

YOUTH2000: Insights from ten years of youth health surveys. Implications for health services.

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National Youth Health Surveys

- Series of national survey of the health and wellbeing of New Zealand Secondary School Students.
 - 2001
 - 2007
 - 2012
- Large national surveys – over 25,000 young people have participated
- Run by the Adolescent Health Research Group at the University of Auckland



Background

- Adolescent Health Research Group formed in late 1990's
- Consultation and collaboration
 - Building on previous NZ research
 - Number of advisory groups: Maori, Pacific, Asian, Young people and School Principals
- Strengths – local results for communities, contemporary data and consistency over time

Methodology

Youth12 – nationally representative
survey of secondary school students

+

Health services survey of participating
schools

Schools	91 (73% response)	
Socio-economic	N	%
low	26	28.6
med	36	39.6
high	29	31.9
Students	8,500 (68% response)	
Gender	N	%
Male	3,874	45.6
Female	4,623	54.4
Ethnicity	n	%
Māori	1,701	20.0%
Pacific	1,201	14.1%
Asian	1,051	12.4%
NZ European	4,024	47.7%
Other	511	6.0%



INTRODUCTION

Intro 1 2 3 4 5 6 7 8 9 Finish

How old are you?

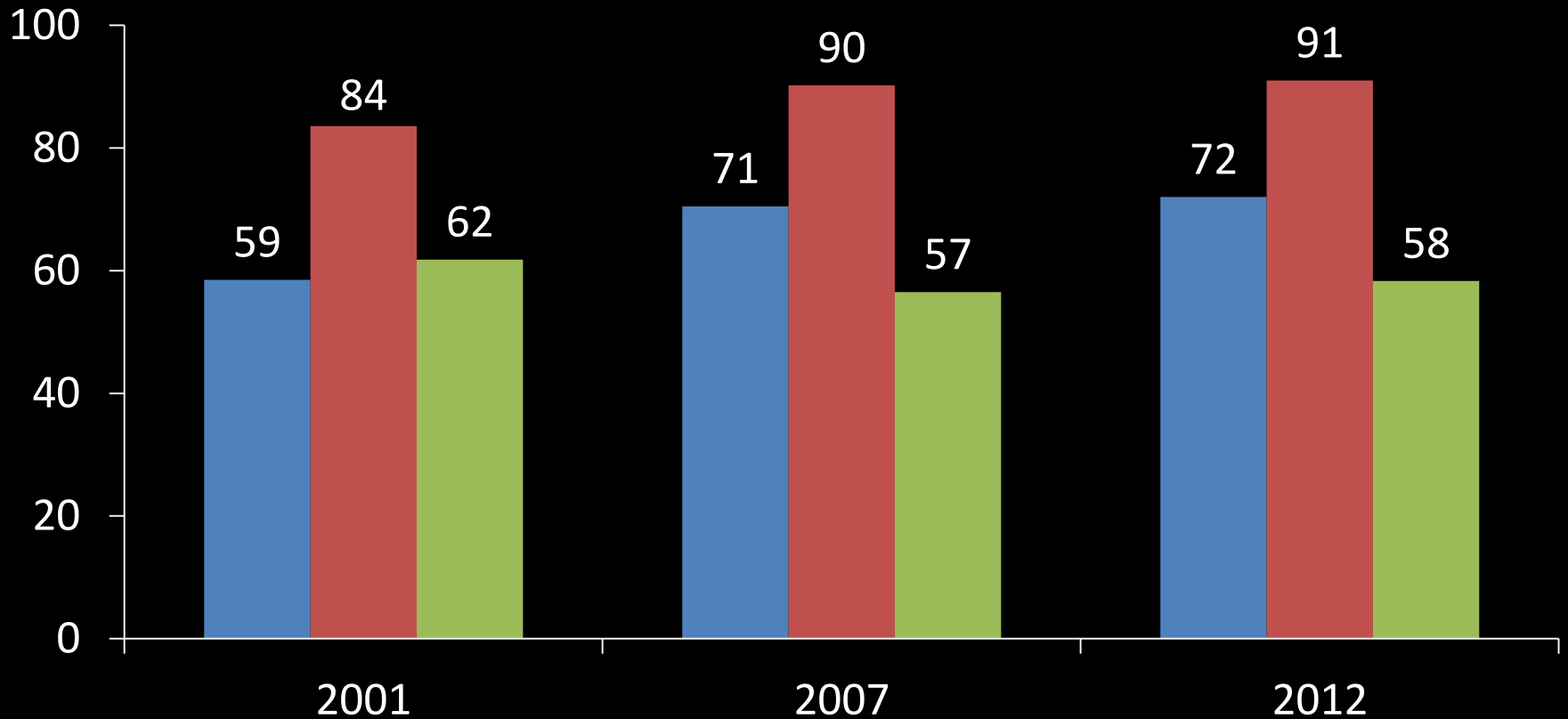
- under 12 years
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- over 19 years

GO



CHANGES OVER TIME

Family Relationships

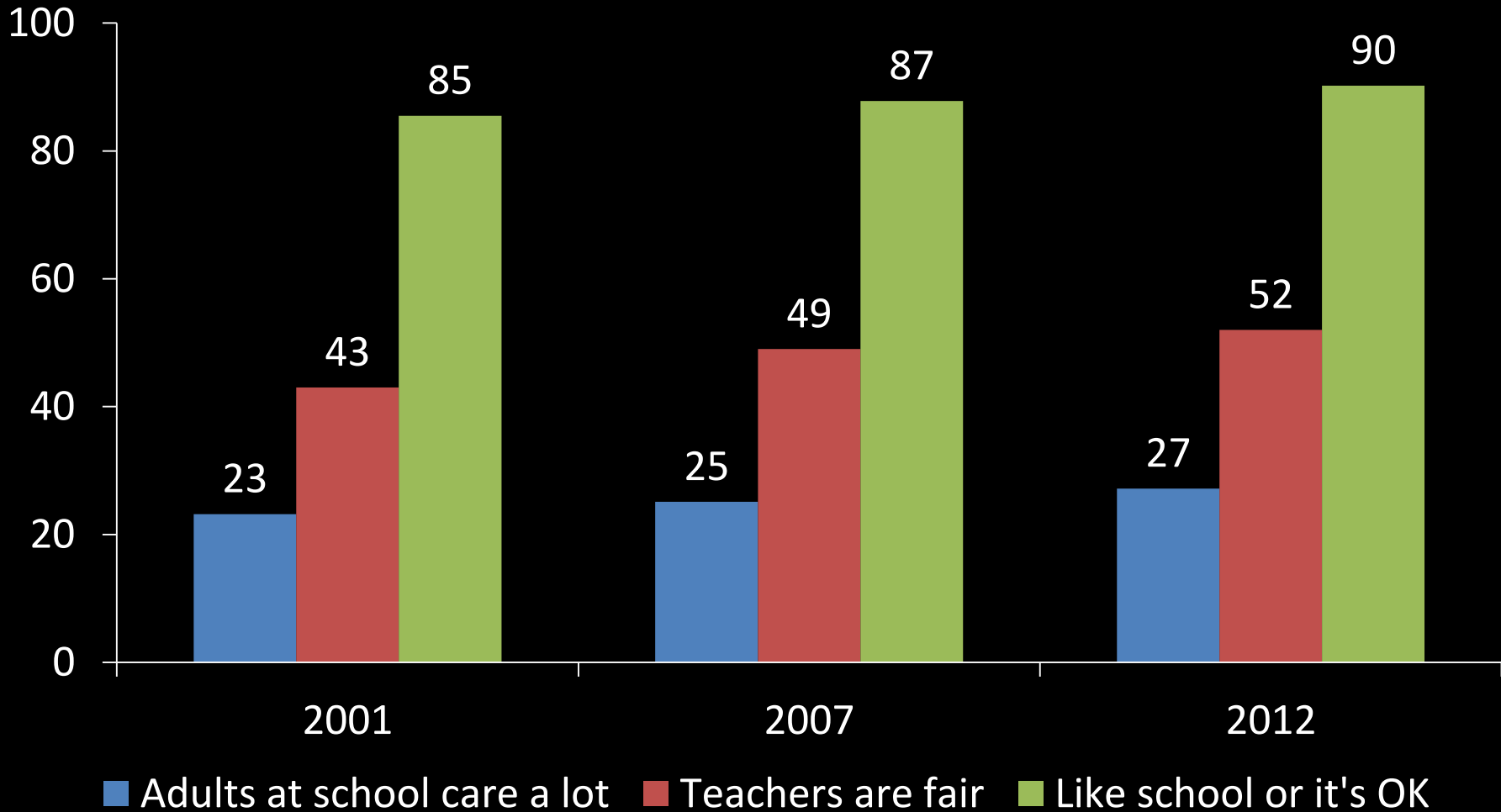


■ Happy how family get along

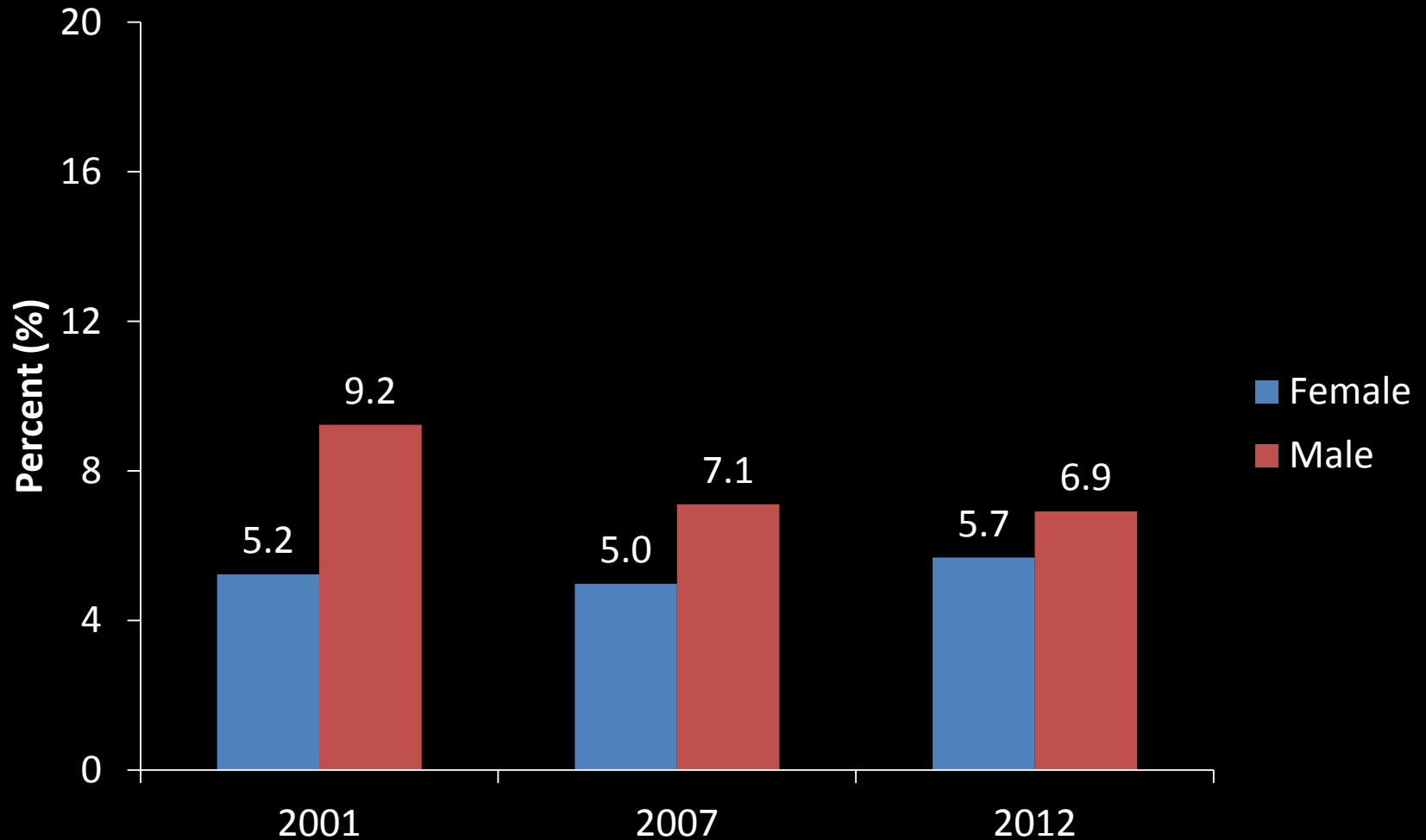
■ Parent wants to know where you are & who with

