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Adolescent and young adult health

26 November 2024



Key facts

- Over 1.5 million adolescents and young adults aged 10–24 years died in 2021, about 4500 every day.
- Young adolescents aged 10–14 years have the lowest risk of death among all age groups.
- Injuries (including road traffic injuries and drowning), interpersonal violence, self-harm and maternal conditions are the leading causes of death among adolescents and young adults.
- Half of all mental health disorders in adulthood start by age 18, but most cases are undetected and untreated.
- Early onset of substance use is associated with higher risks of developing dependence and other problems during adult life, and younger people are disproportionately affected by substance use compared with older people.
- Globally, there were 42 births per 1000 to girls aged 15–19 years in 2021.

Overview

Survival chances for adolescents and young adults vary greatly across the world. In 2021, the average probability of a 10-year-old dying before age 24 was about 6 times higher in sub-Saharan Africa than in North America and Europe.

Within the age group 10–24 years, mortality rates are lowest among adolescents aged 10–14, and highest among young adults aged 20–24 years. Females generally have lower mortality rates for these ages than males.

The patterns of death of 10–14-year-olds are dominated by infectious diseases. Among older adolescents and young adults, a shift away from infectious diseases of childhood is seen, towards accidents and injuries, self-harm and interpersonal violence. Sex differences in mortality rates also become apparent in adolescence.

Main health issues

Many unintentional injuries such as road traffic and drowning are the leading cause of death and disability among adolescents.

- **Road traffic accidents**

In 2021, over 100 000 adolescents (10–19 years) died from road traffic accidents. Many of those who died were vulnerable road users, including pedestrians, cyclists or users of motorized two-wheelers.

Injuries and violence fact sheet

- **Drowning**

Drowning is also among the top causes of death among adolescents; more than 40 000 adolescents, over three quarters of them boys, are estimated to have drowned in 2021.

Drowning fact sheet

- **Violence**

Interpersonal violence is among the leading causes of death in adolescents and young people globally. Its prominence varies substantially by world region. It causes nearly a third of all adolescent male deaths in the WHO Region of the Americas.

Violence during adolescence also increases the risks of injury, HIV and other sexually transmitted infections, mental health problems, poor school performance and dropout, early pregnancy, reproductive health problems, and communicable and noncommunicable diseases.

Youth violence fact sheet

- **Alcohol and drug use**

Drinking alcohol among adolescents is a major concern in many countries. Worldwide, more than a quarter of all people aged 15–19 years are current drinkers, amounting to 155 million adolescents. Prevalence of heavy episodic drinking among adolescents aged 15–19 years was 13.6% in 2016, with males most at risk.

Cannabis is the most widely used psychoactive drug among young people with about 4.7% of people aged 15–16 years using it at least once in 2018. Alcohol and drug use in children and adolescents is associated with neurocognitive alterations which can lead to behavioural, emotional, social and academic problems in later life.

Alcohol fact sheet

- **Tobacco use**

The vast majority of people using tobacco today began doing so when they were adolescents. Globally in 2018, at least 1 in 10 adolescents aged 13–15 years uses tobacco, although there are areas where this figure is much higher. E-cigarettes are particularly risky when used by children and adolescents. Nicotine is highly addictive and young people's brains develop up to their mid-twenties.

Tobacco fact sheet

E-cigarettes: how risky are they?

- **Mental health**

Depression and anxiety are among the leading causes of illness and disability among adolescents, and suicide is among the leading causes of death in people aged 15–19 years. Half of all mental health disorders in adulthood start by age 18, but most cases are undetected and untreated.

Many factors have an impact on the well-being and mental health of adolescents. Violence, poverty, stigma, exclusion, and living in humanitarian and fragile settings can increase the risk of developing mental health problems.

Adolescent mental health fact sheet

- **Communicable diseases**

HIV

An estimated 1.7 million adolescents (age 10–19 years) were living with HIV in 2021 with around 90% in the WHO African Region. While there have been substantial declines in new infections amongst adolescents from a peak in 1994, adolescents still account for about 10% of new HIV infections, with three-quarters amongst adolescent girls. Additionally, while new infections may have fallen in many of the most severely affected countries, recent testing coverage remains low suggesting that many adolescents and young people living with HIV may not know their status.

[HIV fact sheet](#)

[HIV facts in pictures](#)

Tuberculosis

Tuberculosis (TB) is a preventable and curable disease, but it continues to impact the lives and development of millions of children and adolescents. Children and young adolescents aged under 15 years represent about 11% of all people with TB globally. This means 1.1 million children and young adolescents aged under 15 years fall ill with TB every year, and more than 225 000 of them lose their lives.

