



Commissioner for Children and Young People
Western Australia



Caring for the future growing up today

Speaking Out About Youth Health

March 2014

The views of Western Australian young people

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Alternative formats

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Commissioner for Children and Young People

Ground Floor, 1 Alvan Street, Subiaco WA 6008

Telephone: (08) 6213 2297

Facsimile: (08) 6213 2220

Freecall: 1800 072 444

Email: info@ccyp.wa.gov.au

Web: ccyp.wa.gov.au

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“Be kind and listen to our problem. We may be young but we have a voice too and we would like to voice it to get the help we need.”

Commissioner's message



As Commissioner for Children and Young People, I have a statutory responsibility to promote and monitor young people's wellbeing, advocate for young people and consult with them about issues that impact on their lives.

In 2013, the then Commissioner, Michelle Scott, identified youth health as a priority area of work, noting recent developments in Australia and overseas and previous advocacy by stakeholders

for a stronger focus on youth health in Western Australia.

The Commissioner commenced a project to consult with young people about their experiences and views of health services, review the evidence of good practice in policy and service delivery, and engage with stakeholders.

This built on previous work such as the *Report of the Inquiry into mental health and wellbeing of children and young people in Western Australia*, research and consultation regarding children and young people's wellbeing and reducing alcohol-related harm, and the publication of the Wellbeing Monitoring Framework reports.

From the outset, capturing and promoting the views of young people was a key component of this project. Through focus groups and an online survey, we consulted more than 1,000 young people aged 13 to 18 years about health and health services, their experiences with services and opportunities for improvement.

Young people said they view health in a holistic way and had mostly positive experiences with health services. They want more information about services and resources and to be welcomed and treated with respect when they seek help. Young people also outlined specific ideas for improvement.

I encourage policy makers and service providers to consider the views of young people, as captured in this report, and to involve young people in a meaningful way in the planning and delivery of health services that affect them.

Young people have unique insights into issues, can offer creative solutions to problems and can help ensure decisions are relevant and sustainable.

In addition to this report, I have released a position statement that advocates for improving the approach to youth health in WA to enhance the wellbeing of young people and the community. The position statement is available on my website.

I would like to thank the young people who took part in this project, the expert Reference Group that guided the work, the many individuals and organisations who helped promote young people's participation, and the Telethon Kids Institute and the Social Research Group for conducting the consultations.

Jenni Perkins
A/Commissioner for Children and Young People

"I expect the same level of treatment that my parents get... but more casual."

Introduction

Speaking Out About Youth Health is the sixth publication in the Commissioner for Children and Young People's Speaking Out series, which promotes the views of children and young people on particular issues relating to their wellbeing.

The previous Speaking Out publications all touched on young people's views about health in some way. In *Speaking Out About Youth Health*, the focus is specifically on the views of young people about health and health services.

This report accompanies the Commissioner's *Position Statement on Youth Health*. The position statement puts forward options for improving the approach to youth health in WA based on the available evidence of good practice, the views of young people, and discussions with stakeholders in the public health and community sectors.

One of the major themes in the position statement is including young people in planning and decision-making processes to help shape better health policies and services. *Speaking Out About Youth Health* illustrates some of the informative views young people have about these issues.

Methodology

The Commissioner engaged the Telethon Kids Institute and the Social Research Group to conduct consultations with young people. The consultations occurred in October and November 2013 with 1,057 respondents to an online survey and 53 young people taking part in eight focus groups.

The vast majority of young people were aged 13 to 17 years, consistent with the definition of children and young people in the *Commissioner for Children and Young People Act 2006*. There was strong representation of vulnerable and disadvantaged young people and those living in regional areas.

The consultations focused on young people's experiences with health services, their views on what works well and where they would like to see improvements. Most of the views expressed in this publication emerged in the focus group discussions. Also included are comments drawn from responses to the last question in the survey that asked young people if there was anything else they would like to say about how health services could be improved.

The discussion guide used by the focus group moderators and the online survey questionnaire have been published in the full report by the Telethon Kids Institute and the Social Research Group, which is available on the Commissioner's website and also includes detailed findings from the consultations.

