SHE Assembly Reykjavik, Iceland, 20-21 June 2019

Theme – IMPLEMENTATION AND EVALUATION OF SCHOOL HEALTH PROMOTION

Adolescent's Health in North Macedonia and Perspective Concept of SHE







National Policy for Health Promotion and Health Education

> National Legislation

- Law for Health Care
- Law for primary education
- Law for secondary education
- Law for high education, etc.

> The following strategic documents are also implemented:

- Health strategy of North Macedonia
- Strategy for youth
- National plan for gender equity
- National strategy for safe motherhood
- National strategy for SRH
- National strategy for HIV/AIDS
- National program for educational development
- National strategy for collaboration between the Government and the civil sector
- Local strategy for drug control in Skopje
- other local strategies at community level, and etc.

Preventive programs which include programs of interest in protecting women, children and youth health:

Program for active maternal and child health care, Public health program, Program for early detection of malignant neoplasm on reproductive organs, colon and breast, systematic check control of adolescent and youth health program, Program for HIV/AIDS protection, "Health for all" Program and others.

Organization, coordination and monitoring of preventive education

- Ministry of Health, Institute for Public Health, 10 Centers for Public Health, Institute for maternal and child health are the main institutions involved in planning, implementation and monitoring of preventive programs in educational establishments
- Ministry of Education and Science
- Bureau for development of education within Ministry of Education and Science
- Medical faculty, Faculty for dentistry, Faculty for physical culture, Faculty for Pedagogy, etc.

> Coordination and cooperation

- There is a good cooperation between educational institutions, health services and NGOs, when it comes to the implementation of preventive programs.
- There are several NGOs in North Macedonia who work on constantly advancing education on tobacco control, improvement of sexual and reproductive health, healthy diet, physical activity, etc.
- Besides collaborating with the Ministry of Health, Ministry of Labour and Social Policy, Ministry of Education and Science, NGOs collaborate with educational institutions-schools and faculties.
- Example: NVO H.E.R.A is good example for good collaboration and cooperation with other institutes.

> Delivery of educational curricula

 According to the North Macedonian law for primary education and law for secondary education, as well as educational programs and curriculums, all of the educational institutions conduct education for life skills and disease prevention.

However the situation in the field, according to the information's from the BDE (Bureau for development of education in RSM), points to the fact that health promotion in school's curriculum is covered with thematic lessons about health, that are integrated in the broader subjects such as Biology, Citizen Education, Sociology, Pedagogy. Some of these subjects are optional, but some of them are part of the obligate school curriculum.

Financing (national/donor:)

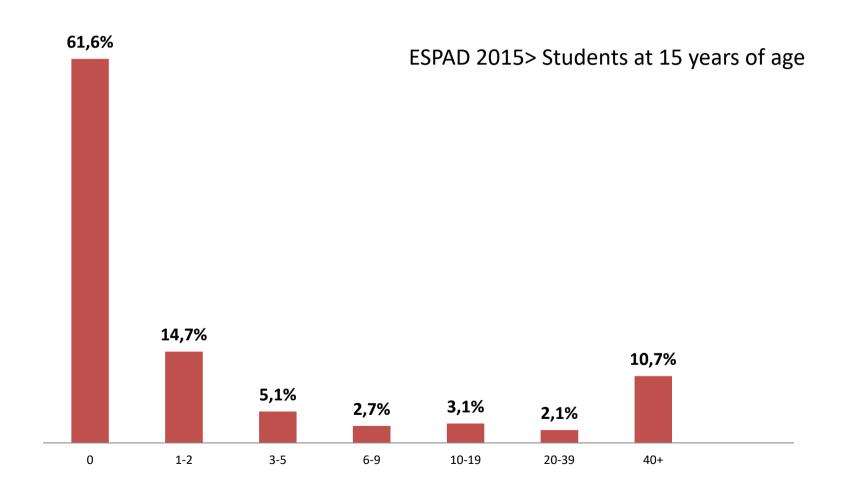
- Budget of the Republic of North Macedonia-many of the planned activities are financed from the budget of RNM through existing prevention programs and within programs and strategies of other ministries and institutions working in promotion
- Local Government-within the framework of the implementation of measures in the field of preventive health care, according to the Law on Local Self-government (Article 22)
- Pre-accession funds (IPA funds).
- Private-public partnership
- Agencies of the United Nations (WHO, UNFPA, UNICEF... technical and financial assistance – Life-skills education (training of teachers, development of teaching manuals, implementation of surveys – HBSC, GYTS, etc)
- European Commission and EMCDDA (exp. European survey of psychoactive drug abuse)
- Other donors

> ADOLESCENT HEALTH

Sexual behaviour

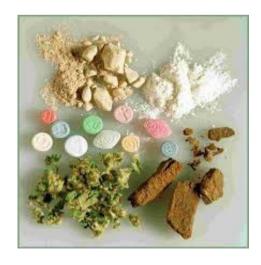
- There are a lot of studies in North Macedonia confirming that young people are showing elements of risky sexual behavior – lower age for the first sexual intercourse, frequent partner change, insufficient use of contraception and anti STD means.
- According to the UNGASS indicator, 3.3% of young women and men aged 15-24 had sex before the age of 15(boys – 6,2%, girls-0,8%).
- Average age of sexual debut for males and females is 16,9.
 38% of young women and men aged 15-24 had sex with more than one partner in the last 12 months.
- According to the State Statistical Office, 5,8% are pregnant women under the age of 20.

