

Youth Health 2010

A Youthline Position Paper

BACKGROUND

Approaches to health for young people in Aotearoa are guided by two complementary documents. These are *The Youth Development Strategy Aotearoa* (Ministry of Youth Affairs, 2002) and *Youth Health: A Guide to Action* (Ministry of Health, 2002).

The Youth Development Strategy Aotearoa (YDSA) presents a youth development approach comprising six key principles:

1. Youth development is shaped by the 'big picture'.
2. Youth development is about young people being connected.
3. Youth development is based on a consistent strengths-based approach.
4. Youth development happens through quality relationships.
5. Youth development is triggered when young people fully participate.
6. Youth development needs good information.

These principles have been identified by working groups and young people as elements that will help achieve the YDSA's vision to create, 'a country where young people are vibrant and optimistic through being supported and encouraged to take up challenges' (Ministry of Youth Affairs, 2002).

The YDSA provides a vision of holistic health and a strategy. The 2002 Ministry of Health report, *Youth Health: A Guide to Action* uses the framework of the YDSA to provide an overarching youth health strategy, which actions the six principles of healthy youth development delineated in the YDSA.

The report proposes a fundamental change to the way the health sector and general society view young people. Traditional attitudes threaten to undermine youth by treating them as a 'problem to be solved'. This report emphasises a strengths based approach that must be embedded in all youth health services. This strategy permits a shift to allow young people to be active participants in creating a healthier world.

The guide to action identifies ways of making health services more youth-focused and youth-knowledgeable. It highlights the need to gather information about factors that affect young people's health and about 'what works' for young people.

It also suggests that the health sector, of which Youthline is a part, should reach out more actively to young people and be more responsive to their views and needs.

GOALS OF YOUTH HEALTH: A GUIDE TO ACTION AND YOUTHLINE'S RESPONSE

1. **A safer more supportive environment for young people.**

Young people's health is affected by their families, friends and schools. Therefore, it is important that these environments are positive. The wider community as well as local and central government also have roles in improving young people's health.

Youthline involves young people in all levels of all of our services and because of this we have a full awareness of youth health issues. Therefore Youthline is active in providing and working towards safe supportive environments, in all the above areas, for young people. In connection with this we also encourage community action and advocate for policy change by engaging in forums and preparing submissions on the issues impacting on the wellbeing of young people. Press releases are also issued by Youthline, which addressing topical events that concern youth and community development.

2. **A measurable improvement in young people's mental health.**

New Zealand has high rates of suicide, mental illness and drug and alcohol abuse. Finding ways of keeping young people mentally healthy is a priority, as it is a major risk factor in suicide.

Youthline provides a 24/7 telephone helpline as well as text message and e-mail services. Youthline's services also include face-to-face counselling and family therapy. We also facilitate access to information and referrals promoting mental health. These services provide a strong platform nationally to support young people's mental wellness. In our broader capacity we seek to advocate for young people, and promote youth participation in the provision of services, which improves their acceptability and accessibility for young people. We also seek to create an environment in which the stigmas around seeking help and around mental illness are substantially reduced.

A high level of connectivity and resilience are demonstrated as being core to young people achieving positive outcomes. To achieve a measure of outcomes and improvements in young people's mental health, Youthline are developing a Youth One Stop Shop (YOSS) evaluation tool. The purpose of this tool is to measure change in the resilience of young people accessing YOSS services. Informed by the data, mental health initiatives in YOSS services will be evaluated and iteratively improved.

Ongoing research is also being conducted into the effectiveness of digital technologies for e-therapy, with a particularly focus on the potential of therapeutic texting. This research complements the Youthline Text 234 service, which provides support for young people via SMS.

3. A measurable improvement in young people’s physical health.

Taking risks and trying new things is part of young people’s development. Finding ways to reduce the negative outcomes of this is part of the plan.