The Commissioner established an expert Reference Group to guide this project. The members were:

- Commissioner for Children and Young People
- Prof Donna Cross – Child Health Promotion Research Centre, Edith Cowan University / Telethon Kids Institute
- Glenn Pearson – Telethon Kids Institute
- Kate Gatti – Child and Youth Health Network, Department of Health
- Sue Kiely – Child and Adolescent Health Service
- Warwick Smith – North Metropolitan Health Service, Mental Health
- Dr Donald Payne – Australian Association for Adolescent Health
- Kate Civitella – Mental Health Commission
- Ross Kyrwood – YMCA
- Craig Comrie and Myra Robinson – Youth Affairs Council of Western Australia

Many stakeholders assisted with promoting the survey and focus groups to young people. In particular, Cambridge Youth Services, Halo, Stand By Me and the Department of Aboriginal Affairs in Port Hedland helped facilitate some of the focus groups.



"Some understanding of the health system needs to be brought into the school system."

Summary of key themes

Young people expressed a holistic view of health that included physical, mental, emotional and social dimensions. They recognised the importance of nutrition, exercise, social and family relationships, education and work, and avoiding harmful substances, as important to their health.

Most young people relied on their parents for advice on health issues and to access services. Friends, siblings, teachers and school-based professionals also had a major role to play in providing information and facilitating care.

The internet is an important source of information, but some young people said they preferred to interact with a real person.

Many young people said they would like more information about health-related services and resources available to them, and more education about how to access health care on their own.

Young people had generally positive experiences with health services, particularly those staffed by professionals trained to work with young people. Vulnerable and disadvantaged young people were less likely to feel positive about their experiences with health services overall.

Many young people said it was empowering to access health services independently. Some of the practical barriers to this included cost, having a Medicare card, transport and other accessibility issues, as

well as concerns about confidentiality, embarrassment and lack of knowledge.

To make it easier to access services and have positive experiences, young people suggested greater awareness and reassurance about the emotional and psychological issues they confront when a health issue arises, more youth-friendly staff, more accessible and low-cost or free services, and better integration of services, such as through schools or youth centres.

These findings are consistent with the results of previous consultations with young people in WA.



"Happy is an important part of being healthy."

What does healthy look like?

Young people expressed a holistic view of health, recognising that good health encompassed positive physical, mental, emotional and social aspects. Eating healthy food, participating in sport and exercise, avoiding drugs and alcohol, and being connected to friends, family and the community were mentioned as ways to stay healthy.

"For me to be healthy I have to be happy, feel safe, feel comfortable, enjoy the people that I'm around, and to be healthy is not only not to be sick."

"You should have balance between school, homework, family, friends, sport and all the other hobbies and interests."

"Not being on drugs. Having a healthy lifestyle. Keeping fit. Eating healthy. Not being sick. Being happy. Being active."

"To be mentally and physically healthy, you need to be healthy outside as well as having a lot of friends and being happy with what you are doing."

Young people emphasised mental and emotional health and happiness as important issues.

"Being mentally healthy as well, so thinking positively. Try not to be negative."

"Emotional health is to do with how you feel, and how you treat yourself."

"Content means almost like you're happy with yourself and how you are going. You don't need to be ecstatic because you've got the most or you're the best at it, but you know it's okay for you."

"You should always have leisure time because if you don't have leisure time then you're not happy, and happy is an important part of being healthy."

Young people viewed having goals as important while also recognising that stress could affect their health.

"A little bit of stress is healthy, a little bit. Otherwise, you don't do anything with work. If you don't have that little bit of stress you are never motivated to do any work."

"When you get older you get more stress, and then stress can really physically get to you as well. They probably go together."

Some of the other health issues raised were body weight, body image, relationship issues, depression, anxiety, smoking, alcohol use, cyberbullying and violence.

Older teenagers were more likely to discuss alcohol, smoking, sexual health and mental health, while those who were younger spoke more about social problems and friendship issues.

Peer pressure was a common theme raised by young people of all ages as influencing behaviours that were risky or unhealthy.

“Get the information out there more widely.”

