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## ADOLESCENT AND YOUTH ACCOUNTABILITY BRIEF

Audience: Stakeholders interested in accountability for adolescent health, and in the meaningful engagement of adolescents and youths in health-related programmes and policies.

### INTRODUCTION

Everyone is entitled to enjoy the highest attainable standard of physical and mental health (the right to health).<sup>1</sup> This includes adolescents (aged 10-19) and youths (aged 15-24). However, young people (aged 10-24) have been largely left behind in terms of health and development, because they have been overlooked as a distinct group, and most programmes and policies have simply included them either with children or with adults. Adolescents and youths have enjoyed fewer health improvements than other age groups.<sup>2</sup> An estimated 1.2 million adolescents died

in 2015, mostly from preventable or treatable causes.<sup>3</sup> Improving young people's health can also improve adult health because 70% of premature deaths among adults are linked to unhealthy behaviours adopted during adolescence.<sup>4</sup> Investments in young people are game changers – they result in triple dividends: healthier adolescents today, healthier adults tomorrow and healthier future generations.<sup>5</sup> A healthy, well-educated young person who has maximized her/his potential can transform society for the better.<sup>6</sup>



It is now recognized that more work is needed to improve the health and well-being of young people, especially adolescents. The [Sustainable Development Goals](#) (SDGs), adopted in 2015, highlight the importance of addressing adolescent and youth issues.<sup>7</sup> Adolescents are a target group for SDGs 1-12 and 16.<sup>8</sup> The updated [Global Strategy on Women's, Children's and Adolescents' Health \(2016-2030\)](#) (*Global Strategy*) explicitly includes adolescent health as a new focus area. It calls for improvements in programmes and policies, as well as increased funding to ensure that young people survive, thrive and transform the world.<sup>9</sup> Aligned with the *Global Strategy*, the Global Accelerated Action for the Health of Adolescents Implementation Guidance document (AA-HA!) shows countries how to plan, implement and monitor progress towards improving adolescent health.<sup>10</sup> Young people have been meaningfully engaged in developing the guidance, and countries are encouraged to involve them and other key stakeholders in its implementation.<sup>11</sup>

Positive commitments have already made to improve young people's health, but major challenges remain. There is a lack of critical data, including age- and sex-disaggregated data, on adolescent health and well-being. There is also a lack of systemic, meaningful

engagement with young people in the design, implementation and monitoring of youth-related policies and programmes at the national, regional and global levels. Meaningful engagement\* of young people is critical because it “strengthens young people’s abilities to meet their own needs, prevents and reduces vulnerabilities, [and] promotes ownership and sustainability of interventions”, as well as building trust and social capital between young people, programme implementers and policy-makers.<sup>12</sup> Moreover, few accountability mechanisms focus on tracking progress on adolescent health and well-being.

In recognizing the importance of improving adolescent health, and of meaningfully engaging adolescents and youths in the entire development-to-monitoring cycle of health-related programmes and policies, this brief aims to strengthen accountability mechanisms on adolescent health by increasing interested stakeholders’

- Understanding of accountability, within the framework of the SDGs, the updated *Global Strategy* and AA-HA!, through the *Global Strategy's Unified Accountability Framework*; and
- Knowledge of accountability mechanisms and interest in working with young people in accountability processes through case studies.

\* Based on discussions with PMNCH's Adolescent & Youth Constituency, meaningful engagement can be defined as the concept and practice of engaging young people in all decisions that affect their lives, creating supportive opportunities for them to collaborate with other partners to design, implement, monitor and evaluate policies and programmes that seek to fulfil their fundamental rights. This includes promoting youth leadership to plan and facilitate initiatives and activities, and to assist in developing skills that will allow young people to better advocate on their own behalf and create programmes and activities that will engage other young people to become active leaders.

## WHAT IS ACCOUNTABILITY?

Accountability is the process of ensuring that governments and other stakeholders fulfil their obligations and commitments. It can have both a preventive and a corrective function. It aims to identify which actions and policies are working, and which need to be amended or revised.<sup>13</sup> Accountability involves three main principles.

