouragement, and having thought about or having tried to kill themselves.³

Between 1996 and 1998, the suicide rate among young people age 15-19 decreased slightly.⁸

C**AUSES OF DEATH**

Unintentional and intentional injuries are leading causes of death among Minnesota adolescents age 10-19, especially older teens. Deaths due to motor vehicle injuries represent the largest proportion of all unintentional injury deaths among this age group.⁸



S**EXUAL BEHAVIOR, PREGNANCY, STDS & HIV**

The percent of students in 9th and 12th grades who have ever had sexual intercourse decreased from 1989 to 1998.³

The overall teen pregnancy and birth rates decreased from 1990 to 1998, yet the rates for Hispanic and Asian youth increased. Also, Minnesota youth of color face teen pregnancy and birth rates that are 2-5½ times higher than white teens with African American and Hispanic young women most likely to experience a pregnancy and give birth.⁸ Nationally, teen pregnancy rates have declined because:

- 1) fewer teens are having sex; and
- 2) more sexually active teens are using contraceptives effectively.¹¹

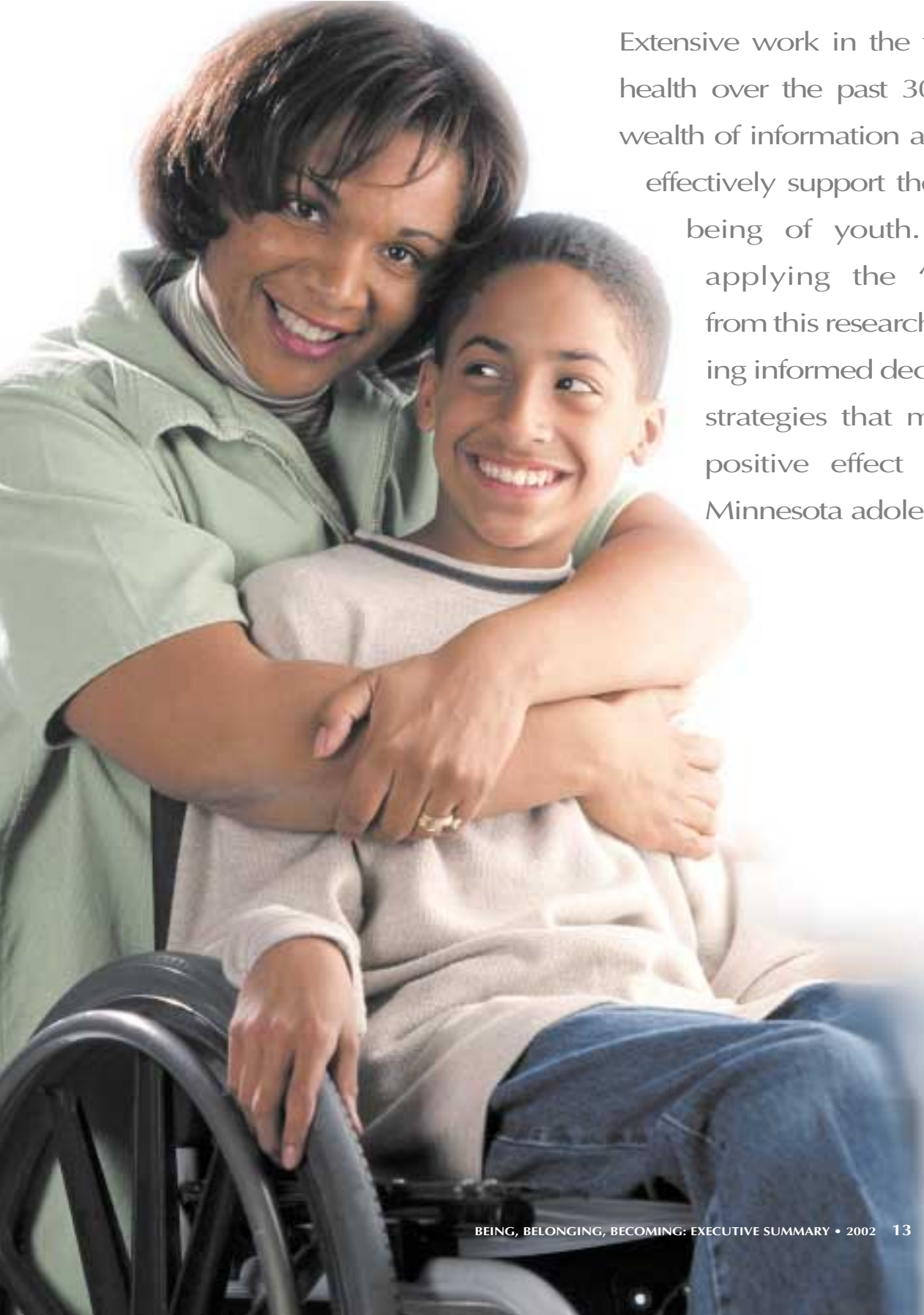
Adolescents and young adults (age 15-24) have the highest rates of Chlamydia and Gonorrhea in Minnesota.¹² Youth of color are disproportionately represented among youth diagnosed with STD and HIV infection.^{12,13}

