

Adolescent Well-being Framework: Virtual Youth Consultation Report

November 2020

UN Major Group for Children and Youth

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Executive Summary

Background

Adolescent well-being is a growing area of policymaking, programming and research, yet there is no consensus on how it should be defined and measured. To address this, the Partnership for Maternal, Newborn & Child Health (PMNCH) recently published [‘Make Adolescent Well-being A Priority: An Urgent Call to Action’](#). As part of the Call to Action, PMNCH and the WHO are leading an initiative of the United Nations H6+ Technical Working Group on Adolescent Health and Well-Being, together with youth and youth-serving organisations, to develop a framework for defining, programming, and measuring adolescent well-being. The framework will provide the basis for developing recommendations for adolescent well-being policies and programmes. The first step in this process was the publication of definition of adolescent well-being and a conceptual framework in the JAH in September 2020.

As part of ongoing efforts to advance the Adolescent Well-being Framework (AWF), the UN Major Group for Children and Youth and the Partnership for Maternal, Newborn & Child Health organised a series of virtual consultations with young people to explore their views on how the framework could be translated into targeted, effective programming for adolescent well-being.

The objectives of the consultations

The specific objectives of the consultations were to:

1. Present and promote the Call to Action for Adolescent Well-being and its key recommendations.
2. Introduce the AWF including its definition and domains, and discuss how it can be translated into action, including:
 - a. How the AWF can reflect adolescents’ needs and be realised in their everyday lives.
 - b. What is already being done and what needs to be done to address the key domains/sub-domains outlined in the framework, highlighting key programmes/interventions and their implications for adolescents’ lives.
 - c. Any gaps in the existing programmes/interventions.
 - d. Next steps for operationalising the AWF.

Methods

A total of nine (one global and eight regional) consultations were held in July 2020. The global consultation brought together adolescents and youth from across a range of countries and contexts. Regional consultations were conducted in each of the six WHO regions (Africa, Europe, the Americas, Western Pacific, Eastern Mediterranean and South-East Asia). These consultations were conducted in multiple languages including English, Arabic, French and Spanish. They were moderated and led by young people with support from key youth-led organisations in each region working in health, human rights and development.

Participants

Over 340 adolescents and young adults from over 100 countries participated in the consultations. The age of participants ranged from 13 to 29. Therefore, participants included younger and older adolescents as well as young adults working directly with adolescents. Consultations included representation from diverse youth populations including young migrants, indigenous communities, young people living with disabilities and ethnic minorities.

Findings

The consultation confirmed that participants' understanding of adolescent well-being aligned with the agreed definition of adolescent well-being and domains of the AWF. Specifically, participants recognised that well-being was a multi-dimensional concept including not only young people's physical and mental health but encompassing the totality of their lived experience. They also emphasised that adolescent well-being was contingent on the full realisation of their rights, including the right to grow up free from poverty, discrimination and violence. Thus, well-being should be seen not just as a health issue but also a social justice and human rights priority.

The consultations yielded some key insights regarding implementation of the AWF:

- Programming should be holistic, dynamic, diverse and inclusive
- There was good agreement between the issues that participants felt were important components of adolescent well-being and the UN H6+ adolescent well-being framework.
- Young people must be meaningfully involved at all levels and all stages of adolescent well-being programming from inception and planning to delivery and policymaking
- Adolescent well-being must be prioritised by governments and governments should play an active role in developing and managing programmes in collaboration with young people
- Addressing adolescent well-being requires a whole-of-society approach and efforts must be made to promote collaboration across sectors to prevent projects existing in silos and to create seamless connections between relevant services, agencies, sectors and organisations
- Programmes should carefully consider the needs of adolescents so that programmes are relevant and culturally appropriate
- Care must be taken to ensure that the needs of the most vulnerable and marginalised adolescent communities are addressed when developing programmes

Conclusion

The consultations provided insightful and informative data on young people's perception of adolescent well-being and how programmes can effectively meet the needs of adolescents. This information should inform the next steps on operationalising the Adolescent Well-being Framework.

1. Introduction to the Consultations

Adolescent well-being is a growing area of policymaking, programming and research, yet there is no consensus on how it should be defined and measured. To address this, the Partnership for Maternal, Newborn & Child Health (PMNCH) recently published [‘Make Adolescent Well-being A Priority: An Urgent Call to Action’](#), an advocacy roadmap spearheaded by young people and their allies.

One of the recommendations in the Call to Action was to “Go beyond the health sector, launching a powerful multisectoral response including a developing and adopting a framework for adolescent well-being, using a multisectoral and multistakeholder lens, to ensure cohesive programming for and measurement of adolescent well-being” . In response to the Call to Action’s recommendation, PMNCH and the WHO are leading an initiative of the United Nations H6+ Technical Working Group on Adolescent Health and Well-Being, together with youth and youth-serving organisations, to develop a framework for defining, programming, and measuring adolescent well-being. The framework will provide the basis for developing recommendations for adolescent well-being policies and programmes.

A [definition of adolescent well-being and conceptual framework](#) were published in 2020 through a consultative process involving the UN H6+ and other partners. These consultations involved young advocates and practitioners from across every region.

The consultations led to the following definition for adolescent well-being:

“Adolescents thrive and are able to achieve their full potential.”

Whilst the agreed expanded definition is:

“Adolescents thrive and have the support, confidence and resources to realise their rights and have secure, healthy and fulfilling lives and relationships, enabling them to achieve their full potential, with meaning and purpose.”

The consultation also led to the formulation of a conceptual framework for Adolescent Well-being which consists of five inter-related domains:

1. Good health and optimum nutrition
2. Connectedness, positive values, and contribution to society
3. Safety and a supportive environment
4. Learning, competence, education, skills, and employability
5. Agency and resilience

Each of the domains has between four to seven sub-domains and these can be reviewed in Appendix A.

The policy and programming implications of the AWF are being examined through a series of working papers which will feed into a series of multistakeholder consultations to be conducted in April 2021. In parallel, there is outreach to member states to generate political will and endorsement for the Call to Action. These efforts will link the Call to Action (as a political advocacy tool) to the AWF (the technical package), as a continuum of work that will require multi-stakeholder engagement leading up to an Adolescent Well-being Summit provisionally planned for the final quarter of 2023.

In order to gain from the insights of adolescents and young adults themselves into the policy and programming implications of the adolescent well-being definition and conceptual framework, PMNCH and UN Major Group for Children and Youth (UNMGCY) organised a series of virtual consultations with adolescents and young adults at the global and regional level in July 2020. This report summarises the findings from these consultations.

2. Objectives of the Consultations

The consultations provided the opportunity to explore with young people around the world, the implications of the newly developed adolescent well-being framework for policies and programming at the country level.

The specific objectives of the consultations were to:

1. Present and promote the Call to Action for Adolescent Well-being and its key recommendations.
2. Introduce the AWF including its definition and domains, and discuss how it can be translated into action, including:
 - a. How the AWF can reflect adolescents' needs and be realised in their everyday lives.
 - b. What is already being done and what needs to be done to address the key domains/sub-domains outlined in the framework, highlighting key programmes/interventions and their implications for adolescents' lives.
 - c. Any gaps in the existing programmes/interventions.
 - d. Next steps for operationalising the AWF.

3. Methodology

Overview

A total of nine consultations were hosted by the UNMGCY between 2nd July and 22nd July 2020. Due to COVID-19 restrictions across the globe, the consultations could not be held in-person; instead, consultations were organised virtually utilising a video conferencing platform.

The consultations took the form of a series of virtual focus groups. In addition to a global consultation, consultation sessions were organised in each of the six WHO regions (South East Asia (SEAR), Western Pacific (WPR), Eastern Mediterranean (EMR), Europe (EUR), Africa (AFR) and the Americas (AMR)). Countries represented in the consultations are listed in Table 1. Depending on the region, multiple language options were provided including English, French, Spanish and Arabic.