- **Responsibility** requires that those in positions of authority (the government and other key stakeholders) act according to clearly defined obligations and standards, enabling their actions to be assessed transparently and objectively.
- **Answerability** requires responsible parties, officials and institutions to provide reasonable justifications for their actions and decisions to those affected by them, particularly the general public (including young people), voters who invest public officials with authority, and institutions mandated to provide oversight.
- **Enforceability** requires institutions and other stakeholders to establish mechanisms that monitor the compliance of duty-bearers with established standards, impose sanctions on those who do not comply, and ensure that appropriate corrective and remedial action is taken when required.<sup>14</sup>



## How can governments and other stakeholders be held accountable for their commitments under the updated *Global Strategy*?

The main accountability mechanism for tracking progress towards the updated *Global Strategy* is the Unified Accountability Framework (see figure below). The Framework is based on “a cyclical process aimed at learning and continuous improvement and involving three principal stages: monitor, review and act”.<sup>15</sup> Accountability starts at country level, and focuses on governments’ responsibility towards their people, as well as to the regional and global communities. It is important to note that, although accountability starts at country level, all stakeholders are obligated to fulfil the commitments that they make.

Although governments and other stakeholders are responsible for leading actions to improve health, young people should be given the platform, opportunity and resources to play their proper part in those actions. Adolescents and youths should meaningfully engage with the development of programming and policy that affects their health and well-being. They should also watch over the actions of governments and other actors, holding them accountable for their obligations and commitments through independent accountability mechanisms (for example, health sector reviews and human rights reviews).

## The *Global Strategy*’s Unified Accountability Framework<sup>16</sup>



## STAGES OF ACCOUNTABILITY: MONITOR, REVIEW AND ACT



### I. Monitor:

Monitoring the implementation of national plans and strategies requires the collection of data that measure progress towards the *Global*

*Strategy's* objectives and commitments. Data are the backbone of accountability. They provide the critical ingredients for assessing what is working and what should be improved. Data can be collected on health status (mortality and incidence of disease), expenditure of resources (financial audits), progress towards human rights (laws and policies) and

implementation of planned activities (inputs, processes and outputs). Data can be quantitative (e.g. numerical indicators) or qualitative (e.g. feedback through consultations and focus groups). There are still important gaps in good quality data on young people. Often they are incorporated into health programmes for either children or adults: there is rarely a specific focus on adolescents or youths. Moreover, most data are not adequately disaggregated. Increasing data disaggregation would, in addition to generating better data on adolescents, also provide insights into differences relating to sex, geographic location, and economic and social status, among other factors. There is also a lack of data on marginalized young people, such as young key populations<sup>17</sup> and those in humanitarian settings, who are not located in traditional data collection sites (households, schools and health facilities). Data collection through social accountability mechanisms, which rely on citizen participation and engagement, should also help raise awareness of the need for greater attention to improving the health of adolescents and youths.

#### **The Indicator and Monitoring Framework for the *Global Strategy for Women's, Children's and Adolescents' Health (2016-2030)***

The international community has identified 16 key indicators that give an essential snapshot of progress towards the *Global Strategy*. Of those, the following indicators focus specifically on young people's health and welfare:

- Adolescent mortality rate;
- Adolescent birth rate;
- Proportion of children and young people in schools with proficiency in reading and mathematics; and
- Proportion of women, children and adolescents subjected to violence.

A broader list of 60 indicators was also compiled, drawn from relevant SDG-related indicators and from established global initiatives for reproductive, maternal, newborn, child and adolescent health.<sup>18</sup> These indicators include other key pieces of data concerning adolescent and youth health that should also be collected. For more information on this list, as well as information on other adolescent and youth-related indicators that need to be developed, please see the *Global Strategy's Indicator and Monitoring Framework*.<sup>19</sup>

In order to obtain more and better data on young people, all relevant indicators should be disaggregated by age and sex, with an emphasis on ensuring that relevant data are also collected on young adolescents (ages 10-14).<sup>20</sup>

#### ***How can young people meaningfully engage in monitoring accountability?***

Young people should be meaningfully engaged in policies and programmes that affect their health, from design, to implementation, to monitoring and evaluation. This includes providing young people with opportunities to engage in accountability. For example, young people can work with service providers in their community to help collect data on adolescents and youths. These data can relate to a range of topics, from the quality and type of services provided, to the treatment of and attitude towards young people seeking those services. These data, in turn, will help service providers tailor their work better. While governments should ensure that data are disaggregated, this is often not achieved. Young people can advocate for data disaggregation, as well as publicizing other critical gaps in data on adolescents and youths (e.g. on those in vulnerable situations).