Factors that contribute to this disparity require careful attention and focus.



action steps

that effectively support the health of adolescents



Extensive work in the field of adolescent health over the past 30 years provides a wealth of information about strategies that effectively support the health and well-being of youth. Analyzing and applying the “lessons learned” from this research can assist in making informed decisions about those strategies that most likely have a positive effect on the health of Minnesota adolescents.



Types of Strategies

Four types of strategies have been shown to effectively support the health and well-being of adolescents:

1

DECREASING THE RISK FACTORS

that contribute to risky behaviors and poor health outcomes.

2

INCREASING THE PROTECTIVE

FACTORS that contribute to resiliency and healthy outcomes.

3

PROVIDING OPPORTUNITIES

for young people to successfully meet the developmental needs of adolescence.

4

BUILDING HEALTHY

COMMUNITIES that support and nurture adolescents.

There are a number of characteristics shared by effective adolescent health strategies. These characteristics play out differently depending on whether strategies intervene directly with adolescents and their families or build systems that support healthy youth. But at their core, effective strategies incorporate many of these characteristics:

1. Adolescents are viewed as resources to be nurtured and supported, not problems to be fixed.
2. Strategies are integrated and coordinated.
 - There is a diversity of strategies that focus not only on adolescents, but also on their social environment including families, peers, schools, and communities.
 - A combination of prevention, health promotion and healthy youth development (asset-building) strategies are used.
3. Youth are involved and engaged as active partners in the design, implementation and evaluation of strategies.
4. There is a good “fit” between strategies and the adolescents on which they focus.
 - They are responsive to cultural, ethnic and other forms of diversity.
 - They are developmentally appropriate.
5. The people involved understand adolescent health and well-being.
6. There is a focus on building and strengthening relationships.
 - They purposefully focus on building supportive adult-youth relationships.
 - They focus on strengthening families.
7. Young people are supported to make successful transitions.
 - They help youth to develop basic life skills.
 - They help young people find and become involved in meaningful roles in their communities.
 - They strengthen the social supports available to adolescents and their families.
8. They provide an array of opportunities for young people so that risk behaviors are not the best option open to youth.

A Minnesota Vision for Healthy Adolescence

Our responsibility as the community of Minnesota is to support and guide Minnesota youth in the healthy development of being, belonging and becoming. This requires a focus on wholeness and wellness, and seeing Minnesota youth as “at promise” rather than “at risk.” Minnesota youth can achieve health and well-being when they have the following:



Being, Belonging, Becoming



Recommendations for Action

These recommendations for action provide the means to build a nurturing and supportive environment for all teens in Minnesota. They focus on:

- **building** the capacity of youth by providing caring relationships, positive expectations, opportunities to participate and contribute, and support for healthy behavior;
- **developing** a comprehensive set of resources that address adolescent health issues;
- **strengthening** the infrastructure of resources that support healthy youth, families and communities.

The action steps following each recommendation provide more detailed information on ways to act on the recommendation. These steps are intended to be implemented at a variety of different levels:

INDIVIDUAL AND FAMILY-FOCUSED ACTIONS that change the knowledge, attitudes, beliefs, skills, practices and behaviors among individuals, either singly or in families, classes or groups.

COMMUNITY-FOCUSED ACTIONS that change community norms, attitudes, practices and behaviors among a population-of-interest (e.g., target group).

SYSTEMS-FOCUSED ACTIONS that change organizations, policies, laws, and structures.



Recommendation

1

Change society's view of adolescents to see youth as resources to be nurtured rather than as problems to be fixed

The goal of this recommendation is to develop a positive view of adolescents among the general public. The action steps promote a view of adolescence focused on the strength and capacity of youth. This view will contribute to an environment that nurtures the health and well-being of Minnesota adolescents.

Recommendation

2

Educate adults about adolescent health and development

The goal of this recommendation is to increase adult knowledge and skills about adolescence in order to strengthen their capacity to support healthy youth. The action steps focus on training both adults who work formally and informally with teens, and adults who influence policy and funding decisions.

