

International Journal of Noncommunicable Diseases

An Official Publication of World NCD Federation Volume 3 / Issue 2 / April-June 2018 www.ijncd.org

Perspective

Young people and noncommunicable diseases - vulnerable to disease, vital for change

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ABSTRACT

Youth have a right to health, but that is not adequately reflected in our societies and health systems. In fact, for cancer, diabetes, chronic lung disease, and cardiovascular diseases - so-called noncommunicable diseases (NCDs) - more than two-thirds of preventable adult deaths are associated with behavior that started in adolescence. Many young people are well aware of how drastically NCDs will affect their generation in the current system and have taken the challenge to change the discourse for a healthier global population. Yet, youth voices are often dismissed or tokenized in political conversations. This is despite the many examples of youth making positive change at all levels of society. This paper provides an overview of the challenges and emerging youth-driven actions to address NCDs at local, national, and global levels.

Keywords: Adolescence, decision-making, health policy, noncommunicable diseases, youth

Introduction

Young people have a right to the highest attainable standard of health and well-being.^[1-3] They are our future in which we invest many hopes. Yet in reality, appropriate treatment, protection from known risk factors and effective prevention from noncommunicable diseases (NCDs) are rarely offered by our societies or health systems.

Cancer, diabetes, chronic lung disease, and cardiovascular diseases (the main NCDs) are crucial issues for the younger generation. More than two-thirds of preventable adult NCD deaths are associated with risk behavior that started in adolescence. The risk of suffering from these diseases is increased by tobacco use, alcohol abuse, unhealthy diets, and physical inactivity. Globally, >150 million young people use tobacco, 84% and 78% of adolescent girls and boys are physically inactive, 11.7% of adolescents partake in binge drinking, and 41 million children under 5 years of age are overweight or obese. [5-8]

Access this article online	
Website:	Quick Response Code
www.ijncd.org	
DOI: 10.4103/jncd.jncd_7_18	

In the last 50 years of the 21st century, overall mortality of children and adolescents decreased dramatically worldwide. The world has seen large investments in maternal, newborn, and child health causing great improvements for early years of life, but a low global investment in NCDs and injuries.^[9] As a consequence, adolescents benefitted less than younger children from the epidemiological transition. In 1955, all-cause mortality was remarkably higher in 1–4-year-old children compared to older children and adolescents for both males and females. Surprisingly, in 2004, the mortality of young men aged 15–24 years was two to three times higher than that of boys aged 1–4 years.^[10] Adolescents are a neglected generation that have mistakenly been perceived as healthy for the past 60 years.

Adolescence is a unique phase of human development, in which the rapid biological and psychosocial changes affect

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How to cite this article: Hauerslev M, Allen L. Young people and noncommunicable diseases – vulnerable to disease, vital for change. Int J Non-Commun Dis 2018:3:45-8.

every aspect of the adolescent experience and lay the foundations for the rest of their lives. Adolescent brains have capacity to change and adapt rapidly, which provides a chance to establish healthy habits, yet it also serves as a period of vulnerability to high-risk behavior, and in fact, risk-behavior and experimentation in this age group is understood as normative rather than pathological. Unsurprisingly, tobacco and alcohol use often start in adolescence and lead to premature death caused by NCDs later in life. To ensure effective prevention, countries must adopt policies that protect this vulnerable group and create health systems that offer services tailored to adolescents.

Youth-Driven Action on Noncommunicable Diseases

Young people are aware of how drastically NCDs are already and will be affecting their generation in the future, especially if action is inadequate. However, a large majority of individuals with preexisting knowledge and interest in NCDs and youth believe that young voices in the NCD dialogues have been tokenized and frequently dismissed. This sentiment was expressed within a "community of practice" focused on youth and NCDs, convened by the World Health Organization (WHO) Global Coordination Mechanism for NCD (GCM/NCD).[12] In different spheres of society, young people are already changing the future of NCDs; through research, participation in traditional and social media, efforts at the community level, civil society, and advocacy work as well as attempts at the decision-making level. Dedicated youth-oriented NCD organizations have undertaken particularly innovative and impactful work to change the global NCD discourse.

In March 2017, the International Federation of Medical Students' Associations (IFMSA) gathered 800 medical students for an NCD youth caucus, co-hosted with WHO GCM/NCD. Surrounded by global experts, medical students debated different aspects of NCDs, linkages to other political agendas and expressed their envisioned actions required for a better future of NCDs through the adopted the Budva Youth Declaration: A Call to Action on NCDs [Table 1].[13] A survey showed that 75% of medical students from 120 countries thought their NCD-related medical education was insufficient. As youth advocates, they called to "ensure voices of young people are heard at all levels of society, recognizing that young people will be living in a world informed by decisions made today."[13] Facilitated by IFMSA's official access to UN meetings, the national medical student associations' access to national ministries as well as deans of medical faculties, medical

students are now advocating from the local to the global level for improved NCD policies.^[13]

