# The Institute *for* Women's Health

# WOMEN'S OPTIMAL HEALTH FRAMEWORK:

Research to Support Health Policy.
Resources to Equip Health Providers.

# The Institute *for* Women's Health

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# When Women Thrive, We All Do...

# GREETINGS FROM PRESIDENT/CEO VALERIE HUBER

The Institute for Women's Health (IWH) is honored to announce the groundbreaking Women's Optimal Health Framework (WOHF). This Framework was developed to provide concepts and research to support great health policy and evidence-based resources to equip health providers. The Institute's unwavering belief is that Optimal Health for women across the entire lifespan - from the first thousand days of life until her last breath - should be the universal goal. Our philosophy is consistent with the foundational pillars of the Geneva Consensus Declaration (GCD) that honor women, families, life, and national sovereignty.

Protecting and respecting women begins with protecting and respecting girls. IWH is alarmed by the tragedy of selective female abortions and infanticide. The WOHF respects every life, including that of refugees, ethnic minorities, vulnerable populations, individuals with impairments, and all women from their earliest days in the womb, supporting their well-being throughout their lifespan.

Decades ago, Abraham Maslow recognized that physical health and safety were foundational to belonging, social needs, and purpose for an individual. In many ways, that theory reflects the components of Optimal Health: the importance of physical, social, intellectual, emotional, and spiritual well-being. Consequently, the WOHF addresses interventions supporting women and their families across multiple aspects of health, opportunities, and relationships.

Research related to health interventions and outcomes consistently supports the need to address all aspects of well-being. Hundreds of articles have been reviewed to produce the Women's Optimal Health Framework, providing an evidence-based resource promoting high-value, low-cost health promotion implemented across a broad range of cultures and countries. The global shortage of healthcare workers demands action. It is time to fully activate Community Health Workers' potential and develop stable, consistent structures to provide training, connection to health systems, and predictable incentives.

Sovereign countries that are committed to the health and prosperity of their citizens support good health interventions in community, faith, and educational settings, as well as health facilities. Creating and maintaining a healthy environment is not the job of an outside NGO or directed financial aid from another country; it is the role of caring and innovative national and community leaders. IWH applauds the commitment of sovereign countries to improve and enrich the lives of women and their families and sincerely believes the WOHF guidelines will support those goals.

*"Sovereignty means that a country is self-governing and has the ultimate responsibility for its citizens. I strongly encourage national leaders to partner with IWH and use the guidelines and resources of the WOHF to improve and enrich the lives of women and their families in their countries. "*
-Valerie Huber, President/CEO

*"Optimal Health for women must support and value women across the entire lifespan, from the first 1,000 days of life, until her last breath."*
-Valerie Huber, President/CEO

Valerie Huber previously served as US Special Representative for Global Women's Health

# EXECUTIVE SUMMARY

The health of women and girls across the globe has improved over the past half-century, but much remains to be done.  The international approach has been to identify serious diseases such as smallpox, polio, malnutrition, malaria, HIV, etc. and conditions that require special care including pregnancy. These targeted  programs focus on a single problem that is diagnosed, counted, and (hopefully) conquered.  However, care may not be available if a person has a different problem. Most Global Health initiatives have been treating diseases and conditions, not caring for individuals.

The Institute for Women's Health (IWH) has developed the unique Women's Optimal Health Framework (WOHF) to both provide research support for health policymakers, as well as resource support for health practitioners that promotes holistic individual, family, and community wellness. "Optimal Health" includes the emotional, social, intellectual, and spiritual components that complement physical health.  Women are healthiest when strong relationships, opportunities, communities, and faith exist.  Consequently, this health framework identifies interventions that strengthen families and communities along with essential medical and preventive healthcare.

The Women's Optimal Health Framework is the product of an exhaustive review of high-quality research articles, guidelines, and resources. Well over 500 references support the recommendations in the Framework.  The recommended interventions have been reviewed by professionals in public health, psychology, nursing, nutrition, medicine, and midwifery.  The IWH's International Health Council, representing Africa, Latin America, Europe, the Middle East, and North America, has considered the cultural, socioeconomic, and practical applications of the Framework with the aspiration that these interventions can be applied globally.

Healthcare professionals, including front-line community health workers, clinical health providers, health administrators, and national policy leaders, can utilize the concepts and health interventions in the Framework to identify high-impact, low-cost, evidence-based activities supporting individual well-being while strengthening population health.

*"Countries that treasure children are becoming the hope for the global future. These nations seek to protect life and families in meaningful, effective ways."*
*-Alma Golden, M.D.*

*"The Women's Optimal Health Framework seeks to treat individuals, not just conditions. It advocates for women across the lifespan, not merely during the reproductive years."*
*-Alma Golden, M.D.*

The first section of the Women's Optimal Health Framework provides public health concepts and approaches that are associated with improved health outcomes.  The WOHF has clearly identified the benefits of Community Health Workers (CHWs); Community-Wide Health and Safety Initiatives;  Water, Sanitation, and Hygiene Programs (WASH); Addressing Families and Children in Crisis; Healthy Marriage and Family Relationships; Emotional and Mental Health Support; Spiritual Wellness; Child Health and Development; and Optimal Adolescent Reproductive and Relationship Health.  These brief concept papers offer evidence-based observations and interventions framing both national policy and direct patient care.

The second section of the Framework utilizes the previous section on community and population health interventions as a foundation for identifying age-specific interventions from the first 1000 days to the end of life.  Physical assessment, screening, education, and management interventions are based on research and guideline recommendations from the current literature focusing on the "Optimal Health" goal identified above.

The WOHF enables nations to focus on achievable health goals consistent with their sovereign interests, laws, and culture.  The Framework recognizes the dignity and worth of every life.  IWH knows that countries that treasure children are the hope for the global future.  These nations welcome children - both boys and girls - and they protect life, youth, and families in meaningful, effective ways. Although many of these countries are not wealthy, they are rich in community connections, faith, and tradition, consequently providing some of the most meaningful components of Optimal Health inside the fabric of their societies.  These nations seek the well-being of their citizens, not simply the management of selected diseases or conditions.  And that is the ultimate goal of the Women's Optimal Health Framework.

The Honorable Alma L. Golden, M.D.
Chief Operating Officer (COO)
Former USAID Deputy Administrator,
Senate-Confirmed Official

Evidence-based practice " involves providing holistic, quality care based on the most up-to-date research and knowledge..." (American Nurses Association, 2024).

*"The Women's Optimal Health Framework cares for the health of women…*
*not just for health conditions."*
*-Alma Golden, M.D.*

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# Research to Support Health Policy

Policymakers, both in governments and in health systems, want to promote Optimal Health for the people they serve. The COMMUNITY-BASED HEALTH PROMOTION section identifies nine important areas to inform good decision-making and wise use of funds and personnel, each linked to current research and evidence-based programs. In this section, as well as in the following section on interventions, policymakers have access to reliable information that can help them prioritize and justify critical initiatives and interventions to care for people, not just problems.

# Resources to Equip Health Providers

Women and their families benefit from community access to quality healthcare that can prevent possible problems, diagnose symptoms early, treat illnesses effectively, and support chronic conditions with compassion. The HEALTH INTERVENTIONS ACROSS THE LIFESPAN section of the WOHF connects health providers with resources, guidelines, and research to care for individuals through each life stage. Each age-specific section has links that take the provider to valuable information that can be used for health screening, diagnosis, education, and referral. Likewise, health providers are essential contributors to community-based health promotion and are critical to implementing community wellness along with individual Optimal Health.

# OPTIMAL HEALTH

Every aspect of IWH's Protego Strategy, including the Women's Optimal Health Framework, promotes Optimal Health, the highest possible standard of well-being, which includes physical, intellectual, emotional, social, and spiritual health.

- The term was first defined in 2009 but implied in the WHO definition for health, "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.
- Optimal Health prioritizes policies that promote best possible health-outcomes-for-all by emphasizing disease prevention and systems-wide health promotion and by engaging all relevant stakeholders in this endeavor.
- The Framework strongly supports health for all women and their families - regardless of their condition or stage of life - specifically focused on empowerment to reach the highest standard of overall health, not merely the absence of disease.

> "Optimal health is a dynamic balance of physical, emotional, social, spiritual, and intellectual health. Lifestyle change can be facilitated through a combination of learning experiences that enhance awareness, increase motivation, and build skills and, most importantly, through the creation of opportunities that open access to environments that make positive health practices the easiest choice."
> -O'Donnell, 2009

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The Framework applies Optimal Health through four approaches that recognize:

1. Support Systems and Wellness: Individuals learn health choices and behaviors from support systems in their environment, including family, community, education, and faith, in addition to healthcare. These support systems provide examples and patterns that either strengthen or undermine wellness. Optimal Health approaches focus on the continual improvement of the population's overall health, intentionally leaving no one behind and involving every support system to achieve this goal.

2. <u>Health Risks Avoidance:</u> Optimal Health reinforces current healthy behaviors and reduces health risks that can be modified, with the goal of eliminating these risks whenever possible. Success is indicated by an individual's movement away from risk. The Optimal Health model offers hope and positive movement toward healthier outcomes, regardless of an individual's past or current reality. <u>Behavioral choices</u> significantly impact health. When tobacco smoking was clearly linked to cancer and lung disease, a campaign encouraged those who had never smoked not to start, and those who were smoking were encouraged to <u>reduce</u> and then stop tobacco use. The same principles apply to other behavioral choices. For those who have not engaged in other health risks, there are health benefits to continuing to avoid risky behavior. Communities can also commit to <u>reducing and eliminating risk.</u> Providing <u>Water, Sanitation, and Hygiene (WASH)</u> facilities, <u>eliminating stagnant water</u>, managing wastes and pollutants, and promoting <u>hand hygiene</u> can be seen as moving from a high-risk to a low-risk to a no-risk situation in a community.

3. <u>Personal and Family Agency:</u> Optimal Health believes in the power of individuals and families to influence their own well-being through knowledge, <u>motivation</u>, skills, and shared support to maintain <u>healthy behaviors</u> or adopt healthier behaviors in the future. Improving nutrition, physical activity, relationships, risk behaviors, <u>sleep</u>, and work routines can be possible. Risky <u>personal choices</u> around alcohol use, tobacco use, drugs, violence, and high-risk sexual behaviors can be reduced or eliminated through <u>personal decision-making</u> and appropriate support. Every individual across the lifespan is valuable, from conception to end-of-life, and should be supported to attain Optimal Health. No person should be viewed as incapable of improving his or her choices and life outcomes. Optimal Health is a framework that offers hope and help to improve well-being.

4. <u>Social Norms for Public Health Improvement:</u> Social norms establish an <u>environment</u> that can either improve or damage the health and well-being of individuals in a community or society. Strengthened <u>social norms</u> can reduce the incidence of behavioral risks and health threats. The WOHF consistently promotes <u>community support</u> for every person at every life stage, including vulnerable individuals and those with developmental or <u>physical challenges.</u> The WOHF also advocates for the prevention of violence, coercion, and neglect. Public health should <u>promote Optimal Health</u> through various means to encourage physical, intellectual, emotional, social, and <u>spiritual well-being.</u>

# OBJECTIVES OF OUR LITERATURE REVIEW

- To contextualize health and well-being using the Optimal Health model, leaving no woman behind.

- To educate on the unique health challenges faced by women at different life stages.

- To identify key factors that impact health, specifically for women.

- To develop an inclusive resource of evidence-based interventions tailored to women's unique health needs through all stages of life that are high-impact, low-cost, and can be efficiently implemented.

- To recognize the importance of supporting the health of an entire family to improve women's health.

- To create a resource packet that can guide healthcare professionals, policymakers, and community leaders in implementing these interventions.

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*"Without scientific evidence, global health policy is weakened and could be dangerous. Nancy Fullman and her colleagues argue that policy decisions are undermined if they are based on evidence that is 'incomplete, incomprehensive, or incomparable over time and across geographies.' Without evidence, it is difficult for policy-makers to know how to prioritize resources, which interventions to scale up, and whether policies are benefiting the population. It is more important than ever to ensure that health aid funds are allocated to interventions with high impact."*

*— The Handbook of Global Health Policy (Handbooks of Global Policy) by Garrett W. Brown, Gavin Yamey, et al.*

# Community-Based Health Promotion:

## Interventions to Support Personal and Population Well-being

The following nine concept notes each briefly describe Optimal Health approaches that can improve the health and well-being of individuals, families, and communities. Each document contains background information and suggested interventions that are linked to research and resources. These concept notes aim to recognize the public health value of community-based approaches, policies, and programs and encourage thoughtful support and expansion of these interventions.