TOBACCO USE - NUMBER OF CIGARETTES



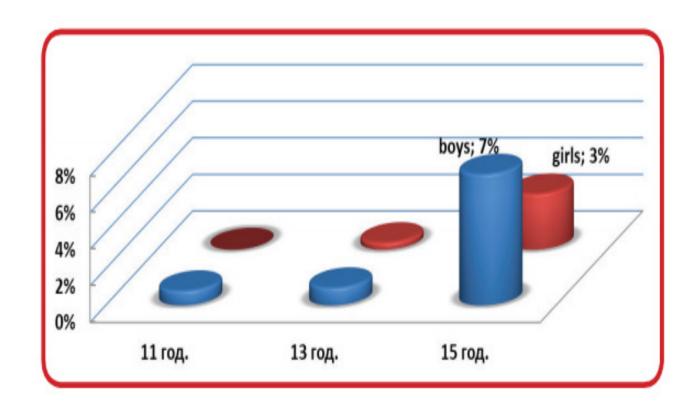
Drug use

- The findings from HBSC survey 2009/2010 in Republic of North Macedonia showed that prevalence of recent cannabis use in adolescents, 15-year-olds, is 2%.
- Boys reported using cannabis more frequently (3,9% boys, 1,4% girls).
- The number of drug users is around 10000 people and there is a trend of increasing according to the data from officially registered users in 2009 8778.
- According to the ESPAD survey in 2008, the prevalence of cannabis users in the last 12 months is 4,3%, and in the last 30 days 2,1% among students at age of 16. Also, the ecstasy use is increasing from 1999 to 2008 for 1% and the prevalence in last 12 months is 2,1%. The prevalence of heroin users is 0,8%.





Alcohol consumption

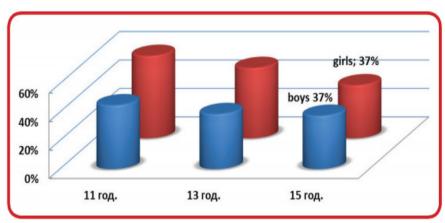


The results of the HBSC 2018 study find that they are around 3% students who were totally drunk more than once in the last 30 days.

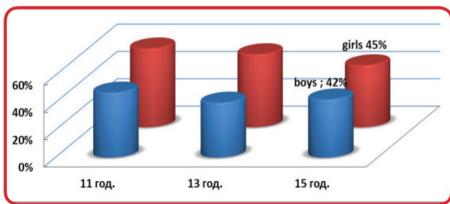
Eating habits

Students consume fruit every day and eat vegetables that is positive, but they also say they eat sweets every day and drink carbonated drinks, which is worrying.

- Students who consume fruit every day



- Students consuming vegetables every day



Major obstacles and challenges

There are some obstacles for incorporation of preventive health education at national policy level:

- Sexual education, HIV/STI prevention and reproductive health are topics that are still a challenge to be institutionalized into official curricula because of negative attitudes of the public, some politicians, religious leaders, parents, etc., towards preventive education (in particular, towards sex education, HIV/STI prevention, reproductive health);
- Large part of the public considers that children are already overloaded with number of subjects they have and hours they spend in schools;
- Capacity of teachers to deal with these topics as well as number and quality of existing training resources are quite limited and require comprehensive improvement;
- Currently applied cross-curricular approach i.e. approach in which thematic lessons are integrated in broader subjects did not give expected results.

- Lectures are not interactive and are not focused on skills building;
- There are no adequate available and earmarked funds for funding of prevention education (program development, training, publication of materials, monitoring and evaluation, etc.);
- Motivation of teachers does not exist or it is on a very low level;
- Students lack motivation to learn more about health promotion mostly due to rather conservative, ex-cathedra way of teaching.
- At this moment knowledge and skills do not influence the students' overall academic performance and there is no data that show to what extent gained knowledge influence their understanding of importance of prevention of their behavior;
- Majority of local communities are not covered by Youth Counseling Service Centers.

6. SWOT ANALYSIS

STRENGTHS

- Legislation
- Annual school programs
- Activities in the chapter "Health Care"
- HBSC 2018/2019 study
- School staff and students with the desire for changes in the educational process

OPPORTUNITIES

- Support from WHO and SHE network (HBSC questionnaire and SHE tools, experts, scientific studies)
- Education Reform Initiative and support from MOE and MOH
- Existence of organizational structures in the school: Teachers' Council, Parent Council, Student Parliament
- Motivated health professionals in public health to cooperate with staff in the school
- Motivated parents with financial opportunities to donate funds to improve the conditions in the school

WEAKNESSES

- Insufficient implementation of the contents and health activities of the programs and plans for work in the schools (boring, stereotyped, emphasis on other subjects)
- Pupils and parents are not involved in the planning of health activities
- The capacities for proper nutrition, physical activity, communications with the social environment are obsolete and insufficient or insufficiently used in their leisure time
- Inappropriate conditions in the physical environment
- Insufficient information about the health of students and school

THREATS

- Insufficient financial support from the budget of the municipalities and the Government of the Republic of Macedonia for improving the physical environment in and out of school
- Slow and incomplete education reforms
- 3. Insufficient number of school staff
- Low salaries of school staff as a reason for insufficient motivation
- Insufficiently educated staff to implement the concept of health promotion in schools

Recommendations

- In order to secure political commitment and funding in terms of addressing the barriers in the future the following is needed:
- To increase public financing of healthy lifestyle programs for adolescents and youth;
- To increase the human capacity for design and implementation of training programs.
- To increase funding for Youth Counseling Service Centers from the National program for public health's budget.
- To use HBSC data and other sources of data, and also SHE tools for evaluation and planning the health promotional activities in the schools
- To prepare National strategy for school health promotion in North Macedonia with international and European specific standards and indicators for quality of work.

Core message: Healthy adolescents – healthy society!



THANK YOU FOR YOUR ATTENTION