Date	Region	Countries Represented	Number of Participants
27 th June 2020	Global - English	Afghanistan, Argentina, Australia, Azerbaijan, Bangladesh, Brazil, Cameroon, Canada, the Democratic Republic Of The Congo, Egypt, Germany, Ghana, Guatemala, India, Indonesia, Iraq, Ireland, Japan, Kenya, Liberia, Malaysia, Mexico, New Zealand, Nepal, Nigeria, Oman, Pakistan, Palestine, Perú, Portugal, Rwanda, Sierra Leone, Somalia, Sudan, Tanzania, Thailand, Tunisia, Turkey, Uganda, South Africa, South Korea, Sri Lanka, UK USA, Venezuela, Zambia, Zimbabwe	120
4 th July 2020	South East Asia (SEAR) - English	India, Thailand, Indonesia, Bangladesh, Sri Lanka and Nepal.	21
3 rd July 2020	Western Pacific (WPR) - English	Singapore, the Philippines, Taiwan, Australia and Malaysia	7
29 th June 2020	Eastern Mediterranean (EMR) – English and Arabic	Egypt, Iraq, Jordan, Lebanon, Libya, Morocco, Palestine, Pakistan, Syria and Tunisia	32

4 th July 2020	Europe (EUR) - English	Belarus, Belgium, Bosnia, France, Germany, Georgia, Ireland, Italy, Kazakhstan, Netherlands, Portugal, Romania, Serbia, Spain, Slovenia, Sweden, Switzerland, Turkey, Uzbekistan and the UK	26
30 th June 2020	Africa (AFR) - English	Benin, Cameroon, Ethiopia, Ghana, Malawi, Mali Morocco, Niger, Nigeria, Kenya, Liberia, Republic of Guinea, Somalia, Sudan, South Africa, Sierra Leone, Rwanda, Tanzania, Tunisia, Uganda, Zambia and Zimbabwe	72
5 th July 2020	Africa (AFR) – French	Bénin, Burundi, Cameroon, Chad, Côte d'Ivoire, the Democratic Republic Of The Congo, Guinée, Madagascar, Mali, Niger, Republic of Mauritania Rwanda, Senegal, Togo and Tunisia	20
4 th July 2020	Americas (AMR) - English	Bahamas, Belize, Guyana and St Lucia	42
5 th July 2020	America (AMR) – Spanish	Brazil, Chile, Dominican Republic, Guatemala, Honduras, Mexico and Peru	

Table 1: List of Regions Participating in the Consultation



Figure 1: World Coverage of the Youth Consultations

Engagement of participants

Participants were engaged through a variety of methods to actively ensure a diversity of adolescents and young people. The consultations were advertised through the UNMGCY's mailing list, which includes over 30,000 youth-led organisations and networks in over 170 countries and territories. Information about the consultation was also sent to the PMNCH Adolescent and Youth Constituency mailing list **which reaches over xx members in xx countries**. UNMGCY focal points also worked with key youth-focused stakeholders such as the UN Interagency Network on Youth Development and the Commonwealth Secretariat, to launch a social media promotional campaign to involve young people from a diverse group of countries. The UNMGCY regional caucus coordinators built on previous engagement work and sent out targeted invitations to youth-led organisations working at regional and country level.

Consultations were convened in partnership with relevant youth organisations including the International Federation of Medical Students, Youth Coalition on NCDs, African Youth Commission, Commonwealth Youth Council, YP Foundation, European Students Forum, Young Professionals Chronic Disease Network, Arab Youth Platform for Sustainable Development, AEGEE European Students Forum, Millennials Movement, My World Mexico and the Asian Youth Council.

To ensure the consultation process considered the perspectives and inputs of marginalised young people, UNMGCY actively and strategically engaged with adolescent and youth-led organisations that represent or work with young migrants, indigenous communities, young people living with disabilities and ethnic minorities. Furthermore, during the registration process, country data was regularly monitored and this information used to inform outreach efforts to ensure adequate regional diversity and representation.

Participants were fully briefed on the objectives, structure and format of the consultation and the time commitment required. Moderators also explained that the consultations would be held in a safe space with other young people where they could come together to express their views freely and confidentially.

Through this comprehensive recruitment strategy, we registered 340 young people aged 13 to 29 from over 100 countries and a further 368 expressed an interest in being involved in follow-up activities. This diverse group spanned younger adolescents, older adolescents and young people working directly with adolescents. They represented multiple cultures and backgrounds and therefore gave the opportunity to obtain wide-ranging perspectives – from both personal lived experience and professional practice.

Format of the consultations

Each session was moderated by one or two young people aged 18-29 (male and female) with a third young person taking notes. Moderators were recruited from

youth-led organisations operating in the relevant region and working on issues related to health, empowerment and youth development. These organisations helped organise the consultations and ‘set the scene’ – providing relevant context on the opportunities and barriers to adolescent well-being at global, regional and national level.

Moderators attended a briefing session and were subsequently provided with a facilitation guide, which included the focus group questions, and a standard presentation. These resources ensured there was consistency in the content and structure of each consultation. The guide acted as a supportive and instructional tool for the planning and delivery of the consultations, in addition to providing facilitators with tips for engaging participants. It also highlighted best practices for moderating discussions with adolescents and young people.

Each consultation was scheduled for 90 minutes and began with moderators providing a brief background to the consultation which included explaining the Call to Action, the AWF and the aim of the consultation. Following this introduction, moderators utilised twelve focus group questions (Appendix B) to obtain feedback and insight from participants. The questions were divided into two main sections:

- Meaning of adolescent well-being
- Programming for adolescent well-being

Throughout the consultation, participants were invited to add their thoughts and ideas to a digital Miro board. This provided an additional feedback mechanism for any participants who did not feel confident speaking up in the group. Moderators regularly reviewed contributions to the Miro board (for examples, see Appendix C) and this feedback was also used to shape and inform the discussions.

Participants’ feedback was captured by the notetaker, through the use of Miro boards (Appendix C) and audio recordings of the session. Participants were informed that the consultation would be audio recorded to support with notetaking purposes only.

At the end of the consultation, participants were also given the opportunity to provide any additional thoughts on adolescent well-being, the AWF and the Call to Action. Further comments and insights were also invited through email.

Based on the audio recordings, written notes and feedback captured on the Miro board, moderators summarised the findings from their respective consultation. The UNMGCY focal points collated all of the findings from the consultations and conducted a thematic analysis to identify the main, reoccurring themes. The main themes to emerge from across the series of consultations are summarised in this report.

Given the lively conversations and feedback on the Miro board, and open feedback at the end of the consultations, it was apparent that participants were fully engaged

in the process, felt empowered to share their views, whether verbally or by using the Miro board, and understood the power of their participation in improving the well-being of their peers.

4. Results

During the consultations, young people discussed their perceptions of adolescent well-being. Based on this they made recommendations for future adolescent well-being programmes, what lessons can be learnt from existing programmes and the actions that are required on a global and regional level to ensure the success of adolescent well-being programmes. The key findings from the consultations are summarised in Box 1 and the following sections provide an in-depth analysis of the views of participants.

Box 1: Key findings from the consultations

Key findings from the consultations

- i. Young people view adolescent well-being as a multi-dimensional concept that encompasses the totality of their experience; therefore, adolescent well-being programmes must be holistic, dynamic, diverse and inclusive.
- ii. There was good agreement between the issues that participants felt were important components of adolescent well-being and the UN H6+ adolescent wellbeing framework.
- iii. For programmes to be effective, young people must be meaningfully involved at all levels and all stages from inception and planning to delivery and policymaking. This includes developing relationships with existing youth-led and youth-focused organisations.
- iv. Adolescent well-being must be prioritised by governments and governments should play an active role in developing and managing programmes in collaboration with young people.
- v. Addressing adolescent well-being requires a whole-of-society approach. Efforts must be made to promote collaboration across sectors to prevent projects existing in silos and to create seamless connections between relevant services, agencies, sectors and organisations.
- vi. There needs to be local, regional and national understanding of the needs of adolescents so that programmes are relevant and culturally appropriate.
- vii. Care must be taken to ensure that the needs of the most vulnerable and marginalised adolescent communities are addressed when developing programmes. This includes populations such as refugees, indigenous groups, the LGBTQIA+ community, those in rural areas, ethnic minorities, those with disabilities, out-of-school adolescents and those living in poverty

4.1. Participants' views on adolescent well-being

Participants' perspectives aligned with the definitions, domains and subdomains of the AWF. This provided wider agreement on and reinforced the inputs of the adolescents and young adults who were involved in the development of the conceptual AWF.