# Community Health Workers

There is a global shortage of healthcare workers. Low-resource regions and countries seeking to improve infant survival, treat infectious diseases, reduce maternal mortality, and address metabolic and cardiac conditions have inadequate numbers of nurses, physicians, laboratory technicians, and pharmacists. Often, once a young healthcare provider is trained, they are offered a better-paying job far away from their home or country, which is referred to as "Medical Brain Drain." Chronically under-staffed health facilities result in delayed, limited, or deficient care and diminish the capacity of a nation to reach development objectives. This situation calls for innovative, context-appropriate, and cost-effective solutions.

The Women's Health Framework (WOHF) recognizes that to achieve development goals, health interventions must be close to home: in the clinic, community, school, faith group, and local civic society of each family and individual. When health behaviors and activities are taught and supported by local, trusted colleagues, health patterns are more quickly adopted, healthcare is seen as accessible and affordable, and the quality of life improves. That is why this WOHF strongly supports Community Health Workers (CHWs).

CHWs are primarily health personnel who work in their own communities, serving as liaisons between health services and their neighbors and often sharing the cultural, language, and socioeconomic characteristics of the people they serve. This intrinsic cultural competency reinforces trust, clear communication, and collaboration between the community and the healthcare system.

Over the past twenty years, CHWs have demonstrated the capacity to improve access to healthcare services. Many low-resource regions and countries have vast rural or disadvantaged areas with limited access to healthcare services. CHWs bring those services closer to home through education, health services, and medical referrals. Resources like the Community Health Planning and Costing Handbook help CHWs implement lasting changes. There are many studies to support the cost-effectiveness, positive impact, and high value of CHWs.

For a comprehensive review of Community Health Workers please visit: Health Research Policy & Systems "Community Health Workers at the Dawn of a New Era" (2021)



## Disease & Injury Prevention

Disease prevention and control can be improved through CHWs. CHWs can promote vaccinations, good hygiene, a healthy environment, early detection of new community infections, management of neglected tropical diseases (NTDs) through community treatment, and screening for diabetes and hypertension. They can provide education on cooking safety, burn safety, environmental contaminants, and reducing unintentional childhood injuries. They perform screenings and identify symptoms in individuals who might not seek medical attention due to factors such as poverty, geography, or cultural barriers. This access reduces health disparities for diseases like cholera, tuberculosis, ebola, HIV/AIDS, and pandemics.
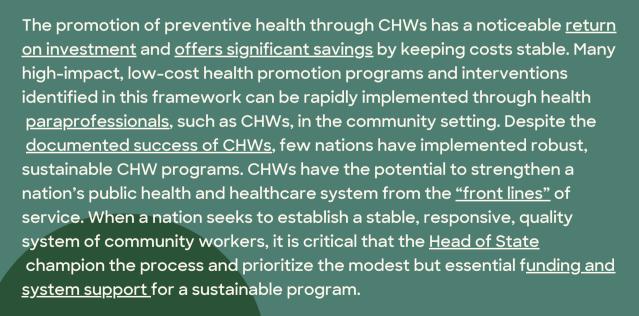
## Improved Maternal and Child Health

Maternal and child health can be effectively supported by CHWs. Studies have shown that home visits are capable of reducing neonatal mortality by 30-61% in high-mortality regions. Home visits by CHWs, trained birth attendants, and/or midwives can deliver enhanced prenatal care, early referral for high-risk pregnancies, safe delivery practices, skin-to-skin contact known as Kangaroo Care, early and successful breastfeeding when possible, and immunization compliance. In addition, CHWs can be trained to diagnose and treat common illnesses such as pneumonia, diarrhea, and malaria. Nutrition for both mothers and children can be improved by CHWs as they promote breastfeeding, educate on food selection and preparation, and distribute micronutrient supplements. These interventions positively influence maternal health and child health and development.

## Community Support, Recruitment, and Training

Community workers are part of the community health system and can also encourage family and neighborhood activities to support child development, learning, and emotional resilience. Community Health Workers can provide cost-effective care in resource-limited areas and conflict settings, including refugee and migrant communities. The recruitment of CHWs by a health system in collaboration with the community strengthens the CHWs' role as health advisors and leaders. Following recruitment, training may be best completed in their home community or nearby. Training varies by geography, culture, and community health needs, but should involve both pre-service and ongoing education. Standards for initial training, certification, and continuing supervision assure quality of care as well as coordination with the local health system.

Several factors determine the stability of the Community Health Worker services. Although many CHW programs were started with volunteers, sustainability is improved if <u>stipends and support (bicycles, phones, uniforms, etc.)</u> are provided. The models for <u>CHW incentives and compensation</u> vary widely and can be developed to address cultural patterns, community health priorities, and health systems. By focusing on <u>preventive health,</u> CHWs offer significant value by providing early identification of patient problems and consequences that may need significant medical attention.



The promotion of preventive health through CHWs has a noticeable <u>return on investment</u> and <u>offers significant savings</u> by keeping costs stable. Many high-impact, low-cost health promotion programs and interventions identified in this framework can be rapidly implemented through health <u>paraprofessionals,</u> such as CHWs, in the community setting. Despite the <u>documented success of CHWs,</u> few nations have implemented robust, sustainable CHW programs. CHWs have the potential to strengthen a nation's public health and healthcare system from the <u>"front lines"</u> of service. When a nation seeks to establish a stable, responsive, quality system of community workers, it is critical that the <u>Head of State</u> champion the process and prioritize the modest but essential f<u>unding and system support</u> for a sustainable program.

# Summary: The Public Health Vision for CHWs

Community Health Workers should live in the area they serve, be trained through an initial education program with continuing education, be respected and trusted by their community clients, and be fairly compensated for their work.
Three systems are critical to optimizing Community Health Workers: good guidelines; strong, connected health systems; and sustainable community and national support.

**First,** good guidelines can provide CHWs with clear roadmaps for basic health surveillance and health education. Smartphone technology has reached most of the world, providing a link to CHWs that can support routine health screening and basic decision-making tools for appropriate diagnosis, treatment, and referral.

**Second,** CHWs need robust connections to the local health system to share critical health screening and monitoring data on local clients and to ensure continuity and care for individuals needing referrals and medical management. The electronic health records, accessed by a smartphone or similar device, can be shared with the local health system and should be supplemented by a personal medical record that empowers self-management and good health patterns.

**Third,** national leadership, especially the Head of State and the parliamentary body, demonstrates commitment to local communities by endorsing, funding, and credentialing stable, quality CHW programs. CHWs represent a nation's commitment to preventing and managing basic health concerns affecting millions of citizens, consequently improving individual, family, and national well-being.

# Community-Based Interventions

## Health Initiatives

An individual's health is linked to the health of the community; therefore, families and community leaders can improve well-being in critical ways through shared responsibilities and initiatives. Many of these interventions are addressed in the information below.  Malaria education is best done through community education, net distribution, insecticide-treated nets, elimination of stagnant water sources, and indoor residual spraying.  Community campaigns with the new Malaria vaccines and antiparasitic medications can also reduce the burden of disease.  Likewise, tuberculosis and HIV/AIDS prevention or management often begin through community-wide education and screening programs.  Neglected Tropical Diseases (NTDs) are poorly controlled through treating individuals one at a time.  However, interventions that treat entire communities through mass drug distribution (MDA) can effectively prevent anemia, severe generalized illness, or blindness.  Many NTDs have the potential to be eliminated through mass treatment programs, consequently improving the health, education, and productivity of a community. The expenses associated with these interventions represent a small portion of the overall benefits to the community.

## Community Interventions

Community interventions are essential to addressing safety. Vehicular injury is a leading cause of trauma and death, especially among children and adolescents. Implementing road safety measures such as safe walking trails; simple, enforced road rules; speed bumps; speed limits; and careful monitoring of children all reduce morbidity and mortality. A community can receive training, such as "Stop the Bleed," to respond to trauma injuries and stabilize patients quickly, allowing them to reach medical care. Additionally, burns are a serious threat to young children with immature mobility and a poor understanding of fire, making it crucial for caregivers and parents to implement strict safety measures and provide close supervision to children around potential fire hazards.

## Household Safety

Household safety is also important. Safe disposal of trash and environmental hazards can minimize home and neighborhood toxins and fires. Parents and caregivers can be encouraged to use safe cooking devices, such as small gas appliances, to reduce indoor pollution, respiratory problems, as well as burns.

## *Farming, Agriculture, and One Health*

Farming activities, livestock management, and contact with wildlife can expose individuals to diseases, injury, or potential contaminants. The One Health programs in many countries offer community guidance and education related to these risks.  Local agricultural activities are the best foundation for good nutrition, but guidance related to soil health, balanced diets, and micronutrients is often best provided through schools, faith groups, community organizations, and community health workers.  Preventing disease through healthy environments is vital for every community to flourish.

## *Violence Prevention*

Violence, both in the home and in the community, drastically diminishes both physical and mental health.  Although the development of strong reporting, fair laws, and law enforcement are critical to curbing violence, it is important to change hearts, minds, and behavioral patterns.  When schools and faith groups support non-violence based on facts and faith, youth can understand that violence is unacceptable socially and spiritually.  All types of violence must be condemned including domestic violence, human trafficking, and child or elder abuse. Violence against women must never be tolerated.  Faith leaders, community leaders, educators, and family members can coordinate to actively condemn all forms of domestic violence, and develop norms to protect all community members, especially the most vulnerable.

# Water, Sanitation, and Hygiene (WASH)

Many low to middle-income countries experience challenges with water, sanitation, and hygiene (WASH). Poor infrastructure, social stigma, and economic factors can make it difficult for all individuals and families to access clean drinking water. Women commonly assume the task of providing daily water for their families.

Currently, billions of people worldwide do not have access to WASH. This massive global problem must be addressed in order to obtain Optimal Health. An intervention as simple as basic education in WASH can profoundly impact individuals, families, communities, and countries by reducing disease, illness, and death.

For women, a primary focus for Global Health leaders is menstrual health. Menstrual health practices are important to prevent reproductive problems, infertility, birth complications, serious health risks, embarrassment, exclusion, missed educational opportunities, and reproductive problems. Hand washing and proper disposal of menstrual products are necessary to prevent the spread of infections. Good menstrual hygiene practices are necessary to support Optimal Health for women and girls. A comprehensive strategy for demystifying menstruation fosters future reproductive health, enhancing educational prospects and achieving the best possible health results.



"Today, however, in the 21st century, an estimated 2.2 billion people in the world do not have access to safe drinking water and 4.2 billion people do not have access to safe sanitation."
-UNICEF & WHO, 2021

# Water, Sanitation and Hygiene (WASH)

- Disinfection: shock and pot chlorination
- Successful source selection, water hygiene, household drinking water, and infant nutrition
- Household water treatment: chlorine-based products, filters, solar disinfection, boiling, removing standing water, safe water storage
- Community-driven sanitation: eliminate open defecation, latrine utilization, toilet use, the importance of maintaining shared toilet sanitation, hand-washing
- Proper trash disposal, drainage, and landscape improvements to remove solid and liquid waste
- Management of bodies after death
- Personal and environmental hygiene promotion: WASH education and training, environmental health recommendations
- Hospital water hygiene and hospital water disinfection

WASH interventions are provided to large populations to reduce the risk of disease transmission in various settings, especially outbreaks of Cholera, Ebola, Hepatitis E, and other diseases.

# Families and Children in Crisis

In today's interconnected world, crises affecting families and children have become increasingly complex and widespread. Disasters are typically <u>classified into several categories</u>, including natural disasters and major disease outbreaks, mass violence and human-made disasters, and technological disasters. Regardless of the category, millions of families find themselves in crises that demand urgent attention and support. Addressing the needs of families and children in crisis requires coordinated efforts, empathy, and a commitment to <u>comprehensive</u>, integrated, long-term solutions. Nations, organizations, businesses, and faith groups that invest in humanitarian aid, education, healthcare, and psychosocial support contribute to building a more resilient and compassionate world where families and children are better equipped to overcome the challenges of crisis situations. National governments have the <u>sovereign responsibility</u> to identify potential threats, prevent and prepare for possible crises, and then protect and support their citizens when problems occur.  This involves implementing <u>effective policies</u> that facilitate aid, protect rights, and support recovery. The good news is that most individuals, families, and <u>communities</u> are <u>generally resilient</u> following disasters and manifest few or no long-term adverse health outcomes, a finding consistently documented in numerous studies.