■ Spend enough time with at least one parent/person who acts as a parent

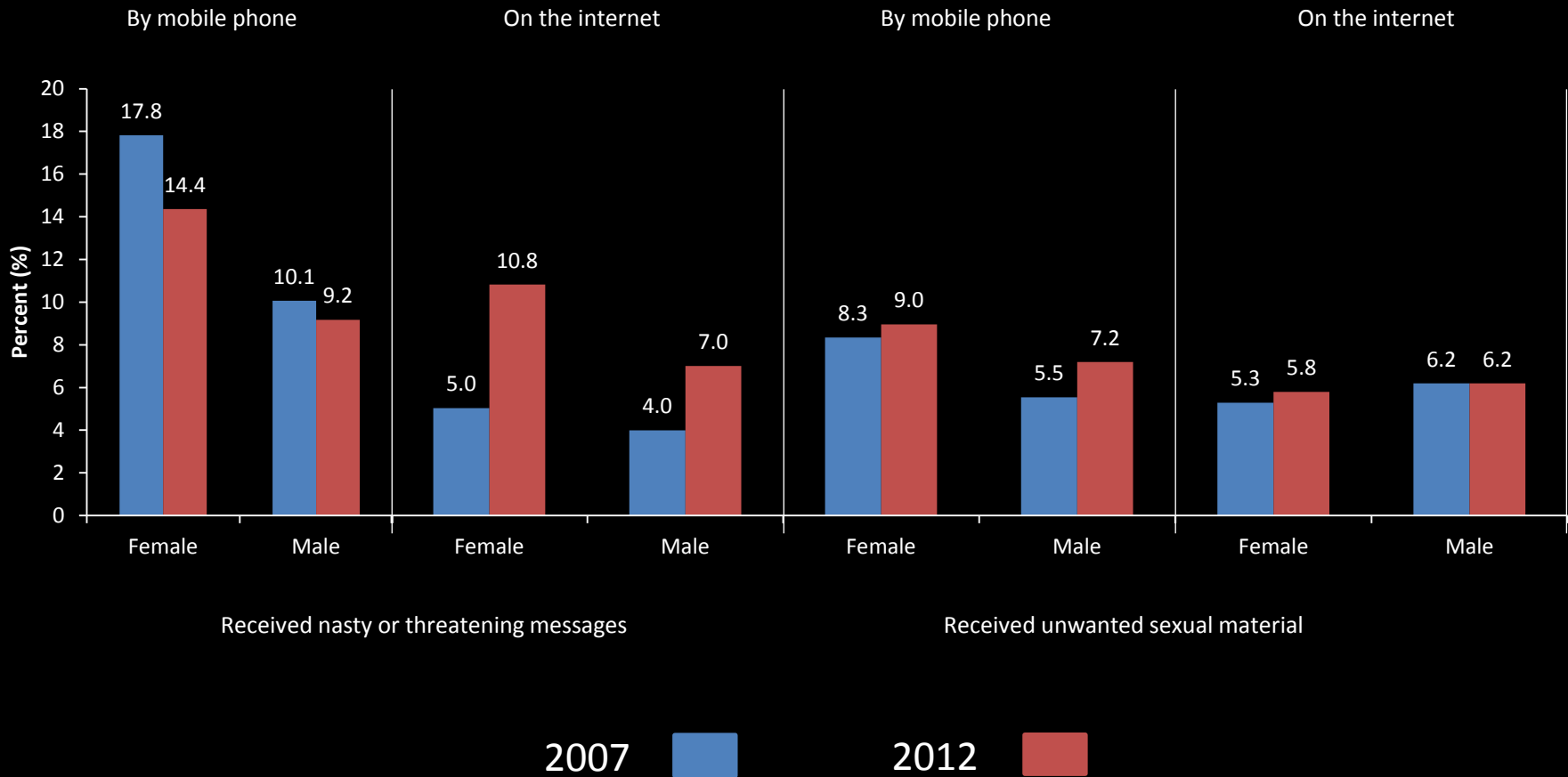
School Relationships



Students experiencing weekly bullying



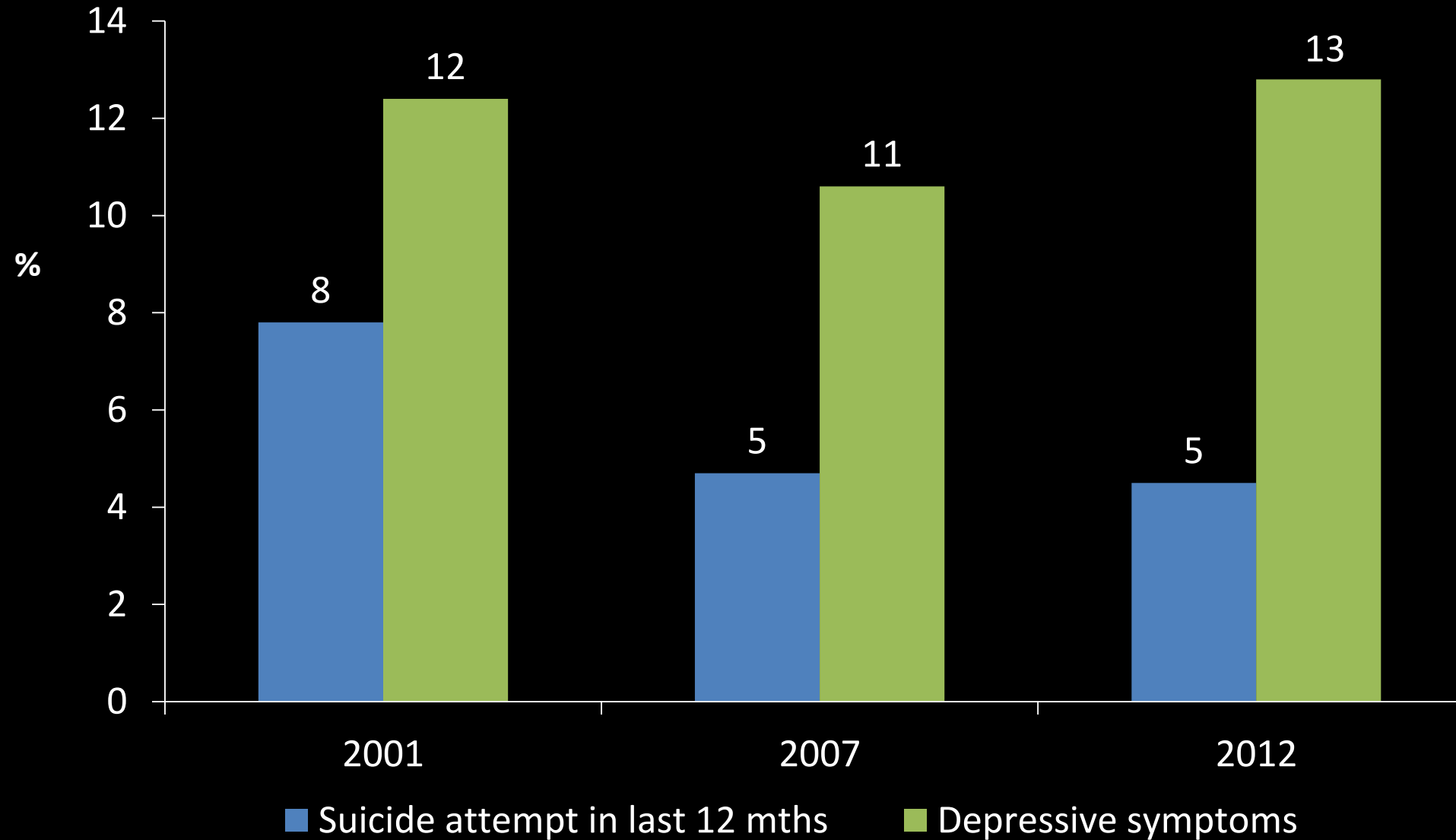
Students experiencing cyber-harassment during the last year