Where young people get help and advice

Young people said that parents, siblings, friends, teachers, school nurses, counsellors, school chaplains and youth workers advised and helped them with health care.

Most young people relied on their parents to help with making appointments and transport, and pay for the consultation.

“My parents take me, because they feel that I need the support, because I’m not really used to talking to people alone.”

In some circumstances, however, young people were sensitive about having their parents involved.

“There are maybe things that I might have kept secret from my parents...”

The Internet was seen as an important destination for finding health information. There were mixed views about the privacy of online activity.

“If it was something I felt I couldn’t tell someone who had contact with my parents, or someone at school, that’s when I would go online.”

“[If] I had a problem, I would first go online, search the symptoms and almost assess whether or not I fall into the

category, and then if I feel like I need that extra help then I would go to someone else.”

“On the Internet it is impossible to be confidential. Because your friend could click on it, see you have this tab open, look at it and be like ‘why are you on this’, or they could be just typing and again it comes up in your history.”

Some young people were aware of the potential for inaccurate or misleading information online and said they would prefer to speak with a real person.

“[Online information] might not always be true.”

“It’s better to talk to someone in real life, most of the time. They can give you a hug or something, maybe. Or a high five. Or a lolly.”

Young people said they wanted more information about how to access health services and health-related resources.

“Get the information out there more widely. Because there’s stuff that I haven’t heard of, there’s stuff that other people in the room haven’t heard of, that’s out there and we don’t know about it.”

“To actually know where to find them. Or where to look to find them, or where to get a number. Information. Knowledge is power. To know where they are is empowering.”

Some comments suggested more could be done at school to teach young people about accessing health services.

“Some understanding of the health system needs to be brought into the school system. Currently we learn in schools about sex, drugs and alcohol but not too much about how to reach out for help at a GP or other health professional.”

“Schools should teach their students how to go to a doctor and how to do it instead of having to figure it out by themselves.”

Young people said they wanted to receive information in a way that protected their privacy. They suggested speakers visit schools to give information about sensitive health issues and where to find health services.

“Get people who have experienced those problems out to schools and teach students how to deal with it, stuff like that.”

“A completely unbiased person comes and tells you the facts, tells you where to find it and everyone is forced to come into this class ...”

They also suggested more advertising and highlighted concerns with relying on pamphlets and posters for disseminating information.

“Health services should be advertised more, especially the ones young people are embarrassed to talk about.”

“Be extremely inviting and advertise/publicise the organisation in more places where youth are more likely to look, eg Facebook,

toilets, schools, magazines, etc.”

“If you pick it up (a brochure) everyone else around you is going to judge it. If you were reading it and it was about depression... people would judge you.”

“The pamphlets are everywhere but no one wants us to look at them. If there was one on boys or how to use condoms... that’s social suicide just there.”



“Independence is a big driver for me.”

Experiences using health services

Young people reported generally positive experiences with health services, though survey responses suggested there was a lack of consistency in the way services were delivered. Vulnerable and disadvantaged young people were less likely to feel positive about their experiences overall.

General practitioners were the health professionals seen most by young people. They reported positive interactions with doctors who spoke directly to them and made them feel comfortable.

“I will speak to the doctor directly and she’ll ask me questions and I will answer them. If something needs to go through my mother, it will. They treat me like an adult I guess, sort of.”

“It takes a long time to get in there but once you’re in there it’s not like you are being rushed, she really listens to all your problems.”

Young people said that sometimes they felt intimidated by reception staff, especially when they were on their own.

“Sometimes the tone of their voice, it’s like a patronising one. It’s like you don’t understand or something.”



“I notice there is a difference in their attitude when a parent comes with you. They treat you differently.”

Going to a health service on your own was generally seen as an empowering experience.

“I had to go to the doctor... my parents never knew. It was fun, so much fun. Going to the doctor by yourself you just feel honestly like I don’t need anyone anymore.”

“Independence is a big driver for me. That’s the one main reason I love to go, because suddenly you go by yourself and you’re the adult. You’re now the person they speak to about what is going to happen, not the dummy that gets tested.”