Recommendation

3

Routinely partner with adolescents to address the issues that affect their health and development

The goal of this recommendation is to engage youth authentically in addressing their issues. Partnership with youth increases the effectiveness of actions because teens understand youth issues in ways that adults do not. It also provides opportunity for youth to be involved in meaningful roles in their communities. The action steps strive to engage the insight, creative ideas, enthusiasm and commitment of adolescents in all areas of adolescent health and well-being.

Recommendation

4

Build the capacity of families to support healthy adolescents

The family plays a significant role in nurturing the health and well-being of teens. The goal of this recommendation is to support strong, stable families that have the capacity to nurture healthy children and adolescents. The action steps focus on strategies that reach out to parents and other caregivers to develop strong families from birth through adolescence.



Recommendation 5

Build the capacity of adolescents to become productive adults

Strengthen schools for students of all ages

Strengthen opportunities that connect teens to the world of work

The goal of this recommendation is to provide adolescents with the opportunities that build a promising future and pathways towards a successful transition into adult roles. The action steps focus on strengthening schools for students of all ages and improving opportunities that connect youth to the world of work.

Recommendation 6

Develop activities that provide youth with healthy outlets and connections to caring adults

Develop a wide variety of recreational activities for teens

Develop opportunities for teens to give back to their community

Develop opportunities for adults to build supportive relationships with youth, especially those who are struggling

The goal of this recommendation is to involve young people in activities that provide opportunity for:

- 1) healthy experimentation;
- 2) development of critical social skills;
- 3) connections to caring adults;
- 4) involvement in meaningful activities within the community; and
- 5) experience of success.

The action steps focus on opportunities for recreation, community service and civic engagement.

They include activities that connect youth with supportive adults.



Recommendation 7

Improve the responsiveness of physical and mental health care services to adolescent health needs

Strengthen health care services for adolescents and their families

Improve mental health services for adolescents

The goal of this recommendation is to strengthen the health care system to better meet the mental and physical health needs of adolescents. The action steps focus on access to services, increasing the capacity of health care providers to effectively address adolescent health needs, and providing services confidentially while balancing the need to reach out to parents of teens.

Recommendation 8

Use strategies that are effective in meeting the needs of Minnesota adolescents

Increase the responsiveness of youth programs to the cultural and ethnic diversity of Minnesota youth

Promote the use of “best practices and promising strategies” to build the capacities of all Minnesota youth

The goal of this recommendation is to promote use of actions proven effective to meet the needs of youth. The action steps focus on improving the “fit” between a diverse group of Minnesota teens and the strategies used to address their health needs. They focus on increasing the use of information from research and program evaluation to guide decisions on adolescent health activities, programs and services.



Recommendation 9

Strengthen the infrastructure of adolescent health resources in Minnesota

Develop commitment to a unified adolescent health agenda focused on building the capacities of all Minnesota youth

Strengthen the connections and relationships between organizations that address adolescent health and healthy development

Improve data on adolescent health and development

Strengthen the evaluation of adolescent health and healthy development activities

Strengthen funding for effective adolescent health and healthy development activities

The goal of this recommendation is to ensure that Minnesota has a structure that supports a comprehensive network of adolescent health resources. These actions steps focus on:

- 1) strengthening commitment to a common adolescent health agenda;
- 2) building relationships between adolescent-focused agencies at the state and local levels;
- 3) strengthening adolescent health data and program evaluation; and
- 4) developing stable funding.

Together, these actions move Minnesota from systems that foster a piecemeal approach to adolescent health to one that is coordinated and comprehensive.

Recommendation 10

Address the social conditions that affect the health of youth, especially racism

The goal of this recommendation is to improve the social conditions that negatively affect the health and well-being of youth and their families. These action steps are based on an understanding that the “fundamental conditions and resources for health are peace, shelter, education, food, income, a stable ecosystem, sustainable resources, social justice and equity.”¹⁴



Resources for Action

Addressing adolescent health issues is a complex endeavor, one that requires sharing resources and expertise across communities. While it is often overwhelming to put effective strategies in place, there is a vast array of resources available to help in planning, implementing and evaluating these strategies. The following is an abbreviated list of resources that touch on aspects of adolescent health and development.

Center for 4-H Youth Development

This is the largest youth organization in Minnesota, one focused on youth development. 4-H is a part of the University of Minnesota Extension Services, an educational outreach arm of the University with offices in every county of the state. It includes a wide variety of activities and programs for youth, including a Minnesota Multicultural Youth Corps which seeks to educate youth about cultural issues and diversity, and helps build relationships among its participants.

