

ADOLESCENT WELL-VISIT

Public Health Issue

Adolescence is an important developmental period to promote optimal health and prevent risky behaviors which can place adolescents at risk for lifelong health problems. Adolescents are among the healthiest populations, with relatively low rates of acute and chronic conditions and high self-reported health status. While enjoying good health, they face a range of physiological and developmental changes, including puberty, increased independence, experimentation, and risky behaviors, which shape their health decisions and needs. This period of unique physical and mental growth requires a range of tailored health services different from that of adults and younger children. Additionally, research suggests that adolescence is a period of opportunity for initiating and developing positive health behaviors that can last into adulthood [1].

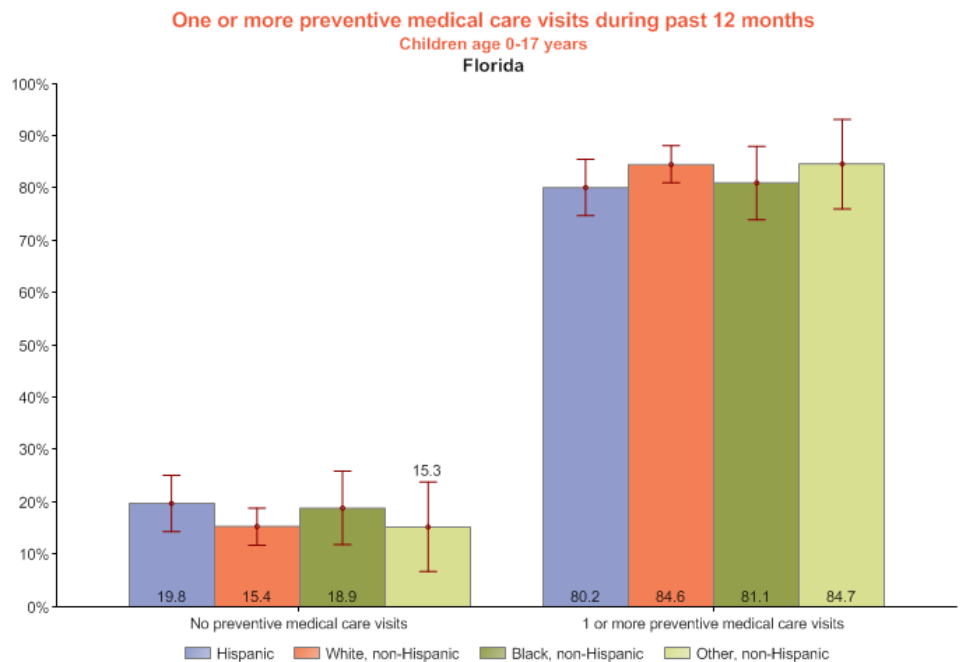
Magnitude and Trend

The adolescent age group has lower well care visit rates compared to adults and young children [2]. These rates likely reflect the challenges of reaching and engaging adolescents in preventive and primary health care.

In 2011/2012, the prevalence of children aged 12-17 years with no preventative medical care visits during the past 12 months was 19.8% in Florida and 18.2% in the nation [3]. According to 2011/2012 data from the National Survey of

Children’s Health, no significant racial/ethnic disparities existed among children younger than 18 years in Florida regarding preventative medical care visits. (Figure 1) [3].

Figure 1



National and State Goals

A number of national measurement frameworks prioritize adolescent well-visits, such as the Children’s Health Insurance Program Reauthorization Act (CHIPRA) Core Measure set and the National Survey of Child Health quality measurement set. The percent of adolescents with a preventative services visit in the last year was also selected as a proposed national performance measure for the 2015 Title V Block Grant. To enhance the national focus, Centers for Medicaid and Medicaid Service released a guide with strategies to increase adolescent well-visit rates for Medicaid members [2].

The Florida Department of Health (FDOH), State Health Improvement Plan (SHIP) includes a goal of improving access to primary health care for all Floridians [4]. Strategies to meet this goal include reducing professional health care workforce shortages and addressing health care service barriers for service providers and care recipients

Current State Programs and Initiatives

The Florida School-Based Health Alliance promotes school-based and school-linked health clinics to provide a safety net for children and adolescents. The goal of the alliance is to increase access to comprehensive health care, resulting in improved health and learning for children and adolescents throughout Florida. There are currently over 50 school-based or school-linked clinics in Florida.

Public Health Strategies and Practices

The foundation of a high quality adolescent well-visit is a comprehensive risk and strength assessment that includes a health history on both physical and mental health development. Private time with the provider and explicit and clear discussion of confidentiality are paramount to high-quality well-visits. Adolescents are more likely to seek care and relay important information about their health when they perceive, and are verbally assured by the provider, that what they discuss will be kept private. Preventive services delivered during an adolescent well-visit contribute to broader public health priorities and population health outcomes [5].

DOH Capacity

The FDOH has 67 local health departments that offer routine health care for children, adolescents, and adults who are unable to afford basic health care. These services include primary medical care, including lab work and necessary tests, and wellness and prevention services, including annual physicals.

In addition, FDOH's Family Planning Program makes family planning and related preventive health services available to both males and females, including adolescents, in all 67 counties through the local health departments or contracted agencies. Family planning services are provided on a voluntary basis in a confidential manner. Available services include pregnancy testing and counseling; physical examinations; screening for hypertension, breast and cervical cancer; and screening, counseling, and testing for sexually transmitted diseases, including HIV. Counseling and education for health promotion and disease prevention are also available. Follow-up and referral services are offered based on the individual's history and need for medical and/or social services.

References

1. Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents. 3rd Edition. American Academy of Pediatrics. Retrieved from: http://brightfutures.aap.org/pdfs/Guidelines_PDF/18-Adolescence.pdf
2. Paving the Road to Good Health: Strategies for Increasing Medicaid Adolescent Well-Care Visits. <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Paving-the-Road-to-Good-Health.pdf>



3. National Survey of Children's Health (2011/2012). Retrieved from:
<http://www.childhealthdata.org/>
4. Florida Department of Health. State Health Improvement Plan. Retrieved from:
<http://www.floridahealth.gov/about-the-department-of-health/documents/state-health-improvement-plan.pdf>
5. Ford C, English A, Sigman G. (2004). Confidential health care for adolescents: position paper of the Society for Adolescent Medicine. *Journal of Adolescent Health*, 35, 2, 160-167.