Young people reported positive experiences with health professionals trained to work with young people.

“I often speak to the youth leader, quite a lot. He knows his stuff when it comes to people and reading situations... I’ve told him before that whatever I say to you stays between me and you otherwise I won’t talk to you anymore, type of thing. He gives me his words of wisdom and his opinion on how to solve issues. At the end of the day I still choose which way I want to try and solve it.”

“Counsellors are good, confidential, you don’t know them, they can’t judge you.”

“Because they’re trained socially. They are not really targeted at adults. It’s their job to try and connect with you I guess.”

Young people with disability spoke about some of the challenges they encountered.

“A lot of doctors will talk to mum and I don’t like that because I can understand what they are saying. Or they talk to us like we are mentally disabled as well. They yell at us, ‘Hello, how are you today?’”

“Confidentiality – that is a big one.”

Barriers to seeking help

Young people reported practical and psychological reasons for not readily accessing health care.

Finding a service nearby, making an appointment, getting there and payment were practical hurdles, particularly if parents were not involved. Most did not have their own Medicare card.

“For me transport is a problem. I don’t carry money on me [so] I couldn’t get a taxi. I could get to the school psychologist or school counsellor or school nurse.”

“Many people don’t book [an appointment] because of time issues, or they’re too scared and also the payment is a big issue.”

“I would probably go to a friend and ask to borrow some money.”

“I would draw out the cash from an ATM and just say I bought my girlfriend a present or something.”

A lack of confidence, embarrassment and worries about confidentiality and being taken seriously were mentioned as reasons for not seeking help independently.

“From personal experience I have always thought ‘what are they going to think about me’ or ‘what will happen if my parents find out’. [This] holds me back from visiting the places I need to go for my health.”

“Most people don’t ask questions because they don’t feel like they can trust the person who they’re asking the questions to.”

“You might not want some people to see where you are going as well. If people see you walk into the counsellor by yourself, it’s like...”



“Treat me like an equal.”

Making it easier

Reassurance

Young people said that being reassured that they will not be judged if they seek help and that information will be kept confidential would help them access services.

“I think just reassuring young people that getting help about your health shouldn’t be an embarrassing thing, and that if you do go and seek help, you won’t be judged, only helped.”

“Reduce the stigma among young people of mental health issues and that, so then it’s easier for people to go and get help and to talk about it.”

Youth-friendly staff

Young people said they wanted to interact with staff who were casual, friendly and respectful, and who listened to them and spoke in a way they could understand.

“I expect the same level of treatment that my parents get... but more casual.”

“First time I went to a psych, they said to me ‘this is the first week, we don’t even have to talk about what your mum wants us to talk about, let’s just talk about your week. Let me get to

know you, let you get to know me.’ Often people need an initial breakdown of their barriers before they can let you in.”

“Be more kind and caring than condescending, because it makes [young people] feel as if they are in an environment where they feel safe and protected... [and] more relaxed and calm.”

“Treat me like an equal...because it feels like they kind of talk down to you sometimes, which is uncomfortable to me.”

“Lower your vocabulary down to theirs so you’re not baffling them with big words, but treat them like an adult. You don’t want to be treated like a kid.”

Being welcomed by reception staff was important to some young people.

“The receptionists are always a big thing. If they’re in suits and they’re quite strict and ‘shh, sit there and wait, I’ll let you know when you can speak’ sort of thing, whereas if they are a bit more laid back then you feel a lot more comfortable.”

Some suggested that health services should employ younger staff.

“I think staff should be closer to our age or more understanding because I’m always embarrassed to visit the doctor and my mum has to say ‘what’s wrong’ because I don’t feel like I can talk to them.”

“Have younger doctors or nurses there who can relate to the patients. This would increase the honesty of the patients so their diagnoses would be more accurate.”

Accessibility of services

Young people suggested services could be made more accessible by locating them close to public transport or delivering them online.

“Make it more local... so easy to get to. Closer to train stations and that sort of stuff.”

“I think there should be more online/email counselling options for people who can't use the telephone or are scared someone will overhear, or that it won't be confidential.”

Young people said they wanted more low-cost or free services.