Other youth organizations have played crucial roles in the prevention and control of NCDs. In 2007, members of Young Professionals Chronic Disease Network (YP-CDN) used their technical expertise and diplomacy skills to successfully add statins to the WHO Essential medicines list, thus improving access to an essential group of NCD drugs worldwide.[14]

NCD Child is building national advocates by organizing regional workshops focused on developing advocacy plans for the inclusion of children and young people in national NCD plans, and providing seed grants to ensure the projects' initiation and viability.^[15]

YP in Uganda witnessed their countries only radiotherapy machine break down in April 2016, leaving patients with no access to treatment. The Ugandan National Chapter of YP-CDN ran an effective twitter campaign, which led to thousands of tweets, mentioning of the issue at global high-level events and a concrete commitment from the Minister of Health to replace the machine.^[16]

By using healthy sustainable food as a solution to beat NCDs, NCD-Free ran a 30 days campaign, where 1000 sustainable meals were served, 3000 people took part in dinner discussions about NCDs and 3 million people were reached through social media. [17]

Climate change affects health outcomes, and several of the solutions to climate change have health co-benefits. [18] Medical students of IFMSA have persistently advocated for the inclusion of health-related language in the UNFCCC agreements over the past 5 years, and successfully health is mentioned in the Paris Agreement. [19,20]

Advancing the Voice of Young People

Young people have already proven their ability to be a meaningful part of the solution for NCDs, but their voice is not routinely included in high-level decision-making. What initiatives, mechanisms, and culture changes need to take place at global, national, and local level give youth a seat at the table?

Our global leaders have already formally recognized the importance of youth participation for development on several occasions. In 1995, the international community adopted the UN World Programme of Action for Youth

and the UN resolution Policies and Programmes involving Youth from 2011 "urges Member States to promote the full and effective participation of young people and youth-led organizations in relevant decision-making processes, including in developing, implementing, and monitoring policies, programs, and activities at all times." [21,22] However, there is still a recognition that youth participation must be increased to achieve the SDGs. For example, in 2016 Ban Ki-Moon, former Secretary-General of the United Nations said "Young people are the world's greatest untapped resource. Adolescents can be a key driving force in building a future of dignity for all." [23]

Many young populations are not represented on the global stage, and the represented youth voices could be much more diverse. There are several initiatives to include young people from low- and middle-income countries and to strengthen civil society and NCD movements in those settings. Still, the youth voices are rarely from lower socioeconomic classes, and thereby not representing the people actually left behind. Persistent under-representation does nothing to reverse pervasive tokenism.

While the Major Group for Children and Youth works to safeguard meaningful participation of young people in central UN processes and the PACT promotes youth participation in human immunodeficiency virus and sexual and reproductive health and rights issues convened by UNAIDS; the WHO has no overarching formal space for youth participation. The meaningful engagement of a diverse range of youth voices in high-level global health policy seems a long way off at present.

The most recent global opportunity to engage as a young person in the NCD field is through the Next Generation Community of Practice convened by the WHO GCM/NCD. Here, participants exchange ideas and knowledge, come up with innovative approaches to increase engagement of youth in NCDs at all levels of society, identify areas for collaboration between youth organizations and across generations to address the global burden of NCDs in the context of the sustainable development agenda. ^[24] It is an important step that a UN agency has decided to focus on young people's engagement as it can set the standard for policy processes with the equal engagement of all generations. Hopefully, this move will inspire increased local and country level actions for meaningful youth participation.

Working across generations offers different challenges than many are used to tackling. As experience is highly

Table 1: Summary of the International Federation of Medical Students' Associations Budva Youth Declaration: A Call to Action on noncommunicable diseases

The Budva Youth Declaration: A Call to Action on NCDs

The IFMSA is one the world's oldest and largest student-run organizations, and represents and connects 1.3 million medical students worldwide. In the declaration, IFMSA calls for bolder measures, increased investment and greater policy coherence in 6 key areas

Protecting health in the urban environment Empowering vulnerable populations and reducing inequity Youth and NCDs Health systems for NCDs Investing in the health workforce

Financing NCD prevention and control

IFMSA - International Federation of Medical Students' Associations, NCD - Noncommunicable disease

valued in many cultures and young people by default often have less experience than their older colleagues, it can be difficult for young voices to be heard. However, experience working with young people tells us that they can be just as well-informed and knowledgeable as older generations on many topics. In addition, they offer a fresh perspective, are often tech-savvy, and may bring an element of creativity and lateral thinking.

The NCD community is uniquely positioned to become one of the frontrunners in bridging this generational divide and leading by example. Young people are significantly affected by NCDs, and they will be the generation living in the society formed by the decisions made today. To ignore their potential could be a fatal mistake.

Acknowledgment

We would like to thank Dr. Tea Collins, Louise Agersnap and Juliette Wittich for their contributions and support.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

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