

Health Services are in a privileged position of being able to support children and young people to be physically, mentally and emotionally healthy, and be instrumental in giving effect to children's rights.

Article 12

Children have the right to give their opinions freely on issues that affect them. Adults should listen and take children seriously.

Article 13

Children have the right to share freely with others what they learn, think and feel, by talking, drawing, writing or in any other way.

Article 24

Children have the right to the best health care possible, and all children should have information about how to stay safe and healthy.

Article 25

Every child in hospital should have their situation checked regularly to see if everything is going well and if this is still the best place for the child to be.

Article 42

Governments should actively tell children and adults about this Convention so that everyone knows about children's rights.



More than perhaps any other generation, today's young people are acutely aware of the diversity of their peers, both in South Australia and around the world. The first truly global generation, young people value diversity and place a huge importance on personal identity and inclusion.

Young people in South Australia want health systems and services to implement plans and strategies that promote inclusion, diversity, kindness and trust. They also want to be engaged directly, and be treated with mutual respect and understanding. They want opportunities to be community leaders themselves and to have a positive impact on the lives of others.

Children and young people have said that being healthy is important to them. Children easily describe how healthy kids feel, what they can do, and what foods keep them healthy. For them a healthy kid is happy, can do anything, is excited and strong, plays sport, has fun, and is active.

When young people talk about health it is generally in relation to their relationships with their peers, partners and families. They include self-harm, bullying, family and domestic violence, child abuse, neglect, and family stress in their discussions, all of which have a direct impact on their health.

During the last decade there has been significant consciousness raising around health issues relating to young people including the 'obesity epidemic' and 'emerging mental health crisis'. While these issues have been amplified and heard loud and clear by young people, there hasn't been equal attention given to the need to systemically embed the views of young people into health services, thereby creating the kinds of services that are respectful of the diversity of their experience and identities.

Common to children and young people are worries about both their own mental health, as well as those of their friends and family. They talk about the impact and barriers that exist to getting what they describe as the 'right help'. Many young people have spoken about friends being suicidal, parents suffering with depression, struggles with stigma, lack of understanding, embarrassment and isolation.

The most prevalent issue young people raise is their role in supporting mates who have significant mental health issues whilst often trying to deal with mental health issues themselves. These informal support networks can often become overstretched and young people talk about the real barriers they face in getting adult help when they need it most.

Young people tell me that in their situations they are most likely to turn to their parents for help rather than to their school or other professionals. Young people discussed the reality that they receive mental health support when things reach a 'critical level.'

Whilst schools do offer young people an opportunity to seek assistance by talking to a school counsellor, young people felt that this limit to resources often made this inaccessible. They query the logic of this approach with comments like 'one counsellor for a whole public school?'

In relation to general health care, young people frequently raise issues of affordability including the cost of treatment and travel to appointments. They talk about how letting small issues escalate into major ones was often unavoidable because of the costs involved.

Children and young people come into contact with many helping professionals throughout their lives including teachers, counsellors and doctors. Others have involvement with more specialised service providers such as mental health professionals, lawyers and police. Being believed and listened to by these professionals is a priority for young people. Many feel they are not truly heard by adults; that they are seen either as a child to protect or as a risk to control, rather than as a thinking, feeling individual with much to offer.

Young people have their own ideas and want them heard and implemented. But they feel tokenised by political systems that are not truly engaging with them on issues that affect them directly. Whatever their circumstances, children and young people overwhelmingly want someone they can trust, along with access to information that is clear, simple, detailed and unbiased. That said, older children made it very clear that they did not want to be given information aimed at a five year old.

Young people have said:

- free health care is virtually non-existent, making health care highly inaccessible
- there are waiting lists that are often 'months and months' long
- they perceive that poorer quality health care is being made available to them
- they have difficulty affording hygiene products such as deodorant, toothpaste and soap
- navigating relationships and intimacy for the first time is scary and they feel unprepared
- they want to know much more about what to do and how to recognise abuse in their relationships and those of their peers
- seeking to access health care services relating to sexual health or mental health in regional towns may involve 'the whole town finding out about your problems'
- health care systems and services can be a hit-and-miss experience for LGBTBIQ+ young people, and services need to be more timely, accessible and informed
- services need to combine primary health and specialist options, and all services should be supportive and gender-affirming
- there is a need for female-centric spaces for teens to talk about health problems, as they don't always feel comfortable with male doctors or counsellors
- mental health support in schools is hard to access and is often ill-equipped to respond to students' needs, with schools on the whole unprepared to deliver the kind of mental health support young people want and need.

