
APPENDIXES

METHOD OF THE STUDY

Overview of Publications

OTA'S Report, *Adolescent Health*, is being published in three volumes:

- . Volume I. Summary and Policy Options;
- . Volume II. Background and "the- Effectiveness of Selected Prevention and Treatment Services; and
- . Volume III. Crosscutting Issues in the Delivery of Health and Related Services.

A full table of contents for all three volumes appears in box A-1.

OTA's assessment on adolescent health also includes two other publications. One, a Report entitled *Indian Adolescent Mental Health*, was released in January 1990. This Report analyzed the mental health needs of Indian adolescents and the services available to address them. The second publication, a background paper entitled *Adolescent Health Insurance Status*, was prepared by Richard Kronick and was released in July 1989. This background paper looked at how many adolescents are uninsured, why some adolescents are insured and others are not, the change in the number of uninsured adolescents over time, and the effect of selected potential policy changes in reducing the number of uninsured adolescents. Several papers were prepared under contract in the course of this assessment, and those papers are listed in the "Contractor Papers" section below.

Request for the Study

This OTA assessment of adolescent health was prompted by several concerns, many of them arising from the recognition that today's youth will someday support an expanding aging U.S. population. Within this context, OTA was asked to address the following topics:

- the health status of adolescents;
- factors that put adolescents at risk for health problems or protect them from such problems, including racial and ethnic backgrounds, socioeconomic status, gender, and developmental stage;
- issues related to the organization of health care services and technologies available to adolescents, including accessibility and financing;
- issues related to the monitoring of adolescent health and opportunities for improving national data collection of efforts; and
- gaps in research on the health and behavior of adolescents and opportunities for public and private support.

OTA's adolescent health study was requested principally by Senator Daniel K. Inouye, Chairman of the

Senate Select Committee on Indian Affairs, and Senator Nancy L. Kassebaum, Ranking Minority Member of the Subcommittee on Education, Arts, and Humanities of the Senate Committee on Labor and Human Resources. Other requesters included Chairmen and/or Ranking Minority Members of the Senate Appropriations Committee, the Senate Commerce, Science, and Transportation Committee, the Senate Finance Committee, the Senate Labor and Human Resources Committee, the Senate Small Business Committee, the Senate Veterans' Affairs Committee, and the House Interior and Insular Affairs Committee. The requesters included the Chairman and six senatorial members of the congressional Technology Assessment Board (see box A-2). The Technology Assessment Board approved the proposal to study adolescent health in June 1988, and OTA staff began working on the project in July 1988.

Involvement of a Nonprofit Foundation

An unusual feature of OTA's adolescent health assessment was the involvement of a nonprofit foundation. On August 4, 1988, Carnegie Corporation of New York agreed to assist OTA in carrying out the assessment of adolescent health. The Carnegie Council on Adolescent Development, an operating arm of Carnegie Corporation of New York, provided various types of assistance for OTA's Report, including assistance in the provision of data, support for workshops and various contractors, consultation and professional advice, and detailees to assist with research and writing.

Advisory Panel and Reviewers

Advisory panels for OTA studies guide OTA staff in selecting issues and material to consider and in reviewing the written work of the staff; however, such panels are not responsible for the content of final reports. In 1988, during the initial phase of the adolescent health project, OTA developed a list of possible members for OTA's Adolescent Health Advisory Panel through searches of relevant literature and discussions with researchers, service providers, and other experts in adolescent health issues. The 24 individuals who agreed to serve on OTA's Adolescent Health Advisory Panel came from a variety of fields and had expertise in health policy, adolescent development, mental health, social welfare, education, adolescent medicine, nursing, psychology, and alcohol and drug abuse policy and treatment (see listing at the front of this volume). Many panel members were parents of adolescents; in addition, the Parent-Teacher Association identified one person to be a parent representative. Felton Earls, professor at the Harvard School of Public Health chaired, and Michael Cohen, chairman of the

Box A-1--Full Table of Contents for OTA's Adolescent Health Report**VOLUME I: SUMMARY AND POLICY OPTIONS****Appendixes**