Reflecting on what adolescent well-being meant to them, participants affirmed that adolescent well-being is multi-dimensional, including not only aspects of physical and mental health but encompassing the totality of their lived experience and evolving capacities.

Across all consultations, both global and regional, participants consistently emphasised their belief that adolescent well-being was a holistic concept including education, finances, employment, sexual health, self-esteem, body image, spirituality, social issues, healthy relationships, personal development and finding their purpose.

Expanding this further individual participants explained that well-being is: "A comprehensive inclusion of health, such as social, physical, mental and even financial" and "goes beyond the physical and health-focused interventions." The importance of mental and emotional well-being was repeatedly highlighted – with participants from all regions feeling that this was an under-recognised component of well-being, but one that shaped the lives and realities of many adolescents.

Participants felt that well-being also includes ensuring that adolescents' basic needs are met, that they can be assured of the fact that they live in an environment free of any form of violence, that inequalities are eliminated, that adolescents from all backgrounds feel included in society and that their rights are respected. For example:

"We need equal access to education" – Participant, Global Consultation

"It starts with equality among rural and urban regions in terms of access of care and other essential services."
– Participant, AFR Consultation

"Well-being means promoting adolescents' rights from work to education" – Participant, EUR Consultation

"Good adolescent well-being is a state wherein our human rights are honoured" – Participant, WPR

“It has to include representation of Afro-descendants and the indigenous population in order to develop public policies with an intercultural approach.” – Participant, AMR Consultation

Another recurring theme was that of ‘positive transitions’. In both the global and regional consultations, participants highlighted that the period of adolescence is a critical and often precarious stage in a young person’s life involving a transition from childhood to adulthood. Therefore, achieving a good level of well-being involved being able to enjoy and manage that transition. This means adolescents should have the opportunity to exercise their sense of adventure, have fun, be social, set aside time to rest, satisfy their curiosity, explore their identities and live happily. However, this had to be balanced with the need to develop skills for the future, such as becoming more independent, finding their sense of purpose, reaching their full potential, finding meaningful causes to engage with and being empowered to make informed decisions. They explained that this aspect of well-being means:

“Learning the ability to negotiate with their surroundings” – Participant, SEAR Consultation

“Equipping adolescents with the skills and capacity to critically assess the world and develop into healthy, able adults.” – Participant, AFR Consultation

“A conducive environment in order to handle their transition into adolescence well.” - Participant, EMR Consultation

“Helping adolescents to understand themselves and directions for the future”- Participant, EUR Consultation

“We need space to try and fail before we try and succeed. Time to figure out who we are and who we want to be ”- Participant, WPR Consultation

It was also recognised that positive relationships with family and friends are very important in cultivating well-being in young people in this time of transition.

“I have gone through really tough times but I have been lucky to have great friends who are always there for me like a family. I think support is very important, whether it’s mental or emotional. Tough times will always occur, there’s no way to avoid it, but if you have a good support system you will get back up. It becomes dangerous when we feel like we’re alone.” – Participant, Global Consultation

The idea of well-being was seen as both multi-faceted and quite complex and therefore, to achieve the best well-being possible there was the recognition that young people need access to adequate and timely information, support, resources and learning and development opportunities. This included comprehensive sexuality education, psychological support, access to healthcare, good role models/mentors and positive peer support.

Additionally, it was felt that well-being was defined by culture, environment and context and these factors will have an impact on adolescents’ perception of well-being. It was stated that:

“The Indian context is very different to the European or Western context.” - Participant, SEAR Consultation

“I’m not just a young person – my culture, community and what I believe in are all part of who I am and how I understand the idea of well-being.” - Participant, EMR Consultation

The role of culture and social norms in shaping the construct of well-being was articulated across the regional consultations. For example, ideas around finding purpose and creating independence were highlighted as a particularly important aspect of well-being in the Asian context because of social and cultural norms, including navigating the restrictions placed on young people by their parents. Meanwhile spiritual health was considered by participants in the Americas regional consultations to be a particularly important part of well-being.

Participants talked about the importance of young people being connected and having a sense of purpose. They highlighted how feeling part of their community contributed to a sense of belonging, support and emotional connection. Beyond their immediate relationships with family and peers, they also spoke about the important role of social networks, especially those defined by shared identity, experience or interests. In particular, young LGBTI participants highlighted how a

supportive social network, or the lack thereof, directly affected their sense of well-being while coping with the challenges of forming their sexual orientation/gender identity. This support system was often found online, where they could connect with other adolescents going through the same experiences.

Interactions with the digital world was a common theme across many of the consultations. Many participants spoke about the opportunity to be exposed to new ideas, connect with friends, and exercise greater agency and choice in an online space. However they also raised the concern that, while social media may have improved their ability to connect with a large number of people, this was not always improving the quality of their relationships or their sense of community. Therefore, there was a need to understand how young people can:

“Maintain relationships between people so that they do not feel alone - feeling disconnected despite our 24/7 access to technology.” - Participant, EUR Consultation

Civic responsibility, purpose and the ability to make a meaningful contribution were also considered to be important components of well-being. Participants highlighted examples such as volunteering, advocating for a cause they are passionate about or working on community problems. Through being involved in such activities, adolescents felt a sense of purpose and were able to develop their voice and agency.

When asked about their personal experience and what has helped them achieve well-being, participants’ responses included many of the themes touched on above:

1. **Mentorship** – positive relationships with a trusted adult helped them to tackle misinformation, personal challenges and understand their future.
2. **Access to information and educational opportunities** – this went beyond formal education and included seminars and workshops, and topics on puberty (menstrual health, hygiene, body shape, hair growth, etc) were seen as particularly helpful.
3. **Access to relevant services and programmes** – e.g. health services, mental health services, existing school programmes and programmes delivered by civil society and faith-based organisations.
4. **Access to personal development opportunities** – this included opportunities to develop their leadership skills and that promote the development of meaningful relationships; resilience; their own identity; their ability to express themselves; and their potential.

5. **Affordable, youth-friendly services** which remove the financial barriers to accessing services and provide an entry point to non-stigmatising care and support when adolescents need it.
6. **Their social network** – family, friends and peers. It was felt that parents were particularly important in providing guidance during this period and the home environment was described as the “backbone” and “foundation” and the main supportive factor for them.
7. **School** – by providing guidance and information on what to expect during adolescence as well as opportunities to form connections and support networks with their peers, and providing a space to explore their potential.
8. **New experiences** - which have taught them important life lessons. For example, being involved in issues and causes they care about; their parents giving them the freedom to tackle certain issues on their own; overcoming the challenges they face at school or college and gaining an understanding of the different challenges that their peers are facing. These all provided important life lessons that have impacted their well-being.
9. **Being validated** – this included being taken seriously at school and home, and feeling empowered to pursue their aspirations.
10. **A safe environment** both digitally and in-person, this includes an environment where they can speak freely, connect with other young people and also green spaces that are free from pollution where they are safe to play and explore.
11. **Culturally relevant and sensitive initiatives** which considered and respected different cultures, traditions, backgrounds, and histories and encouraged young people to respect themselves and others.
12. **Equality** – young people being given an equal opportunity to make decisions, especially about their own bodies and lives.