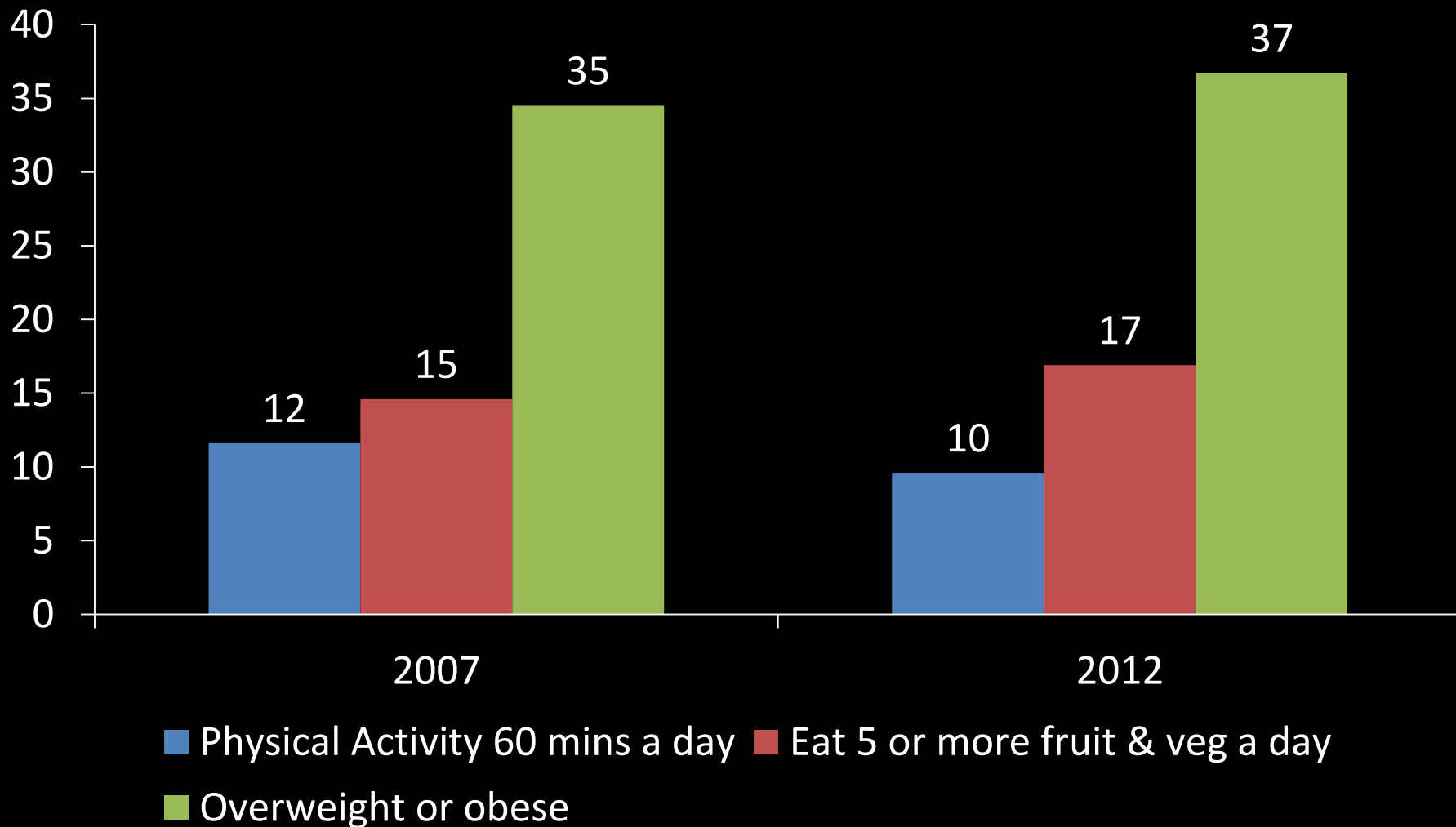
Risky driving behaviours



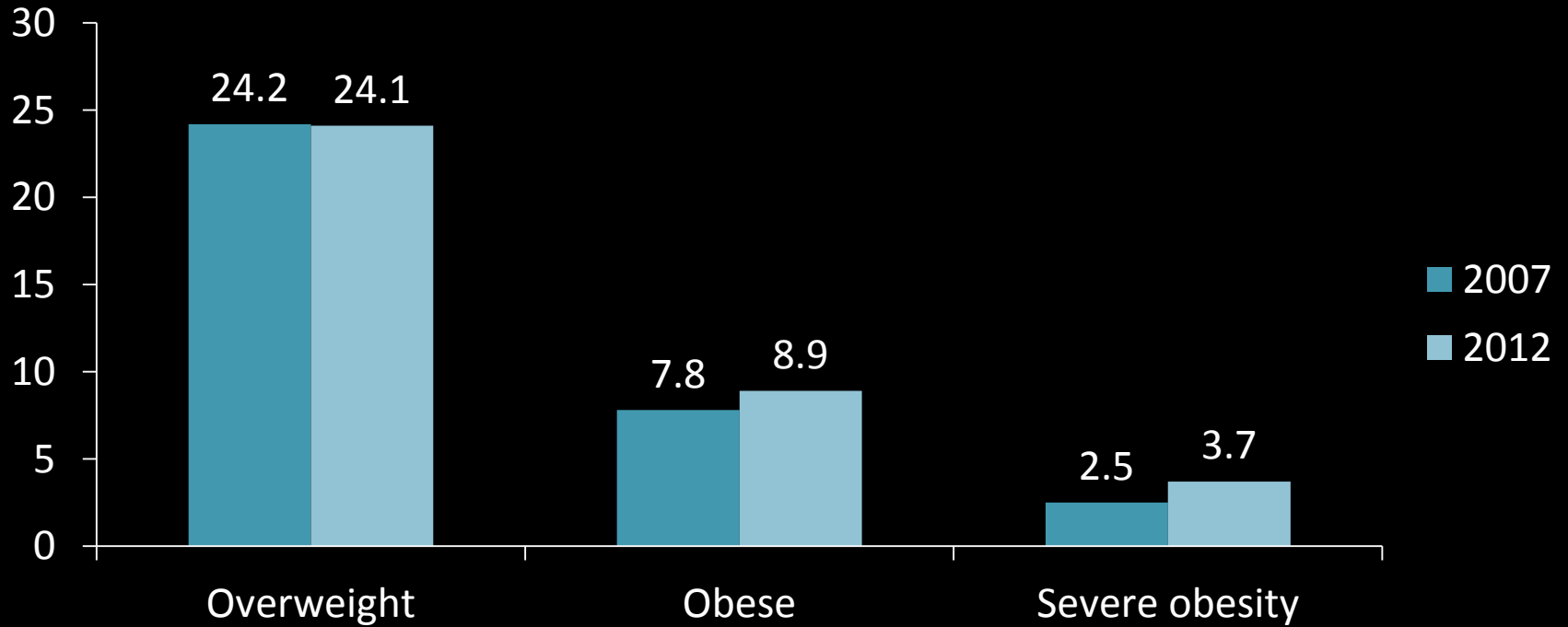
Suicide attempts & depressive symptoms



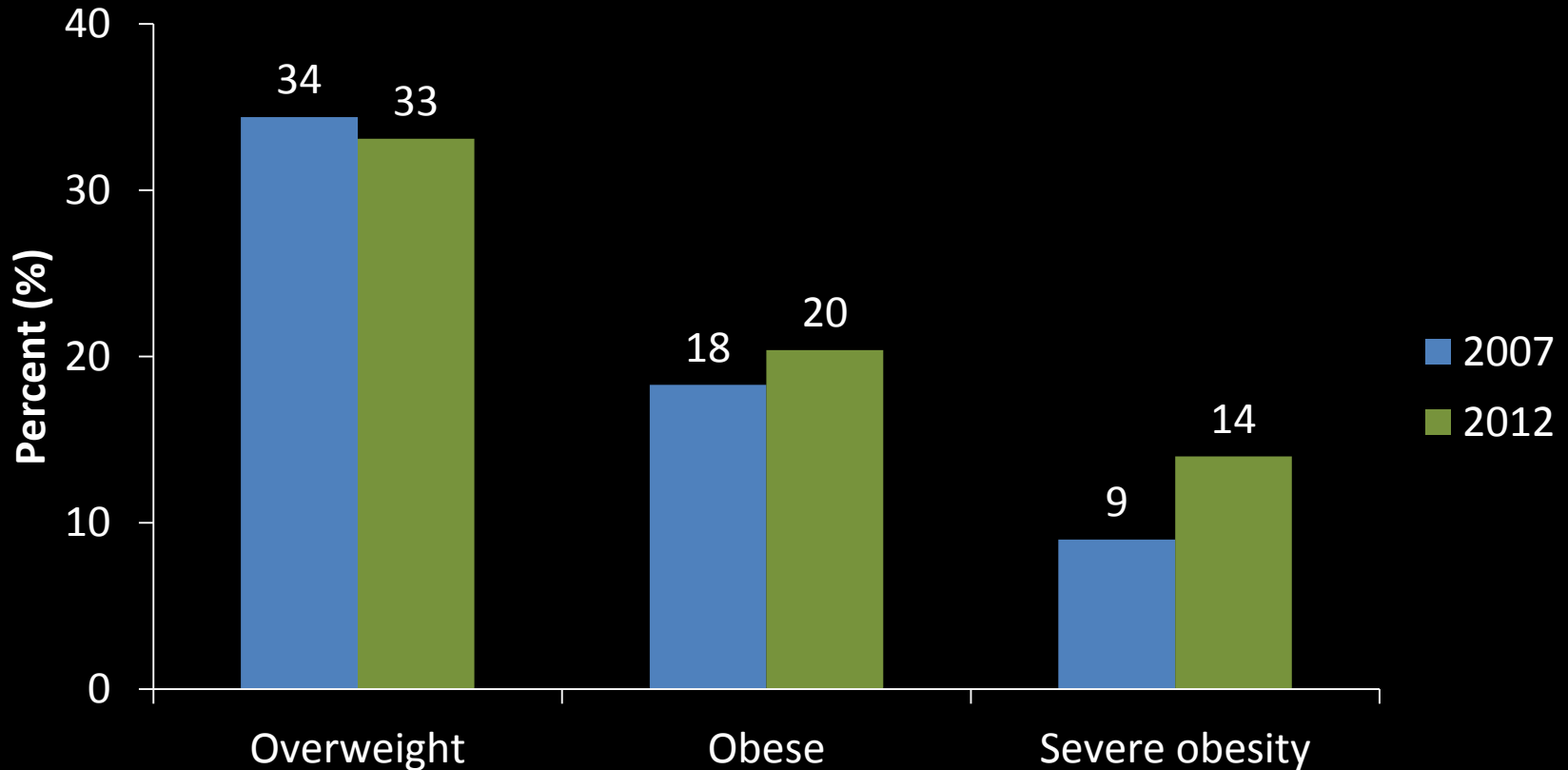
Activity, food and body size



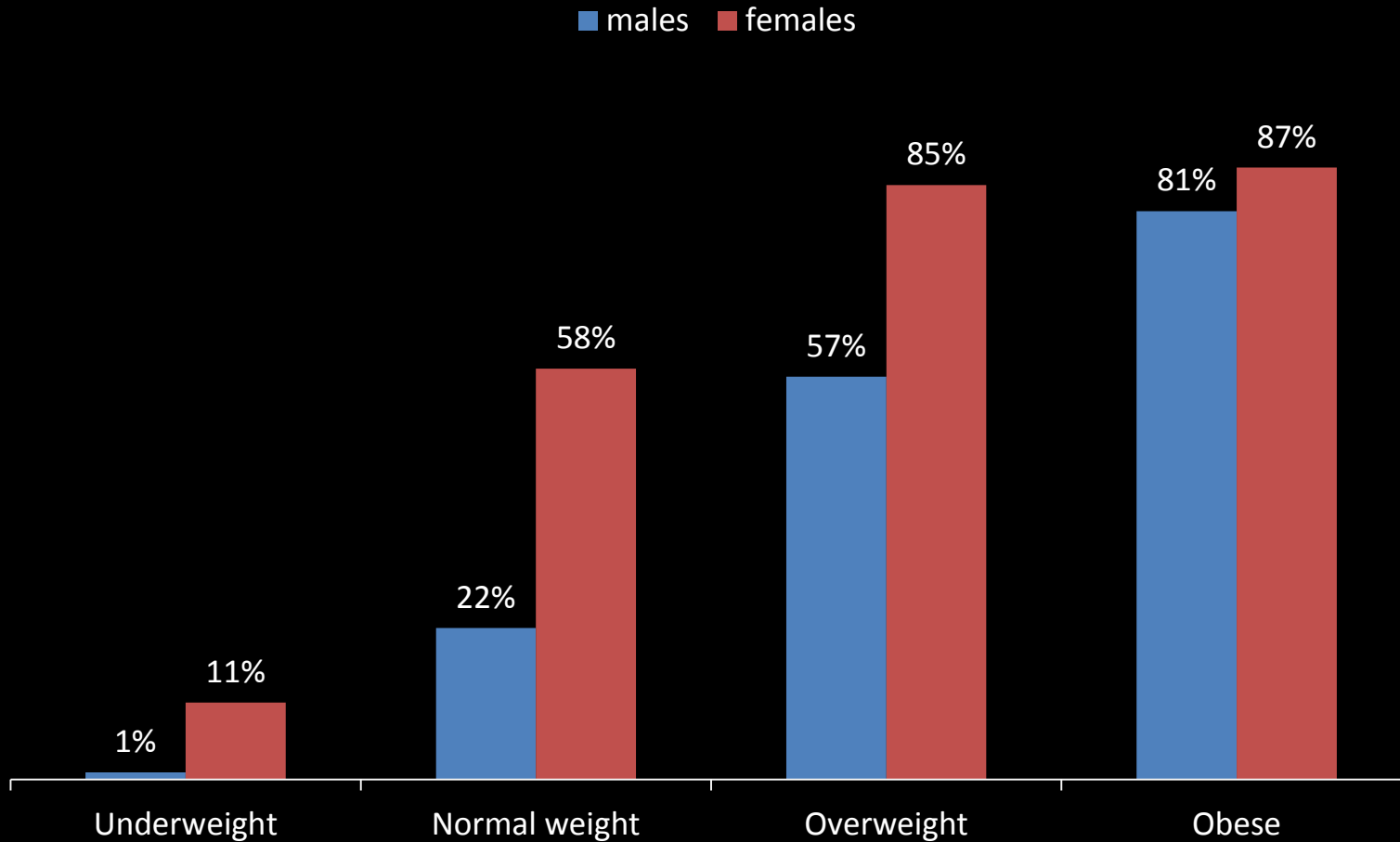
Weight changes



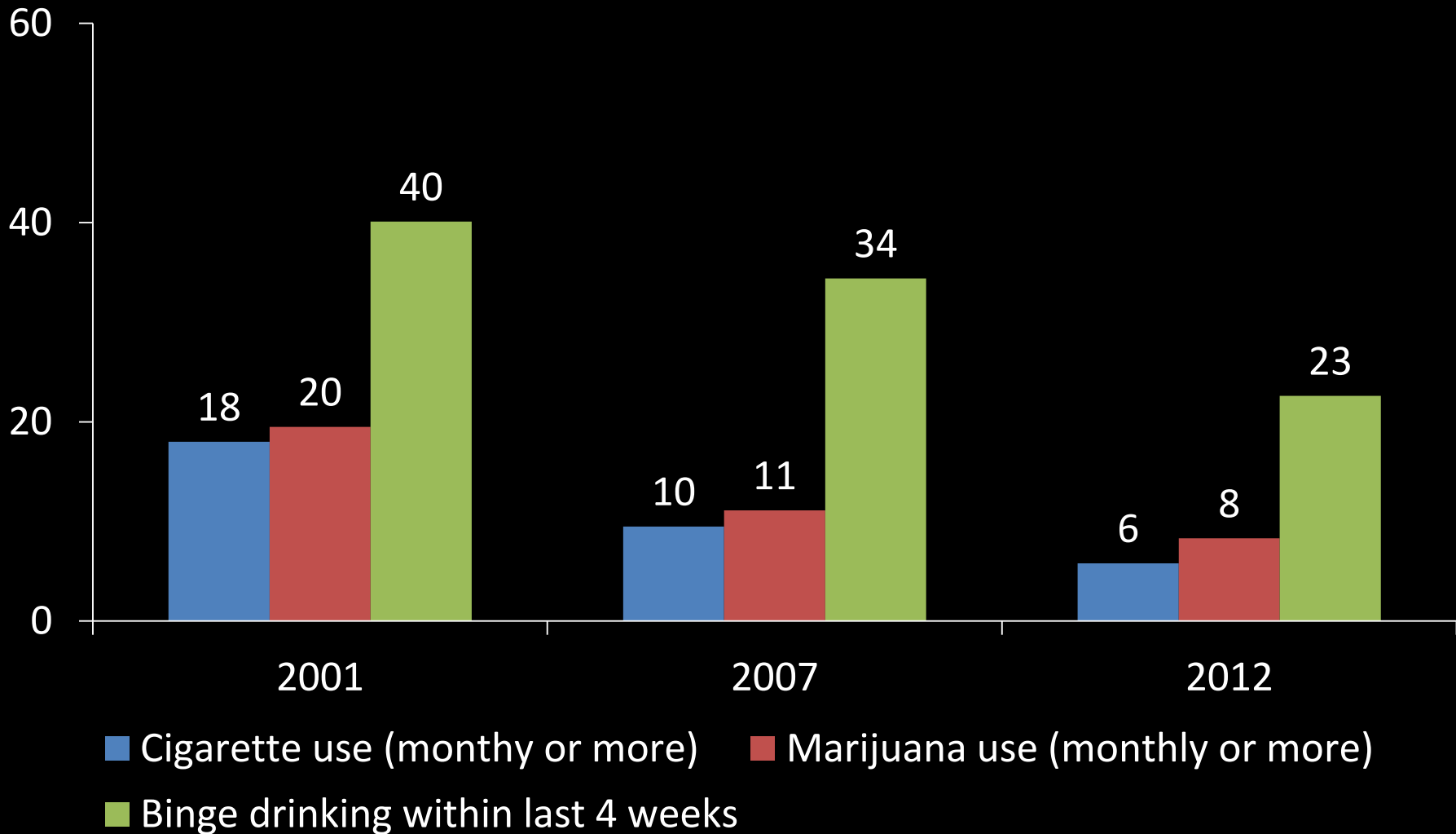
Weight Changes for Pacific Young People



Weight loss attempt, past year



Substance use



Sexual and reproductive health

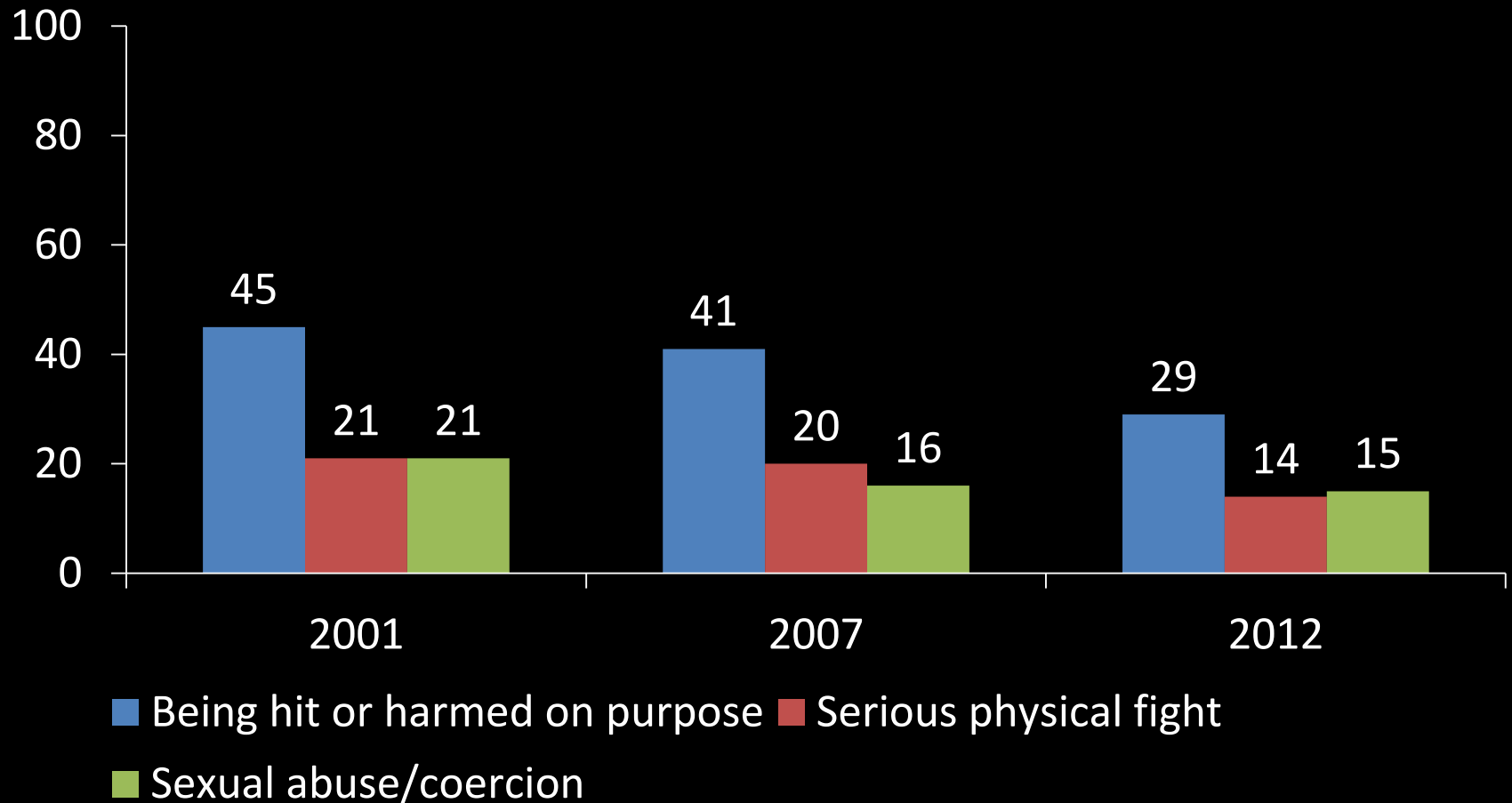


■ Ever had sex

■ Always uses condoms to prevent STI