- A. Method of the study
- B. Acknowledgments
- C. Issues Related to the Lack of Information About Adolescent Health and Health and Related Services
- D. Glossary of Abbreviations and Terms

VOLUME II: BACKGROUND AND THE EFFECTIVENESS OF SELECTED PREVENTION AND TREATMENT SERVICES**1. Introduction****Part 1: Background on Adolescent Health**

- 2. What Is Adolescent Health?
- 3. Parents' and Families' Influence on Adolescent Health
- 4. Schools and Discretionary Time

Part II: Prevention and Services Related to Selected Adolescent Health Concerns**prevention and Services Related to Physical Health Problems**

- 5. Accidental Injuries: Prevention and Services
- 6. Chronic Physical Illnesses: Prevention and Services
- 7. Nutrition and Fitness Problems: Prevention and Services
- 8. Dental and Oral Health Problems: Prevention and Services
- Prevention and Services Related to Sexually Transmitted Diseases and Pregnancy
- 9. AIDS and Other Sexually Transmitted Diseases: Prevention and Services
- 10. Pregnancy and Parenting: Prevention and Services

Prevention and Services Related to Mental Health problem

- 11. Mental Health Problems: Prevention and services
- 12. Alcohol, Tobacco, and Drug Abuse: Prevention and Services
- Prevention and Services Related to Delinquency and Homelessness
- 13. Delinquency: Prevention and Services
- 14. Homelessness: Prevention and Services

Appendix

- A. Glossary of Abbreviations and Terms

VOLUME III: CROSSCUTTING ISSUES IN THE DELIVERY OF HEALTH AND RELATED SERVICES

- 15. Major Issues Pertaining to the Delivery of primary and comprehensive Health Services to Adolescents
- 16. Financial Access to Health Services
- 17. Consent and Confidentiality in Adolescent Health Care Decisionmaking
- 18. Issues in the Delivery of Services to Selected Groups of Adolescents
- 19. The Role of Federal Agencies in Adolescent Health

Appendixes

- A. Glossary of Abbreviations and Terms
- B. Burden of Health Problems Among U.S. Adolescents
- C. HCFA's Method for Estimating National Medicaid Enrollment and Expenditures for Adolescents

Department of Pediatrics at Montefiore Hospital, was vice-chair of the Advisory Panel.

The first meeting of the Adolescent Health Advisory Panel was held on October 26, 1988. At that meeting, the panel discussed the purpose of the study, the plan and organization of the study, background materials, and key issues to be included in the study. Preliminary drafts of the entire report were reviewed by members of the Advisory Panel and discussed at meetings of the panel members in May 1989 and March 1990. Following these meetings, OTA staff incorporated revisions and sent the new drafts

to the panel members for their comments. In addition, the entire draft, each contributing contractor paper, and each chapter were reviewed by the Advisory Panel and by relevant outside experts. Taken together, more than 500 individuals reviewed aspects of the report (see app. B, "Acknowledgments"). The final draft was sent to the Technology Assessment Board in late July 1990,

Youth Advisory Panel

An unusual feature of OTA's adolescent health assessment was that it included a Youth Advisory Panel to

