



Youth Shoalhaven Position Paper on Youth Health & Access to Health Services

Our Young People and their health issues

In the 2011 census the Illawarra Shoalhaven area had approximately 63,000 young people aged 12 to 24. This meant that more than 17% of the districts total population were Young people aged 12 to 24 (this was slightly higher than the overall NSW percentage). Further analysis shows that compared to the rest of the district the Shoalhaven LGA had:

- **The second largest population of young people in the district.**
- **The most disadvantaged young people (based on SEIFA socio-economic profile).**
- **The highest % of Aboriginal young people (more than double the state average).**
- **The most remote areas (especially villages in the southern Shoalhaven).**
- **The lowest rate of year 12 or equivalent completion (especially low amongst boys).**
- **The highest rate of young parents.**

For more information:

ABS Census 2011, NSW, Wollongong, Shoalhaven, Jervis Bay, & Kiama, Basic Community Profiles. Catalogue no 2001.0.

Major Youth Health issues

Young people including those in the Shoalhaven have specific health issues that differ from those of children or adults. According to the 2011 *Young Australians* Health report, some of the key health issues for young people include:

Mental Health problems and disorders.

The causes of ill-health in young people are mostly psychological rather than biological with Mental Health issues accounting for the highest burden of disease among young people. Young People in the Shoalhaven are growing up in an area where there are a higher proportion of people with high or very high psychological distress, compared to other areas in NSW.¹

Alcohol, other drugs and violence.

Considerable proportions of young people drink alcohol at risky levels, and / or are victims of alcohol or other drug related violence (Young People in the Shoalhaven are growing up in an area where there is a higher proportion of people consuming alcohol at levels posing lifetime risk to health).

Sexual health.

Young people are a high risk group for sexually transmitted infections; Young people make up the largest number of Chlamydia infections.

Lifestyle related disease.

Many young people are overweight; most don't do enough physical activity, or eat a healthy diet. This has led to rising rates of diabetes and places young people at risk for other chronic diseases and cancers in later life.

For more information:

Australian Institute of Health & Welfare 2011. *Young Australians: their health & wellbeing 2011*. Cat no. PHE 140 Canberra: AIHW.

Young People most at risk

The Young People most at risk of the above mentioned health issues are more often:

Homeless, or have experienced abuse or neglect.

Homelessness, disconnection and lack of quality parental care can increase health and wellbeing risks.

Aboriginal.

Aboriginal Young People have much higher rates of sexually transmitted infections, hepatitis, deaths from assault, suicide, smoking, and death while young.

Unemployed or have lower levels of education.

Employment and education are major social determinates of health. In the ISLHD the Shoalhaven had the lowest rate of year 12 or equivalent completion.

¹ NSW health statistics, High or very high psychological distress by Local Health District, persons aged 16 years and over, NSW 2011.

http://www.healthstats.nsw.gov.au/Indicator/men_distr_age/men_distr_lhn?filter1ValueId=&filter2ValueId

Male.

Young males have higher rates of suicide, substance abuse, and other health related harm and injury including road deaths (which are nearly 3 times more than females).

Live in remote or disadvantaged areas.

Young People in remote and disadvantaged areas (such as those found in the Shoalhaven), are at greater risk of having higher death rates, poorer health and have less access to GPs and other health services.

For more information:

Australian Institute of Health & Welfare 2011. *Young Australians: their health & wellbeing 2011*. Cat no. PHE 140 Canberra: AIHW.

Barriers to accessing health services

There are a number of barriers that young people face when accessing health services. Addressing these barriers through strategically planning can attract more young people to health services and increase a young person's compliance and appointment attendance. Some of the more common barriers include:

Health literacy and experience navigating health systems.

Young people do not have the same experience and familiarity with accessing and navigating the health system as adults.

Health services can help overcome this with youth friendly service delivery, large external signage that clearly identifies the health services provided, and effective promotion and communication online.

Stigma.

The health issues that commonly impact young people such as alcohol & drug issues, mental health, and sexual health, tend to have high levels of stigma, meaning young people can be reluctant to ask for, or access these health services.

This can be changed by openly promoting and normalising these services.

Access to health services (such as Transport & Health Service hours).

Because of their age and lower financial positions, young people generally do not have the same access to transport. As a result Young People often have to rely on other people such as parents for transport or they have to pay to use public transport if it is available. This can impact on their ability to access health services.

Health services that are near major hubs, are easy to find, have good access to parking and public transport are the most accessible to young people.

Even when Young People can arrange transport options they often face barriers because of their work and study environments. Unlike adult occupations many young people are in education settings or have less flexible employment than that of adults, this is because Young People are more

likely to be in employment contracts, in traineeships, or undertaking an apprenticeships were conditions are less flexible.

To overcome this young people often seek health service that are available outside of standard work hours.

Young people in rural and remote areas.

Young People in more rural and remote areas such as the southern Shoalhaven face additional barriers because of the large geographical distance to services, a lack of public transport and limited access to bulkbilling medical centres (this is particularly the case for many areas in the southern Shoalhaven).

When strategic planning, health services should consider how they are going to provide accessible services to these young people. This could include outreach, screening hubs, and the use of video conference technology.

Costs.

Young people do not have the same finances as adults so can find it difficult to afford some health services and medications.

To help offsets cost and to gain more control over their health, Young People can be encouraged to get their own Medicare card and use bulkbilling services when and where available (however the reality is that many health services do not bulk bill).

Recommendations

- Health services are as youth friendly as possible with large external signage that clearly identifies the health services provided.
- Health services provide youth specific effective promotion and communication online where possible.
- Alcohol & drug, mental health, and sexual health services are encouraged and supported to openly promote and normalise these services to reduce stigma that can be associated with accessing them.
- Health services consider locating near major hubs to be easy to find, and have good access to parking and public transport.
- Health Services aim to provide flexible and outside of normal work hours service.
- Health Services endeavour to include outreach, screening hubs, and the use of video conference technology as part of service delivery.
- Health Services provide and increase the availability of bulk billing services to young people.