Youthline promotes and facilitates mental and physical wellness and wellbeing within its services and programmes. We also provide a youth-focused and youth-specific health information service aimed at harm minimisation; this includes clear accessible information on sex and relationships, alcohol and drugs, issues around stress and anger management. Exposure to risk factors is a key element of a young person’s life regardless of whether they would be considered “at risk”. In this sense all young people need to develop resilience to deal with the normal challenges of life and Youthline services seek to promote resilience by equipping young people with knowledge and skills. Youthline are also developing an outcomes evaluation tool to measure the changes in young people engaging in Youthline services, which will capture an understanding of their resilience.

4. Young people influencing health policy and programme development.

Young people want to be involved in the decisions that affect them and their own health care. Programmes and services work better when young people are fully involved at all levels.

Youthline encourages meaningful participation in the young people involved in our services and programmes; many of which are run by young people. Feedback and input into our services is part of the Youthline philosophy and we will actively engage young people in advisory groups to help shape future directions of programme development.

5. A higher level of knowledge about youth health and youth health services.

Youth health is a neglected area for research and specialisation. The plan encourages the sharing of knowledge about youth health and services.

Youthline provides an accessible health and information service aimed at enhancing the health and well being of young people. Additionally we provide a wide ranging information service on youth related issues. We have existing links and are also actively establishing links with other youth-focused services. Knowledge about youth health is enriched by up to date research; Youthline contribute to the existing evidence base by conducting research projects about important but overlooked areas of youth health. A recent Youthline report, Running to America in High Heels (2010) explored the health status of youth sex workers and highlighted the need for better provisions for this subgroup of the population.

6. High-quality, youth-friendly, accessible health services.

Existing health services often present barriers to young people.

Youthline provides a wide range of easily accessible youth focused services for young people, by young people. These can be accessed in a variety of ways, including in person, by phone or via internet services, thus allowing for high levels of anonymity if this is a concern for the young

person. Costs are low and always negotiable (or free for internet, helpline and text 234 services). We are guided by ethics and national standards regarding safety, privacy and confidentiality.

To ensure young people and their families receive a high standard of care, a number of protocols are in place. Service standards guide practice at Youthline and ongoing training ensures staff deliver a high calibre of care. This is supplemented with opportunities for staff to engage in continued professional development, including participation in workshops and attending relevant conferences. These standards, combined with the expertise of the team ensure high-quality services.

7. A measurable improvement in the health of rangatahi.

Young Māori often experience worse health outcomes than the general youth population. This goal seeks to redress this imbalance.

Youthline has an active Treaty of Waitangi strategy for its services and training programmes. We have consulted, and will continue consulting with rangatahi to determine how our health and information service and other services can best meet their needs. Holistic models of Māori health such as Te Whare Tapa Wha are important to this (see below). The Youthline team is diverse and we continue to explore our bicultural journey through yearly Noho Marae, regular whanau breakfasts, our whanau room at Youthline House and support from our Kaumatua.

8. A measurable improvement in the health of Pacific young people.

Along with Māori, Pacific young people also experience inequitable health outcomes.

Youthline has established links with Māori and Pacific health providers for information sharing and the provision of referrals between services. Youthline has also undertaken qualitative research to evaluate the best ways to engage young people and the types of service models that suit young people. These projects include the Counties Manukau Pacific Youth One Stop Shop: A review of research, best evidence and youth opinion (Youthline, 2006) project and the Youth Engagement Project (Youthline, 2006).

9. A measurable improvement in the health of disabled and chronically ill young people.

As an organisation, Youthline supports all staff and volunteers and provides facilities to improve the working conditions of those with disabilities. These include phones suited to vision-impaired telephone counsellors and disability accessible buildings. Youthline also use the New Zealand Relay Service enabling the same level of telephone service for deaf, hearing impaired, deafblind or speech impaired clients. We recognise however, that the area of disabilities and chronic illness is one that we need to address further. There will be further consultations with other organisations that work in this area to establish future directions. Our growing Internet services and free text message service open up communication for a greater number of young people who may have otherwise not been able to access our services.