“Make it cheaper. Because if you don't want your parents knowing and you don't have a job, then you can't obviously pay for it. And that's kind of difficult.”

“All medical centres regardless should bulk bill the under 25s.”

Stronger links with educational institutions were also suggested.

“[Make] things more available in local schools. With ease of access and without the worry of anyone finding out. Also preferably someone that doesn't work at the school.”

“Greater links to schools, universities.”

Physical surroundings

Physical surroundings were an important issue for some young people, while others felt that being welcomed by staff was more important. Some young people rejected attempts to make surroundings 'teen-friendly'.

“Make [waiting rooms] more fun and feel less boring.”

“Make it calm.”

“Surroundings doesn't bother me. It's more like the people if they're nice and welcoming.”

“I don't like it how they make it all like the typical teenager look. Sometimes I want it to look a bit more mature. I don't like it. They always have like the teen zone and all that kind of thing written everywhere.”

Youth centres

Many young people said they would like to be able to access a youth centre.

“A local hangout that also has a room next to it, so you can tell your parents I am just going to this place, just somewhere you can hang out, but if you really need it there is a counsellor right next to it.”

“I wish most suburbs had youth centres where kids can just hang out together. These centres should be accessible to all young people and have health services within, [such as a] counsellor and general practitioner. Even if they cannot help fully with the problem, they can help get information for us and send us somewhere. It shouldn't have a cost and the workers should be paid well from the government.”

Hospitals

Young people who had experienced hospital care spoke about some of the challenges they encountered, including the transition from child to adult services. Suggestions included providing dedicated services for adolescents and young adults, and more support around mental and emotional health.

“There should be a hospital that bridges the gap between PMH and adult hospitals, as for those above 16 they can no longer go to the children’s hospital PMH, yet sometimes adult hospitals aren’t geared up for some of the illnesses which may be common in young adults such as those between 16 and 25 with eating disorders, drinking and drug abuse or any other illnesses.”

“A young adults’ hospital would be able to offer a comfortable environment for young adults to be around those with similar problems and around their age group.”

“I recently went into a hospital in WA for surgery for the removal of a brain tumour and from that I have a number of suggestions for how health services could be improved for not only me and my family but WA.

Firstly the hospitals need to provide better services in the form of aid and help for families that are struggling with the situations and their ill family member. When we were in hospital we only had one social worker actually come up to us and say ‘just do what the doctors and nurses tell you and it will help you get

better’ and that was it. We felt the social worker help [we] were provided with was very limited.

Also parking at local hospitals for extended periods of time; for example for my parents to come visit me while I kept in hospital it cost them over \$300 in parking which I found on arriving home made it hard for my parents keeping up with bills for some time and this put a lot of stress on my family.

Another thing that could be improved by health services to help WA is the communications within public hospitals. We find a majority of the time for appointments still, with MRI scans and blood tests, we are told we will get sent letters for appointments [but they] never arrive on time, arrive the day of the appointment or are neglected to be organised as a result of a lack of communication between the different hospital teams.

Also for young people staying in adult hospitals, there needs to be more attempts by the hospital to provide a social worker or someone for the young person to speak to in order to help improve their mental health, as I found in hospital I was struggling with all these new changes and wanted someone to talk to about some of my worries and concerns to do with my schooling and how my being sick was affecting my parents.”

Conclusion

The views expressed by young people in the consultations will help shape the Commissioner's advocacy on youth health.

The Commissioner will also promote young people's views to stakeholders to encourage future decisions that are responsive and informed.

The Commissioner's *Position Statement on Youth Health* identifies options for improving the approach to youth health in WA based on the consultations with young people and stakeholders, and evidence of good practice. Some of the suggestions include promoting a stronger focus on young people at a health policy level, fostering tailored and integrated policies and services, encouraging youth-friendly practices by health care providers, increasing education about health resources and services, and involving young people in planning and evaluation processes.

Updates about the Commissioner's advocacy on youth health will be available on the Commissioner's website.



Young people depicted in this publication did not take part in the Youth Health project. They are Western Australian young people who have provided permission to the Commissioner to use the images.



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