**Box A-2—Requesters of OTA's Adolescent Health Report
(with current committee chair or ranking minority assignments)**

Senator Daniel K. Inouye, Chairman of the Senate Select Committee on Indian Affairs;
 Senator Nancy Landon Kassebaum, Ranking Minority Member of the Subcommittee on Education, Arts, and Humanities of the Senate Committee on Labor and Human Resources;
 Senator Bob Dole, Minority Leader of the Senate;
 Senator Robert C. Byrd, chairman of the Senate Committee on Appropriations;
 Representative William H. Gray, III, Majority Whip of the House of Representatives;
 Senator James M. Jeffords, Ranking Minority Member of the Subcommittee on Labor of the Senate Committee on Labor and Human Resources;
 Senator Orrin G. Hatch, Ranking Minority Member of the Senate Committee on Labor and Human Resources;
 Senator Edward M. Kennedy, Chairman of the Senate Committee on Labor and Human Resources;
 Senator Quentin W. Burdick, Chairman of the Senate Committee on Environment and Public Works;
 Senator Mark O. Hatfield, Ranking Minority Member of the Senate Committee on Appropriations;
 Senator Alan K. Simpson, Assistant Minority Leader of the Senate;
 Senator Alan Cranston, chairman of the Senate Committee on Veterans Affairs;
 Senator Ted Stevens, Ranking Minority Member of the Senate Committee on Rules and Administration;
 Senator Bob Packwood, Ranking Minority Member of the Senate Committee on Finance;
 Senator Charles Grassley, Member of the Technology Assessment Board;
 Senator Barbara Mikulski, Chairman of the Subcommittee on Veterans Affairs, Housing and Urban Development, and Independent Agencies of the Senate Committee on Appropriations;
 Senator Ernest Hollings, Chairman of the Senate Committee on Commerce, Science, and Transportation;
 Senator Arlen Specter, Ranking Minority Member of the Subcommittee on Veterans Affairs;
 Representative Henry A. Waxman, Chairman of the Subcommittee on Health and the Environment of the House Committee on Energy and Commerce;
 Senator Daniel K. Akaka
 Representative Morris K. Udall, Chairman of the House Committee on Interior and Insular Affairs;
 Senator Frank H. Murkowski, Vice Chairman of the Senate Select Committee on Intelligence;
 Senator Christopher. Dodd, Chairman of the Subcommittee on Children, Family, Drugs, and Alcohol of the Senate Committee on Labor and Human Resources;
 Senator Claiborne Pell, Chairman of the Senate Committee on Foreign Relations;
 Senator Dale Bumpers, Chairman of the Senate Committee on Small Business;
 Senator Lloyd Bentsen, Chairman of the Senate Committee on Finance;
 Senator Daniel P. Moynihan, Chairman of the Subcommittee on Social Security and Family Policy of the Senate Committee on Finance;
 Senator John D. Rockefeller, IV, Chairman of the Subcommittee on Medicare and Long Term Care of the Senate Committee on Finance;
 Representative Don Young, Ranking Minority Member of the House Committee on Interior and Insular Affairs.
 A letter of support was received from the House Select Committee on Children, Youth, and Families.

provide OTA staff with an adolescent perspective on the issues in the Report. The Youth Advisory Panel consisted of 21 individuals who ranged in age from 10 to 19. Panel members represented a range of backgrounds: racial/ethnic (white, non-Hispanic; Hispanic; Asian; black), socioeconomic, and experiential (e.g., homeless, substance use, pregnant, parenting, children of divorce, children from stepfamilies, and extended families). Although all were from the greater Washington, DC, metropolitan area, they came from central city, suburban, and rural areas. During meetings, the Youth Advisory Panel highlighted important health issues for adolescents, developed a list of desirable features of health services, and made recommendations to the project staff on ways to improve adolescent health. Representatives of the Youth Advisory Panel also attended various workshops and meetings held by OTA. Members of OTA's Youth Advisory Panel are listed in box A-3.

Workshops

During the course of the study, OTA project staff convened five workshops to discuss various issues relating to adolescent health. Three of these workshops (the second, third, and fifth workshops) were supported by the Carnegie Council on Adolescent Development.

- The first workshop, on American Indian and Alaska Native adolescents' mental health, was held on December 12-13, 1988, in Albuquerque, New Mexico.
- The second workshop, on health service delivery to adolescents, was held at OTA on August 1-2, 1989. At this workshop, participants discussed the availability, access, effectiveness, and appropriateness of various services for adolescents in such areas as mental health, substance abuse, child welfare; in the



Photo credit: Office of Technology Assessment

An unusual feature of OTA's adolescent health assessment was the involvement of a panel of 10- to 19-year-olds who advised OTA.

mainstream health care system; and in alternative organizational settings such as school-linked health centers and free clinics. Workshop participants responded to drafts prepared by OTA contractors.

- In the third workshop, on the role of Federal agencies in adolescent health, representatives from relevant Federal departments and agencies discussed issues relating to the nature and scope of the Federal role in adolescent health. This workshop was held at OTA on October, 11, 1989.
- The fourth workshop, on socioeconomic and cultural/ethnicity issues in the delivery of health services to adolescents, was held on December 18-19, 1989, at OTA. At this workshop, parties responded to first drafts of papers prepared by OTA contractors.
- On March 28, 1990, OTA held a final workshop to discuss how various policy options of the Report could incorporate an approach that was less focused on health problems and more oriented to health promotion.