4.2. Adolescent well-being programming

When asked what a comprehensive adolescent well-being programme should look like, participants’ responses fell into the following categories

- Content
- Format and structure
- Setting
- Planning and service delivery
- Governance and accountability

1. Content of adolescent well-being programmes

Participants felt that adolescent well-being programmes should be holistic and include a number of interventions that promote good health and well-being. Key areas highlighted included:

- Physical health - including physical activity and nutrition
- Emotional and mental health
- Sexual and reproductive health
- Financial health – financial literacy, employability and access to decent work
- Soft skills – communication skills, particularly how to express their emotions and define their problems
- Social justice and civic duty - raising awareness of the rights of adolescents and promoting volunteering
- Personal development/capacity building - encouraging adolescents to set goals and have ambition; encouraging self-reflection; promoting positive self-esteem; encouraging personal improvement; facilitating the development of their talents and abilities
- Resilience - providing guidance on managing adversity; capacity building to enable young people to offer peer support; developing young people's ability to successfully navigate the world; and the provision of tools and strategies that young people can use to support their own well-being and resilience.
- Digital literacy – promoting safe and healthy use of technology
- Spiritual health – taking an approach that adolescents can relate to, not always religious/faith-based, but with a focus on well-being, the meaning of life, self-care and understanding their feelings

In addition, some topics were country or region-specific, for example, participants from the Middle East and North Africa felt it would be important to address female genital mutilation (FGM) and other sexual and reproductive health topics as there is a lack of focus on these issues and persistent stigma. They also felt that there is a need for education around managing family relationships, particularly the dynamic between parent and children as adolescents are often afraid or too shy to discuss issues with their parents. In addition, participants felt that guidance was needed around developing healthy relationships in preparation for marriage and raising children later in life. The family unit appeared to be very important to adolescents in this region and, therefore, programming that focused on this aspect of well-being was seen as beneficial. Furthermore, in this region, it was felt that there is an urgent need to focus on mental health as there is a high rate of suicide and depression in young people in this region.

Participants from the Americas felt it was important to have more focus on youth empowerment through the development of life skills like critical thinking and resilience. Participants from this region also felt it would be important for programmes to provide adolescents with access to basic services such as water and sanitation and education. They also emphasised the important role of culture and spirituality for adolescents and recommended that any programmes focusing on well-being should consider these factors.

Additionally, it was felt that policies and programmes addressing adolescent well-being should consider the needs of younger and older adolescents, indigenous adolescents and vulnerable adolescents such as refugees, those with disabilities and out-of-school adolescents, and tailor the content to suit different stages of adolescence and different demographics. The specific challenges faced by adolescent girls, as well as young refugees and out-of-school adolescents were raised in the African, South-East Asian and European regional consultations – as well as the negative impact of racism and discrimination.

“Out-of-school adolescents are also ignored in programmes, neglecting a vulnerable population.” - Participant, SEAR Consultation

“Such vulnerable populations must be prioritised while thinking of policies for adolescents.” –Participant, SEAR Consultation

“In Greece, due to large populations of refugees and migrants, a lot of the population are adolescents, often unaccompanied – they face significant challenges in integrating and finding new opportunities to grow and develop their lives. Political discrimination and a lack of understanding creates mistrust and a lack of willingness and initiative to integrate them.” – Participant. EUR Consultation

“Racism and discrimination are shaping the lives of many adolescents and young people today and this will affect their well-being now and in the future” – Participant, EUR Consultation

“Adolescents in refugee camps will have different needs again.” - Participant, AFR Consultation

Throughout the consultations, young people reflected on how their lives and well-being were shaped by factors such as discrimination, poverty and inequality. The impact of structural, personally-mediated, and internalised racism – as well as other forms of discrimination, on adolescent well-being cannot be overstated. Many participants spoke about personal challenges of navigating racial or ethnic identities and the profound impact this had on their day-to-day physical, mental and emotional well-being. Others highlighted how exposure to poverty, inequality, and social exclusion continued to affect the lives of many adolescents in their

communities. Programmes to improve adolescent well-being must begin to tackle some of these challenges.

Finally, it was felt that programmes should be able to adapt to address the challenges that young people may face due to new and emerging societal challenges. For example, participants in the UK felt that there are currently a lot of uncertainties around Brexit and this is creating some anxiety for adolescents and young people, especially around their future. It was felt that adolescent well-being programmes should be able to guide adolescents through these types of changes.

2. Format and structure of adolescent well-being programmes

Participants reflected on the possible format and structure of well-being programmes and it was felt that an intersectional approach should be taken that considers race, ethnicity, gender, sexuality and the local context. This would provide a targeted, culturally-relevant approach. Diversity and equity were important to participants with participants expressing that programmes should be inclusive.

“Adolescents are not homogenous; programmes must be mindful of all diversities.” Participant, Global Consultation

“Ensure that the needs of more marginalised adolescents are met, and this may mean tailoring the programme to their needs (in co-production), and in the places, they are/can access.” – Participant, AFR Consultation

“A multicultural approach needs to be taken throughout the programme development and delivery process.” – Participant, AMR Consultation

With regards to the method of delivery, it was felt that a mixed approach should be explored to make the content as engaging as possible. Suggestions included blogs, peer education, digital approaches, in-person sessions (seminars, workshops), open discussions, individual therapy sessions, support groups and adolescent mentoring (older adolescents mentoring younger adolescents). Participants also highlighted the ways that activities such as clubs, sport and other organised physical activities provided a much-valued space for conversations, support and interventions to promote adolescent well-being.

It was also felt that it would be important to integrate adolescent well-being programming into existing programmes, and to find ways to reach adolescents where they are, such as in schools. This could include embedding activities into the

curriculum or after-school clubs. Participants were keen to emphasise, however, that purely school-based interventions would fail to address the needs of more vulnerable and out-of-school adolescents – and that schools were not always seen as the best place for promoting progressive agendas around well-being. Young people highlighted worrying examples of push-back from parents, teachers and communities around sexuality education and emphasised the need to create genuinely safe spaces for adolescent programming.

Furthermore, it was felt a multi-sectoral approach should be taken when designing and delivering programmes aimed at addressing adolescent well-being. This includes engaging government institutions beyond health e.g. ministry of youth, ministry of education, as well as organisations working on relevant agendas such as road safety, urban design, livelihoods etc.

3. Setting of adolescent well-being programmes

In every consultation, whether global or regional, participants emphasised the importance of location. It was felt that the location and place of delivery would be very important to the success of any programme, and participants cited examples where the location of the programme meant that the adolescents who needed it most were not able to easily access it. Participants also emphasised that there was a need to identify and create safe spaces that adolescents would be happy to come to and where they would feel secure in expressing themselves.

Participants felt that there needed to be a balance of formal and informal settings with some sessions being delivered in social spaces so young people can connect, share experiences and interact socially, and more formal settings like the classroom. Furthermore, it was felt that the programmes should be located in spaces that are adolescent-friendly and, moreover, they should be delivered in settings that adolescents already occupy and, therefore, feel comfortable in, rather than unfamiliar spaces.

Finally, participants felt that programmes should have a nationwide reach and every effort should be made to reach peripheral locations that are usually overlooked in many initiatives, but participants in the Africa consultations raised the point that currently, rural areas sometimes receive more support and services as there is the assumption that adolescents in urban and peri-urban areas are already catered for. This highlighted the need for an equitable approach that ensures all communities have access to programmes and services, in a way that responds to their needs and setting, and adolescents – wherever they are - are not overlooked.

4. Planning and service delivery

During the discussions, several logistical and planning issues were raised. These included ensuring that programmes are easily accessible by removing financial

barriers through free access, ensuring that programmes can be accessed in multiple ways (at school, through their health worker, etc.) and ensuring convenient scheduling. Additionally, it was suggested that programmes should provide easy access to other support and services by developing seamless referral pathways to other sectors, such as between education and health, as well as mechanisms for identifying and escalating complex needs e.g. adolescents needing clinical mental health support.