### *Families in Crisis:*

The impact of war, armed conflict, or natural disaster extends beyond casualties and destruction, affecting the very fabric of families. Separation, loss of homes, economic upheaval, disrupted schooling, and the uncertainty of the future are challenges families face in crisis.  Separation from loved ones by death, war, or migration, and the breakdown of support networks can lead to feelings of isolation and abandonment. Immediate relief to families and children in crisis is critical, including food, shelter, and clean water. Medical assistance is also essential to treat physical injuries and respond to ongoing health conditions. Tailored programs addressing <u>parenting skills during a crisis</u> and <u>supporting caregivers</u> of children are essential for long-term recovery and <u>resilience</u>. Restoring a sense of normalcy and community is crucial. Initiatives promoting social integration - such as community centers, regular school classes, and support groups - help families rebuild their lives by providing children with stable environments.

### *Children in Crisis:*

Children are among the <u>most vulnerable victims</u> of crisis situations, and their mental health and well-being may experience <u>lasting effects</u> as a result. Children may exhibit behavioral issues such as aggression, withdrawal, or regressive behaviors as coping mechanisms and signs of emotional distress. Avoid forcing children to talk about their experiences if they are not ready. Instead, provide <u>supportive environments</u>, with <u>supportive family</u> if possible, in order to allow children to express themselves when they feel comfortable to facilitate healing.

Crisis situations increase the risk of child protection issues, including <u>abduction, recruitment into the armed forces</u>, <u>child labor</u>, and exploitation. <u>The International Labor Organization (ILO)</u> notes that crises risk forcing children into hazardous and <u>exploitative work conditions</u>, compromising their health and safety. Families, already struggling to meet basic needs, sometimes find it challenging to protect their children from various forms of harm, perpetuating cycles of vulnerability. Disruptions in their education exacerbate long-term challenges, hindering social adjustment, skill-building, and opportunities for their futures.

Efforts to mitigate adverse childhood experiences can include safe and <u>child-friendly spaces</u> for education, psychosocial and spiritual support, and recreational activities to build resilience and healing from trauma. <u>Educational Initiatives</u> should focus on providing emergency support for learning in conflict and disaster-affected regions. Additionally, policies prioritizing children's well-being should be implemented during and after crises. These policies address their unique needs and vulnerabilities. <u>Empowering children</u> to help others and create improvements in their communities through education and skill-building programs builds resilience and a sense of self-sufficiency.

### Abuse, Violence, and Intervention:

Conflict zones often see an increase in abuse and violence, particularly affecting women and children. The IWH condemns all forms of abuse, violence, and rape as despicable acts of war. These are heinous and destructive crimes against humanity. The use of physical, emotional, or psychological abuse and violence is morally reprehensible and a grave violation of international humanitarian law. Abuse and violence targeting vulnerable citizens exacerbate the cycle of fear and destruction disrupting communities. Rape as a tactic of war represents one of the most abhorrent aspects of armed conflicts. It is a deliberate strategy employed to instill fear, exert control, and degrade the dignity of individuals and communities. Rape not only causes immediate and long-term physical harm but also leaves survivors with deep emotional scars, perpetuating trauma lasting a lifetime. Rape is an affront to human rights, gender equality, and the principles of humanity itself.
Preventive measures such as awareness campaigns and legal protection help to ensure safer environments for women, children, and families. Government leaders, civil society members, faith leaders, and individuals must condemn abuse, violence, and all violations of protection and safety. Every individual should live free from the fear of violence and abuse, even during conflict.

### Psychosocial and Mental Health:

The psychological toll of crisis situations is profound. It often exposes children and families to traumatic events, including natural disasters, violence, injury, displacement, terminal diagnosis, divorce, unemployment, and loss of loved ones. Experiences like these can lead to acute stress reactions and may develop into more severe mental health conditions. Families and children may experience anxiety related to safety, survival, and the future, which increases the likelihood of depression in both children and adults. Grief and loss manifest in complicated ways, impacting psychological well-being. Some refugee and crisis programs have developed emergency mental health initiatives that can be implemented to support victims in distress. Both parents and children may experience mental health issues, requiring targeted psychosocial support. Early, brief psychosocial interventions are one of the most important predictors for resilient parents and children. The availability of individual, family, and community psychosocial resources appears to be effective in reducing and mitigating adverse health consequences.

# How to Help Families and Children in Crisis:

**Immediate Relief Priorities:**

- Ensure access to safe shelter, food, and medical care.
- Psychological First Aid: assessment, crisis intervention, and trauma treatment

**Education and Skill-building:**

- Empower families and children with education and skills for self-sustainability
- Healing After Trauma Skills (HATS): facilitated by teachers, psychologists, social workers, community health workers, and other counselors working with children from kindergarten to early middle school
- Disaster Preparedness Nutrition Education Program (DPNEP)

**Psychosocial Support:**

- Implement programs assessing and treating the psychological impact of crises:
  - Assessment, Crisis Intervention, and Trauma Treatment Model (ACT)
  - Johns Hopkins RAPID Model of Psychological First Aid
  - Listen, Protect, Connect Model of Psychological First Aid
  - Faith Communities & Disaster Mental Health

**Protection Measures:**

- Establish and enforce measures protecting children and families from abuse and violence

**Community Integration:**

- Facilitating the integration of displaced populations into host communities for social cohesion
- Prayer/Worship Services/Events: Religious leaders help communities find meaning in crisis by providing opportunities for prayer/worship services, an essential foundation for community recovery

# The Importance of Faith-Based Organizations in Crisis Response

In an era marked by both local and global crises, <u>faith-based organizations</u> have emerged as crucial pillars of support for <u>vulnerable</u> children and families. Driven by spiritual convictions and humanitarian principles, these organizations actively bridge gaps left by governmental and secular agencies.

Faith-based groups are often the <u>first line of defense</u> for families in crisis. They provide essential services such as <u>food</u>, clothing, and shelter, particularly in areas where governmental support is limited or slow to respond. In the event of <u>natural disasters</u>, faith-based organizations are frequently among the first responders, providing aid, rebuilding homes, and offering trauma counseling. These groups often provide emotional and spiritual assistance through counseling services to individuals and families coping with trauma, stress, or loss. The community-centric approach of many faith-based organizations promotes a feeling of belonging and supports resilience.

On the global stage, the impact of faith-based organizations is profound and far-reaching. In response to international disasters, groups representing a <u>variety of religions</u> are often among the first to provide emergency aid and medical care in affected areas. Many faith-based groups set up clinics, conduct vaccination drives, and provide surgeries in underserved areas, combatting diseases and improving overall community health.

In areas ravaged by conflict or natural disasters, faith-based organizations engage in rebuilding efforts, going beyond immediate relief to ensure sustainable recovery. One way this is done is through educational approaches, such as providing schools and vocational training, aiming to break the cycle of poverty and empower future generations. Peacebuilding and reconciliation programs in conflict zones not only address immediate needs but also foster long-term commitment to fostering harmony and stability.

Faith-based organizations play an indispensable role in aiding children and families in crisis, both at local and international levels. Their unique blend of practical help, <u>emotional guidance</u>, and spiritual support make them invaluable in the global effort to alleviate suffering and promote human dignity. As the world continues to face complex challenges, the compassionate and coordinated efforts of these organizations remain a beacon of hope for the most vulnerable.

# Healthy Marriage and Family Relationships

If a nation seeks to strengthen the health of its citizens and communities, it is wise to promote healthy families. There are many potential health and personal benefits when individuals are part of a caring family, as the family is the most common source of food, shelter, and safety. It is the most basic unit of belonging, acceptance, and identity. People without a strong family structure often feel lonely, and loneliness is frequently linked to poor health, depression, antisocial behaviors, and even premature death.

Individuals learn life patterns from the family, including important health behaviors, nutrition, sleep, exercise, and coping skills. The family is the most frequent source and reinforcement of values, faith, education, purpose, support, work habits, and commitment to others, and this is where these principles are reinforced. In addition, the family is society's foundation for economic, social, and emotional well-being. Health education without the promotion of healthy mothers, fathers, and extended family is often limited in impact because the most critical support of healthy decisions and actions is ignored.

Each spouse's family of origin impacts the creation of a healthy family. If each marriage partner grows to maturity with caring, committed parents who share respect, responsibilities, and trust, then they are more likely to carry those attitudes and behaviors into a healthy marriage. The Institute for Women's Health created the Three Generation Model for Adolescent Health (AdGen3) and The Parent Guide, promoting strong multi-generational bonds supporting youth through adolescence and as they prepare for their future careers and families.

Adolescents and young adults should be fully informed about the health, social, emotional, and financial benefits of a healthy marriage. These lessons can be shared through their families, faith groups, and schools. Skills related to communication, conflict resolution, financial literacy, sharing responsibilities, and future parenting should be included. Finally, respect for the value of children and the dignity of life and the lives of others should be emphasized in each lesson.
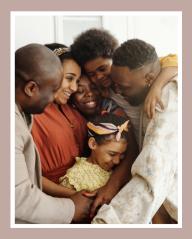
Consistent messages from school, faith, and community leaders should clearly condemn violence, especially family violence. Violence in a family has many immediate and long-term health and social consequences. Local laws and law enforcement should protect victims and prosecute perpetrators. Leaders in churches, mosques, temples, and communities should teach youth through their sacred texts to respect and protect each other, especially women, and to condemn violence. Similarly, when youth are valued, supported, and have educational and career opportunities, they will be better equipped to develop skills to avoid, resist, and/or recover from coercion, abuse, and violence.

Premarital education and counseling equip young couples with skills that reduce confusion and conflict in early marriage and family formation. Some governments, like Hungary, are providing incentives for couples to marry and have children. Counseling before marriage can also allow health information to be shared, including genetic diseases (such as sickle cell disease), chronic illnesses, or sexually transmitted diseases/HIV. Mutual respect, responsibilities, and emotional intelligence in marriage can be discussed, as well as shared values, faith, and family goals, including planning for children. Awareness of fertility cycles and age-related windows is important for a couple. Early adult pregnancy is recommended before fertility decreases with increasing age.

The future of each country is dependent on the next generation. Many countries are now facing a serious population decline that will limit their future productivity and survival. Couples who wish to have children should be supported by their nation and community. Early adult pregnancy is recommended before fertility decreases with increasing age.

# Emotional and Mental Health

The Institute for Women's Health recognizes the critical role of <u>emotional and psychological health</u> in people's overall well-being. The Women's Optimal Health Framework addresses several, often overlooked, aspects of mental health and advocates for comprehensive, accessible, and <u>culturally sensitive mental health support</u> and services. Early identification of substance use disorder and mental health screening is a positive strategy. The <u>prevention</u> and <u>management</u> of significant mental health issues on a global scale requires <u>policy,</u> <u>healthcare</u>, community, individual, and family collaboration.

## *Developing Healthy Habits*

Promoting emotional and mental wellness starts with helping people develop habits of <u>self-care</u> throughout their lifespan, such as prioritizing <u>sleep</u>, <u>eating well</u>, and staying <u>active</u>. <u>Mindfulness</u> and relaxation techniques reduce anxiety, increase self-awareness, and improve overall mental wellbeing. An effective low-cost strategy is to encourage good sleep habits.

<u>Sleep</u> is critical to mental wellness. Ensuring that all people develop a consistent bedtime routine with at <u>least 7 - 9 hours of sleep</u> supports mental health. Other wellness strategies include developing a wellness plan with favorite activities. Staying physically active through walking, games, and creative activities releases endorphins and reduces stress. These are just a few of the many wellness strategies promoting Optimal Health for women. When wellness plans are neglected, the likelihood of experiencing a mental health challenge increases.

Mental health challenges frequently occur at the same time as substance use disorders. <u>Co-morbid mental health</u> and substance use disorders require early identification to increase Optimal Health outcomes. Genetic and environmental risk factors determine the likelihood of someone experiencing a mental health crisis. People with genetic risk factors may try to cope with environmental stress by <u>using substances.</u> Significant research has linked highly potent THC in <u>cannabis</u> products with early onset of psychosis in people with genetic risk factors, including <u>schizophrenia in</u> both <u>men and women</u>. Strong health policy <u>discourages the legalization</u> of highly potent THC products and discourages the use of substances, especially in adolescent populations.

Over the past two to three decades, there has been an increased awareness of situations associated with physical and mental health problems. Adverse Childhood Experiences (ACEs) studies have highlighted the increased risks of youth and adult depression, substance abuse, relationship failures, physical illness, self-harm, suicide attempts, and chronic diseases when children are exposed to violence, instability, and abuse. The first goal of interventions for mental health should incorporate efforts to prevent experiences that trigger serious mental health problems. Safety, caring, family support, faith, community resources, good schools, delayed dating, and available healthcare can support Optimal Health.

### Individual

An individual suffering from poor mental health can cause various problems that have unintended effects on the family, community, and country. Access to early interventions such as counseling, community or faith support groups, online resources, and, if available, pharmacotherapy can drastically improve outcomes for people with these challenges.