Values identified by children and young people as underpinning all systems and services

What this looks like at the plan level:

Women's Children's and Youth Health Plan 2020-2030

What this looks like at the service level:

SA Health Services

What this looks like at the practitioner micro level:

Health Practitioners

Kind

The new plan could recognise and uphold the rights of children and young people as active citizens, stakeholders and consumers, who require a range of approaches according to their different ages and stages of development.

Health services understand their role as Health Ambassadors in engaging children and young people into a positive relationship with the health system; one that increases the likelihood of early identification and preventative health to promote positive attitudes and behaviours over the life course

Health Practitioners recognising first impressions matter and that children and young people interacting with systems, services and people in a series of 'firsts' while a health professional may be doing something for the one thousandth time.

Inclusive

The new plan could actively address the specific barriers children and young people have identified as impacting on their health, including relationships and sexual health, violence, psychosocial support, and mental health first aid.

Health services need to look beyond age and acknowledge and validate the social roles and contribution of children and young people as workers, athletes, friends, umpires, volunteers, carers, etc. They need to assume the competency and capacity of children and young people reinforced in practice.

Health Practitioners asking about a child's life, identity and experiences, including their family dynamics, sexuality, and cultural or gender identity and not making assumptions around these important factors.

Participatory

The new plan could establish a Youth Health Network (YHN) to advise Local Health Networks (LHNs) about the priorities and issues raised by children and young people across the state.

Health services embrace their role in developing children and young people's health literacy, ensuring children and young people receive information in ways they can understand produced to suit various age levels.

Health Practitioners asking children and young people what the biggest issues and impacts are for them, and being responsive to what's most important, even when this differs from their own adult perceptions and personal experiences.

Trustworthy

The new plan could embed a real time contemporary, accessible and relevant feedback and complaints mechanisms policy across all state health networks.

Health services educate children and young people about confidentiality, privacy and consent and explain good data stewardship to ensure children develop an understanding of their rights.

Health Practitioners taking the time to listen to children and young people, believing what they say and taking their views seriously.

Respectful

The new plan could respect the diversity of children and young people through the development and implementation of:

- Whole of Government Menstrual Wellbeing Policy
- Gender affirming services and Specialist clinic
- Monitoring and reporting on whole of life outcomes for children and young people with chronic illness

Health services identify and implement a suite of ideas on how children and young people can feel seen, known and valued in healthcare environments.

Health Practitioners addressing children and young people directly with easy-to-understand information and options that respect their culture, identity and right to privacy.

Accountable

Monitoring and annual reporting on feedback and complaints from children and young people and the accessibility and impact of mechanisms against Youth Health Network (YHN) issues and priorities.

Health services include curated content from children and young people on a variety of communications strategies including age relevant information on display screens across hospitals, GP and community health settings.

Health Practitioners understanding, upholding and directly explaining to children their rights to good quality health care and their rights to be informed and to be heard.

Quotes from Health Services Presentation, September 2020:

- “ ‘Less homework, I think is very important because homework messes with my mental health, it makes me stress and I then I can't sleep and I get grumpy and sad and depressed. Because I want to spend time with my family and friends and be doing things I love and am happy doing and bring me joy! Thanks.’ (Age 11)
- “ ‘I think people should be accept other people with kindness, respect and honour.’ (Age 14)
- “ ‘[We need] a class where we learn from people who have experienced [mental illness] and gotten past it...’ (Age 14)
- “ ‘More education on mental health to help get rid of the stigma and know how and when to seek help. Better School counsellors. Professionals (should) take students seriously and be private.’ (Age 15)
- “ ‘There is a limited understanding [of] how to access mental health services among young people. Many resources such as a GP provided mental health plan are not made known to young people, who want to access this type of service but are unsure how to.’ (Age 15)
- “ ‘There is not enough support for children with mental health issues. While I have support now, I waited for months for this and during this time I was falling apart and nearly ended it multiple times and I believe my mental health worsened because of no support.’ (Age 15)
- “ ‘Train GPs better in mental health b/c I have been to 3 different doctors + had incredibly bad experiences w/ them and very belittled.’ (Age 16)
- “ ‘The waiting list is 6-8 weeks and many cannot pay for those services. Many of my friends have to choose between paying rent or treating their mental health problems which is not okay.’ (Age 16)
- “ ‘The reason I think we need more ‘reach out’ ‘facilities’ is because I know people with mental health problems... Everybody has a risk of getting depression, and don't know where to go for help. If there were more places to go for help, everybody would be happier and feel safer.’ (Age 17)