Workshop attendees included adolescent health care providers, academics, and adolescents. Participants of all five of the workshops are listed at the end of this appendix.

Box A-3--Youth Advisory Panel for OTA's Adolescent Health Report

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Survey of Federal Agencies and Site Visits

In preparation for the workshop on the role of Federal agencies, OTA staff conducted a survey of various Federal agencies in August 1989 to determine the scope and level of activity at the Federal level regarding adolescent health. The results of the survey are presented in chapter 19, "The Role of Federal Agencies in Adolescent Health," in Volume III.

In addition to conducting workshops and a survey of Federal agencies, OTA staff made site visits, conducted literature reviews, and performed other research activities. Project staff visited various programs in Los Angeles, San Francisco, New Jersey, New York, Boston, and Washington, DC, designed for adolescents. These visits included school-linked health centers, community-based adolescent health centers, hospital-based and health maintenance organization-based adolescent clinics, youth serving organizations, and various programs for special groups, such as homeless adolescents and delinquents.

Contractor Papers

Thirty-one contractor papers were commissioned by OTA during the course of the study on adolescent health

and are listed below.¹The National Technical Information Service (NTIS) in Springfield, VA, has copies of most of the contractor papers; the NTIS classification numbers are listed beside the specific contractor paper. For additional information, call NTIS at (703) 487-4600.