### Family

Prevention and management of post-partum depression (PPD) is important for women and girls. Early recognition of the mental well-being of an individual often affects the entire family unit. Parental mental health issues can have long-lasting impacts on children, affecting their academic performance, social interactions, neurodevelopment, and unhealthy attachment patterns. Resources like family therapy, teletherapy services, online resources, and primary healthcare models that include mental health services can significantly reduce treatment costs, medications, and strain on families.

## Community

A community's ability to thrive is closely tied to the mental health of its members. Consequently, communities must decrease the negative stigma of seeking help. Untreated mental health issues can also lead to decreased work performance, affecting businesses and services, and increased healthcare costs for emergency, long-term care, and other mental health services. Prevention interventions make communities safer by reducing homelessness, strains on welfare systems, availability of dangerous drugs and alcohol, and crime rates. "Mental Health First Aid" training can help teachers, community health workers, faith leaders, law enforcement workers, and others identify and respond compassionately to distressed individuals and families. Communities with robust mental health support interventions such as community and faith-based support groups, workplace wellness programs, and school programs are better equipped to handle crises and challenges. Public awareness campaigns on mental health help educate the public, reduce the stigma, and promote help-seeking behaviors that foster a more resilient and harmonious community.

## Policy

Policy-level interventions for mental health include implementing laws that protect the rights of individuals with mental health issues and developing treatment options. Community health workers can prevent increasing costs and serve as a bridge between the community and healthcare services by providing screenings, basic counseling, referrals, and more. A more holistic and effective mental health support system strengthens all community members through collaboration.

# Spiritual Well-being

The IWH recognizes that Optimal Health includes a sense of purpose, shared values, and resilience, which are part of the transformative power of faith, religion, and spirituality. The diverse tapestry of beliefs that make up our global community helps to form and define cultures and communities.  Faith practices help to establish social norms, family patterns, personal values, and national priorities. Advocating for the importance of spirituality for individuals, families, and societies is a priority.



At the individual level, faith and spirituality often serve as sources of resilience, providing individuals with the emotional and psychological strength to navigate life's challenges. Studies have shown that a strong spiritual foundation can contribute to better mental health outcomes, lower stress levels, and even improved physical health. Additionally, faith often provides a moral compass, a source of stability, and a sense of purpose.

In the family setting, faith can act as a unifying force, offering a shared set of values and ethical guidelines that can be passed down through generations. Adolescents benefit from a sense of belonging and guidance from engaging in faith activities. As the basic building block of society, spiritually engaged families are strengthened with shared traditions, such as participation in faith groups, prayers, and moral teachings. This can create a more stable and nurturing environment for all its members.

Religious and spiritual institutions often serve as community hubs, offering social support networks and charitable services alongside spiritual guidance. These institutions can be particularly beneficial for women and children, offering educational programs, healthcare services, and safe spaces for social interaction. Whether it's a church organizing a food drive, a mosque offering educational services, or a temple hosting a community event, the positive impact is felt far beyond the walls of the house of worship.

Faith-based organizations often lead efforts to protect the vulnerable, advocate for justice, and respond to humanitarian needs at local, national, and international levels. Faith-based health systems have provided compassionate care throughout the world for centuries and are an example of the effective use of religious resources and volunteers to improve lives, communities, and nations.

Faith, religion, and spirituality offer multifaceted benefits that align closely with enhancing women's, children's, and families' health and well-being. Spirituality provides emotional support, strengthens family and community bonds, and contributes to broader humanitarian efforts. As we work towards a healthier, more honest world, the positive contributions of faith and spirituality should not be overlooked.

The benefits of religion or spirituality to physical, mental, and social health are significant. In the modern world of stress and uncertainty, faith, spirituality, and religion are anchors for individuals, families, and communities. Spirituality offers solace and guidance and significantly impacts the well-being of individuals, families, and communities. A deeper look at the positive impact shows that religion and spirituality benefit health, including blood pressure, C-reactive protein levels, and cardiovascular health markers. Several studies show that religious practices increase healthy diet and exercise, decrease coronary heart disease, and improve endocrine function.

Spirituality gives people meaning in their lives, and spiritually healthy people have a strong sense of purpose, belonging, and identity. Spirituality is recognized as a key component in promoting mental health and well-being, particularly in the management of disorders like depression, anxiety, substance abuse, and trauma-related disorders. Spirituality and religion aid the recovery of individuals coping with health challenges or dealing with addiction and trauma. This is important because severe mental health disorders can reduce life expectancy anywhere from 10 to 25 years. Other studies found that most who sincerely practiced their religion were less likely to attempt suicide. Spiritually healthy individuals are more resilient. They are able to bounce back from adversity. Also, spiritually healthy people are less likely to engage in risk behaviors such as alcohol, drug abuse, and cigarette smoking. This is especially important for adolescents because each of these can have dramatic health consequences throughout their lives. Studies show that religious or spiritual people are less stressed and have better mental health. Spirituality reduces the effects of stress, depression, and inflammation, as well as improves self-esteem, self-efficacy, and community connection.

Spirituality-based interventions have been shown to improve mental health, particularly in <u>marginalized communities</u>. These interventions focus on enhancing spiritual well-being alongside mental health, offering a holistic approach to care. Practices such as <u>mindfulness meditation</u>, often rooted in religious spirituality, have been shown to improve mental health by <u>enhancing personal growth</u>, life satisfaction, and quality of life.

People with an active faith feel a broad sense of connection to something larger than themselves. Active religious practice improves <u>social health</u>, which is important because loneliness and social isolation are associated with higher risks of <u>heart attack and strokes</u>. In fact, research shows that loneliness and social isolation can be as damaging to an individual's health as <u>smoking 15 cigarettes per day</u>. A lack of social connections also had an effect on hypertension that was greater than that of clinical <u>risk factors such as diabetes</u>. Faith communities provide social support and informal caregiving to individuals and families. Faith-based organizations play a crucial role in <u>youth development</u>, offering programs and services that foster positive growth. Many of these organizations provide structured activities, caring adults, and spiritual guidance that positively impact the development of teens. Such support is invaluable in shaping the character and well-being of the young. Additionally, spirituality and religion are key components in the prevention, treatment, and recovery of substance use disorders. Faith communities are uniquely positioned to <u>support recovery and resilience</u>, offering resources and programs to assist those struggling with

The intersection of faith, spirituality, and religion with mental and physical health is profound and multifaceted. As we continue to face global challenges and individual struggles, the nurturing role of faith-based communities and spiritual beliefs remains a cornerstone for resilience and well-being.

# Child Health and Development

Optimal developmental health from conception to adolescence is crucial for ensuring the well-being and future success of individuals. It is vital for shaping a generation of physically, cognitively, emotionally, socially, and spiritually resilient citizens. Investing in early childhood development benefits individuals and contributes to the overall well-being and prosperity of families, communities, and countries. The best supporters of childhood development are the parents. Programs encouraging parenting skills, parental engagement, emotional intelligence, shared play, reading, and good nutrition are central to healthy development.

### *Foundation for Future Health*

From before conception, proper nutrition, prenatal care, and a supportive environment contribute to the prevention of health issues in adulthood. Lifestyle habits established during childhood significantly influence long-term health outcomes and reduce the risk of chronic diseases, such as obesity, diabetes, and cardiovascular issues.

Routine healthcare is integral to ensuring a child is thriving. By providing a means for early intervention conditions such as infectious diseases, nutrient deficiency, and growth stunting can be detected and prevented. The most impactful is during the newborn and childhood phases. Policy leaders and providers must urgently address prenatal growth challenges, lack of micronutrients, and early malnutrition to avoid growth stunting, decreased cognitive abilities, various health conditions, and even limitations in future fertility. Nearly half of deaths among children under five years of age are linked to undernutrition.

Oral rehydration salt (ORS) therapy is lifesaving during critical illnesses leading to dehydration, especially diarrhea-inducing infections. National and local campaigns promoting the accessibility of this critical, low-cost, easy-to-use treatment in various communities through CHWs, schools, and other sites have been pivotal in preventing the loss of life for babies and children at greater risk of death from diarrhea.

### *Legal Documentation Rights*

The <u>International Covenant on Civil and Political Rights</u> and the <u>Convention on the Rights of the Child</u> state that all people have a right to birth registration. Fundamentally, birth registration <u>aids in early childhood development</u>, and permits the <u>recognition and protection</u> of children. Birth registration especially affects the vulnerable, within their national social systems to access opportunities such as <u>education</u>, healthcare, citizenship, legal protection, and even welfare benefits if needed.

### *Healthy Family and Relationship Success*

The experiences, interactions, and <u>emotional bonds</u> formed during childhood impact individuals' ability to engage in <u>healthy and fulfilling connections</u> throughout life. <u>Secure attachments</u> with caregivers during childhood develop trust, the foundation of healthy adult relationships with family and peers. <u>Quality parenting</u> and the <u>parent-child relationship</u> significantly influence future mental, social, and emotional development. <u>Fathers are essential</u> to a <u>child's development</u>, bringing both care and protection. Fatherlessness has increased around the world and is associated with increased poverty, <u>school failure</u>, and emotional and social problems.

### *Cognitive and Academic Success*

Adequate cognitive development during childhood is linked to academic success. <u>Early learning experiences</u> stimulate intellectual curiosity, language skills, and problem-solving capacities. Many nations and international organizations consider education a fundamental human right for all individuals regardless of age, gender, or socioeconomic status. Early learning and high retention rates through secondary education are associated with higher <u>lifetime earnings</u>, improved health, reduced crime, and stronger family units.

### *Emotional Regulation and Resilience*

Optimal developmental health encourages emotional regulation and resilience. Children who develop healthy emotional regulation have more self-control and <u>effective communication skills</u>, are better at conflict resolution, and have <u>positive peer relationships</u> because they are better equipped to navigate conflicts and maintain positive relationships. When children learn to overcome challenges and setbacks, they develop a belief in their ability to handle future difficulties, fostering a sense of confidence and competence, and are less prone to <u>anxiety and depression</u>, reducing the risk of mental health disorders and improving lifelong coping mechanisms and healthy relationships.

# Long-Term Economic Impact

Countries that invest in the developmental health of their children from conception to adolescence experience a wide range of long-term positive impacts:

- Reduced burden on healthcare systems. Preventing health issues in childhood translates into longer, healthier lives, lower healthcare costs, and a more efficient allocation of resources.

- Better cognitive and physical abilities. A healthy, robust workforce produces and contributes more to economic growth and competitiveness on the global stage.

- Enhanced global competitiveness. A skilled and adaptable workforce meets the challenges of the rapidly changing global landscape.

- Positive family and social relationships. Children from nurturing environments are more likely to form stable families, contributing to social fabric and community cohesion.

- Less criminal behavior later in life. Increased community connectedness leads to safer communities, lower crime rates, and a reduced need for law enforcement resources.

- Sustainable future. A healthy and well-prepared younger generation creates responsible and contributing citizens encouraging long-term prosperity.

# Adolescent Reproductive and Relationship Health

## Focus on Sexual Development, Connected Relationships, and Well-being

*Adolescent sexual health has become a divisive topic for the past two generations. Establishing a brief, basic definition of adolescent sexual and relationship health focuses health providers and health policy leaders on important developmental tasks associated with positive physical and mental health outcomes: Optimal Health. The definition in the sidebar on the next page includes physical, intellectual, emotional, social, and spiritual components of holistic well-being. When communities and families acknowledge shared aspirations for their youth, they can be more cohesive with messages, expectations, programs, and support.*

### Equipping Parents

Parents provide the most valuable support system for adolescents, as demonstrated by research and observation. Many parents want to support their children by talking openly about values, sexual development, health risks, and relationships, but lack the skills and confidence to do so.

Youth who experience caring communication, connections, mentorship, and purpose from trusted adults are more likely to avoid bullying, coercion, and adverse risks and more likely to recover from difficult experiences without long-term mental and physical health complications. In addition to the many physical changes during puberty, studies of brain development and function reveal active maturation during adolescence that extends into young adulthood. Parents and community members who understand these changes are better able to support and communicate with children and youth.

The Institute for Women's Health meets this need through two programs designed to support youth by strengthening family connections, community bonds, and social norms: 1) The Parent/Child Communication Guide (Parent Guide) and 2) The Three Generation Strategy for Adolescent Health (AdGen3).

# The Parent Guide

The Parent Guide contains eight lessons for parents to share with children of all ages to discuss topics such as family and friend relationships, self-worth, valuing others, and decision-making. Four additional lessons are for children ages 9 and up and address the sensitive topics of male and female puberty, reproduction, and sexual decision-making. Educational lessons and training modules are based on accurate information and shared goals, and delivered through their schools, faith groups, or community organizations. Improving the parent-child bond is a strong and viable health promotion strategy.