■ Always uses contraception to prevent pregnancy

Violence



Health and wellbeing indicators

Significant symptoms of depression

Suicide attempt

Unsafe sex

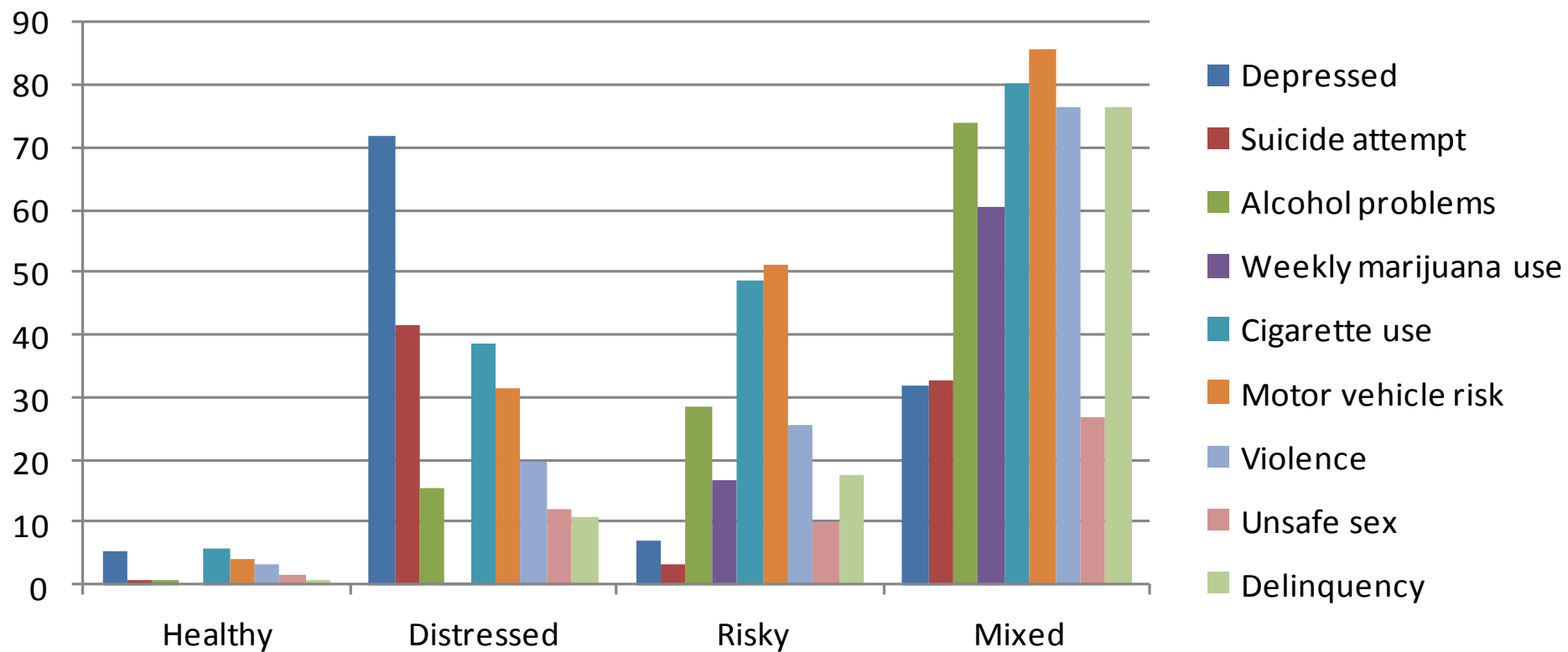
Alcohol binge

Weekly marijuana use

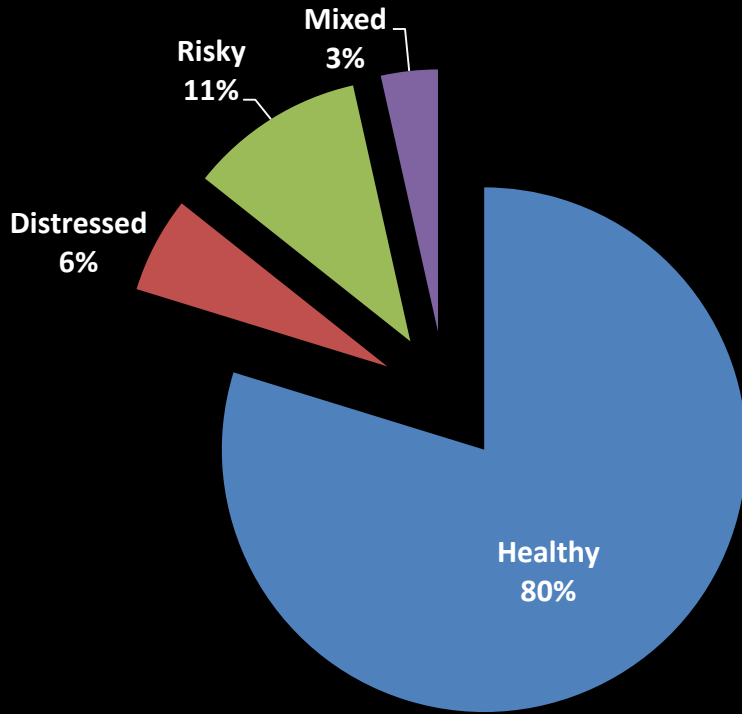
Cigarette use

Motor vehicle risk

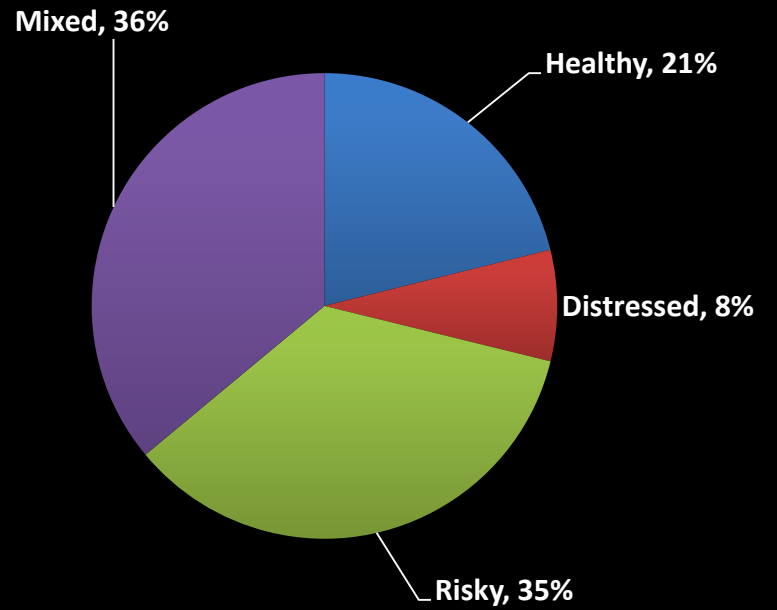
Violence



Mainstream

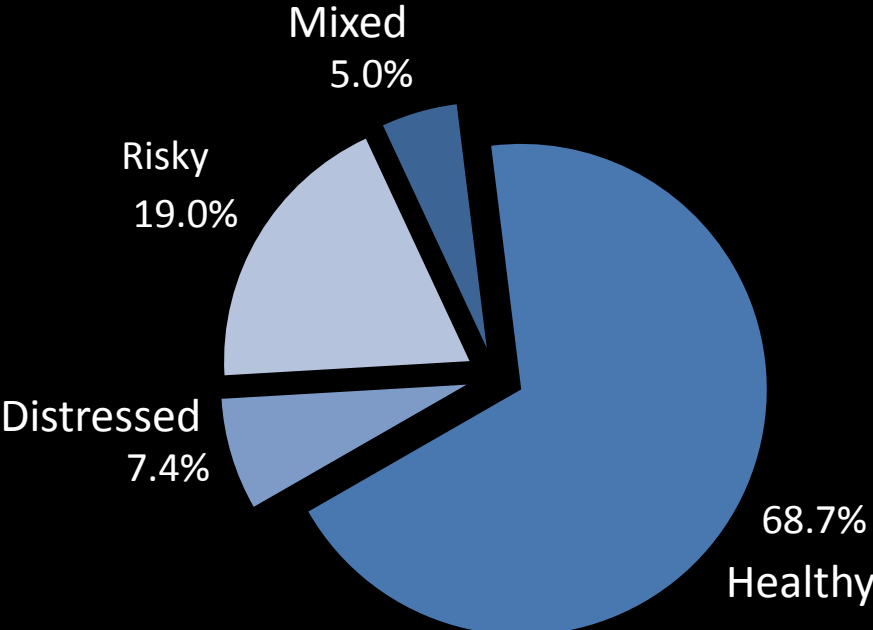


Alternative education

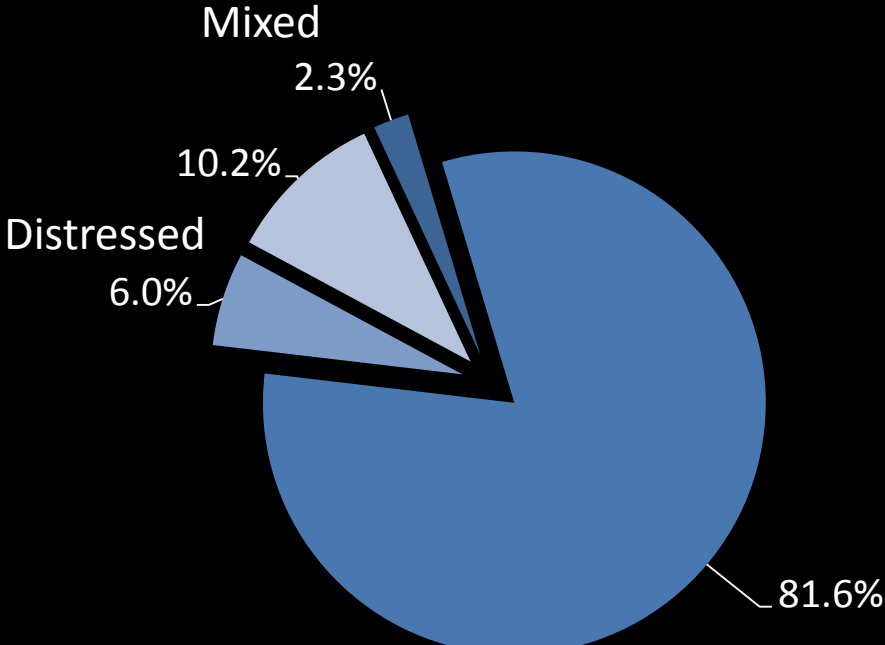


Secondary school students attending school within CMDHB
Health concerns by school decile (n = 1529)