## CASE STUDY #1

### Monitor and Review > Scorecards on improving sexual and reproductive health services

In Malawi, CARE has developed Community Score Cards (CSC) to “engage adolescents in the planning, monitoring, and evaluation of service delivery and in enacting desired change within their own communities”.<sup>21</sup> The CSC process allows adolescents to speak about their concerns and the challenges they face in accessing sexual and reproductive health services. Based on the identified challenges, measurable indicators are developed, which are then verified and scored to produce a Score Card. The Score Card is shared with adolescents and their communities, to prompt discussion on possible solutions. These solutions are jointly implemented and monitored by young people, service providers and the wider community.<sup>22</sup>

Find out more here:

[http://coalitionforadolescentgirls.org/wp-content/uploads/2015/12/CAGPartnersandAlliesToolKit\\_10.compressed.pdf](http://coalitionforadolescentgirls.org/wp-content/uploads/2015/12/CAGPartnersandAlliesToolKit_10.compressed.pdf) (page 20)



## II. Review

Reviewing country progress, including the implementation of national plans and strategies, involves analysing whether governments and other stakeholders are fulfilling their commitments to improve the

health of young people. First, this involves verifying the data collected during the “monitor” stage, by ensuring that they are credible and of good quality. The data should then form the basis of an independent analysis of the country’s work on its commitments. The results of that analysis can be presented in various ways, for example in reports or scorecards.

However, quantitative data alone are not sufficient to produce a meaningful review. Qualitative data, collected through mechanisms such as citizens’ hearings, human rights reviews, court judgements and national health sector reviews, are also necessary for the review of a country’s progress. While there are global and regional mechanisms for review, such as the [UN treaty bodies](#), the [Independent Accountability Panel](#)<sup>23</sup> and the [African Union Peer Review mechanism](#), this core accountability function must be exercised at the country level.

### **How can young people meaningfully engage in reviewing accountability?**

Whenever possible, governments and other key stakeholders should meaningfully engage adolescents and youths in government-led reviews of data on young people and health. Communities should also support young leaders, and broadcast their voices. For example, within a community, young people can call for, and help organize, citizens’ hearings on health and access to services. In addition, they can engage in reviews on relevant topics, such as progress towards the SDGs (reducing poverty, improving health, achieving gender equality and access to clean water, removing inequalities) and towards realizing human rights, ensuring that young people’s health issues are highlighted and addressed.

## CASE STUDY #2

### Monitor and Review > Young people’s engagement in accountability framework for the the Eastern and Southern Africa Commitment to sexual and reproductive health and education

Youth-led and youth-focused civil society organizations, through the African Youth and Adolescents Network on Population and Development (AfriYAN), have been working in partnership with the Regional CSOs platform in Eastern and Southern Africa (RAANGO) on the development and implementation of an accountability framework for the ministerial commitment on comprehensive sexuality education and sexual and reproductive health services for adolescents and young people in Eastern and Southern African (the ESA Commitment). Twenty ministries of health and education endorsed the ESA Commitment in 2013 at the 17th International Conference on AIDS and Sexually Transmitted Infections in Africa. The Commitment sets out time-bound actions and targets that were agreed upon by countries, and is expected to pave the way for actions that will scale up delivery of sexuality education and related health services for young people.<sup>24</sup> To ensure progress towards the Commitment’s targets, civil society has established an engagement and accountability strategy, recognizing the important role of civil society in holding governments and their partners accountable. The accountability framework provides for the monitoring of, and advocacy for, successful implementation of the ESA Commitment, and aims to ensure that young people’s voices are heard in those processes.

Find out more here:

<http://youngpeopletoday.net/wp-content/uploads/2014/08/ESA-Commitment-FINAL-Affirmed-on-7th-December.pdf>



### III. Act

Acting is the link that completes the circle of accountability. It requires governments and other stakeholders to respond to, and if possible resolve, any gaps and challenges identified during the “monitor” and “review” phases. This includes

taking remedial action to address existing shortcomings, as well as preventive action to avoid any future challenges anticipated. For example, more work is needed to ensure that young people are able to access critical health information and services, including sexual and reproductive health services.