Parents are empowered because it:

- Provides parents, faith groups, and schools with accurate, age-appropriate, family-centered, plain language materials to discuss character development, puberty, reproduction, and sexual decision-making.
- Promotes multiple shared meals per week, learning activities, traditions, and religious participation as a family to promote "connectedness" or belonging, which has been shown to protect youth from stress, bullying, and adverse risks, including early sex and the use of illegal and/or harmful substances.
- Encourages parents to establish fair and consistent "house rules" that monitor social media, sleep patterns, healthy eating, friend groups, and activities of their children.
- Educates parents and family members to observe children and youth for signs of vulnerability to coercion, exploitation, and other forms of manipulation or dangerous circumstances.

Support for parent engagement occurs directly through the Parent Guide and community, school, and faith activities.

## Defining Optimal Adolescent Sexual and Relationship Health

- Healthy pubertal development.
- Healthy brain, mental, emotional, and spiritual (moral) development.
- Healthy social and relational development through strong, safe friendships.
- Knowledge, attitudes, support, and self-efficacy for refusal skills.
- Respectful and non-violent dating relationships
- Avoidance of alcohol and substance use.
- Risks of early sexual involvement and benefits of delay: a, b, c, d.
- Awareness of sexually transmitted diseases, sexual assault, and coercion.
- Awareness of challenges related to teen pregnancy and benefits of secure attachment style.
- Delay of pregnancy and parenting until benchmarks of basic education, employment, faithful marriage, and preparation for parenting.
- Preparation for healthy, low-risk pregnancy and childbearing.
- Promote standards encouraging committed sexual relationships with a trusted mature life partner.
- Commit to a caring, faithful marriage characterized by a satisfying and pleasurable sexual relationship.

# Training Providers

Addressing youth from the perspective of Optimal Health across the lifespan is the goal of <u>The Three Generation Strategy for Adolescent Health (AdGen3)</u>, which addresses the teen, their family of origin, and their family of the future: three generations.

AdGen3 trains and supports health providers, psychologists, social workers, and educators with research related to youth behaviors and development. It offers effective interventions engaging adolescents and their parents. The purpose of AdGen3 is to transition research regarding <u>teen brain development</u>, <u>parental engagement</u>, positive youth development, and risk behaviors into strong clinical models supporting Optimal Health.

It specifically equips youth professionals with skills to engage parents as fundamental allies in their teens' achievement for Optimal Health, to communicate effectively, and to provide compassionate, health-affirming guidance.

**Using the Three Generation Strategy for Adolescent Health, community professionals are trained in methods supporting youth and families by:**

- Sharing current research on adolescent development and health.
- <u>Partnering with parents</u> and equipping them with skills to help youth make healthy choices and avoid health risks.
- Improving techniques to share health information, <u>teach decision-making</u>, and practice refusal skills.
- Strengthening prevention, detection, reporting, and accountability in the event of <u>coercion</u>, abuse, bullying, or exploitation.
- Reinforcing the importance of<u> healthy relationships</u> and relationship skills.

# Adolescent Risks

Adolescents need to experience opportunities for risk-taking to practice <u>decision-making</u>, responsibility, rewards, consequences, and leadership. Those opportunities can be associated with positive or negative behaviors. In some cultures and traditions, youth development is celebrated by completing complex tasks or achieving age and religious landmarks through which the individual has increased responsibilities, accountability, and belonging as an emerging adult. When parental or community support fails to offer and celebrate reasonable risks, adolescents may engage in violence, substance use, sexual activity, and other negative risk behaviors. Families and communities can promote "<u>Positive Risks</u>" to promote youth development while mentoring and encouraging youth in healthy and productive settings.

## <u>Positive risk-taking</u> can include any of the following:

- Wilderness adventures, camping, and survival skills-building.
- Encourage mastery of complex skills associated with adult work opportunities such as construction, mechanics, farming, and technology.
- Maintain cultural, family, and <u>faith traditions</u>, guiding and encouraging youth in preparation for adult careers, families, and societal responsibilities.
- Assign tasks and leadership roles inside educational, faith, and community settings, demonstrating optimism and support for developing adolescents as emerging adults.
- Celebrate youth risks that embrace athletic, leadership, and academic challenges.
- Encourage volunteerism to promote the well-being of others before self.
- Establish community activities, inviting family and friends to observe and congratulate music, drama, debate, and other performances.

# Sexuality and Relationship Education in Schools and Communities

Optimal Health principles should be incorporated into all child and adolescent health information, especially education around relationships, puberty, reproduction, and sexual decision-making. Topics and discussions addressing holistic wellness consistent with the definition of optimal adolescent sexual and relationship health included in this section are best. Much of social media and some sex education programs misrepresent the significance of sex and the consequences of early sexual involvement. By focusing solely on the physical components of sexual activity, they neglect four of the five components of optimal sexual health, which are holistic and address physical, intellectual, emotional, social, and spiritual well-being.

Sexually explicit messaging that normalizes early sexual behaviors and multiple sexual partners increases the probability of adverse outcomes, especially for vulnerable and young adolescents who are at increased risk for coercion, abuse, sexually transmitted diseases, injury, and mental health concerns. Parents and communities should ensure that educational materials contain information and values consistent with healthy adolescent development. Parents should be prepared to discuss these important issues with their children.

## Curricula and programs addressing sexual development and decisions should help adolescents

- Understand and accept their bodies, value and protect themselves, and recognize that healthy development and decisions during adolescence are essential to their future.
- Realize that returning to a risk-free lifestyle is a possible and healthy option, even if they have initiated sexual activity in the past.
- Recognize that everyone is unique, but all adolescents experience changes and stresses; they are not alone, and their parents, adult mentors, and peers understand.
- Provide home assignments with each lesson, encouraging and guiding parent and child discussions about relationships, puberty, reproduction, and families.
- Be informed about physical, hormonal, and brain development changes during puberty, with particular emphasis on awareness and understanding of the menstrual, hormonal, and fertility cycle.
- Equip adolescents to recognize and resist health threats such as sexually transmitted diseases, pressure to drink alcohol or try drugs, participate in violence, bullying or coercion, view pornography, or engage in sex.

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## Promoting Optimal Health with Social Norms.

When communities and environments value youth, they develop, articulate, and demonstrate social norms supporting healthy development. Key concepts include:

- Teaching the dignity, value, and respect for oneself and all human life.
- Teaching that personal choices should not harm other people or oneself.
- Valuing healthy family formation, childbearing, and safe, committed, and loving homes.
- Promoting messages of hope, encouragement, and opportunity, through positive influential voices, such as family, community, civil society and underline faith based organizations.
- Denouncing violence in every community setting and institution, including the media.
- Addressing and countering advertising, entertainment, and educational materials featuring an unhealthy self-image, distorted sexual expectations, alcohol use, substance use, pornography, transactional sex, or trafficking.
- Establishing and enforcing local policies and laws protecting adolescents from trafficking, exploitation, and abuse.

*Curricula and programs addressing sexual development and decisions should help adolescents (Continued)*

- Develop attitudes and skills to make wise and healthy decisions, refuse coercive pressures, build solid friendships and dating patterns, and prepare for a healthy marriage and future family.
- Understand the potential consequences of teen sex, which can include:
  - Physical: sexually transmitted infections (STDs), pregnancy, injury, and abuse.
  - Intellectual: distraction, decreased or discontinued academic engagement.
  - Emotional: increased anxiety, depression, poor/distorted self-concept, and non-suicidal self-harm.
  - Social: change in peer groups, peer perceptions, social expectations.
  - Spiritual: conflict with moral or religious beliefs regarding the significance, timing, and value of sex.
- Respect and protect themselves and the dignity and value of every human life.

The review and approval of community or school-based sex and relationship curricula should be conducted by a panel which is primarily comprised of local parents.

THE INSTITUTE FOR WOMEN'S HEALTH

## *Preventing and Addressing Sexual Harm*

Sexual abuse, forced marriage of girls and adolescents, trafficking, forced female genital mutilation (FGM), and intimate partner violence are among the greatest threats to girls and women globally. In many countries, it is a public health emergency. Families, communities, faith groups, and nations must be resolute to stop these violations of the body, the mind, and the future well-being of young women and girls.

The physical damage of early sexual involvement to the young female body is well documented. Most countries report that sexually transmitted infections and HIV/AIDS occur in younger women several years earlier than their male counterparts, primarily due to transmission from older, dominating partners. These infections can result in short-term or long-term chronic disease, pain, malignancies, and infertility. Pregnancy during the adolescent years is frequently associated with increased premature delivery, complications during labor, vaginal fistulas, and recurrent infections.

Intellectual and emotional consequences of early sexual involvement include disruption of schooling and career training, higher rates of depression, unstable romantic relationships, and other chronic problems, which can contribute to or exacerbate Adverse Childhood Experiences (ACEs). The long-term personal, family, and community impacts are challenging to quantify and root causes and possible consequences are not adequately addressed by simply offering contraceptives and condoms.

As noted in women's movements over the past decade, even mature women in unequal power relationships report debilitating feelings of victimization and regret. Younger women are often more easily intimidated or coerced than mature women, and their distress may lead to poor self-esteem and patterns of abusive and unhealthy relationships.

Exploitation is harmful to all affected individuals; however, it is often more devastating to young people due to their biological and emotional immaturity. The developing brain has more difficulty understanding situations, identifying risks, directing protective responses, and dealing with stress and abuse, as well as recovering from violence, neglect, and other adverse pressures.

Violence, exploitation, coercion, intimidation, and lack of protection against these offenses is a public health tragedy. The Institute for Women's Health strongly supports:

- Establishing and enforcing local policies and laws that protect children, adolescents, women, and other vulnerable populations from trafficking, exploitation, harassment, and abuse.
- Teaching the intrinsic dignity, value, and respect due to oneself and every human person.
- Robust and multi-pronged prevention efforts focused on multigenerational strategies aimed at both the potential victim and potential perpetrator.
- Denouncing violence through faith and community groups, schools, and media.
- Law enforcement processes that quickly respond to violence and consistently hold perpetrators accountable.
- Compassionate resources for treatment, protection, and recovery

*The Institute for Women's Health recognizes that today's youth are tomorrow's leaders. Their healthy sexual and relationship development during adolescence strengthens their physical, intellectual, emotional, social, and spiritual well-being for the coming decades, and Optimal Health efforts improves the future prospects of a nation.*

# Health Across the Lifespan

### Promoting Age-Appropriate Health Interventions for Women and their Families

The following charts are divided by age range from the First 1000 Days to the Late Adult Years.  Each section provides suggested healthcare interventions, health policy, and administrative resources for healthcare providers and leaders as they implement policies that improve the health of communities, the nation, and its citizens.
1) physical assessment and screening, 2) immunizations, 3) health promotion, 4) nutrition, and 5) management and treatment.  The interventions in each category are linked to guidelines, research, and resources that can be used by frontline health providers in direct patient care, as well as health policy and administrative leaders, as they care for their neighbors and fellow national citizens.

# First 1000 Days
## Conception - 2 yrs.

Optimal child health begins with maternal health, even before conception. Consequently, before pregnancy begins and during the first nine months (280 Days) of a baby's life, maternal interventions are the most critical. Social and emotional connections during pregnancy and health interventions prepare both the expectant family and the developing child.

Trained healthcare providers, health educators, appropriate nutrition, and infection control are critical throughout pregnancy, labor and delivery, the newborn period, and infancy. Efficient, effective health interventions are addressed in the following section.

Through strong family, faith, and community relationships, physical, developmental, and social support in the first 1000 days can improve resilience, learning readiness, and lifelong thriving. The maternal components of this timeframe are addressed in the section titled "Child-bearing Years."