- LaRue Allen, Ph. D., University of Maryland, and Christina Mitchell, Ph. D., New York University, *Poverty and Adolescent Health** (NTIS No. PB 91-154 385/AS)
- Trina Anglin, M. D., Ph. D., Cleveland Metropolitan General Hospital, *Health Service Delivery to Adolescents**
- Lois Bergeisen, Gaithersburg, MD, *Indian Adolescent Physical Health*
- Barbara Bums, Ph.D, Duke University, Carl A. Taube, Ph.D, Johns Hopkins University, and John E. Taube, University of Maryland, *Mental Health Services for Adolescents** (NTIS No. PB 91-154 344/AS)
- Barbara Burns, Ph.D, Duke University, Carl A. Taube, Ph.D, Johns Hopkins University, and John E. Taube, University of Maryland, *Use of Mental Health Sector Services by Adolescents: 1975, 1980, 1986** (NTIS No. PB 91-154 344/AS)
- Paul Casamassimo, D. D. S., M. S., Children's Hospital, Columbus, OH, *Adolescent Dental and Oral Health* (NTIS No. PB 91-154 336/AS)
- Johanna Dwyer, D.Sc., R. D., New England Medical Center Hospital, and Carol N. Meredith, University of California at Davis, *Great Expectations." Adolescent Nutrition and Fitness*
- James Emshoff, Ph.D. and Ronnie Margolin, Georgia State University, *Treatment of Adolescent Substance Abuse: A National Review and Critique** (NTIS No. PB 91-154 344/AS)
- Mathea Falco, J. D., New York, NY, *Primary Prevention of Alcohol, Tobacco, and Drug Use by Adolescents*
- Ronald A. Feldman, Ph. D., Columbia University, *How Can Society Contribute to Meaningful Use of Adolescents' Spare Time?* (NTIS No. PB 91-154 328/AS)
- Michelle Fine, Ph. D., University of Pennsylvania, *Middle and Secondary School Environments as They Affect Adolescent Well-Being* (NTIS No. PB 91-154 328/AS)
- James Garbarino, Ph. D., Erikson Institute, *Adolescent Victims of Maltreatment* (NTIS No. PB 91-154 310/AS)
- Josephine Gittler, J. D., Mary Quigley-Rick, J. D., and Michael J. Saks, Ph. D., University of Iowa, *Adolescent Health Care Decisionmaking: The Law and Public Policy** (available from Carnegie Council on Adolescent Development, Washington, DC 202/429-7979)
- Angela Holder, LL.M., Yale University, *Legal and Ethical Issues Related to Adolescents' Participation in Research and Data Collection on Health and Related Topics** (NTIS No. PB 91-154 377/AS)
- Jonathan Klein, M. D., M. P. H., Milton Kotelchuck Ph. D., and Gordon H. DeFries, Ph. D., University of North Carolina at Chapel Hill, *Critical Evaluation of Comprehensive Multi-Service Delivery Systems for Adolescents: A Framework for Evaluation of Effectiveness and a Feasibility Analysis**
- Barry Krisberg, Ph. D., National Council on Crime and Delinquency, *Juvenile Justice: A Critical Examination** (NTIS No. PB 91-154 351/AS)
- Richard Kronick, San Diego, CA, *Adolescent Health Insurance Status: Analyses of Trends in Coverage and Preliminary Estimates of the Effects of an Employer Mandate and Medicaid Expansion on the Uninsured* (available from GPO (telephone number 202/783-3238); stock number 052-003-01 160-3)
- Richard Kronick, San Diego, CA, *Update: Adolescent Health Insurance Status** (NTIS No. PB 91-154 369/AS)
- Spero Manson, Ph. D., University of Colorado, *Indian Adolescent Mental Health* (available from GPO (telephone number 202/783-3238); stock number 052-003-01 175-1)
- Margaret McManus, Harriette Fox, Paul Newacheck, Lori Wicks, and Rebecca Kelly, McManus Health Policy, Inc., *Medicaid Coverage of Adolescents* (NTIS No. PB 91-154 369/AS)
- Gary B. Melton, Ph.D. and Lois B. Oberlander, M. A., University of Nebraska-Lincoln, *The Health of Rural Adolescents* (NTIS No. PB 91-154 385/AS)
- Scott Menard, Ph. D., University of Colorado, *The Epidemiology of Minor Offending in Adolescence* (NTIS No. PB 91-154 351/AS)
- Larry Mi'ike, M. D., J. D., University of Hawaii, *Health and Related Services for Native Hawaiian Adolescents** (NTIS No. PB 91-154 385/AS)
- Edward P. Mulvey, Ph. D., Michael A. Arthur, M. A., and N. Dickson Reppucci, Ph. D., University of Pittsburgh, *Review of Programs for the Prevention and Treatment of Delinquency* (NTIS No. PB 91-154 351/AS)
- D. Wayne Osgood, Ph.D. and Janet K. Wilson, University of Nebraska-Lincoln, *Covariation Among Health-Compromising Behaviors in Adolescence** (NTIS No. PB 91-154 377/AS)
- Carol Runyan, M. P. H., Ph. D., Elizabeth A. Gerken, M. S. P. H., and Laura S. Sadowski, M.D., M. P. H.,

¹The 16 papers marked with an asterisk are papers for which funding was provided by the Carnegie Corporation of New York and the Carnegie Council on Adolescent Development.

- University of North Carolina, *Unintentional Injury Among Adolescents* (NTIS No. PB 91-154 336/AS)
- Stanley Sue, Ph. D., University of California, Los Angeles, and Nolan Zane, University of California at Santa Barbara, *Health and Related Services for Asian American Adolescents** (NTIS No. PB 91-154 385/AS)
- Dalmas A. Taylor, Ph. D., Wayne State University, and Phyllis A. Katz, Ph. D., Institute for Research on Social Problems, *Health and Related Services Available to Black Adolescents** (NTIS No. PB 91-154 385/AS)
- I-I. Rutherford Turnbull, Esq., J. D., LL.M., and Lisa Dorrill, M. A., University of Kansas, *Health Care Services for Adolescents With Developmental Disabilities*
- Robert Valdez, Ph. D., University of California, Los Angeles, *Factors Affecting Latino Adolescents' Health and Health Care Use** (NTIS No. PB 91-154 385/AS)
- Margaret West, M.S. W., Ph.D. and Sally N. Stuart, M. S. W., University of Washington, *Child Welfare Services for Adolescents** (NTIS No. PB 91-154 310/AS)

Participants in Workshops on Adolescent Health

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Workshop #3—The Federal Role in Adolescent Health

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