

Healthy Choices and Changes

“Perfection of means and confusion of goals seem, in my opinion, to characterize our age.”

—Albert Einstein
Out of My Later Years, 1950

Einstein’s observation was made over a half century ago, yet it still holds true today: the search for precision and “excellence” in the means often causes us to lose sight of the ultimate goal. The resulting confusion can claim its toll on public health initiatives, no matter how well intentioned. In the case of adolescent health, program developers must remember that while different behavior change models might represent effective *means* to the adoption of health-promoting lifestyles, the ultimate goal is *positive, sustainable behavioral change which enables young people to become actors of their own change and achieve their self-set goals*. As expressed in the Ottawa Charter, health promotion is a means to increase the control people have over the determinants of their own health by increasing self-care capacities, which are the decisions and actions individuals take regarding their health.

Youth: Choices and Change provides a variety of theoretical frameworks within which health professionals and others dedicated to improving the health of adolescents and youth may design mechanisms to stimulate the development of healthy lifestyle choices. By strengthening youths’ decision-making capacity and encouraging them to take advantage of enhanced social support systems within the community, the impetus for behavioral change receives both immediate and ongoing positive reinforcement.

From a broad health promotion perspective, encouraging adolescents to adopt and maintain healthy lifestyles and behaviors is crucial to reducing the burden of chronic diseases in Latin America and the Caribbean countries, given that many of the unhealthy habits that later produce morbidity and mortality in adults are acquired during the period of

adolescence (PAHO 1998). At the same time, as we will see in Chapter One, young people in this region of the world represent a growing segment of the overall population, and therefore their health and development will be a key element for the region's socioeconomic and political progress now and in the coming years (PAHO 2000a).

In today's world of sophisticated targeting of young people by the fast food, tobacco, and alcohol industries; nearly universal access to television; the glamorization of sexual experimentation; and peer pressure, youth are inundated with messages that both subtly and blatantly push health-compromising activities. The social pressure to adopt the risky lifestyles depicted in commercial advertising is enormous. In this sense, promoting the importance of healthy lifestyles and environments must compete with other messages that young people often find more attractive. At the same time, evidence shows that while public health interventions can successfully increase adolescent and youths' knowledge about health risks, this awareness is not, in and of itself, always enough to change unhealthy behaviors.

This means that while young people may have access to information and may even know that certain behaviors and practices are unsafe, this is not sufficient to persuade them to change their actions. Instead, youth must be motivated to develop the skills and assets necessary to prepare for the coming years of change through a sense of positive empowerment and the personal conviction that they have the capacity to make conscious choices about their lives, including the desirability of moving away from negative influences and situations as a means of self-preservation and enrichment.

Youth: Choices and Change has four sections. In the first, an overview is provided of adolescent lifestyles in Latin America and the Caribbean, indicating the scope of the challenge for health promotion programs and policymakers. The need to bridge the knowledge-behavior change gap is highlighted, followed by a discussion of the importance of adopting a suitable theoretical framework as the basic foundation for achieving successful and respectful interventions. The book's first section also underscores the crucial link between the different stages of adolescent development and the use of behavior change and health promotion theories and models specifically tailored to these stages, including appropriate gender and cultural background considerations. In Section One's final chapter, the authors describe the Youth: Choices and Change Model and explain why the Pan American Health Organization recommends it as an effective tool for the design of health interventions for adolescents.

The book's second section analyzes the most prominent theories and models on behavior change and health promotion in use with a developmental perspective, noting that program developers should not only consider theories and models focusing on individ-

ual change but also those which promote change at the interpersonal, community, and policy levels. The reader will find an extensive literature review of the applications of the different theories and models when encouraging the adoption and maintenance of health-promoting behaviors and the cessation of health-compromising behaviors in adolescents.

Section Three underscores the importance of understanding the different developmental processes through which adolescents will pass and how this progression must serve as the context within which any given theoretical framework will be applied. The authors note that while many of the classical behavior change and health promotion theories and models described in the previous section hold great promise, they can only achieve the desired results if program designers understand the changing needs and wants of adolescents at different stages of development and tailor interventions and goals accordingly. PAHO considers the preadolescent and early adolescent age groups¹ to be the most overlooked by adolescent health programs and emphasizes the importance of promoting the adoption and maintenance of healthy behaviors beginning with preadolescence, instead of waiting until later, when health-compromising behaviors have already begun and may be well entrenched, thus becoming more difficult to change. In this section's closing chapters, PAHO presents a series of developmentally appropriate goals to be considered when planning health promotion and prevention programs for these two age groups.

The fourth and final section synthesizes the contents of the previous three sections and highlights the unique contributions of this book, particularly its emphasis on early intervention during the preadolescent and early adolescent years and on the incorporation of a growth and developmental perspective in the creation of adolescent health promotion programs. It also offers insight into the current socioeconomic challenges and advantages facing youth in Latin America and the Caribbean and presents a review of international commitments undertaken by the member countries of the United Nations designed to strengthen the health and development of young people in the Region of the Americas. The section concludes with a series of recommendations for improving health and development opportunities for this group over the next decade.

PAHO's Child and Adolescent Health Unit presents this book in the hope that it will stimulate and further refine dialogue—in the academic and public health communities, on national political agendas, and beyond—about the need to promote and protect the health and well-being of young people everywhere, as today's precious resource and a solid investment in tomorrow's sustained socioeconomic development.

¹ Preadolescence refers to girls ages 9–12 and boys ages 10–13; early adolescence refers to ages 12–14 and 13–15, respectively.