“There is a lack of clear referral pathways to non-health sectors.” – Participant, Global Consultation

Participants also felt that another important element of the planning of adolescent well-being programmes was ensuring meaningful involvement of adolescents and young people, as well as partnering with local youth-led organisations. Participants felt that adolescents should be involved in the inception, planning, design and delivery of programmes. They also emphasised that their meaningful participation in monitoring and evaluation was critical to ensure that programmes were truly fit for purpose. The overwhelming sentiment was that youth-led programmes, where young people were involved in the decision-making processes and potentially also in the delivery, would have more of an impact and would more accurately address the needs of young people. This included involvement in decisions around governance, development, resource allocation and use.

It was felt that partnering with existing youth-led organisations, initiatives and networks would be an effective way to engage adolescents and young people. Participants from the Africa region also highlighted the opportunity to engage these youth-led organisations as delivery partners but emphasised the need to recognise, value and appropriately remunerate their contributions.

It was recognised that there usually needed to be some type of government involvement in these programmes to ensure success and sustainability. Buy-in from governments would be important and, therefore, relevant ministries should contribute to establishing these programmes in collaboration with young people. Finding ways to create better incentives for collaboration, convening diverse stakeholders at national and sub-national levels, and securing political and financial commitment to improving adolescent well-being was considered to be critical to creating the right enabling environment that delivers better outcomes for adolescents.

Participants also noted the delivery of adolescent well-being programmes would require capacity-building and training for all stakeholders – including local actors. This included supporting institutions and agencies to shift away from interventions to address single domains or sub-domains of adolescent well-being and to understand their role in promoting and supporting adolescent well-being.

Additionally, it was felt that teachers and parents would need training so they develop the skills and knowledge to better support adolescents.

Furthermore, it was felt that programming needed to be consistent, sustainable and long-term, to ensure that it is delivered over a long enough period and frequently enough to make a significant difference; it was felt that adequate funding should be raised to achieve this. Participants noted that identifying the right monitoring and evaluation framework would also be important – well-being is a broad concept and there is a risk that stakeholders are looking at immediate, measurable results to assess the efficacy of programming, and this might push them towards single issue, uncoordinated programming. It is important to be realistic about the timeframes, understand what can be measured, and also value the importance of qualitative insights and feedback from adolescents themselves.

Finally, it was mentioned that programmes needed an effective communication and promotional strategy to reach their intended audience and this required effective use of online and offline media. Participants reflected that this is often developed without the input of adolescents and young people, which means that materials aimed at health promotion and behavioural change are often based on assumptions of what will appeal to adolescents rather than what they actually find engaging. This emphasised again the value of meaningfully engaging young people.

5. Governance and accountability

“If you involve us, you should be open, willing to learn and prepared for us to hold you to account.” – Participant, Global Consultation

It was felt that there needed to be some form of accountability in these programmes, so it is clear who is ultimately accountable for their success. Young people should be embedded in the governance of adolescent well-being programmes and also play an important role in driving accountability and ensuring the programme truly delivers for adolescents. Safeguarding was also highlighted as an important component of any programmes targeting adolescents and participants highlighted that it would be essential to ensure appropriate complaint mechanisms if young people had concerns.

Additionally, youth participants from Europe mentioned that transparency and information sharing would be important and should align with Health 2020’s vision of building a common network to allow for transparency¹. This was echoed by participants in other consultations who emphasised that openness about success and failures, a commitment to ongoing learning, and sharing insights with the community were critical factors for success.

¹ Health 2020 (2012), WHO Europe

4.3. Barriers to success in adolescent well-being programming

When probed on how current adolescent well-being programmes differ from what they believe a comprehensive well-being programme should look like, participants stated that most current programmes:

- Are not holistic, they are mono-disciplinary and unconnected to other youth programmes and do not account for the intersecting needs of adolescents
- Have been designed from an adult perspective and not a youth perspective
- Are usually focused on specific settings (e.g. rural/urban) while others are underserved

Furthermore, when identifying the barriers to implementing such programmes, participants highlighted the following main barriers:

1. **Consistency** – this seemed to be a particular challenge in Asia. It was felt that programmes across the region are not consistent, implementation is not uniform, and funding is inconsistent across the region.

“In my country, programmes are not consistent across local areas, funding is also not consistent.”– Participant, SEAR Consultation

“In Sri Lanka where such programmes already exist their implementation is quite poor and not uniform” – Participant, SEAR Consultation

2. **Relevance** – it was felt that many programmes were not relevant to the needs of young people because there was a lack of understanding of their needs and, therefore, programmes tended to take a “one size fits all” approach. Participants identified that this lack of understanding was due to a lack of meaningful engagement with adolescents, especially during programme design.

“Programming often doesn’t recognise the lived realities of adolescents so programmes are not fit for purpose e.g. wrong time, place, not appealing – this should be addressed by engaging adolescents in the design of the intervention, but this rarely happens.” Participant, AFR Consultation

“In Australia, there are child models, and then adult models. But as a young person, child services aren’t appropriate anymore. Once you turn 18, you are expected to understand how the next system works independently but it’s not that easy.” – Participant, WPR Consultation

“One size fits all interventions don’t recognise the spectrum of adolescents – younger adolescents want different things to older adolescents, adolescents in refugee camps will have different needs again” - Participant, AFR Consultation

“The older generation doesn’t necessarily understand what matters to this generation of adolescents – we want programmes that empower us and address the issues that are important to us like our mental health and sexualities.” - Participant, AFR Consultation

3. Culture – participants also felt that, all too often, culture was not considered when designing and developing these programmes, which led to poor uptake at local level – or risked missing out particular groups of adolescents.

“There are no programmes and policies focused on Afro-descendants and indigenous young people.” – Participant, AMR Consultation

“Recognising and respecting culture is the most important factor for ensuring the long term sustainability and success of these programmes – Participant, Global Consultation

4. Context – participants felt that the local, national and regional context can hinder the success of programmes. Participants explained that programmes were often hampered by the political climate. For example, in some countries political

corruption has created barriers to adolescents' voices being heard while in others their sexual and reproductive rights are highly contested and politicised. Finally, in countries where poverty is a significant issue, there was the feeling that focusing on issues like well-being was often seen as a luxury and could be seen as inappropriate and insensitive when a vast proportion of the population is suffering from hunger and other critical issues. This could be why other components of well-being are sometimes overlooked or not adequately prioritised.

5. Evaluation – participants highlighted the difficulties that programmes have in measuring well-being outcomes. They also identified limitations of the design of evaluations explaining that evaluation models do not consider the context and demographics of the target group and, overall, more data are needed to truly evaluate the impact of adolescent well-being programmes.

“It is hard to measure wider well-being outcomes, so this isn’t valued in the same way - especially when it is often youth-led and civil society organisations doing this work.”- Participant, AFR Consultation

5. Collaboration – participants made a number of observations about the lack of collaboration and joined-up working across different agencies. While recognising the contribution of different sectors and services, they felt there was no view towards shared risks and shared outcomes which hindered the realisation of a comprehensive well-being approach. They highlighted the need for a joined up approach at policy, programmatic and budgetary level and identified several potential barriers including political and donor agendas which identify certain areas as priorities (e.g. sexual and reproductive health and rights) and others less so.

“There is very little incentive for delivering more holistic programming for adolescents – stakeholders need to work together but funding doesn’t always follow.” - Participant, AFR Consultation

Other barriers mentioned included:

- Lack of political priority and a policy agenda focused on adolescents
- Programmes having too much of a short-term focus
- Challenges related to online programming (there is a lack of access to the internet in some communities so they cannot access online programmes, but other communities face cyberbullying and highlighted the need for greater protection)
- Lack of political will to prioritise adolescent well-being
- Lack of follow-up processes

- Many programmes are only partially delivered due to the lack of proper planning
- Lack of accountability

4.4. Implementation of adolescent well-being programmes

Consultation participants were then asked how they would like adolescent well-being programmes to be delivered. They stated that these programmes should be community-driven with a significant amount of community participation, including input from marginalised groups, village-level leaders and schools. It was felt that a ground-up rather than top-down approach would be more effective as this would account for local realities and the needs of adolescents in that community. Related to this point, there was the feeling that the approach should be inclusive, with the diversity that exists within the adolescent population recognised.