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Monitoring Healthy Growth, Development, and Disease Prevention: Newborn – Toddler<br>• Newborn Measurements: Height/Length, Head Circumference, Weight (Girls, Boys), Vital Signs<br>• Newborn Screenings: Motor Development, Vision, Dental, Hearing, Muscle Tone, Movement, Responsiveness, Physical Development, Developmental Milestones, Nutrition, Neurological, Psychometric, Social and Emotional Development, Communication Development, Developmental Delay Evaluation<br>• Assessment: Anemia, Malaria, Parasites, HIV, TORCH, Cholera<br>• New Born Care: Neonatal Evaluation, Safe Birth, Respiratory Support, Kangaroo Care, Breastfeeding, Circumcision<br>• Health Recommendations: CDC Milestone Checklist, Pathways Milestone Checklist, Pathways Ability Checklist, The American Academy of Pediatric Pocket Guide, WHO Newborn Health Recommendations, Risk of Harm to Baby Assessment, Western Australia Community Health Physical Assessment Guide | Clinic/Community (Healthcare providers, CHWs) |
| **Immunizations** | Immunize According to Universal Standards for Vaccination Protocols:<br>• For All: Polio (IPV), HepB, DTaP, Hib, PCV, RV, MMR, RSV, Chickenpox (Varicella), HepA<br>• Recommendations for Certain Regions and Populations: Japanese Encephalitis (JE), Yellow Fever, Tick-Borne Encephalitis, Typhoid Fever, Cholera, Meningococcal, Rabies, Tuberculosis (TB), Neglected Infectious Diseases,<br>• WHO Immunization Schedule, CDC Immunization Schedule | Community/Clinic (Healthcare providers, CHWs) School |
| **Health Promotion & Education** | Strengthening family and support systems<br>• Parenting Education: Positive Parenting 0-1 year, Positive Parenting 1-2 year,<br>• Safety Risks and Accident Prevention: Birth-6 Months, 1-2 years, Passenger/Car Seat Safety, Sleep Safety, Animal/Pet Safety, Firearms Safety, Medication Safety, Home Environment Safety Checklist, Drowning Prevention, Unintentional Injury<br>• Improving Early Childhood Development, Parent Reported Early Child Development<br>• Strategies for Ending Childhood Violence, Adverse Childhood Experience Prevention, Child Abuse and Neglect Prevention | Community (Community Health Worker) Family, Schools, Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• Breastfeeding, Dads & Breastfeeding, Formula Feeding, Solid Food Feeding, Vitamins/Minerals/Micro Nutrients.<br>• Pathways Feeding Checklist, UNICEF: Children, Food and Nutrition, Culture-Specific Diets | Family Schools |
| **Management & Treatment** | • Treatment: Anemia, Pneumonia, Diarrhea, Malaria, Cholera<br>• WHO Recommendations for Preterm or Low Birth Weight Infants<br>• Kangaroo Care Implementation Strategies for Different Countries<br>• Newborn Survival and Well-Being<br>• WHO Children Environmental Health Resources for CHW<br>• Step-by-Step Chart for Integrated Management of Childhood Illness<br>• Palliative Care for Children<br>• Chronic Care for Neglected Infectious Diseases<br>• Referral for Developmental Delays/and Other Chronic or Acute Illnesses. | Community/Clinic (Healthcare providers, CHWs) Family |

# Childhood
## 2 yrs. – 10 yrs.

The childhood years of rapid growth and learning often set the patterns for future health behaviors and health status. In addition to monitoring growth and nutrition, physical and mental development, immunizations and disease prevention, and education during these years, it is also important to encourage strong family, community, and spiritual relationships. These relationships during childhood build security, belonging, and purpose that establish resilience and direction for the coming years.

Optimal health incorporates community interventions such as WASH, school nutrition, parasite treatment, and safe communities. Prevention of burns, vehicular injuries, and violence are important interventions to protect children. In addition to school, many children gain social and personal skills from neighborhood or organized sports, religious instruction, and worship.

# Childhood: 2 yrs. – 10 yrs.

| Topic | Intervention | Setting |
|-------|-------------|---------|
| **Physical Assessment & Screening** | Childhood examinations, including:<br>• Measurements: <u>Height</u>, <u>Weight</u>, <u>Vital Signs</u><br>• Screenings: <u>Vision</u>, <u>Dental</u>, <u>Hearing, Physical Challenges</u>, <u>Social and Emotional Development</u>, <u>Malnutrition</u><br>• Assessments: <u>Malaria</u>, <u>Parasites</u>, <u>HIV</u>, <u>Tuberculosis</u>, <u>Anemia</u>, <u>Neglected Tropical Diseases (NTDs)</u>, <u>Cholera</u>,<br>• Mental Health Assessments: <u>Self-harm</u>, <u>Depression</u>, <u>Anxiety</u>, <u>Psychological First Aid</u><br>• Health Recommendations: <u>WHO Child Health Recommendations</u>, <u>Pediatric Symptom Checklist</u>, <u>Youth Self Report</u>, <u>Western Australia Community Health Physical Assessment Guide</u>, | Clinic/Community (Healthcare Providers, CHWs) Schools |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>• CDC <u>Early Childhood Vaccinations Schedule Birth-6 years (DTaP, IPV, MMR, Varicella)</u><br>• CDC <u>Recommended Immunizations for 7-18 years (Dengue, HPV)</u> | School Clinic/Community (Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• <u>Strengthening Parent-Child Communication</u><br>• Prevention of <u>Burns</u>, <u>Vehicular Trauma</u>, <u>Unintentional Injury</u>, <u>Passenger/Car Seat Safety</u>, <u>Animal/Pet Safety</u>, <u>Firearms Safety</u>, <u>Medication Safety</u>, <u>Home Environment Safety Checklist</u>, <u>Drowning Prevention</u>,<br>• Promote the Correct Use of <u>Malaria Nets</u>, <u>HIV Awareness</u>, <u>Stop the Bleed Education and Training</u><br>• <u>Safe Social Media Use</u>, <u>Avoiding Online Bullying</u>, <u>Online Pornography</u>,<br>• <u>Ending Violence Against Women</u>, <u>Exploitation</u>, <u>Coercion</u>, <u>Trafficking</u>, <u>Forced Sexual Intercourse</u><br>• <u>Building Resilient Children</u>, <u>Avoiding Harmful Risks</u>, <u>Refusal Skills Education</u>,<br>• <u>Violence Awareness and Prevention, School-Based Violence Prevention</u>, <u>Ending School Bullying</u><br>• <u>Child Abuse and Neglect Prevention, Adverse Childhood Experience Prevention, Strategies for Ending Violence Against Children</u><br>• <u>American Medical Association "The Parent Package"</u> | School Clinic/Community (Healthcare Providers, CHWs) Family Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• <u>Micronutrients, Vitamin A, Zinc, Folic Acid, Iron</u><br>• <u>Culture-Specific Diets</u>, <u>Diarrhea</u>, <u>Malnutrition</u>, <u>Obesity</u>, <u>UNICEF: Children, Food and Nutrition</u> | School Clinic/Community (Healthcare Providers, CHWs), Family |
| **Management and Treatment** | • <u>Mass Drug Administration (MDA) to treat NTDs</u>,  <u>Soil-Transmitted Helminths (STH)</u><br>• <u>WHO Children Environmental Health Resources for CHW</u><br>• <u>Step-by-Step Chart for Integrated Management of Childhood Illness</u><br>• <u>Palliative Care for Children</u><br>• <u>Chronic Care for Neglected Infectious Diseases</u><br>• <u>Treatment of Children with Chronic HCV Infection</u><br>• <u>Wound Care Protocol</u><br>• Referral for Developmental Delays/and Other Chronic or Acute Illnesses. | Community (Community Health Workers) School |

# Adolescence
## 11 yrs. – 18 yrs.

The transition from childhood to adulthood is referred to as "adolescence" and includes physical growth, sexual maturation, rapid brain development, and many social, emotional, and relationship changes. Consequently, optimal teen health includes healthy pubertal development, healthy peer, family, and school relationships; and the ability to make good decisions, resist coercion, exploitation, and health risks; and to prepare for future work and family.

Stable, caring parent-teen relationships, characterized by good communication and reasonable house rules, are associated with many positive outcomes. Better school performance and mental health, and lower rates of violence, substance use, and teen sexual involvement are noted among youth whom their families and community actively support. Consequently, the WOHF embraces the "Three Generation Strategy for Adolescent Health" (AdGen3), which promotes research-based interventions to strengthen the teen's family of origin, the teen, and preparation for their family of the future - three generations.

# Adolescence:    11 yrs. – 18 yrs.

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Adolescent examinations, including:<br>• Measurements: Height (<u>Boys</u>, <u>Girls</u>) <u>Weight</u>, <u>Vital Signs</u><br>• Screenings: <u>Vision</u>, <u>Dental</u>, Hearing, Mental and Motor Development,<br>• Mental Health Screening: <u>Suicide</u>, <u>Depression</u>, <u>Anxiety</u>, <u>Self-Harm</u>,  <u>Psychological First Aid</u>, <u>Parent and Peer Attatchment Inventory</u><br>• Assessments: Anemia, Hypertension, <u>Malaria</u>, <u>Parasites</u>, <u>Tuberculosis</u>, <u>HIV</u>, <u>STDs</u>, <u>Cholera</u>, <u>Adolescent Wellness Exam</u>, | Schools<br>Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>• <u>DPT</u>, <u>HPV</u>, <u>Dengue</u>, <u>Meningococcal</u>,<br>• CDC <u>Recommended Immunizations for 7-18</u><br>• <u>Human Papillomavirus (HPV) Vaccine</u> | School<br>Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• Promote Parent and Adolescent <u>Communication</u>, <u>Support</u>, and <u>Monitoring</u>.<br>• <u>Ending Youth Violence</u>, <u>Violence Against Women</u>, <u>Exploitation</u>, <u>Coercion</u>, <u>Trafficking</u>, <u>Forced Sexual Intercourse</u>, <u>Sexual Violence</u>, <u>Intimate Partner Violence</u>, <u>Youth Violence Awareness, & Prevention</u>, <u>School-Based Violence Prevention</u>, <u>Ending School Bullying</u><br>• <u>Mental Health Prevention and Intervention</u>, <u>Self-Harm Prevention Training</u>, <u>Medication Safety</u>,<br>• <u>Safe Social Media Use</u>, <u>Social Media Health</u>, <u>Internet Gaming Addiction</u>, <u>Cell Phone Safety</u>, <u>Digital Depression</u><br>• <u>Sleep Health Education for Parents and Adolescence</u>.<br>• Information and Education on <u>HIV and STDs</u>, <u>Healthy Teen Romantic Relationships</u>,<br>• <u>Puberty</u>, <u>Menstrual Health</u>, <u>Fertility Awareness</u>, <u>Contraception</u><br>• <u>Positive Risk-taking</u>, <u>Decision Making Skills</u>, <u>Refusal Skills Education</u> for: <u>Drugs</u>, <u>Alcohol</u>, <u>Tobacco</u>, <u>Sex</u>, <u>Pornography</u><br>• <u>Vehicle Safety</u>, <u>"Stop the Bleed"</u>, <u>Drowning Prevention</u><br>• <u>American Medical Association "The Parent Package"</u> | School<br>Clinic/Community<br>(Healthcare Providers, CHWs)<br>Family<br>Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• <u>Micronutrients: Vitamin A, Zinc, Folic Acid, Iron</u><br>• <u>Culture-Specific Diets</u>, <u>Malnutrition</u>, <u>Obesity</u>. | School<br>Family<br>Community |
| **Management and Treatment** | • Treating Anemia: Iron Deficiencies, Infectious, Genetic, and Menstrual Causes<br>• <u>Palliative Care for Children</u><br>• <u>Chronic Care for Neglected Infectious Diseases</u><br>• <u>Treatment of Children with Chronic HCV Infection</u><br>• <u>Wound Care Protocol</u><br>• Referral for Developmental Delays/and Other Chronic or Acute Illnesses. | Community<br>School |

# Early Adult Years
## 19-25 yrs. old

By 19 years of age, young people are establishing an independent life, often through education, careers, and new relationships.  As these young adults become responsible for their daily lives, economic stability, and personal relationships, few of them tend to engage with the healthcare system on a frequent basis. However, there are important health milestones that should be addressed.

Socially, many young adults transition from childhood friend groups as they seek to establish new friends, social groups, and, possibly, a future mate.  Personal safety and the prevention of exploitation and violence are important considerations.  Rates of sexually transmitted infections can be very high in this age group, often secondary to coercive or transactional sex.

Young adults need information, skills, and support to help them embrace Optimal Sexual Health. Optimal Sexual Health includes delaying sexual involvement until establishing a committed, life-long relationship or marriage. Optimal health also involves awareness of both male and female sexual development, fertility patterns, risks such as sexually transmitted infections and HIV, the impact of hormonal birth control, and preparation for a trusting, enjoyable life partnership.  To make wise decisions about when and whether to have a family, young adults need accurate information about the risks of difficult pregnancies and infertility due to chronic illness, infections, and advanced age.

