Any door is the RIGHT door
For Your Consideration ...

- Why youth health matters
- The health of young people in NZ
- HEADSSS assessment
- Youth friendly practices/clinicians
Adolescence

- Adolescence is a time of transition
- It is a major time of growth and development
- With physical changes of puberty and brain maturation
- Risk taking
- Emerging capacity for abstract thinking and increasing move to autonomy, with a growing need for privacy and confidentiality
- Is a more complex time today with the rapid development of new technologies, social media, cyber bullying, continuous connectivity
Youth 2012

- 19% students had been unable to access healthcare when they needed to in the last 12 months
- 37% YP accessed health care seen on their own
- 46% had confidentiality discussed with them
- 21% female and 10% male had seriously thought about suicide in last 12 months
- Cigarette smoking last month, 2001-18% 2012-6%
- Marijuana use last month, 2001-20%, 2012-8%
- Binge drinking last 4 weeks, 2001-40%, 2012-23%
- Driving a car more than 2 drinks alcohol, 2001-8%, 2012-4%
- Depressive symptom in last year, 2001-12%, 2012-13%
Mental illness and substance abuse are key issues

- Wide range of negative outcomes: self harm, substance abuse, poorer educational achievements, unemployment, violence, teen pregnancy
- In NZ approximately 25-43% of young people meet the criteria for at least one mental health diagnosis
- Provisional figures for suicide released by Chief Coroner for 2013/14 for YP under 24 years were lower than last year with 110 compared to 144 in 2012/13
Considerations

- Age and developmental stages
- Confidentiality and limits
- Legislation, Capacity to consent
- Informed consent
- Non judgemental
- Level of literacy
- Family context
- Seeing them on their own
- Financial constraints-paying for scripts
- Special pops- LGBTI
Holistic approach-HEADSSS

- H - home environment
- E - education, employment
- E - eating, exercise
- A - activities - peer related, family related
- D - drugs and alcohol, smoking
- S - sexuality
- S - suicide and depression
- S - safety from injury and violence
## Risks and Resiliency

<table>
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<th>Poor grades school</th>
<th>Connections-school, clubs, sports teams</th>
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<td>Smoking, drugs, alcohol</td>
<td>Adult in life trust</td>
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<td>Sexual activity</td>
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<td>Family violence</td>
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Barriers

• Fear of lack of confidentiality
• Practical barriers-limited knowledge of services available
• COST- lack of affordable services
• Lack of access to transport/money bus etc
• Being judged
• Not listened to
• Too embarrassed

- Accessible
- Acceptable
- Appropriate
- Right place
- Right time
- Delivered in the right style
Australian study

- Reception staff need to be sensitive to the needs of YP
- Staff attitude: respectful, supportive, honest, trustworthy
- Clinicians- developing an open and friendly engagement by being friendly, polite, down to earth, direct and non-patronising, keeping quiet allowing YP to talk
- Broad based approach- suggesting ways of dealing with depression rather than medication straight away
- Accessibility- convenient hours and location, YP being aware of services and how to access them
Acceptable/Appropriate

• Provide adequate information and support to enable YP to make free informed decision
• Are motivated to work with a YP
• Non-judgemental, easy to relate too
• Adequate time to see them, and act in the best interests of YP
• Ensure privacy, short waiting times or without an appointment
communication: clarity and provision of information, active listening

Confidentiality, autonomy, transition to adult health care

Environment: flexibility of appointments, separate physical space, adolescent orientated health information, clean, waiting time, continuity of care

Involvement in their health care
Ideas

• Adolescent champion in your service
• Waiting room, health literature
• eHEADSSS training: http://www.werrycentre.org.nz/elearning-courses
• Friendly non judgemental reception staff
• Some flexibility of appointments
• Seeing YP on their own for some of the consultation
• Aware of services in your area
• Youth friendly practice review
• Primary mental health services
• All DHBs have extended their primary mental health services to young people aged 12-19
• YP mental health issues can have extended GP/nurse consultations, counselling and group therapy
• Don’t have to be enrolled with a GP
• Know your sexual health contract- free under 22s
Take home messages

• Always take the opportunity to see a young person on their own for at least part of the consultation
• Ask them some questions about how their life is going
References


References (continued)


• The Collaborative for Research and Training in Youth Health and Development Trust. (2011). Youth Health: Enhancing the skills of primary care practitioners in caring for all young New Zealanders.