Young people felt that the best programmes would have an element of bespoke programming where individuals can define what well-being means to them and then the programme is tailored to meet their needs in order to address their lived realities. Programming should take a strength-based approach, allowing them to realise their confidence and potential rather than taking a deficit approach and trying to 'solve' adolescents.

Most importantly, participants felt that young people should be involved at all stages and levels of implementation – oversight, delivery, as speakers and mentors (to share their experience), fundraising and policy development - and to ensure the success and impact of their contribution, capacity building exercises should be conducted so that young people are equipped to carry out these roles.

Participants felt that every effort must be taken to gain the views of adolescents and this could be done through surveys, focus groups and discussions in schools before launching the programme, but also during the programme to monitor the progress of programme implementation and drive a process of constant reflection and quality improvement. They also felt that actively engaging youth-led organisations already working in the community would be important. It was felt that these organisations would be a key asset bringing important expertise, insight and connections to young people, and engaging them early would prevent duplication of effort.

In the SEAR, the updated regional strategy for Universal Health Coverage is soon to be launched and it was felt that prior to this, research is needed to determine the best way to include adolescents and tailor programmes to reach them.

While many participants thought that programmes should be youth-led, and community-centred, participants also felt they should include engagement of national government to ensure programmes are embedded into national strategies leading to continuity and sustainability. This will ensure government accountability and lead to action.

As highlighted previously, broad collaboration and partnership were felt to be very important to the success of these programmes. Participants felt a whole-of-society approach is needed with schools, parents, teachers, government, civil society, the private sector, media and other organisations playing a role. It was felt that civil society appreciates the need for a focus on adolescent well-being, but the government and other sectors do not and, therefore, adolescent well-being is neglected. By creating a whole-of-society approach, all sectors will be more aware of the importance of focusing on adolescent well-being and by creating a shared language, incentives and tools to facilitate effective working of partnerships, progress can be made in galvanising the whole of society behind promoting adolescent well-being.

Other specific implementation ideas included:

- Setting up information stalls in a variety of locations to cover a wide audience
- Combining digital and in-person programming, especially in urban areas
- Tapping into young people's passion to make a positive impact in their community
- Educational strategies that develop life skills such as leadership skills and improve young people's sense of community

4.5. Learning from existing policies and programmes

Exploring in more detail the lessons that can be learnt from existing adolescent well-being programmes and what needs to be done differently, participants felt that programmes needed to be responsive and adapt as the experiences of adolescents change over time. It was also felt that mental health is often neglected, and this is a very important aspect of well-being programming. With regards to specific lessons around inclusion and diversity, it was felt that a structured approach should be introduced such as Roger Hart's Ladder of Participation² and a social justice approach should be employed so that at the core of any policy or programme are the values of equality and fairness.

With regards to youth engagement, it was felt that this should not be tokenistic, but meaningful, with the opinions of young people influencing the direction of the programme. This could be achieved by involving young people in policy development and governments working closely with young people as stakeholders rather than beneficiaries. On policy, it was felt that policies for adolescents need to take a comprehensive approach to adolescent well-being but also be more specific and focus on key issues such as health, rather than just a blanket, general youth policy. Furthermore, it was felt that resources should be set aside for youth programmes and processes should be in place to ensure that these resources reach the youth-led programmes that need them.

² Roger Hart, 'Children's Participation: From Tokenism to Citizenship' (1992), UNICEF

Participants highlighted that the COVID-19 pandemic exposed the need to focus on the well-being of young people both now and for the future. They felt that countries shouldn't wait for a crisis to occur to address the needs of adolescents, this should be an ongoing process to secure the well-being of the next generation. Finally, it was felt that in low-income countries it would be critical not to lose sight of the basics, such as alleviating poverty and ensuring access to nutritious food, proper sanitation and a safe living environment.

To ensure that we can successfully learn from these programmes and move forward with developing an effective global adolescent well-being programme. It was felt that the following is needed:

- More national dialogue on adolescent wellbeing
- Increased engagement of adolescents
- Community-led, participatory approaches
- Greater public awareness of adolescent well-being
- High-level commitment from politicians and donors
- Long-term investment
- A more holistic approach
- Creating the right incentives for multi-sectoral collaboration
- Reorientation of systems (economic, educational, health) towards a holistic, well-being approach
- A communications strategy that is youth-focused and youth-led
- 'Bottom up' advocacy and campaigning
- A stronger accountability agenda at local level

4.6 Global action

When asked to consider what could be done at the global level to realise meaningful change for adolescents, participants suggestions are summarised in the table below:

Consultation	Regular, accessible consultations that enable wider global youth participation and the monitoring of progress on implementing the AWF
Collaboration	Fostering greater collaboration between global organisations with similar aims and objectives Working with donors to shift the focus from single issues to more holistic well-being issues

	<p>Creating safe spaces for young people to come together to learn and share experiences and good practices</p> <p>Galvanising the media to improve awareness by the public and policy makers</p> <p>Building effective multi-stakeholder coalitions at all levels (global, regional, national), including strong representation from civil society and youth-led organisations</p>
Adolescent Involvement	<p>Creating a global advocacy roadmap that is led by young people</p> <p>Featuring the voice of adolescents more prominently, especially younger adolescents</p> <p>Developing the capacity of young people to translate this global agenda into their local context and providing a platform for them to connect to implement this agenda</p>
Inclusion	<p>Championing the inclusion of sensitive/neglected topics such as mental health and sexual health issues</p> <p>Designing more inclusive programmes and ensure the needs of the most marginalised adolescents are being addressed</p> <p>Addressing any stereotypes that are held about adolescents to prevent exclusion</p>
Accountability	<p>Driving accountability by securing tangible commitments with avenues for follow up</p> <p>Supporting young people to drive accountability efforts at local level</p>
Alignment	<p>Articulating the link between adolescent well-being and regional/national priorities</p> <p>Ensuring adolescent well-being programmes deliver against all five domains of the AWF</p>

5. Synthesis of key findings and recommendations for programming

The global virtual youth consultations on adolescent well-being provided important insights into young people's perceptions of adolescent well-being and how programmes can effectively meet the needs of adolescents. This information should inform next steps for operationalising the AWF.

The key findings from the consultations and related recommendations are summarised below.

Findings	Recommendations
1. Young people view adolescent well-being as a multi-dimensional concept that encompasses the totality of their experience.	Adolescent well-being programmes must be holistic, dynamic, diverse and inclusive. Therefore, the AWF must be made widely available so that all those working with young people can utilise the framework to develop multi-dimensional approaches to improving adolescent well-being
2. There was good agreement between the issues that participants felt were important components of adolescent well-being and the UN H6+ adolescent well-being framework.	Regular consultation with young people is required to quickly identify emerging issues and changing perceptions of adolescent well-being to ensure the AWF remains relevant. Processes for reviewing and updating the AWF are required to ensure it meets the changing needs of young people over time
3. For programmes to be effective, young people must be meaningfully involved at all levels and all stages from inception and planning to delivery and policymaking	Guidance on youth engagement should be provided to those implementing adolescent well-being programmes. This could take the form of a best practice guide, checklist or developing a youth engagement toolkit that sits alongside the AWF.
4. Adolescent well-being must be prioritised by governments and governments should play an active role in developing and managing programmes in collaboration with young people.	Governments (local and national) should be briefed on issues related to adolescent well-being and introduced to the AWF, its implications and how it can be used to inform policy and resource allocation
5. Addressing adolescent well-being requires a whole-of-society approach.	Efforts must be made to promote collaboration across sectors to prevent projects existing in silos and to create seamless connections between relevant services, agencies, sectors and organisations.