# Early Adult Years: 19-25 yrs. old

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | <ul><li>Height, Weight, Vital Signs</li><li>Mental Health Screening: Suicide, Depression, Anxiety, Self-Harm, Psychological First Aid</li><li>Assessments: HIV Testing Guidelines, STI Screening</li><li>Pneumococcal Vaccine,</li></ul> | Clinic/Community (Healthcare providers, CHWs) |
| **Health Promotion & Education** | **Prevention of Risks:** <ul><li>Drugs and alcohol</li><li>Pornography, Technology Addiction,</li><li>Information on HIV and STIs</li><li>Vehicular Accident, Drowning,</li><li>Violence prevention, Sexual Violence, Intimate Partner Violence,</li></ul> **Promotion of Health:** <br>Improved mental health, social health <ul><li>Finding Positive Peer Groups</li><li>Healthy Social Media Use</li></ul>Strengthen family and support systems, specifically through: <ul><li>Ending Violence Against Women,</li><li>Marriage Education and Enrichment</li><li>Risk avoidance and Refusal Skills for Drugs, Alcohol, Tobacco, Sex, and Pornography</li><li>Menstrual Health, Contraception, Fertility</li></ul> | Community (Community Health Worker) Family, Schools, Faith |
| **Nutrition** | Adequate fluid intake; Sodium and fat intake, Fiber consumption <br>o Males need more vitamins C and K, along with thiamine, riboflavin, and niacin. <br>o Young men and women who are very athletic and perspire a great deal also require extra sodium, potassium, and magnesium. <br>o Females require extra iron due to menstruation. | Family Schools |
| **Management & Treatment** | <ul><li>Dr. Stephen J. Shaw's Birth Gap Information</li><li>Emerging Adulthood as a Critical Stage in the Life Course</li><li>Mental Health Care Manual, Management of physical health conditions in adults with severe mental disorders</li><li>Chronic Care for Neglected Infectious Diseases</li><li>Wound Care Protocol</li></ul> | Community/Clinic (Healthcare providers, CHWs) Family |

# Pre-Pregnancy

## Early Adult and Childbearing Years

Both physical health and relational health should be considered in preparation for pregnancy. Couples with strong mutual commitment (marriage) and communication skills can prepare and plan for pregnancy together, leading to better nutrition, healthcare, and use of family resources. It is important to recognize high-conflict relationships to address the potential of stress and violence for a woman considering pregnancy.

Significant health conditions should be addressed before pregnancy begins. Screening and management for all types of anemia, diabetes, hypertension, and infectious diseases are important prior to conception. Healthy lifestyle patterns, including nutrition, activity, rest, and life/work balance, can improve general health as a woman begins pregnancy. CHWs can offer many screening and education activities.

Age-related issues can impact the ability to become pregnant and to deliver a healthy baby. Couples should be informed of the possibility of infertility or complicated pregnancy associated with chronic diseases and advancing age and be taught to track monthly fertility cycles.

# Pre-Pregnancy
## Early Adult and Childbearing Years

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Pre-Pregnant examinations, including:<br>• Height, <u>Weight</u>, <u>Vital Signs</u>, Urinalysis<br>• Breast, Heart, Pelvic, and Lung examinations<br>• <u>Malaria</u>, <u>Parasites</u>, NTDs, TB, <u>HIV</u>, <u>STDs</u>, <u>Cholera</u>, <u>Anemia</u><br>• Mental Health Screening: <u>Suicide</u>, <u>Depression</u>, <u>Anxiety</u>, <u>Self-Harm</u>, <u>Psychological First Aid</u> | Schools<br>Clinic/Community<br>(Healthcare Providers, CHWs)<br>Community |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>• Updated <u>Tdap</u> and <u>MMR</u> vaccine<br>• <u>Emphasizing benefits and impact of preventing disease through vaccination of women, including the DPT for pregnancy.</u> | School<br>Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• <u>Ending Violence Against Women,</u><br>• <u>Information on HIV and STIs</u><br>• <u>Marriage Education and Enrichment</u><br>• <u>Risk avoidance</u> and <u>Refusal Skills</u> for Drugs, <u>Alcohol</u>, <u>Tobacco</u>, Sex, and Pornography<br>• <u>Menstrual Health</u>, <u>Contraception</u>, and <u>Fertility</u>.<br>• <u>Mental Health Prevention and Intervention</u>, <u>Self-Harm Prevention Training</u><br>• <u>Sexual Violence Prevention</u>, <u>Intimate Partner Violence Prevention</u> | School<br>Clinic/Community<br>(Healthcare Providers, CHWs)<br>Family<br>Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• <u>Vitamin A, Folic Acid, Iron</u><br>• Culture-specific diets to avoid both malnutrition and obesity. | School<br>Family<br>Community |
| **Management and Treatment** | • Diagnose and treat anemia addressing: Iron deficiencies<br>• Diagnosis and treatment of hypertension.<br>• Treatment of fertility concerns, <u>contraception</u>, menstrual cycle awareness.<br>• <u>Mental Health Care Manual</u>, <u>Management of physical health conditions in adults with severe mental disorders</u><br>• <u>Chronic Care for Neglected Infectious Diseases</u><br>• <u>Wound Care Protocol</u> | Community<br>School |

# Pregnancy
## Early Adult and Childbearing Years

The physiologic and physical changes that occur after conception impact women in many ways. Optimal Health during pregnancy must address physical, emotional, social, and spiritual well-being. The interventions listed below serve to encourage family and community support and medical or health interventions.

Many cultures and religions attach deep spiritual meaning to the development of a unique new person growing inside the mother. Healthcare systems should welcome these important faith and cultural traditions and encourage couples to protect and support both the mother and forming child.

Early in the pregnancy, parents and families should be informed of the value of trained birth attendants, routine healthcare, and important interventions, such as screenings and immunizations.

# Pregnancy
## Early Adult & Childbearing Years

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Examination for pregnant women, including:<br>• Height, Weight, Edema (swelling) Gestation-Specific Vital Signs (Blood pressure, Heart rate, etc.)<br>• Evaluation of Fundal Growth, Heart Beat, and Restriction<br>• Components of Routine Pregnancy Evaluation<br>• Pregnancy Test Confirmation<br>• Screening for: Anemia, Hypertension, Proteinuria, Glucosuria (via blood/urine tests) Hypoglycemia<br>• Mental Health Assessment, Risk of Suicide Assessment, Risk of Harm to Baby Assessment, Psychological First Aid<br>• Malaria, Parasites, Tuberculosis, HIV, STDs, | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>• Immunizations for Pregnant Women in Select Countries | School<br>Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• Information and Care on HIV and other STDs,<br>• Reproduction and relationship health<br>• Risk avoidance and Refusal Skills for Drugs, Alcohol, Tobacco, Sex, and Pornography<br>• Ending Violence Against Women, Sexual Violence Prevention, Intimate Partner Violence Prevention<br>• Fathers and Breastfeeding | Clinic/Community<br>(Healthcare Providers, CHWs)<br>Family<br>Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• Vitamin A, Folic Acid, Iron, Protein<br>• Culture-specific diets to avoid malnutrition and obesity.<br>• Increase caloric intake for pregnancy & prenatal vitamins (if available) | School<br>Family<br>Community |
| **Management and Treatment** | • Care and treatment for numerous high-risk conditions including:<br>  ○ Gestational Diabetes, Preeclampsia and Eclampsia, Fetal Growth Challenges, Abnormal Pregnancies, Miscarriages, Complications Following an Abortion, Mental Health Conditions, Multiple Simultaneous Pregnancies (twins, triplets, etc.)<br>• Management of physical health conditions in adults with severe mental disorders<br>• Chronic Care for Neglected Infectious Diseases<br>• Wound Care Protocol | Community<br>School |

# Labor & Delivery
## Early Adult and Childbearing Years

Labor and delivery can be a joyous event or a life-threatening experience. The interventions identified below focus on the value of trained birth attendants in safe, hygienic facilities, with adequate medical and equipment supplies to support the mother and the baby.

During labor and delivery, family members' active engagement and support, especially a caring spouse, is associated with improved parent-child bonding, nutrition, immunization status, and emotional well-being.

# Labor & Delivery
## Early Adult & Childbearing Years

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Examination for women in labor including:<br>• Vital Signs, Immediate drying, and additional stimulation as needed<br>• Baby growth Challenges (w/ evaluation of fundal growth and heartbeat)<br>• Evaluation for edema (swelling)<br>• Obstetric Fistula Training Packet<br>• Assisted Vaginal Birth: Forceps and Vacuum Extractor<br>• Core Competencies and Decision Support Tools for the Management of Labor<br>• Screening for Anemia, Hypertension, Proteinuria, blood/urine check for sugar, STDs, HIV<br>• Mental Health Assessment, Risk of Suicide Assessment, Risk of Harm to Baby Assessment Baby | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Immunizations** | Immunize according to vaccination protocols, as indicated. | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and spousal support specifically through education on:<br>• Clean Birthing Kits: Clean Clamp and Cut Cord, Infant Suction, Bulb, Sterile, Gloves<br>• Skin-to-skin contact in the first hour of life, Kangaroo Care Implementation Strategies for Different Countries<br>• Information and Care on HIV and STDs<br>• Reproduction and relationship health<br>• Ending Violence Against Women, Sexual Violence Prevention, Intimate Partner Violence Prevention<br>• Fathers and Breastfeeding | Clinic/Community<br>(Healthcare Providers, CHWs)<br>Family<br>Faith |
| **Nutrition** | • Prevention/Management of Dehydration<br>• Breastfeeding Information and Resources | Clinic/Community<br>(Healthcare Providers, CHWs), Family |
| **Management & Treatment** | Providing medical support to the woman during delivery through:<br>• Trained traditional birth attendants (TBAs), Trained Community Health Workers (CHWs)<br>• Referral to a health facility for complications<br>• Preterm Birth Interventions, Managing Eclampsia, Managing Prolonged and Obstructed Labour<br>• Fetal monitoring (as available)<br>  ○ Either in-hospital or in-home via (electronic or intermittent methods)<br>  ○ Monitoring of fetal complications (breech, failure to progress, abruption)<br>• Perinatal Mortality Guidelines | Clinic/Community<br>(Healthcare Providers, CHWs)<br>Family |

# Postpartum
## Early Adult and Childbearing Years

The days and weeks following the birth of a baby can be challenging. Family, community, and health system support are needed to address the physical, hormonal, and relationship demands of a newborn and a recovering mother. The recommended interventions, including health monitoring and support of breastfeeding, can be offered through local health facilities, community health workers, faith or community support groups, and caring family members.

It is important to monitor the mother and infant as a unit in the postpartum period since anemia and illness in the mother can jeopardize the care and nutrition of the infant. Likewise, a sick newborn can progress to life-threatening conditions rapidly and must be observed for early symptoms to be diagnosed and treated successfully.

Using a cohesive CHW program linked to a responsive health system can facilitate postpartum care and expedite timely treatment and referrals if the mother or infant requires medical care.

# Postpartum
## Early Adult and Childbearing Years

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Examination of women postpartum, including:<br>• Vital Sign Reference Ranges: Postpartum-Specific<br>• Fundal Size, Signs of Infection, Perineal Lacerations, Breast Exam<br>• WHO Recommendations on Maternal and Newborn Care: Positive Postnatal Experience<br>• Postpartum Nursing Care Pathway: Obstetrics Guidelines<br>• ACOG Optimizing Postpartum Care Resource<br>• Measures and Screening:<br>   ○ Anemia, Hypertension, Postpartum Infections, Breast Infections, HIV,<br>   ○ Postpartum Mental Health Health Substance Use Guidelines, Postpartum Depression Screening, Risk of Suicide Assessment, Risk of Harm to Baby Assessment Baby, Anxiety, Self-Harm, | Clinic/Community (Healthcare Providers, CHWs) |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>• DPT, As indicated: Dengue, Meningococcal, etc. | Clinic/Community (Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and spousal support specifically through education on:<br>• Cord Care,<br>• Ending Violence Against Women, Sexual Violence Prevention, Intimate Partner Violence Prevention<br>• Spacing of Pregnancies for 18– 24 Months, Natural Family Planning Awareness, Contraception, Menstrual Health and Fertility.<br>• Life Line for Moms: Perinatal Mental Health Toolkit, Mental Health Support, Alcohol & Drug Abuse<br>• Fathers and Breastfeeding<br>• Risks and Accident Prevention: Birth-6 Months, Home Environment Safety Checklist, Reduce the risk of SIDS. | Clinic/Community (Healthcare Providers, CHWs) Family Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• Vitamin A, Folic Acid, Iron, Protein<br>• Culture-specific diets to avoid both malnutrition and obesity.<br>• Breastfeeding Diet<br>• Feeding of Low-birth-weight (LBW) infants | Clinic/Community (Healthcare Providers, CHWs) Family |
| **Management and Treatment** | Understanding the possibility of late-onset complications such as:<br>• Prevention of Immediate Postpartum Bleeding and Hypertension,<br>• Breastfeeding, Fundal Massage, and Medication<br>• Family Planning Awareness and Contraception<br>• Management of physical health conditions in adults with severe mental disorders<br>• Chronic Care for Neglected Infectious Diseases | Clinic/Community (Healthcare Providers, CHWs) Family |

# Healthy Timing and Spacing

## Early Adult and Childbearing Years

Healthy timing and spacing of pregnancy are important to the well-being of both a mother and an infant and, consequently, the family. Methods for managing the timing of pregnancy can include fertility awareness (natural family planning), hormonal contraceptives (pills, injectables, or implants), non-hormonal contraceptives (condom and other barriers, intrauterine devices, and ligation of male vas or female fallopian tubes). Abortion is NOT a form of contraception.