Guidance for country actions is provided by the recommendations and analyses issued by independent review mechanisms. If necessary, countries can obtain support from technical and funding agencies to implement follow-up actions. These agencies include, but are not limited to: expert civil society groups and the **H6** (UNFPA, UNAIDS, UNICEF, UN Women, WHO and the World Bank) for technical support; and the **Global Fund to Fight AIDS, Tuberculosis and Malaria**, the **Global Financing Facility** in support of *Every Woman, Every Child*, and **GAVI: The Vaccine Alliance** for financial support.

#### ***How can young people meaningfully engage in acting to ensure accountability?***

Governments should give young people the opportunity to engage meaningfully in the processes for responding to the recommendations from the “monitor” and “review” phases. Their engagement should be sustainable, and not merely tokenistic. For example, if a government decides to strengthen its workforce and health systems, young people should have a meaningful voice in how to achieve this so as to facilitate their access to information and services. If this involves re-allocating or increasing budgets for health, young people should provide inputs into the range of and demand for health-care services. Young people can also support actions such as training for health-care providers to provide more youth-friendly services.

### CASE STUDY #3

#### **Monitor, Review and Act > Youth-led accountability in Uganda**

Restless Development, along with UNICEF, supported youth-led accountability that held decision-makers accountable for their commitments on health, child marriage and employment. The project worked with 40 young leaders and generated community-level data across four districts in Uganda. It uses UNICEF’s U-Report system, a text message-based feedback platform that allows young people to share their opinions on a variety of issues. The information generated by U-Report identified the challenges faced by young people in their communities. The data and analyses were shared and discussed at community consultations. Young people then shared the outcomes of the community consultations with district and subnational-level decision-makers. The U-Report and community consultations facilitated the discussion of how leaders, community members and young people could address the identified challenges. Within six months, the initiative had produced impressive results, including the development of an advocacy programme addressing concerns relating to early marriage in Napak province, and an improvement in decision-makers’ perceptions of young people as development and community leaders.

Find out more here:

[https://social.un.org/youthyear/docs/policy\\_guide.pdf](https://social.un.org/youthyear/docs/policy_guide.pdf) (page 18)

### CASE STUDY #4

#### **Act > Participatory Budgeting in Argentina**

The Municipality of Rosario conducts annual participatory youth budgeting, engaging young people across six districts to decide on budget allocations for youth services. Young people identify the priorities within their communities and elect a youth representative to speak on these issues. The delegates form youth councils, which meet regularly for several months, developing youth-oriented projects based on community priorities. This exercise allows the identification of gaps in services and proposals for actions to address them.<sup>25</sup>

Find out more here: [https://social.un.org/youthyear/docs/policy\\_guide.pdf](https://social.un.org/youthyear/docs/policy_guide.pdf) (page 22)

## RECOMMENDATIONS

### a. Address and invest in data gaps for adolescents and youths<sup>26</sup>

- ▶ **Ministries, health facilities and other institutions** should collect critical and comprehensive data that are consistently disaggregated (by age and gender) and support investments in the development of new data indicators on adolescents and youths.
- ▶ **Young people** and allies should advocate for better data and feedback on health-related issues to inform policies and programmes that affect their lives. Information can be collected through traditional data collection channels (e.g. surveys and health facility reviews), or by innovative methods (e.g. social media, m-health and online), or through social accountability mechanisms. Adolescents and youths, with the support of all stakeholders, should also work to develop, collect and analyse the data.

### b. Formalize and increase the meaningful engagement of adolescents and youths<sup>27</sup>

- ▶ **Governments and other stakeholders** should formalize and increase the meaningful engagement of adolescents and youths in accountability processes, from review to action. Governments can leverage the existing networks of national, regional and global youth organizations, and should support the capacity strengthening of new youth-led bodies. Young people should be involved in formal processes (e.g. the national review process for the *Global Strategy* and the SDGs) as well as in subnational and community-level reviews and accountability mechanisms (e.g. establishing dialogues and partnerships between service providers and young people within their communities). Adolescents and youths should also be engaged in proactive, remedial or other actions taken as a result of those reviews to improve young people's health.
- ▶ **Young people** and their allies should campaign for formalized and increased meaningful engagement in accountability processes within their communities and countries. They should be involved in the development, implementation and subsequent review of the policies and programmes, so that these result in adolescent- and youth-friendly information and services.



