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EM DEBATE

Adolescents and young people on the agenda of the Brazilian Unified Health System

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THIS SPECIAL THEMATIC ISSUE (NTE) ON 'Health Policies and Social Protection for Adolescents and Youth' is the result of institutional cooperation between the Brazilian Center for Health Studies (Cebes), the Fiocruz's Center for Strategic Studies Antônio Ivo de Carvalho, the Sergio Arouca National School of Public Health, and the General Coordination of Children's Health Care, Adolescents and Young People of the Department of Comprehensive Care Management of the Secretariat of Primary Care of the Ministry of Health (CGCRIAJ/DGCI/SAPS/MS). The edition brings together authors from diverse academic, research, and public management institutions who conceptualize, analyze, and strengthen the agenda for the protection, care, and social participation of adolescents and young people in the context of Brazilian public policies.

The works dialogue with the contemporary challenges of the organization of actions and services within the scope of the Unified Health System (SUS), emphasizing the role of Social Determinants of Health (SDH), the centrality of Primary Health Care (PHC), and the need to expand the spaces for listening, participation, and protagonism of adolescents and young people. In this sense, the NTE contributes to shifting the debate on adolescence from an exclusively vulnerable category to a strategic window of the life cycle, decisive for the production of health, equity, and social well-being over time.

The texts highlight the challenges of organizing actions and services within the scope of the SUS and the SDH, as well as the dissemination of the agenda of participation and listening to adolescents and young people in primary care.

It is worth remembering that the Ministry of Health adopts the World Health Organization (WHO) classification, which defines adolescence as the period from 10 to 19 years old and youth as the period from 15 to 24 years old. This population demands the protective intervention of public policies and civil society in their living and health conditions, especially in contexts marked by social, territorial, ethnic, and gender inequalities.

Contemporary literature in the field of social protection policy has highlighted that the breadth and scope of protection for adolescents and young people are crucial markers of a nation's overall social well-being[1]. In the context of growing concern with adolescents and young people, it is worth highlighting the remarkable proposal, in 2022, of the WHO's Global Action for Monitoring Adolescent Health and Well-Being, with the recommendation of specific indicators (Global Action for Measurement of Adolescent Health – GAMA) for evaluating policy in the field of public health[2].

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In view of the necessary urgency of government policies to protect adolescents and young people, the issues addressed by the NTE advocate, directly or indirectly, for initiatives within the scope of the SUS to: 1) strengthen actions to promote comprehensive health care, in order to build a process of promotion, prevention, recovery and rehabilitation; 2) guarantee of comprehensive care, through the organization of services and integration with the multidisciplinary teams existing in the territory; 3) reorientation of Health Services in Primary Care, aiming to favor the capacity of responses for comprehensive health care for adolescents and young people; 4) hierarchical, articulated and integrated implementation of the policy, seeking to ensure the integrality of care with a focus on the Family Health Strategy; 5) incorporation of SDH, intersectionality, such as ethnicity, sexual orientation, gender identity, class and disabilities, as well as social and cultural vulnerabilities in health practices, health care and self-care; 6) organization and qualification of health services and actions, so as to welcome adolescents and young people in their singularities, needs and diversities, thus favoring their attachment and engagement in health services; 7) formalization of a line of care that establishes flow and reference between primary care and specialized care; 8) implementation of educational practices in a participatory, emancipatory perspective and focused on equity and citizenship; 9) continuous improvement of actions based on monitoring and evaluation; 10) interfederative management of actions, plans and programs aimed at the health of adolescents and young people; and 11) dissemination of continuing education to primary and specialized care professionals in the SUS, for the adoption of practices that value qualified listening.

According to these guidelines, the Ministry of Health has supported the agenda of comprehensive health care for adolescents and young people in the SUS through normative acts, technical guidance, qualification of health professionals, interfederative and intersectoral articulation, and ensuring the participation of adolescents and young people in the formulation, implementation, and evaluation of strategies and actions.

The contributions of this NTE dialogue, therefore, with the political agenda and with the SUS service provision model, reaffirm the health of adolescents and young people as a structuring dimension of primary care, equity, and the civilizing project inscribed in the 1988 Constitution[3], contributing to the strengthening of a sustainable, continuous public policy committed to the citizenship of the new generations.

Authorship contributions

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