	The AWF should be promoted amongst all sectors and creative ways of embedding it into the language, practice and consciousness of policymakers, decision-makers, civil society and private sector identified.
6. There needs to be local, regional and national understanding of the needs of adolescents so that programmes are relevant and culturally appropriate	All stakeholders should be briefed on issues related to adolescent well-being and introduced to the AWF, its implications and how it can be implemented in an equitable and culturally appropriate way.
7. Care must be taken to ensure that the needs of the most vulnerable and marginalised adolescent communities are addressed when developing programmes. This includes populations such as refugees, indigenous groups, the LGBTI community, those in rural areas, ethnic minorities, those with disabilities, out-of-school adolescents and those living in poverty	Guidance on inclusion and diversity should be provided to all those implementing adolescent well-being programmes. Specific interventions and best practices should be identified to improve the well-being of different adolescent groups.

6. Discussion

Achieving the Sustainable Development Goals (SDGs), including universal health coverage (SDG Target 3.8), requires keeping adolescents informed, healthy, connected, safe and resilient so they can survive and thrive both now and in adulthood, as recognized in the United Nations Strategy for Women’s, Children’s and Adolescents’ Health. However, to fulfil the promises of the SDGs, further support and commitment are required to deliver for adolescents, especially those most at risk of being left behind. Through the AWF, we can ensure that organizations throughout the world develop and deliver more effective programmes by providing a blueprint that defines adolescent well-being, how to measure it and the key components of well-being that need to be considered in any intervention targeting this age group.

Following the development of the AWF, this consultation sought to introduce the wider adolescent community to the framework and gain their perspective on how it can be translated into meaningful action. To gain the most accurate and representative view of adolescent well-being, the consultation process involved over 340 adolescents and young adults from a diversity of backgrounds, countries and contexts.

In addition to targeted regional outreach, efforts were taken to ensure inclusion of perspectives from often-marginalised communities including indigenous populations, ethnic minorities, those living with disabilities and the LGBTQIA+ community. While consultation participants represented over 100 countries, there were some notable gaps. There were no participants from either Russia and China, despite their large youth populations, which was probably due to the lack of consultations in these languages. This will be actively addressed in future outreach as this work moves forward and engagement work has already started with national youth networks.

Under normal circumstances, these consultations would have been conducted within communities in locations that were easy for all to access. However, due to the ongoing pandemic, all consultations had to be conducted virtually which meant direct participation was limited to those who had reliable internet access. As we move to the next phase of this project we hope to widen participation through in-person engagements when it is once more appropriate to do so.

During the consultation, it was important to gain honest feedback from participants and therefore sessions were youth-led and multiple engagement strategies were utilised including the use of online Miro boards which gave young people who were less comfortable with speaking up the opportunity to share their thoughts; their ideas were then explored by the group without putting pressure on any one individual to present or defend their suggestion. A youth-led approach and giving participants a choice on how to express their views proved successful and participants were fully engaged and were comfortable enough to discuss sensitive topics such as personal experiences of mental health, violence and racial discrimination.

The consultations confirmed that the definition of adolescent well-being and the AWF were in line with the lived experience of young people. Participants very eloquently confirmed the complex and multi-dimensional nature of adolescent well-being and highlighted the need for nuanced, holistic, diverse and inclusive approaches if adolescent well-being programmes are to be effective. They stressed the importance of meaningfully involving young people at all stages and levels of the planning and delivery of programmes and this included developing relationships with existing youth-led and youth-focused organisations; they also highlighted the need for a joined-up approach that brings all sectors together. Ultimately it was felt that a deep understanding of the needs of all adolescents must be at the heart of adolescent well-being programmes so that relevant, equitable and culturally appropriate approaches are taken, and this can only be achieved by governments, policymakers, civil society and the private sector meaningfully involving adolescents, youth-led and youth-serving organisations, prioritising adolescent well-being and making it a core part of their mission, regardless of whether they work with adolescents directly or indirectly.

Next steps:

- Inform the background papers for the multistakeholder consultations in April 2021
- Involve adolescents and young adults, youth-led and youth-serving organisations in the consultations
- Ensure that the views of adolescents and young adults, youth-led and youth-serving organisations reported here are carried forward to the preparations for the planned Adolescent Well-being in a Digital Age: A Global Summit 2023 and beyond.

Appendix

Appendix A – Adolescent Well-being Framework

The five domains of adolescent well-being that underpin the adolescent well-being framework.

No.	Domain	Sub-domains	Requirements Include	Type of well-being
1.	Good health and optimum nutrition	<ul style="list-style-type: none"> • Physical health and capacities. • Mental health and capacities. • Optimal nutritional status and diet 	<ul style="list-style-type: none"> • Information, care and services: access to valid and relevant information and affordable age-appropriate, high quality, welcoming health services, care and support, including for self-care. • Healthy environment: such as safe water supply, hygiene, sanitation and without undue danger of injury in the home, safe roads, management of toxic substances in the home and community, access to safe green spaces and no air pollution. Skills to navigate the environment safely. • Physical activity: Has access to opportunities for adequate physical activity. • Diet: Has access to local, culturally-acceptable, adequate, diversified, balanced and healthy diet commensurate to the individual's characteristics and requirements, to protect from all forms of malnutrition 	Physical Nutritional Emotional Socio-cultural
2.	Connectedness, positive values and contribution to society	<ul style="list-style-type: none"> • Connectedness: Is part of positive social and cultural networks and has positive, meaningful relationships with others, including family, peers and, where relevant, teachers and employers. • Valued and respected by others and accepted as part of the community. • Attitudes: Responsible, caring and has respect for others. Has a sense of ethics, integrity and morality. • Interpersonal skills: Empathy, friendship skills and sensitivity. • Activity: Socially, culturally and civically active. • Change and development: Equipped to contribute to change and development in their own lives and/or in their communities. 	<ul style="list-style-type: none"> • Connectedness: Has access to opportunities to become part of positive social and cultural networks and to develop positive, meaningful relationships with others, including family, peers and, where relevant, teachers and employers. • Valued: Has opportunities to be involved in decision-making and having their opinions taken seriously, with increasing space to influence and engage with their environment commensurate with their evolving capacities and stage of development. • Attitudes: Has access to opportunities to develop personal responsibility, caring and respect for others and to develop a sense of ethics, integrity and morality. • Interpersonal skills: Has access to opportunities to develop empathy, friendship skills and sensitivity. • Activity: Has access to opportunities to be socially, culturally and civically active that are appropriate to their evolving capacities and stage of development. • Change and development: Has access to opportunities to develop the skills to be equipped to contribute to change and development in their own lives and/or in their communities. 	Emotional Socio-cultural

No.	Domain	Sub-domains	Requirements Include	Type of well-being
3.	Safety and a supportive environment	<ul style="list-style-type: none"> • Safety: Emotional and physical safety. • Material conditions in the physical environment are met. • Equity: Treated fairly and have an equal chance in life. • Equality: Equal distribution of power, resources, rights and opportunities for all. • Non-discrimination. • Privacy. • Responsive. Enriching the opportunities available to the adolescent. 	<ul style="list-style-type: none"> • Safety: Protection from all forms of violence and from exploitative commercial interests in families, communities, amongst peers and in schools, and the social and virtual environment. • Material conditions: The adolescent’s rights to food and nutrition, water, housing, heating, clothing and physical security are met. • Equity: There is a supportive legal framework and policies and equal access to valid and relevant information, products and high-quality services. • Equality: Positive social norms, including gender norms, to ensure equal rights and opportunities for all adolescents. • Non-discrimination: Free to practice personal, cultural and spiritual beliefs and to express their identity in a non-discriminatory environment and have the liberty to access objective, factual information and services without being exposed to judgmental attitudes. • Privacy: Their personal information, views, interpretations, fears and decisions, including those stored online, are not shared or disclosed without the adolescent’s permission. • Responsive. Has access to a wide range of safe and stimulating opportunities for leisure or personal development. 	Physical Emotional Socio-cultural
4.	Learning, competence, education, skills and employability	<ul style="list-style-type: none"> • Learning: Has the commitment to, and motivation for, continual learning. • Education. • Resources, life skills and competencies: Has the necessary cognitive, social, creative and emotional resources, skills (life/decision-making) and competencies to thrive, including knowing their rights and how to claim them, and how to plan and make choices. • Skills: Acquisition of technical, vocational, business and creative skills to be able to take advantage of current or future economic, cultural and social opportunities. • Employability. • Confidence that they can do things well. 	<ul style="list-style-type: none"> • Learning: Receives support to develop the commitment to, and motivation for, continual learning. • Education: Has access to formal education until age 16, and opportunities for learning through formal or non-formal education or training beyond. • Resources, life skills and competencies: Has opportunities to develop the resources, skills (life/decision-making) and competencies to thrive. • Skills: Has opportunities to develop relevant technical, vocational, business and creative skills. • Employability: Is given the opportunity to participate in non-exploitative and sustainable livelihoods and/or entrepreneurship appropriate for their age and stage of development. • Confidence: Is given the necessary encouragement and opportunities to develop self-confidence and is empowered to feel that they can do things well. 	Emotional Cognitive