Adolescents and young adults usually present with bacteriologically infectious TB characterized by cavities seen on chest x-rays. The [Global Tuberculosis Report](#) shows that notification rates in adolescents aged 15–19 years are relatively high compared with younger adolescents.

[Tuberculosis fact sheet](#)

Other infectious diseases

Diarrhoea and lower respiratory tract infections (pneumonia) are estimated to be among the top five causes of death for adolescents 10–14 years, with mortality rates being particularly high in African low- and middle-income countries. Thanks to improved childhood vaccination, adolescent deaths and disability from measles have fallen markedly.

[Diarrhoeal disease fact sheet](#)

[Pneumonia fact sheet](#)

[Measles fact sheet](#)

Early adolescence (9–14 years) is the optimal time for vaccination against HPV infection and it is estimated that if 90% of girls globally get the HPV vaccine more than 40 million lives could be saved over the next century. However, it is estimated that in 2021 only 12%

of girls globally received the vaccine.

Human papillomavirus (HPV) and cervical cancer fact sheet

Overall there are proportionally fewer cases of and deaths from COVID-19 disease for adolescents and young adults than for older adults. However, the pandemic has severe indirect negative effects on young people's well-being, including on their mental health, loss of education time through school closures, social isolation, physical inactivity, malnutrition and domestic violence.

- **Early pregnancy and childbirth**

Approximately 12 million girls aged 15–19 years and at least 777 000 girls under 15 years give birth each year in developing regions. Complications from pregnancy and childbirth are among the leading causes of death for girls aged 15–19 years globally.

The global adolescent birth rate in 2021 was 42 births per 1000 girls this age, and country rates range from 1 to over 200 births per 1000 girls annually. This indicates a marked decrease since 1990. This decrease is reflected in a similar decline in maternal mortality rates among girls aged 15–19 years.

One of the specific targets of the health Sustainable Development Goal (SDG 3) is that by 2030, the world should ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Adolescent pregnancy fact sheet

- **Environmental health**

Many of the main causes of mortality in adolescents and young adults have strong links to the environment, including unintentional injuries and infectious diseases. Young people are at increased risk of environmental hazards and pollution due to their developmental physiology and immature systems. Primary environmental hazards and pollution affecting the health of adolescents and young adults include air pollution, chemicals and heavy metals, climate change, UV radiation, urban health and WASH.

WHO's work on children's environmental health

- **Overweight**

Globally, in 2016, over 1 in 6 adolescents aged 10–19 years was overweight. Prevalence varied across WHO regions, from lower than 10% in the WHO South-East Asia Region to over 30% in the WHO Region of the Americas.

Obesity and overweight fact sheet

- **Nutrition**

Many boys and girls in developing countries enter adolescence undernourished, making them more vulnerable to disease and early death.

Iron deficiency anaemia was among the leading causes of healthy years of life lost due to disability by adolescents aged 10–19 in 2021. Iron and folic acid supplements are a solution that also helps to promote health of adolescents. Regular deworming in areas where intestinal helminths such as hookworm are common is recommended to prevent micronutrient (including iron) deficiencies.

Malnutrition fact sheet

Healthy diet fact sheet

- **Physical activity**

Globally, in 2016, only 1 in 5 adolescents are estimated to meet WHO guidelines on physical activity. Prevalence of inactivity is high across all WHO regions, and higher in female as compared to male adolescents (8).

Physical activity fact sheet

Rights of adolescents

The rights of children under 18 years to survive, grow and develop are enshrined in international legal documents. In 2013, the Committee on the Rights of the Child (CRC) published guidelines on the right of children to the enjoyment of the highest attainable standard of health, and a General Comment on realizing the rights of children during adolescence was published in 2016. It highlights states' obligations to recognize the special health and development needs and rights of young people.

The Convention on the Elimination of Discrimination Against Women (CEDAW) also sets out the rights of women and girls to health and adequate health care.

WHO response

WHO works with Member States and partners to improve the health of young people by producing evidence-based guidelines, advocating and providing recommendations for adolescent-responsive health systems, and documenting progress in adolescent health and

development.

In 2023, WHO published an update of the Global Accelerated Action for the Health of Adolescents (AA-HA!): Guidance to support country implementation. AA-HA! 2.0 has drawn on inputs received during consultations with Member States, United Nations agencies, adolescents and young people, civil society and other partners. It aims to assist governments in deciding what they plan to do and how they plan to do it as they respond to the health needs of adolescents.

To improve adolescent health measurement globally, WHO in collaboration with UNAIDS, UNESCO, UNFAP, UNICEF, UN Women, the World Bank Group, and the World Food Programme (WFP), has established the Global Action for Measurement of Adolescent health (GAMA) Advisory Group. A comprehensive set of 47 priority indicators for global, regional and national adolescent health measurement has been published in 2024 using a structured participatory process.

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