Low decile schools

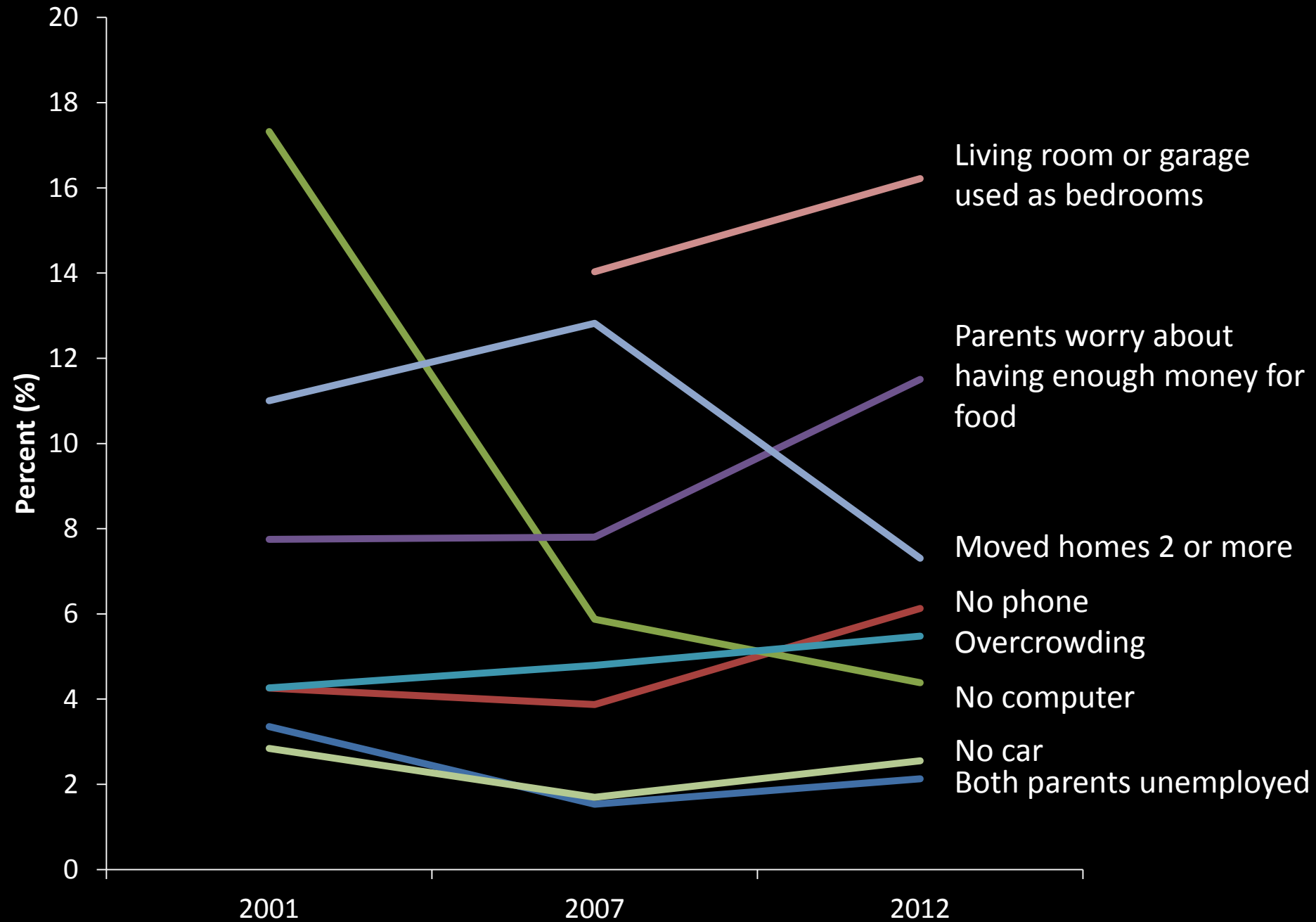


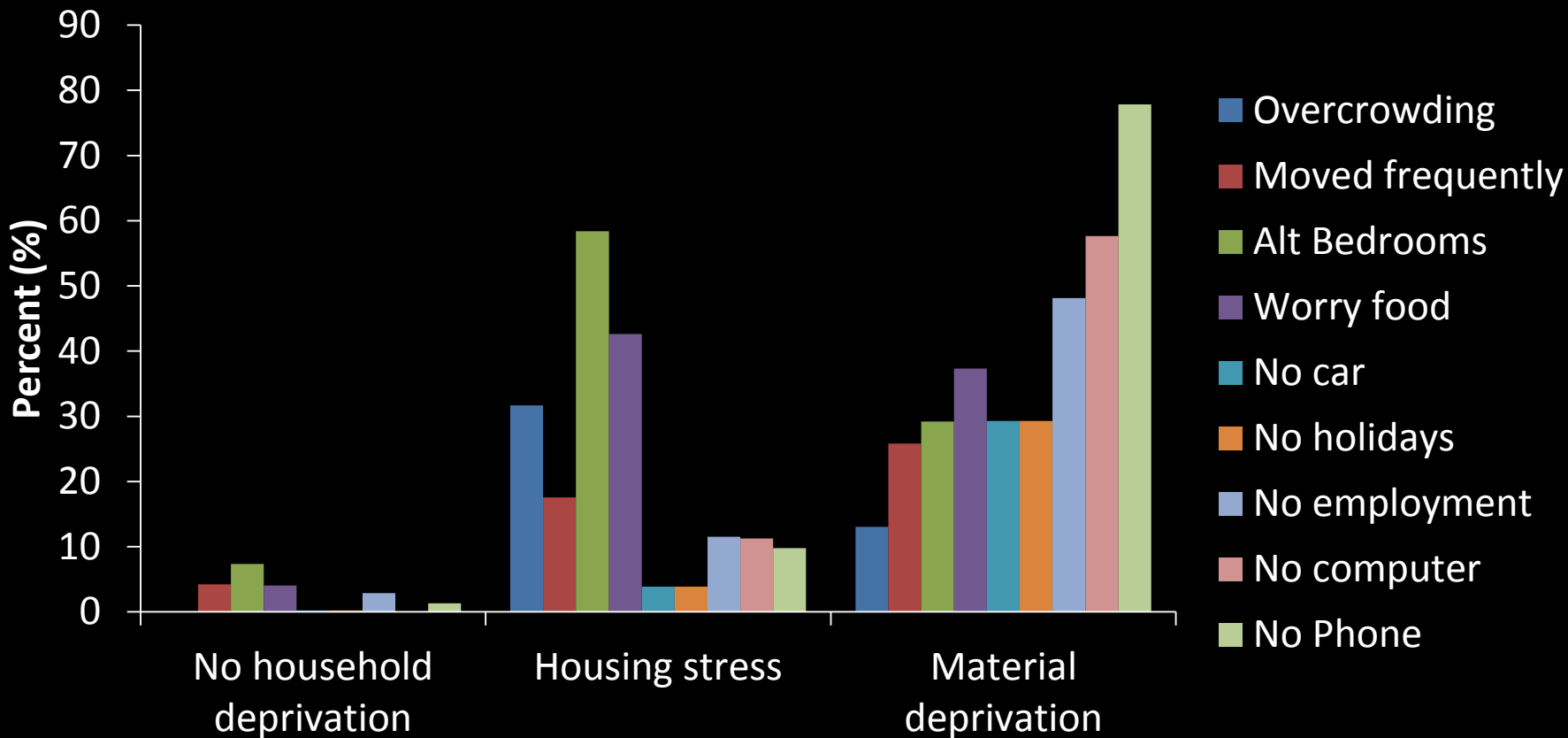
High decile schools

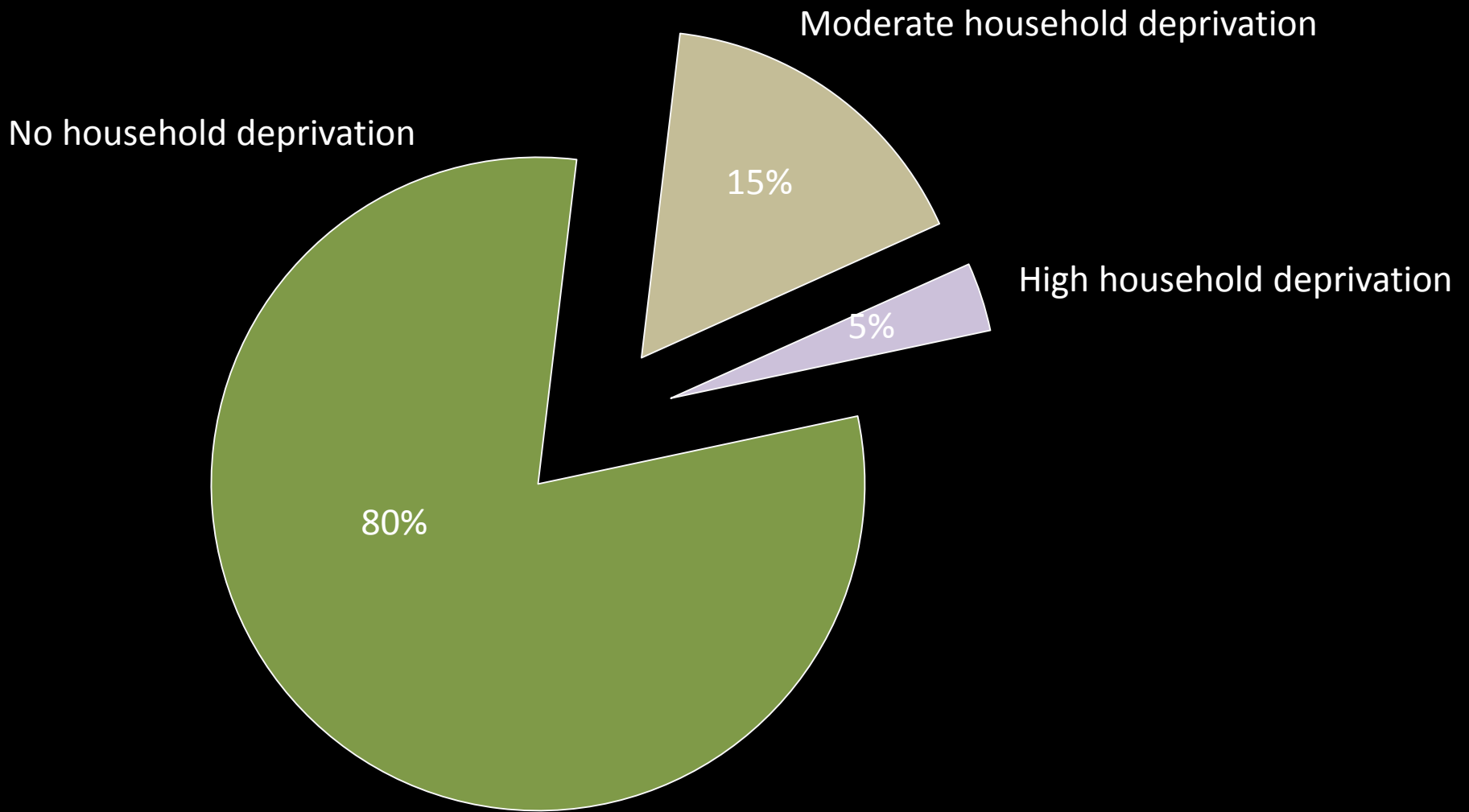


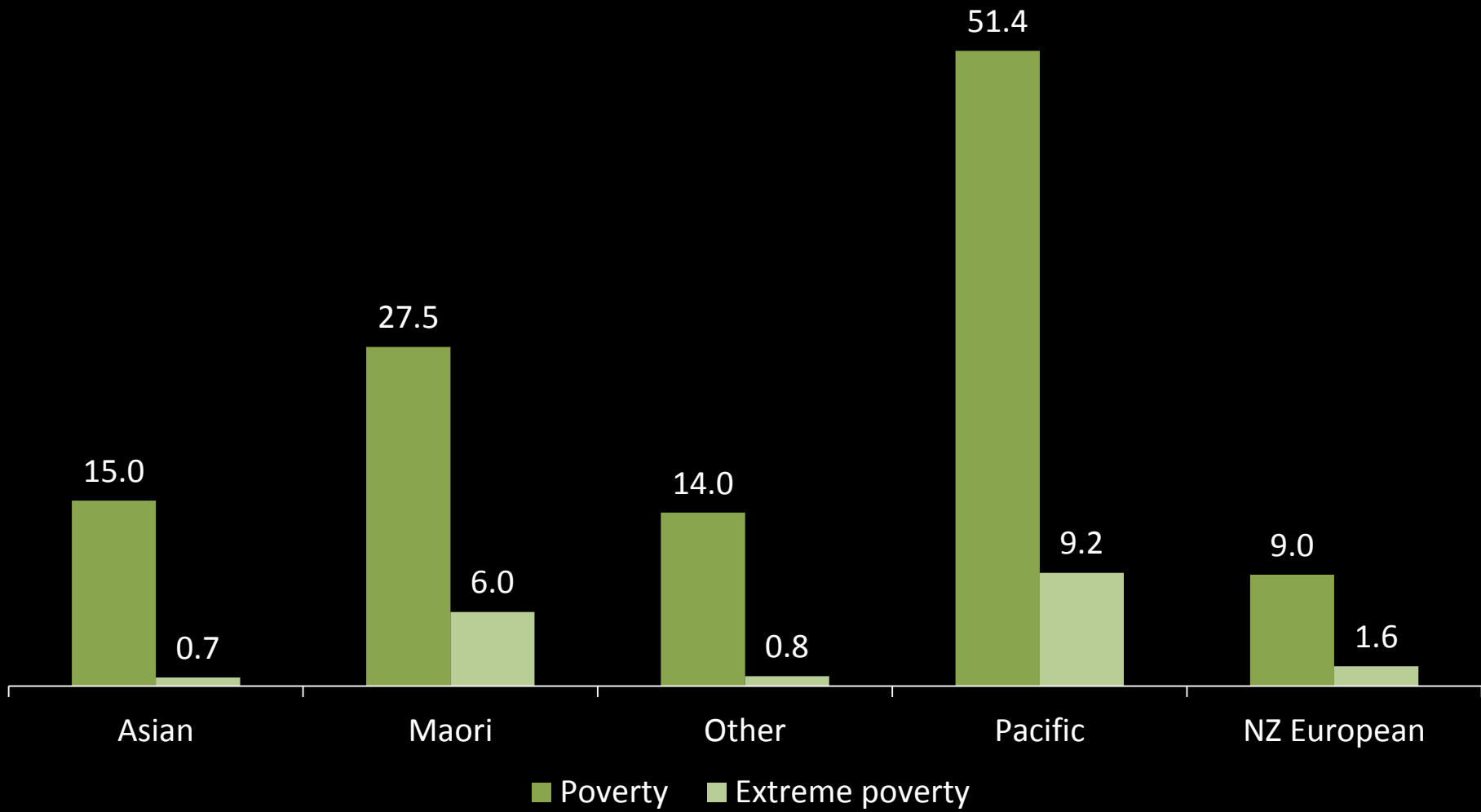
Source: Youth07 CMDHB Data

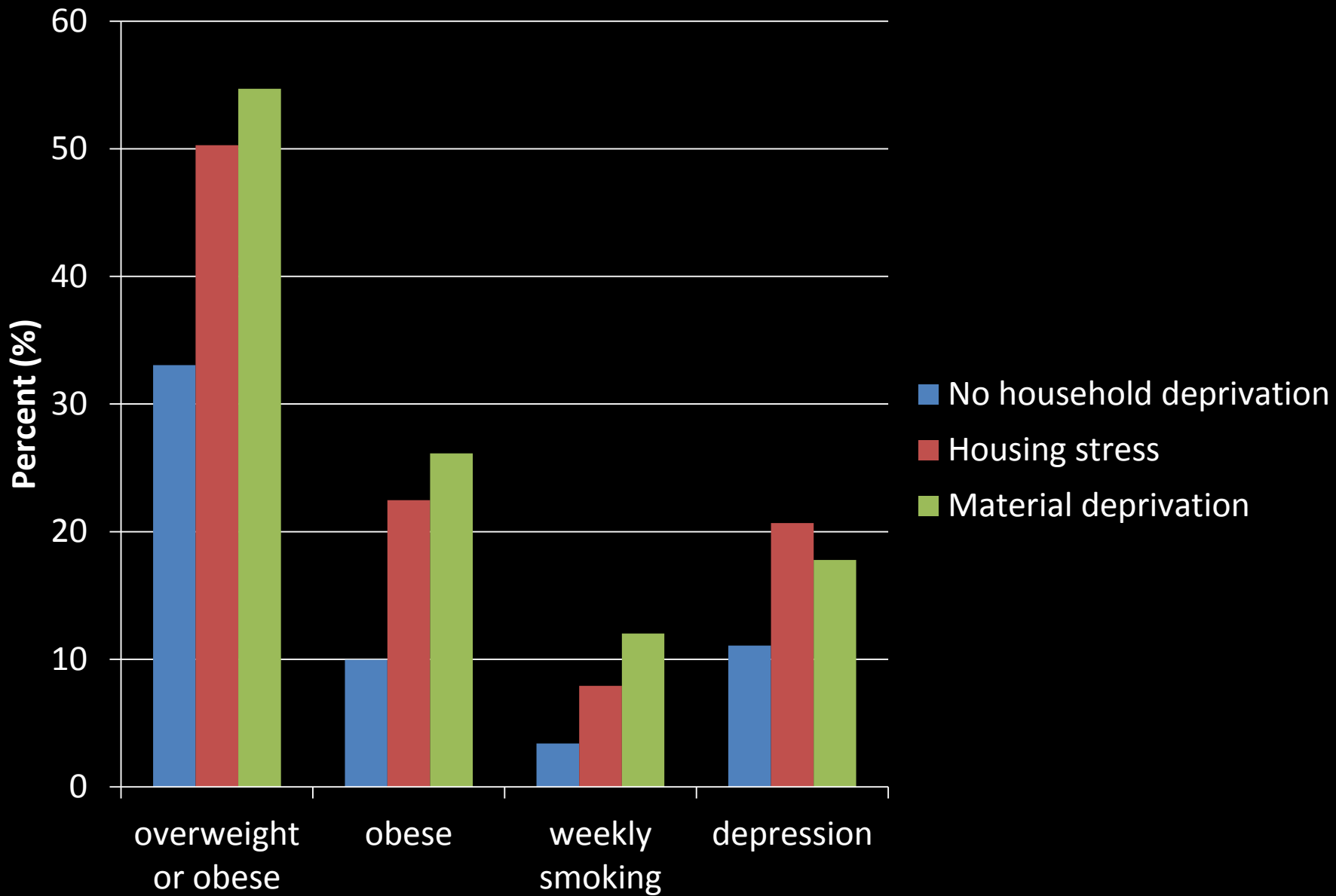
