

<b>Reference</b>	SIHLWA 5/4/1/1_Info1_ADO_Theme1-1_Youthrisk-data-base
<b>Title</b>	Background information on ADO-subgroup Theme : “youthrisk data-base” to be elaborated as thematic paper for the NDPHS data-base website
<b>Submitted by</b>	SIHLWA ADO-subgroup participants Theme 1
<b>Summary / Note</b>	This paper provides a draft for the plan for preparing the thematic paper on youth health risks in the northern dimension partnership area
<b>Requested action</b>	For information and basis for discussion

## **SIHLWA - database on youth risk behaviors**

“NORTHERN DIMENSION YOUTH HEALTH PROFILE”

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### **Background**

Majority of the premature deaths are due to causes related to unhealthy behavior such as smoking, alcohol abuse, lack of physical activity and unhealthy diet. Health behaviors are adopted in early life. Especially smoking and alcohol abuse are usually started during adolescence. The implementation of smoking and alcohol legislation and policies is poor in many countries. Effective models and strategies to prevent smoking and alcohol abuse among youth are needed. Intervention planning and implementation needs comprehensive assessment of risk behavior burden and social and environmental circumstances.

### **Project description**

The National Public Health Institute of Finland proposes to compile a profile on youth's health behaviour and on existing policies targeted at youth's health at north-west Russia and Northern Europe. This youth's health database could serve as a baseline information source for different development programmes and interventions for a Sub-group on Adolescent Health and Socially-Rewarding Lifestyles in SIHLWA working group.

This “NORTHERN DIMENSION YOUTH HEALTH PROFILE” would comprise information on youths (10-25 year olds) substance misuse and other risk behaviour, such as sexual behaviour and nutrition. Besides statistics on prevalence of risk behaviour, database would include information on laws and their implementation, health policies and programs targeted at youth's health-behaviour in north-west Russia and in northern Europe.

The already existing data would be gathered from various sources at these countries, and based on this possible gaps in policies would be identified and recommendations for actions needed pointed out.

The National Public Health Institute has prior experience on data collection and research collation, in Finland from various health monitoring activities and recently from the Development of Child Health Monitoring (LATE) -project, and internationally on health monitoring systems from Finbalt-project and WHO EURO CINDI Programme (Countrywide Integrated Noncommunicable Disease Intervention). The National Public Health Institute has also already existing contacts through this previous co-operation to relevant research organisations at Baltic countries and in Russia, which could be utilized when compiling the information.

## **Procedures**

The aim of the project is to develop a comprehensive picture of the risk behaviors among youth in Northern Dimension countries and existing legislation and policies related to the topic. In data collection the following topics will be prioritized:

1. Collect information on legislation and policies related especially to alcohol and tobacco from member countries in Northern Dimension having special focus on issues related to children and youth (such as sales, advertising, school policies etc.)
2. Collect information on behavioural risk factors among children and adolescents targeting on risk behaviours such as smoking, alcohol consumption, drug abuse, sexual behaviour, traffic etc. from member countries in Northern Dimension
3. Collect information on projects targeted to prevention of risk behaviors among youth and especially their effectiveness
4. Collect information on organizations (i.e. NGOs) and other stakeholders working on this field

This work will be closely linked with the Northern Dimension Partnership in Public Health and Social Well-being data-base project, and will be supervised through the NDPHS Expert Group on Social Inclusion, Healthy Lifestyles and Work Ability (SIHLWA), sub-group on adolescent health and socially rewarding lifestyles.

## **Time schedule**

The work could be done during January-December 2008 and would need 5 person-months personnel resources.

## **Budget**

Budget depends on the extent and number of countries involved. The minimum for a first version consisting of about 5 person months and about 4 visits to data sources would be circa 20.000-30.000 € More detailed budget available for funding agencies.

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