10. Better health outcomes for young people with multiple disadvantages.

Research has demonstrated that linked, wrap-around services confer the best advantages for young people accessing services. The Youthline House Model enacts a flexible integrated model of services delivery where young people and their families are afforded a high level of choice and flexibility – they can connect in when they choose and come in and out of services as their need and life stage dictate. The aim of this model is to make all Youthline services as accessible and flexible as possible so that there is no disadvantage to young people of low or no income or who are affected by the cumulative impact of other disadvantages. To further facilitate the wellbeing of the people who enter Youthline services, referrals or recommendations will be made for them to engage in external services and health providers where appropriate.

Youthline’s vision is to create communities which relate to the needs of young people, respond to them, and support them to achieve their potential. To achieve this vision, Youthline understand youth development through the lens of the YDSA and services are informed by both the strategy and by the guide to action. To ensure youth services are relevant for all young people, Youthline staff receive training in cultural competence and are guided by Te Whare Tapa Wha.

‘TE WHARE TAPA WHA’ – A MĀORI MODEL OF HEALTH

Health is a wider concept than just the physical; the Māori view is that health encompasses the emotional and mental, connections to family, spiritual and the physical. The view that culture affects health outcomes began to be recognised in the mid-1970s by mainstream medicine (Durie, 1998) meaning that models of health other than Pākehā ones have been increasingly accepted. In a New Zealand context, this is encapsulated in Mason Durie’s model of Māori Health, Te Whare Tapa Wha Here, the four walls of a house are analogies for the four central ideas key to health – all four are needed if the house is to stand strong.

Durie states that the fundamental of health for many Māori is *taha wairua*. This is more than a religious spirituality; it is an attachment to the environment and a broader sense of belonging, meaning and purpose. This is interwoven throughout Māori culture.

Taha hinengaro describes the importance of thoughts and feelings. As with *taha wairua*, this is closely linked to the environment. Durie states that for Māori, health is integrative, and the closeness to the wider environment is evident in te reo Māori (Māori language):

“Whenua, for example, can mean both placenta and the land, rae is either the forehead or a land promontory, iwi refers equally to a bone (ko-iwi) or to a nation of people, while hapu can denote pregnancy and a section of a large tribe. The word for birth is whānau, the same term used to describe a family and wairua, spirituality, can also be used to refer to an insect, just as kapo can mean blind or a species of eel. Whakapo is to darken (as in approaching night) and, as well, to grieve, waimate is a hereditary disease but also polluted water, kauae can be the jawbone or a major supporting beam in a building, and tahuhu refers both to the vertebral column and the ridge pole of a meeting-house.”

Taha tinana refers to bodily health, which differs somewhat from the Pākehā perspective. In the Māori paradigm, it is essential for health that tapu and noa are kept separate, as tapu indicates a risk to health, while noa represents safety (Kingi, 2005). Traditional hospital environments can challenge this concept at times if eating, sleeping and toileting occur in the same place.

Finally, *taha whānau* emphasises the role of extended family in health. Whānau is the fundamental unit of Māori society, and cannot be separated from the individual. Increasing social and family dysfunction and strong societal focus on individuality may cause a strain on taha whānau.

The Youthline House model of service delivery has Te Whare Tapa Wha as the supporting structure of the model, demonstrating how services are provided at a person centered, culturally relevant level.

SUMMARY

Youthline's strategy toward youth health embeds principles of youth development within a holistic, community based approach. To enhance the health and wellbeing of young people, Youthline works to create safe and supportive environments that promote and sustain positive and healthy development. All aspects of health are provided for within a model of cultural competency, and young people have the opportunity to engage with as many or as few services as they need. A strengths based perspective is serves the foundation for all initiatives, thus allowing the young person to build on their potential.

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