POVERTY AND HEALTH OF YOUNG PEOPLE

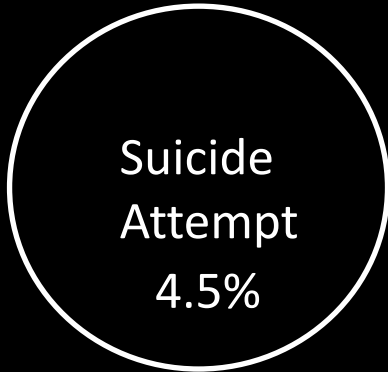
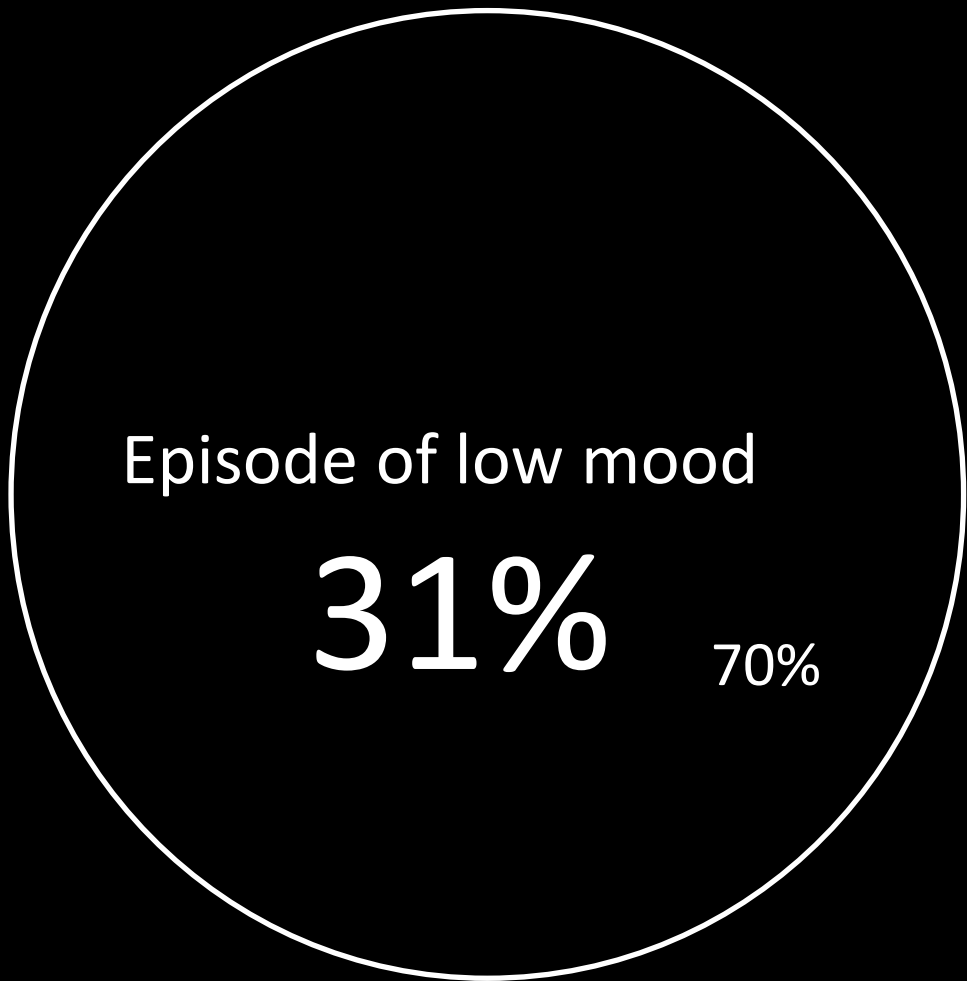












5%

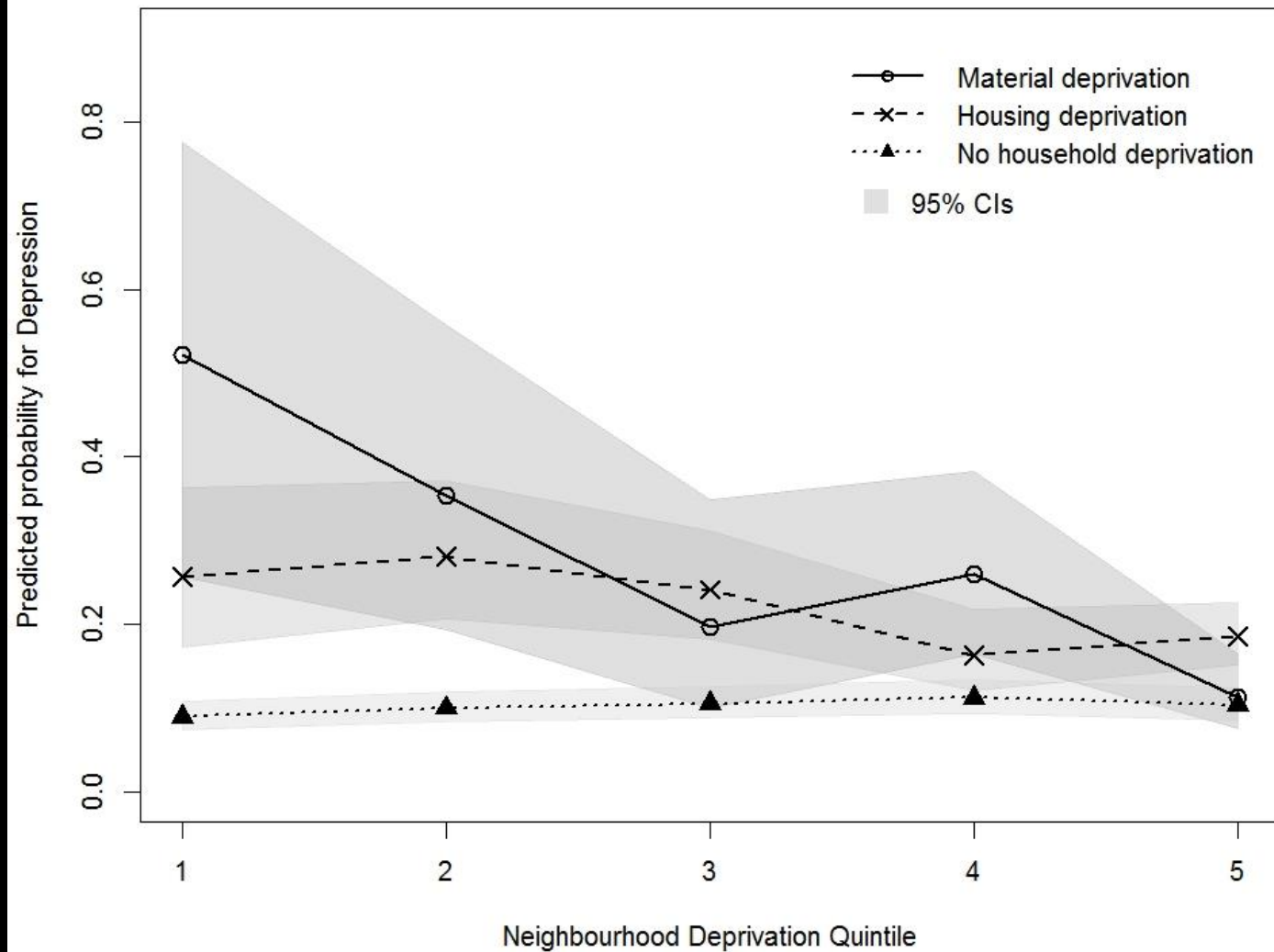
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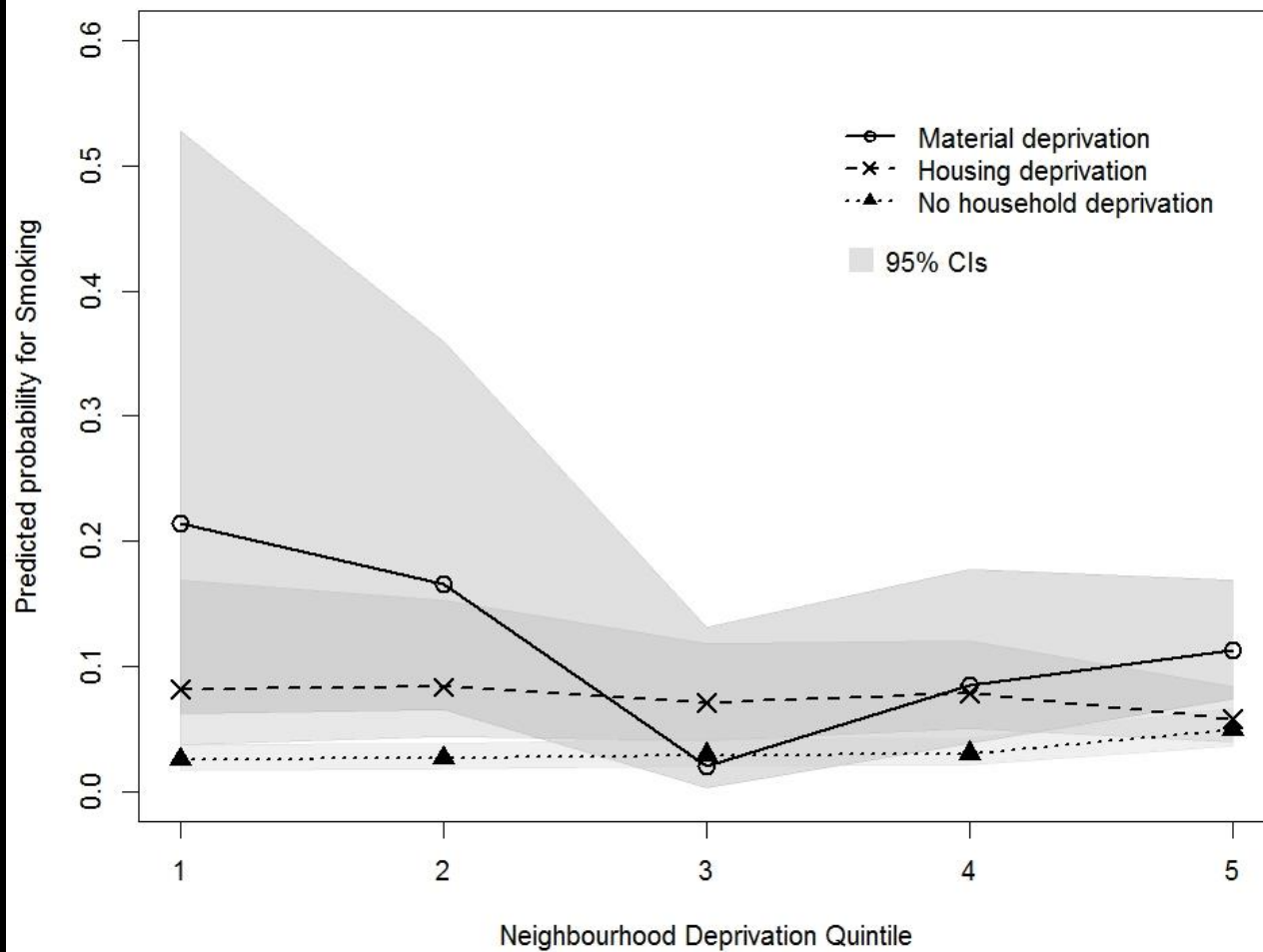
7%