Every woman deserves fully informed consent about her reproductive system, fertility cycle, and the impact of medications and hormones on her well-being. Awareness of the biological cycles by a woman and her spouse/partner can assist when desiring or delaying pregnancy. Information regarding age-related health and fertility problems should be provided.

Any discussion of contraception should include education about avoiding sexual risks, exploitation, and sexually transmitted infections. Optimal sexual health includes stable, caring relationships, emotional and spiritual wellness and is often found within the boundaries of mutually monogamous long-term relationships such as marriage.

# Healthy Timing and Spacing
## Early Adult and Childbearing Years

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Standards for physical examination for women, including:<br>• Height, weight, <u>vital signs</u><br>• Exam for physical abnormalities or disabilities<br>• Screening for:<br>  ○ Anemia, <u>malnutrition</u>, postpartum infections, breast infections<br>  ○ <u>Malaria</u>, parasites, TB, <u>HIV</u>, STDs, <u>Alcohol</u>, <u>Drug Use</u><br>  ○ Mental Health Screening: <u>Suicide</u>, <u>Depression</u>, <u>Anxiety</u>, <u>Self-Harm</u> | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>  ○ As indicated: Dengue, Meningococcal, etc. | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• Importance of <u>timing between pregnancies</u> for the health of the mother and baby<br>• <u>Menstrual health</u>, <u>Fertility awareness</u>, <u>C</u>ontraception, <u>Natural family planning awareness</u>,<br>• Risk avoidance and refusal skills for Drugs, <u>Alcohol</u>, Tobacco, Sex, and Violence<br>• Education on <u>tubal ligation</u> and the importance of <u>relationship quality and spousal support</u><br>• Educating that abortion is not the only option<br>• <u>Raising a Family in the Digital Age: A Technology Guide for Parents</u><br>• <u>American Medical Association "The Parent Package"</u><br>• <u>Sexual Violence Prevention</u>, <u>Intimate Partner Violence Prevention</u>, <u>Suicide Prevention</u> | Community<br>Family<br>School<br>Faith |
| **Management and Treatment** | • Management and treatment of complications or health issues from pregnancy<br>  ○ Permanent sterilization if future pregnancies would be life-threatening for the mother and baby.<br>  ○ Two-year intervals after a live birth<br>  ○ Six-months allowed after a miscarriage<br>• <u>Management of physical health conditions in adults with severe mental disorders</u><br>• <u>Chronic Care for Neglected Infectious Diseases</u><br>• <u>Wound Care Protocol</u> | Community<br>Family |

# Mid-life Years
## 40 yrs. – 60 yrs.

Between the ages of 40 and 60, many men and women care for families and work long hours daily. They represent a nation's greatest potential for economic growth and social stability. Their well-being can determine the stability of families, the social fabric of a community, and their country's economic prosperity.

For these individuals, ignored health problems can become major, life-threatening concerns. Cervical cancer can become deadly. Tuberculosis can debilitate workers while spreading to family and colleagues. Hypertension and diabetes can silently but permanently disable individuals.

Disease and death in this age group often result in the loss of a parent and provisions to children and the community.
Mid-life adults can be supported by community interventions, including CHWs and local health facilities. Nations are wise to invest in the health of mid-life adults through screening, monitoring, diagnostic, and treatment interventions listed below.

# Mid-life Years: 40 yrs. - 60 yrs.

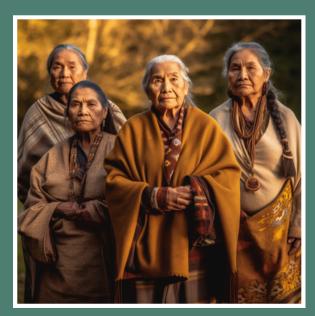| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Measures and Screening for disease prevention, including:<br>• Vital Signs,<br>• Non-Communicable Diseases (NCDs): Diabetes, Anemia, Hypertension, Hyperlipidemia, Osteoarthritis, Osteoporosis, Kidney, Liver,<br>• Cancer Screening: Cervical, Breast, or other Malignancies<br>• Mammogram, Pap Smear<br>• Malnutrition, HIV, STD, Alcohol, Drug Use<br>• Mental Health Screening: Suicide, Depression, Anxiety, Self-Harm | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Immunization** | Immunize according to universal standards and/or recommendations for nation-specific vaccination protocols, including:<br>  ◦ As indicated: Influenza, Shingles, Tdap, Dengue, Meningococcal, MMR, RSV, Hepatitis B, etc. | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• Physical Activity: CDC Guidelines, Alcohol Use<br>• Caring for Aging Parents, Becoming a Grandparent, Making Blended Families Strong<br>• Hormonal, Breast Self-Exam, Menopausal, Changes in Sexual Function<br>• Raising a Family in the Digital Age: A Technology Guide for Parents<br>• Stop the Bleed Education and Training<br>• Stress Management for Resiliency in Midlife, Suicide Prevention<br>• American Medical Association "The Parent Package"<br>• Sexual Violence Prevention, Intimate Partner Violence Prevention, Ending Violence Against Women, | Family<br>Faith<br>Community |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• Vitamin D, Omega-3, Calcium | Family, Community, School |
| **Management and Treatment** | • Physical Health:<br>  ◦ Infectious: Malaria, HIV, Tuberculosis, and Hepatitis B,<br>  ◦ Metabolic/Chronic Disease: Diabetes, Hypertension, Anemia, Hyperlipidemia, Osteoporosis, Cancer<br>  ◦ Hormonal Support<br>  ◦ Preventing Medication Misuse, Overuse or Counterfeit Drugs<br>  ◦ Curative Treatment and Palliative Care<br>• Mental and Relationship Health Resources:<br>  ◦ Group Therapy, Individual Counseling, Family Therapy, Marriage Counseling<br>  ◦ Maintain Strong Community and Faith Connections<br>  ◦ Management of physical health conditions in adults with severe mental disorders<br>• Chronic Care for Neglected Infectious Diseases<br>• Wound Care Protocol | Clinic/Community<br>(Healthcare Providers, CHWs) |

# Late Adult Years
## 60 yrs and up.

Past the age of 60, health problems can become more frequent and significantly impact the quality of life. In low-resource regions and countries, comprehensive health assessments and interventions can be limited due to geographic, economic, and social factors. For older women, especially widows, healthcare can be difficult to access due to limited income, poor mobility, and social/emotional isolation.

Consequently, this Framework strongly endorses the use of Community Health Workers to monitor, educate, and encourage older community members. Many of the recommended interventions below can be delivered by CHWs. These interventions include basic nutrition screening and education, basic screening for vision, hearing, blood pressure, safe mobility, and mental health issues, recommendations for physical activities and range of motion exercises, and encouragement to continue engagement in family, faith, and neighborhood groups. CHWs should be empowered to make referrals to a healthcare system for potentially serious or chronic conditions.
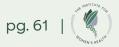
As individuals approach the end of life, many struggle with purpose, meaning, and communication, as well as physical health issues. Families and communities can support their elderly members through frequent visits and encouragement.

# Late Adult Years: 60 yrs and up

| Topic | Intervention | Setting |
|---|---|---|
| **Physical Assessment & Screening** | Geriatric examination for women 60 yrs.. and above, including:<br>• Height, weight, <u>Vital Signs</u>, <u>vision</u>, <u>dental</u>, <u>hearing</u>, and mobility changes<br>• Exam for physical abnormalities or disabilities<br>• Measures and Screenings for monitoring disease prevention, including:<br>  ○ Arthritis, <u>Cervical Cancer, Breast Cancer, Colon Cancer,</u> Hypertension, <u>Diabetes</u>, Cholesterol, <u>Bone Density</u>, <u>Anemia</u>, <u>Alcohol</u>, <u>Drug Use</u>, <u>Pap smear</u>, <u>Malnutrition</u>, <u>Elder Abuse</u><br>• Mental Health Screening and Prevention for <u>Suicide</u>, <u>Depression</u>, <u>Anxiety</u>, <u>Self-Harm</u> | Clinic/Community<br>(Healthcare Providers, CHWs)<br>Community |
| **Immunizations** | Immunize according to universal standards for vaccination protocols, including:<br>  ○ <u>DPT/Tdap, HPV, Hep A and B, Flu, Pneumococcal & Shingles RSV</u><br>    ▪ Special emphasis on flu and pneumonia, and other regional infections. | Clinic/Community<br>(Healthcare Providers, CHWs) |
| **Health Promotion & Education** | Strengthen family and support systems, specifically through:<br>• Encouraging <u>daily routines</u> that include support from family<br>• Encouraging relationships and community<br>• Maintain social and family contact, activities, and support<br>• <u>Mental health support</u>, <u>Suicide prevention</u>, <u>Grief and Mourning</u>, <u>Depression</u><br>• <u>Ending Elder Abuse</u>, <u>Ending Violence Against Women</u>, <u>Sexual Violence Prevention</u>, <u>Intimate Partner Violence Preventio</u>n | Community<br>Family<br>Faith |
| **Nutrition** | Special emphasis on dietary intake of the following:<br>• Calcium, Vitamin D, Iron, Folate, Omega 3<br>• Careful Monitoring of Diet for Bone Density, <u>Malnutrition</u> and Obesity<br>• <u>ESPEN Practical Guide for Clinical Nutrition and Hydration in Geriatrics</u> | Family<br>Community |
| **Management and Treatment** | • Environmental improvement to <u>prevent falls</u><br>• Accommodations for basic functions (latrines, etc.) to reduce arthritis.<br>• <u>Activity</u> to maintain range of motion, balance, and muscle strength<br>• <u>Management of physical health conditions in adults with severe mental disorders</u><br>• <u>Chronic Care for Neglected Infectious Diseases</u><br>• <u>Wound Care Protocol</u> | Community |

# Conclusion

The Institute for Women's Health (IWH) is pleased to share the Women's Optimal Health Framework with health professionals, health systems, and nations around the world.
IWH hopes this resource improves the lives of women and their families through implementing effective health interventions throughout the community and family. We empower Optimal Health by connecting health and community workers with easy-to-use resources and research.

IWH recognizes that nations need reliable research and resources to build excellent health policies supporting women, families, and life.  The Framework assists leaders in the Ministries of Health to identify health goals and establish evidence-based strategies to accomplish those goals.

IWH values the input of health and community entities to continually strengthen the Women's Optimal Health Framework.  Suggestions from interested colleagues are welcomed to help IWH improve health across the lifespan from conception to the end of life through health, community, education, and faith settings.
Please submit your feedback and ideas to:  info@theiwh.org

# Appendix
# Research Review: Criteria, Literature & Contributors

**Literature Review:**

- The primary focus of this extensive research and literature review was to identify high-impact, low-cost health interventions that can be implemented through a wide variety of settings to promote Optimal Health. Books, academic journals, reports, published guidelines, health recommendations, and relevant publications of existing literature on women's, children's, and family health issues were reviewed. The scope of this review was wide-ranging, encompassing the entire lifespan as well as diverse cultural, geographic, and ethnic factors. The selection criteria for inclusion into the framework were stringent, focusing on those that demonstrated clear alignment with established best practices in health care and a profound understanding of the value of Optimal Health across various stages of life. This approach ensured that the selected interventions were effective, economical, inclusive, and adaptable to a wide range of populations and settings, thereby maximizing their potential impact on public health.

**Public Health Professionals:**

- A diverse group of practicing and academic public health personnel, as well as healthcare providers, assisted with the selection of resources for review and the analysis of interventions.

**International Health Council Review:**

- Healthcare and policy experts from five continents contributed to this project. Their invaluable guidance, reviews and practical plans ensured the cultural relevance and practicality of the interventions in different global contexts. This international perspective was crucial in acknowledging and addressing the multifaceted aspects of cultural, geographic, and ethnic diversities, which play vital roles in health and healthcare outcomes.

The Reference Page, detailing all sources and materials cited in this document, is available as a separate document on our website. Please refer to it for more detailed information on the resources used in our research and analysis.

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