

WHAT?


Implementation research to prevent non-communicable diseases (NCDs) by reducing adolescents' exposure to air pollution and tobacco.


WHO?


Adolescents aged 14–21 living in disadvantaged communities, family members, clinicians, public health managers, authorities, policy makers and school teachers.


WHY?

30% Air pollution and tobacco are responsible for >30% of the global NCD deaths and significant health and economic problems.

 Solutions need a collective response, engaging local communities and policy-makers.

 Tobacco dependence often starts in adolescence.

 Brain research shows adolescence is the period for decision making and habit forming.

 Adolescents have the potential to be powerful advocates for change in family and society.

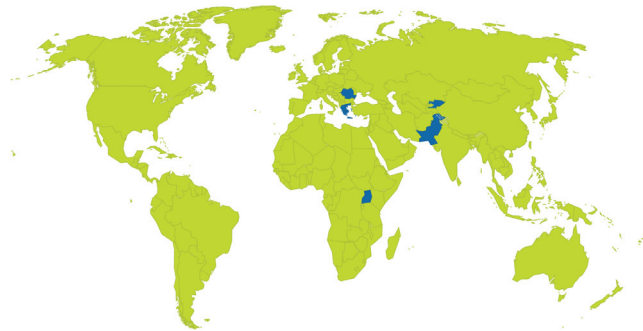
HOW?

1. Identify local stakeholders and engage with them to understand context, define priorities for change and interventions with most potential for impact, tailored to local assets and needs.
2. Offer expertise from multiple university and NGO teams to select, co-create interventions from the prevention palette.
3. Deliver implementation and evaluation plans working closely with local teams.
4. Build dual leadership and teaching capacity through cascaded programmes for youth advocacy and professional leadership.
5. Sustain stakeholder interest and commitment through scientific publications, and communication through social and mass media.



WHERE?

Disadvantaged populations in Uganda, Crete, Pakistan, the Kyrgyz Republic and Romania . 13 partners in 5 countries.



WHEN?

January 2023–December 2026.

PREVENTION PALETTE

Introduce the evidence-based WHO-recommended *primary* (core) interventions adapted to each national context, and also mix and use *complementary* interventions, based on local situations, assets and engagement.