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12%







SCHOOL HEALTH SERVICES

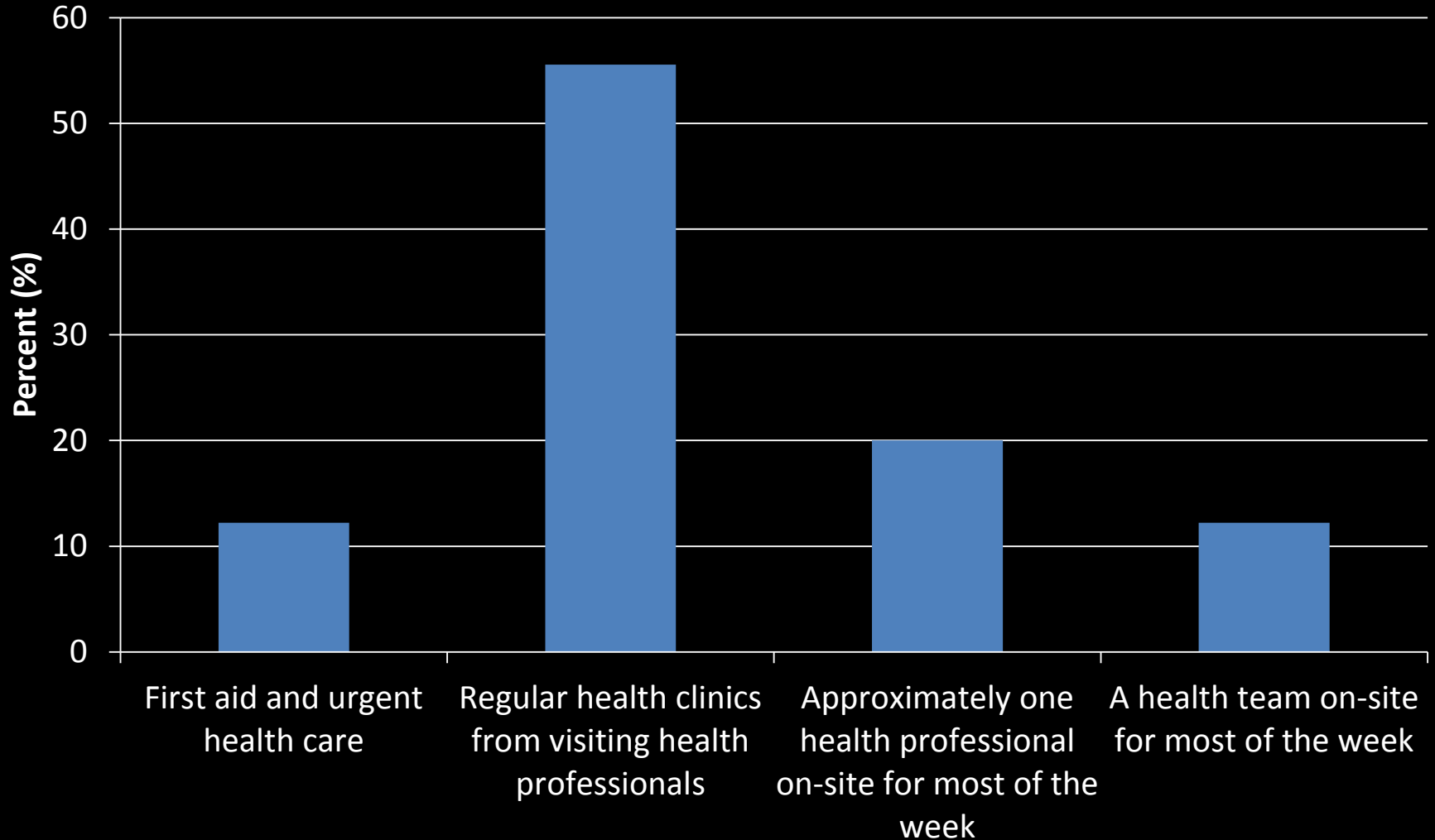
School Health Services Survey

Of the 91 schools that participated in Youth'12, 11 reported no health services except first aid care and 1 school had subsequently closed.

Among the remaining 79 schools, 129 health and pastoral care staff (e.g. guidance counsellors, social workers) were invited to take part in a health services survey.

One hundred and thirteen health and pastoral care staff replied to the health service survey (**88% response rate**), which included 74 nurses (n=74, 92.5%) and 6 doctors (n=6, 7.5%).

Level of health services in schools



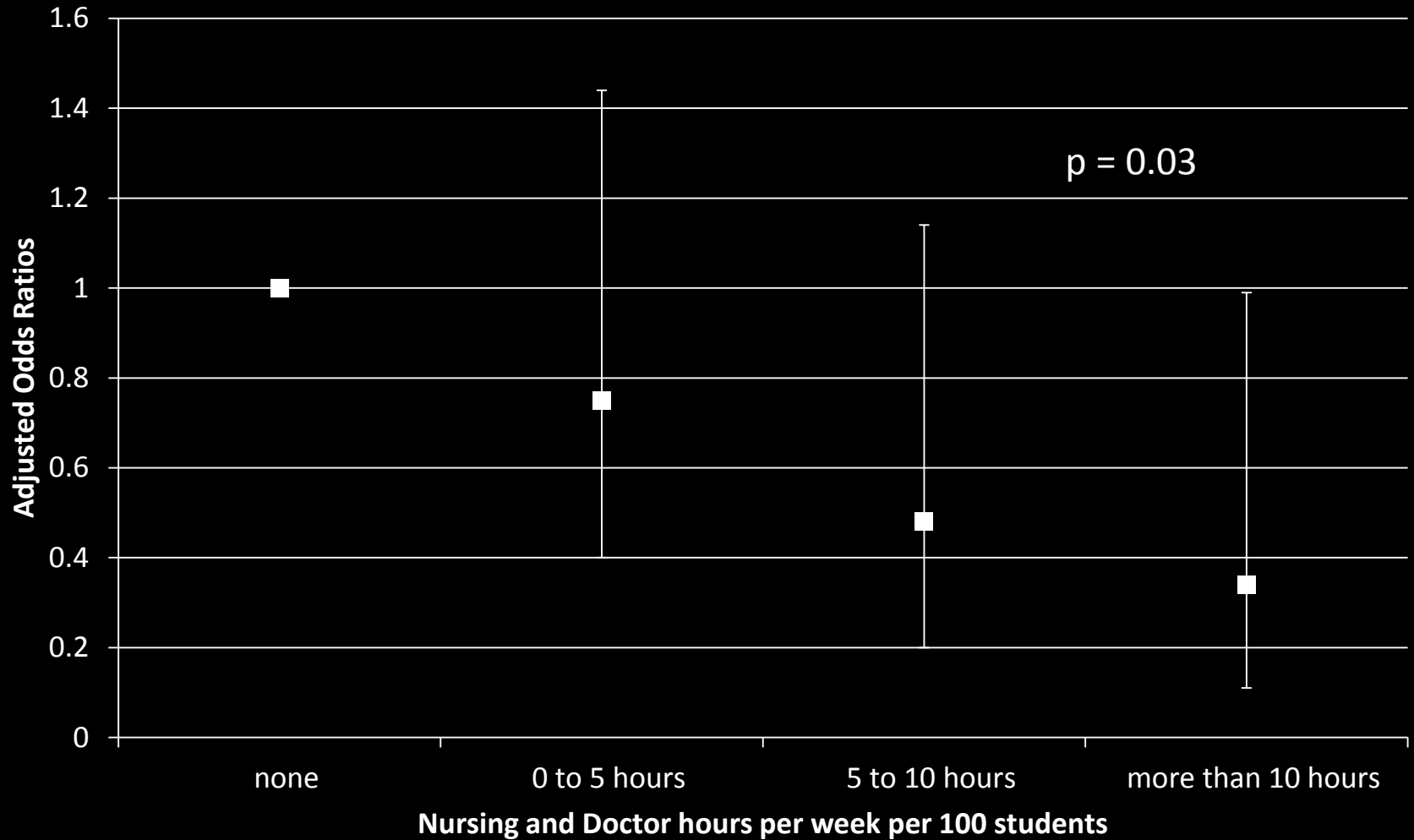
Linking student health outcomes to health services

- No randomised trials of school health services
- Can't link individual use of school health services to health outcomes
- Need to look at overall levels of student health and wellbeing in each school
- Also need to account for background characteristics of students

	Less depression symptoms	Less suicide risk
Level of health service		
Regular clinics from visiting HP	+	+
One person on-site	++	++
Health team on-site	+++	++
Infrastructure		
Hours of nursing/ 100 students	++	+
Hours of GP/ 100 students		++
HEADSS screening	++	
Facilities	+	
Training and continuing education		
Youth health training – post grad	+++	++
Peer review group		+
Collaboration and support		
With pastoral care team		
With local GP/ PHO	+	
Team meetings		
Specialist support – mental health		

	Less binge drinking	Cigarette/ marijuana use
Level of health service		
Regular clinics from visiting HP	-	
One person on-site	-	
Health team on-site	+	
Infrastructure		
Hours of nursing/ 100 students		
Hours of GP/ 100 students		
HEADSS screening		
Facilities		
Training and continuing education		
Youth health training	+	
Peer review group		
Collaboration and support		
With pastoral care team		
With local GP/ PHO		
Team meetings		
Specialist support – mental health		

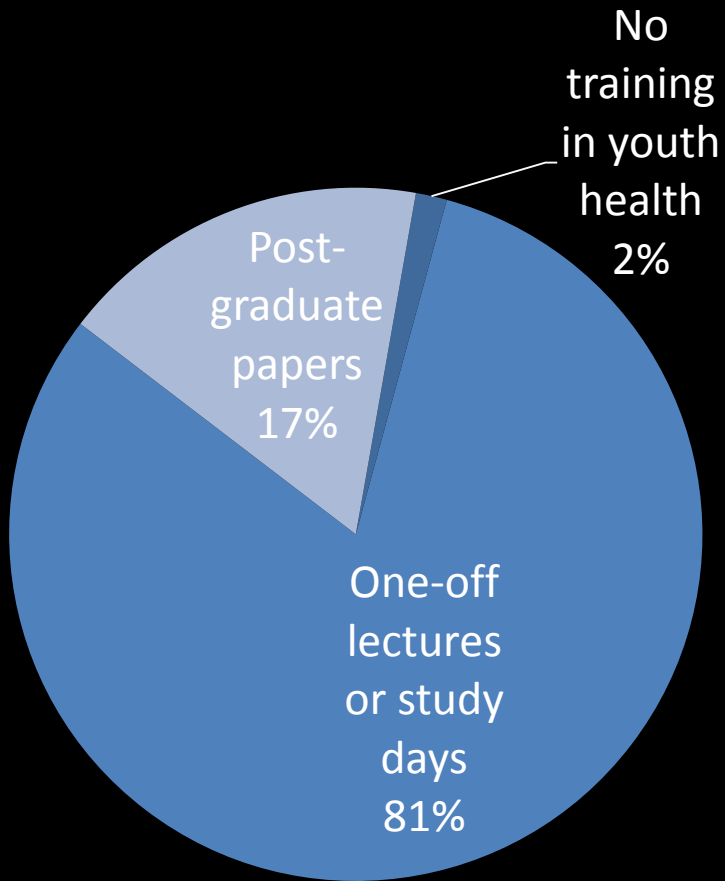
Association between nursing and doctor hours and self-reported pregnancy



