

Guiding Principles for the Division of Adolescent and Young Adult Medicine

1. We are *committed* to comprehensive health care and programming that is client-directed, sex-positive, and celebrates that young people have the agency to make health decisions for themselves and their children.
2. We *believe* in the importance of working toward sustainable improvements and growth that support equity and anti-oppression; address health disparities caused by systems informed by white supremacy; and support the overall health and well-being of young people, specifically Black, Indigenous and Youth of Color (BIYOC).
3. We *acknowledge* and *commit* to increasing awareness that oppression and white supremacy are historically and currently intentionally embedded into our medical and care systems and professions. We are *dedicated* to combating and deconstructing these long-standing aspects of our collective existence.
4. We *believe* in the inherent resilience, autonomy, and capacity of young people to define and achieve their goals and navigate life challenges ranging from individual stressors, such as adverse childhood experiences (ACEs), to societal stressors/challenges that commonly include systemic oppression.
5. We are *committed* to creating and maintaining trauma-informed safer spaces for young people, staff, trainees, and faculty, where they can express who they are without fear of bias and discrimination. Trauma-informed care specifically includes engagement with young people with the intention of nurturing healing, recognizing that anti-blackness in our space is a barrier to necessary healing, and working toward creating and maintaining safe spaces for all Black young people, staff, trainees, and faculty.
6. We *affirm* queer and trans identities and the intersectionality of youth identities. We foster a queer-affirming network and act with the intention of freeing ourselves from hetero- and cis-normative thinking.
7. We *value* reflective learning and cultural humility as core strategies for personal and professional growth and un-learning the way we have been complicit and explicit in maintaining white supremacy and intersecting oppressions, including but not limited to cis-heteronormativity, adultism, and elitism.

8. We *acknowledge* that systemic racial oppression, white supremacy, and white privilege play a prominent role in society. We *acknowledge* that if we are not Black, we are socialized to navigate the world with anti-blackness and white supremacist attitudes.
9. We *commit* to engage in both restorative justice and social justice approaches to address missteps, learn from mistakes, be accountable, and focus on truth and transparency.
10. We *value* the contributions of lived experience and the voices of historically and currently marginalized communities and use these experiences to inform, direct, and create collaborative and culturally congruent research, programming, training, and services.
11. We *commit* to recruiting, hiring, and retaining Black, Indigenous and People of Color (BIPOC) as staff and faculty, specifically Black-identified staff and faculty. We view diversity in cultural identities as an area of professional expertise. We *commit* to professional development of our BIPOC colleagues, upward mobility, and representation in leadership positions.
12. We *practice* cultural humility and seek to develop respectful partnerships with youth and their communities and to explore similarities and differences between the community and funders' priorities, goals, and capacities. We are *committed* to taking action to align with the values of the communities we serve.
13. We are *dedicated* to creating and sustaining intentional relationships with youth, families, community members and leaders, other professionals, providers, and national advocates to better address health inequities.
14. We *strive* to cultivate an intergenerational and communal network free from ageism and adultism. We *believe* that all people, regardless of age, show up with the capacity to lead and learn.

Glossary of Terms

- **BIYOC** – Black, Indigenous, and Youth of Color
- **BIPOC** – Black, Indigenous, and People of Color
- **Restorative Justice**
 - Howard Zehr (2002) lists the three pillars of Restorative Justice as:
 - Harms and Needs: Who was harmed, what was the harm? How can it be repaired?
 - Obligations: Who is responsible and accountable and how can they repair the harm?
- **Basic principles of social justice**
 - Access (greater equality of access to goods and services)
 - Equity (overcoming unfairness caused by unequal access to economic resources and power)
 - Rights (equal effective legal, industrial and political rights)
 - Participation (expanded opportunities for real participation in the decisions which govern their lives).
 - Cultural wealth (Critical Race Theory)
- **Sex Positive** - Sex positivity is the belief that consensual sexual expression is both healthy and important. Sex positivity is grounded in comprehensive sex education that is age and developmentally appropriate, exploring and deconstructing gender norms, and promoting body positivity and self-love. It fosters safe spaces in which different identities and sexual expressions are valued and bodily autonomy is paramount. Sex positivity transforms our relationships with ourselves, each other, and our communities and can impact policy.
- **Bodily Autonomy** – The right for a person to govern what happens to their body without external influence or coercion. This is something that all people should know and exercise.