University of Minnesota

University Gateway
200 Oak Street Southeast, Suite 270B
Minneapolis, MN 55455
(612) 624-2116 or (800) 444-4238
www.fourh.umn.edu

Center for Youth Development and Policy Research (CYD)

This organization is dedicated to contributing to better futures for all youth, particularly disadvantaged youth in the United States. Its goal is to transform concern about youth problems into public and private commitment to youth development. It produces a series of papers on youth risk and development available from their website or ordered in print copy. Topics include violence prevention, drug abuse and building supportive communities for youth.

Center for Youth Development & Policy Research

Academy for Educational Development
1825 Connecticut Avenue Northwest, Suite 700
Washington D.C. 20009
(202) 884-8267
www.aed.org/us/cyd

Healthy Youth Funding Database

A website that provides access to a database of information about funding resources that support school health and adolescent health programs. It includes information on federal and private funding and is updated frequently and easy to use. It provides links to the website of funders as they become available.

Centers for Disease Control and Prevention

Division of Adolescent and School Health (DASH)
4770 Buford Highway, N.E.
Atlanta, GA 30341-3724
(770) 488-3168
www.cdc.gov/nccdphd/dash/funding.htm

Konopka Institute for Best Practices in Adolescent Health

The Konopka Institute is a special initiative of the Schools of Medicine, Nursing and Public Health at the University of Minnesota. Their mission is to promote the adoption and adaptation of strategies, policies and systems that show the greatest promise of supporting healthy youth development. This is done through 1) dissemination of cutting edge information on a range of adolescent health-related issues; 2) convening and creating opportunities for discussion around specific policy, programmatic or systems issues; 3) education about adolescent health best practices and tools to adapt these practices for application at state and local levels; and 4) translating research into everyday language and in formats accessible to a wide variety of audiences. Their publications include *Growing absolutely fantastic youth: A guide to best practices in healthy youth development* and *Best Bet* policy briefs.

University of Minnesota

University Gateway
200 Oak Street SE, Suite 260
Minneapolis, MN 55455-2002
(612) 625-7137
www.allaboutkids.umn.edu/konopka/

National Adolescent Health Information Center

An organization that disseminates a wide array of practical information about adolescent health that is grounded in research.

National Adolescent Health Information Center

3333 California Street, Box 0503
San Francisco, CA 94143
(415) 502-4856
<http://youth.ucsf.edu/nahic>

Strategies for public health: A compendium of ideas, experiences, and research from Minnesota's public health professionals

A guide to best practices and promising strategies to address a wide range of health concerns, including adolescent health issues.

Minnesota Department of Health

Health Systems Development Section
P.O. Box 64975
St. Paul, MN 55164-0975
(651) 296-9661
www.health.state.mn.us/divs/chs/phs/phs.html

Urban Institute

A non-profit policy research organization whose goals are to sharpen thinking about society's problems and efforts to solve them, improve government decisions and their implementation, and increase citizens' awareness about important public choices. As part of their work, they have developed a number of adolescent-focused publications such as *Teen risk-taking: Promising prevention programs and approaches; Why should we invest in adolescents?; Helping at-risk youth: Lessons from community-based initiatives*. Many of these reports are available on-line.

Urban Institute

2100 M Street NW
Washington D.C. 20037
(202) 261-5709
www.urban.org

What's Up? Adolescent Health Fact Sheets

Factsheets on a wide variety of adolescent health issues including drug and alcohol use, tobacco use, eating disorders, nutrition, physical activity, physical growth and development, emotional growth and development, STDs, teen pregnancy, sexual behavior, intentional and unintentional injury, sexual identity, suicide, and talking to your teen. Available on-line or in print version (the order form is available on-line). Up to 25 copies of each fact sheet are available at no cost.

Washington State Department of Health

P.O. Box 47890

Olympia, WA 98504-7890

www.doh.wa.gov/cfh/adolescenthealth.htm



Being, Belonging, Becoming



Now is the time for



The health and well-being of Minnesota youth is in our hands. *Being, Belonging, Becoming: Minnesota's Adolescent Health Action Plan* provides an array of tools for use by advocates to strengthen Minnesota's investment in healthy youth. While the magnitude of work is great, each of us has an important role to play. Take time to think about how the information in the Action Plan fits with your work, whether personal or professional. Then decide on what area or areas you can take action. No action is too small!



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Minnesota Department of Health
PO Box 64882
St. Paul, MN 55164-0882

651-215-8960 Phone
651-215-8990 TDD/TTY
800-627-3529 Minnesota Relay Service

adolescenthealth@health.state.mn.us
www.health.state.mn.us

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being, belonging, becoming



Minnesota Department of Health
PO Box 64882 · St. Paul, MN 55164-0882

651-215-8960 Phone
651-215-8990 TDD/TTY
800-627-3529 Minnesota Relay Service