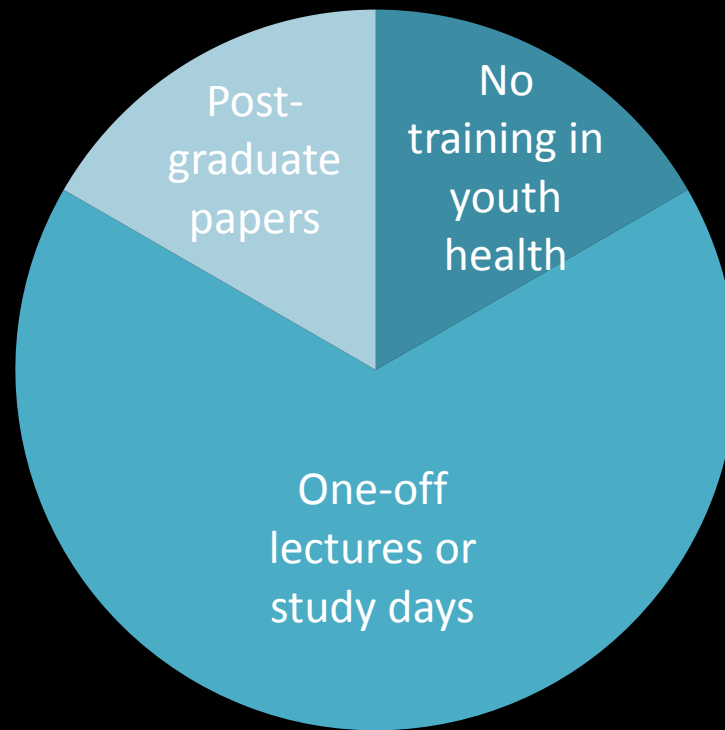
TRAINING IN YOUTH HEALTH

“What training/ professional development in youth health have you had? (You can tick as many as apply)”

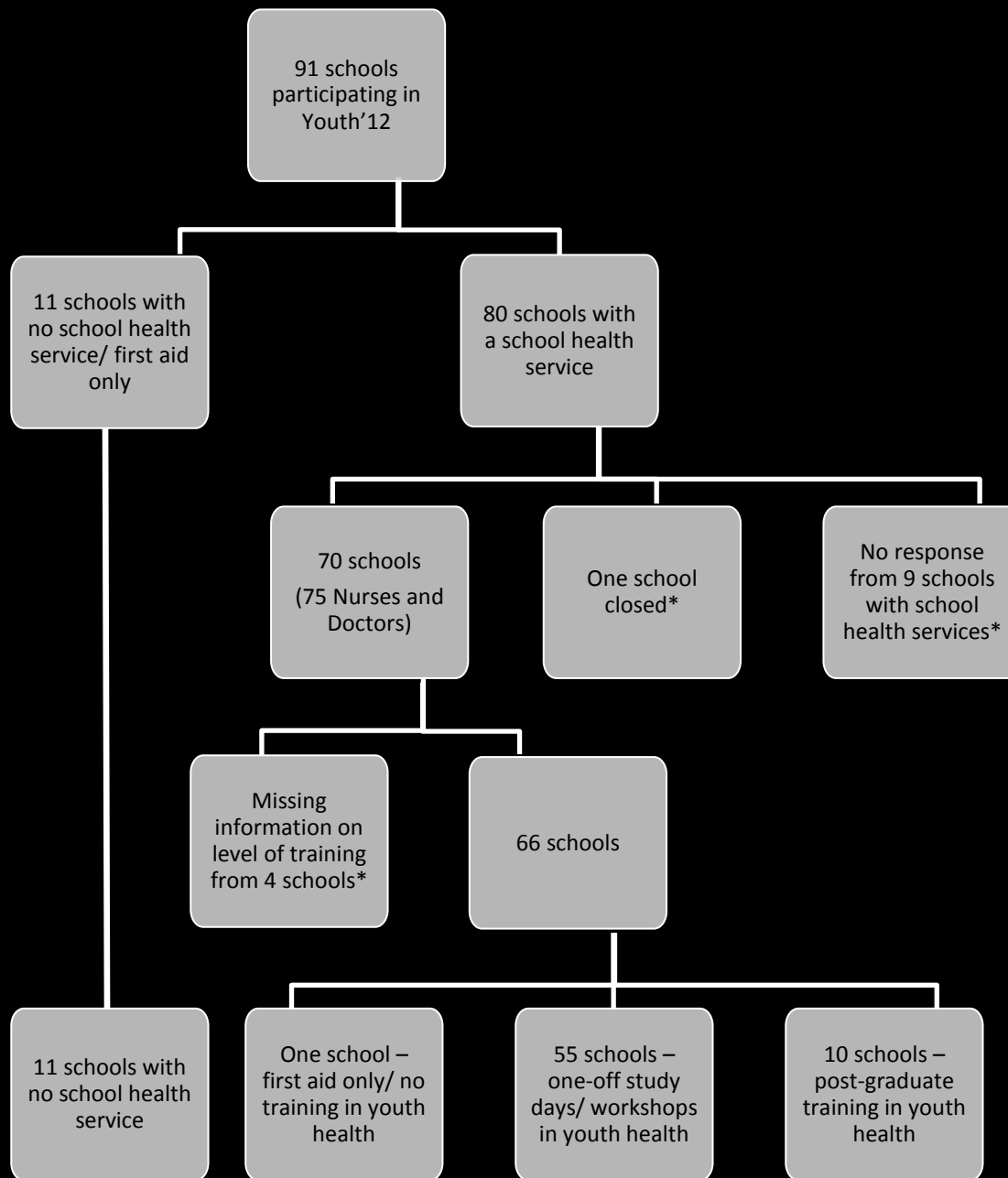
with response options ranging from “None” through to “I have a postgraduate diploma in youth health”.



Nurses (N = 69)



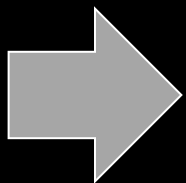
Doctors (N = 6)



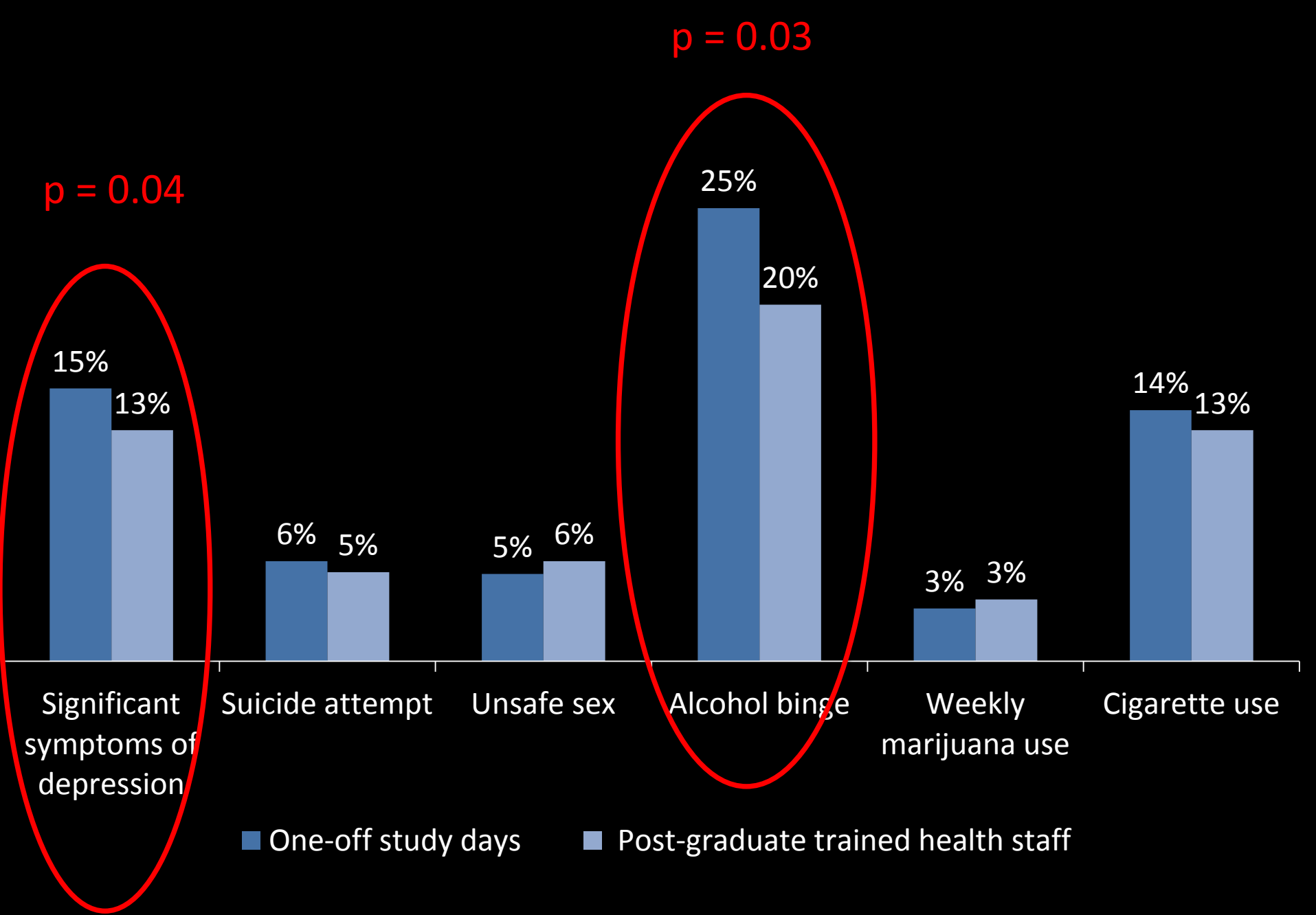
12 schools with no
school health
service

55 schools – one-
off study days/
workshops in
youth health

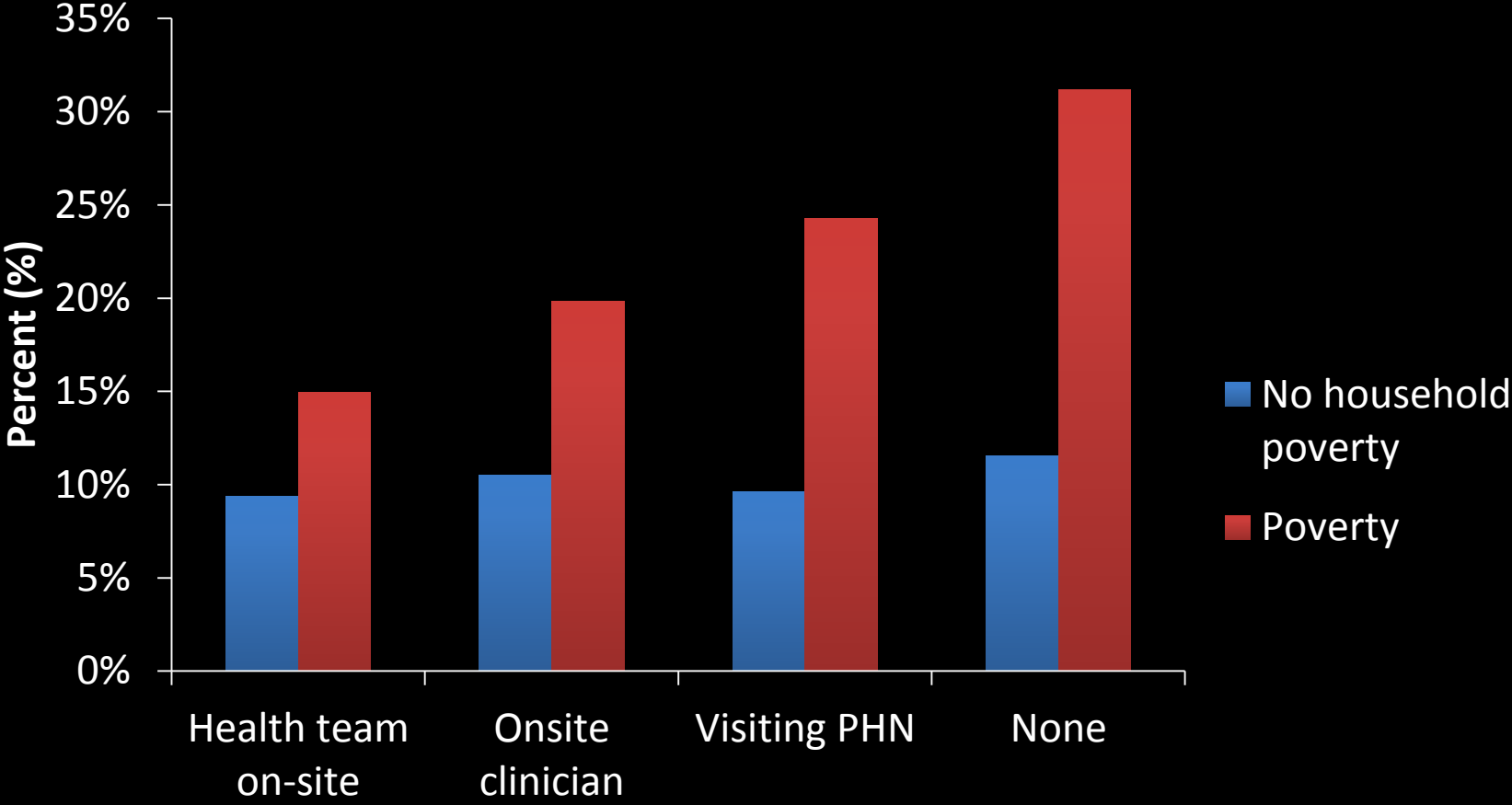
10 schools – post-
graduate training
in youth health



Three groups of schools for comparison



Depression symptoms



Effective School Health Services

Work in Teams!

Expand the role of nurses

Co-locate health, social, cultural and counselling services

Increase in staffing levels

Well trained

Supported by local youth health teams

Acknowledgements

Students, staff and schools participating with the youth2000 surveys

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Investigators: Terryann Clark (Principal investigator), Sue Crengle, Simon Denny, Terry Fleming, Elizabeth Robinson, Jennifer Utter, Pat Bullen, Ben Dyson, Sarah Fortune, Roshini Peiris-John, Fiona Rossen, Janie Sheridan, Tasileta Teevale.