- c. As far as possible, **governments and young people** should ensure that their accountability work at national and subnational levels is in line with the global and regional accountability mechanisms. This is important in order to track key issues relating to data, rights and financing/funding.<sup>28</sup> Adolescents and youths interested in linking their work to country-, regional- and global-level work through the Partnership for Maternal, Newborn and Child Health's Adolescent & Youth Constituency are invited to send an email to [pmnchayc@gmail.com](mailto:pmnchayc@gmail.com).

## USEFUL RESOURCES:

- *Global Strategy* monitoring readiness report <http://www.who.int/life-course/partners/global-strategy/gc-monitoring-readiness-report.pdf?ua=1>
- *Global Strategy* Indicator and Monitoring Framework <http://www.who.int/life-course/publications/gc-Indicator-and-monitoring-framework.pdf?ua=1>
- Knowledge Summary on Adolescents <http://www.who.int/pmnch/knowledge/publications/summaries/ks35/en/>
- Second decade report [http://apps.who.int/adolescent/second-decade/files/1612\\_MNCAH\\_HWA\\_Executive\\_Summary.pdf](http://apps.who.int/adolescent/second-decade/files/1612_MNCAH_HWA_Executive_Summary.pdf)
- *Global Strategy for Women's, Children's and Adolescents' Health (2016-2030)* <http://www.everywomaneverychild.org/global-strategy-2>
- Youth engagement in development (USAID-funded review) [http://www.youtheconomicopportunities.org/sites/default/files/uploads/resource/USAID\\_Youth%20Engagement\\_FINAL%20External.pdf](http://www.youtheconomicopportunities.org/sites/default/files/uploads/resource/USAID_Youth%20Engagement_FINAL%20External.pdf)
- Making the money work for young people: a participation tool for the Global Fund to Fight AIDS, Tuberculosis and Malaria:
  - Part 1 - [http://www.unaids.org/sites/default/files/media\\_asset/JC2661\\_part1\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/JC2661_part1_en.pdf)
  - Part 2 - [http://www.unaids.org/sites/default/files/media\\_asset/JC2661\\_part2\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/JC2661_part2_en.pdf)
- Accountability in the 2015 *Global Strategy for Women's, Children's and Adolescents' Health*, BMJ article: <http://www.bmj.com/content/351/bmj.h4248> (see also all the articles in this collection: <http://www.bmj.com/content/women%E2%80%99s-children%E2%80%99s-and-adolescents%E2%80%99-health-0>)
- Lancet Commission on adolescent health: <http://www.thelancet.com/commissions/adolescent-health-and-wellbeing>

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15. United Nations Commission on Information and Accountability for Women's and Children's Health definition. Secondary source: <http://globalstrategy.everywomaneverychild.org/chapter5/> (original source is Commission's report, available at [http://www.who.int/topics/millennium\\_development\\_goals/accountability\\_commission/Commission\\_Report\\_advance\\_copy.pdf](http://www.who.int/topics/millennium_development_goals/accountability_commission/Commission_Report_advance_copy.pdf))
16. *Every Woman Every Child*. Unified Accountability Framework: Supporting country-led efforts with the *Global Strategy on Women's, Children's and Adolescents' Health*. 2016, available at <http://www.who.int/pmnch/activities/accountability/framework.pdf?ua=1>
17. Key populations, or key populations at higher risk, are groups of people who are more likely to be exposed to HIV or to transmit it. Their engagement is critical to a successful HIV response. In all countries, key populations include people living with HIV. In most settings, men who have sex with men, transgender people, people who inject drugs and sex workers and their clients are at higher risk of exposure to HIV than other groups. However, each country should define the specific populations that are most at risk, based on the epidemiological and social context. UNAIDS 2016–2021 Strategy: On the fast track to end AIDS (2015).
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