No.	Domain	Sub-domains	Requirements Include	Type of well-being
5.	Agency and resilience	<ul style="list-style-type: none"> • Agency: Has self-esteem, a sense of agency and of being empowered to make meaningful choices and to influence their social, political and material environment, and has the capacity for self-expression and self-direction appropriate to their evolving capacities and stage of development. • Identity: Feels comfortable in their own self and with their identity(s), including their physical, cultural, social, sexual and gender identity. • Purpose: Has a sense of purpose, desire to succeed and optimism about the future. • Resilience: Equipped to handle adversities both now and in the future, in a way that is appropriate to their evolving capacities and stage of development. • Fulfilment: Feels that they are fulfilling their potential now and that they will be able to do so in the future. 	<ul style="list-style-type: none"> • Agency: Has opportunities to develop self-esteem, a sense of agency, the ability to make meaningful choices and to influence their social, political and material environment, for self-expression and self-direction. • Identity: Has the safe space to develop clarity and comfort in their own self and their identity(s), including their physical, cultural, social, sexual and gender identity. • Purpose: Has opportunities to develop a sense of purpose, desire to succeed and optimism about the future. • Resilience: Has opportunities to develop the ability to handle adversities both now and in the future, in a way that is appropriate to their evolving capacities and stage of development. • Fulfilment: Has opportunities to fulfil their potential now and to be able to do so in the future. 	Emotional Cognitive

Appendix B - Consultation Questions

Discussion 1: Your Thoughts on Adolescent Well-being

1. When you think of good adolescent wellbeing, what comes to mind? Why?
2. What has helped you and other young people achieve good health and wellbeing?

Discussion 2: Adolescent Well-being Programming

3. What would a comprehensive adolescent well-being program look like? What would be the key components of that program?
4. How does this differ from what is already being implemented?
5. Based on your experience, to what degree are programs or interventions aimed at improving adolescent well-being implemented in reality – what are some of the barriers?
6. How would you want an adolescent well-being program to be implemented/delivered?
7. How should adolescents and young people be invited to contribute to the planning, development, and implementation of such programs?
8. Can you provide examples of successful programs or approaches to a successful program addressing any or all of the five domains? What made it successful? Who delivered it?
9. What would need to be done differently from current programming across the sectors that contribute to enhancing adolescent well-being?
10. What would it take to get there?

Discussion 3: Additional Points

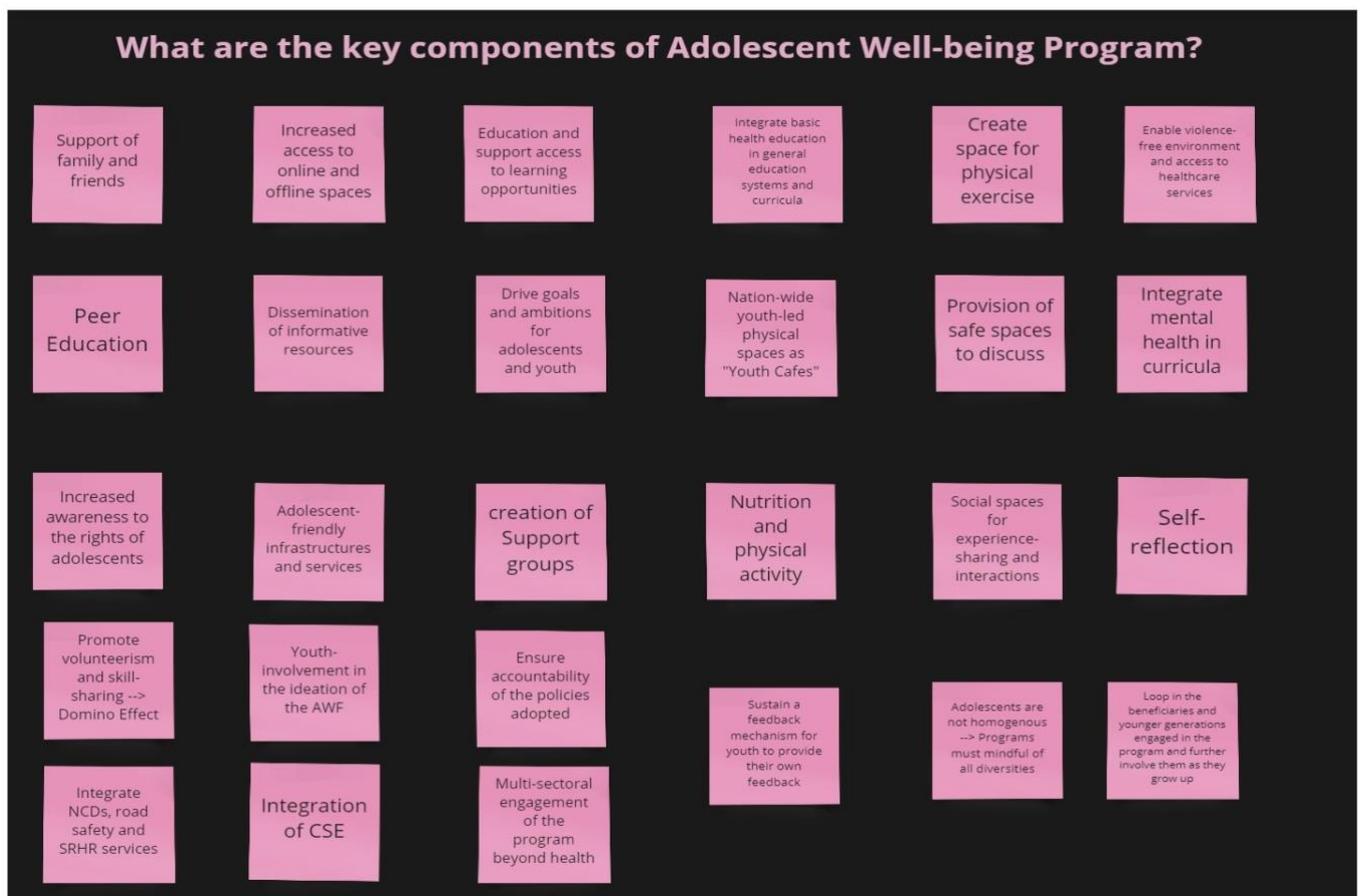
11. Is there anything else that you would like to share about adolescent well-being (or the Framework/Call to Action)?
12. What do we need to do at the global level to realise meaningful change for adolescents? How should youth civil society and youth advocates take this forward – are there priority actions?

Appendix C – Digital Whiteboards Used to Capture Participant Feedback

Miro, an online collaborative whiteboarding platform, was used during the virtual consultations to brainstorm ideas and capture key messages using digital sticky notes.



Digital whiteboard used to capture the European region’s consultation responses



Miro board displaying the consultation data from the Global Consultation