

All enquiries

Our reference: 17/6161

Sustainable Health Review Secretariat 189 Royal St EAST PERTH WA 6004

Dear Sir / Madam

WA State Government Sustainable Health Review

Thank you for the opportunity to comment on the Western Australian (WA) State Government's Sustainable Health Review (SHR) Terms of Reference.

As the WA Commissioner for Children and Young People, I have a statutory role to advocate for and promote policies, laws, programs and services that enhance the wellbeing of all children and young people in WA. My functions are set out broadly under section 19 of the *Commissioner for Children and Young People Act 2006*.

In performing my role the best interests of children and young people are my paramount consideration. I must give priority to, and have special regard to, the interests and needs of Aboriginal and Torres Strait Islander children and young people, and children and young people who are disadvantaged for any reason.

My office has undertaken significant work to better understand the physical and mental health needs of children and young people across the State, and made a series of recommendations relating to how these needs can be best met, which remain applicable today. This work has included the development of the *Speaking out about youth health* consultation with around 1000 WA young people; research and consultation regarding children and young people's wellbeing and reducing alcohol-related harm; the *Wellbeing Monitoring Framework* reports; *the Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia*, and the subsequent follow up report, *Our Children Can't Wait*, which reviewed how the recommendations of the Mental Health Inquiry had progressed. I recommend the SHR consider these documents as part of the Review process.

It is with the responsibilities of my role and the previous work and recommendations of my office in mind that I provide the following comments.

Social determinants of health

In considering how to achieve a WA health system that is patient-centred, accessible, responsive, coordinated and sustainable, I strongly encourage the review team to ensure a social determinants of health approach underpins every domain of the SHR. It is well understood that without addressing determinants such as the social, physical, and economic environments in which people live, strategies and interventions to improve the health of the WA population will be limited.

A social determinants approach requires a whole-of-government effort. To achieve this there must be stronger strategic partnerships within and between Commonwealth, State and Local Governments, and non-government organisations, and the delivery of better coordinated and integrated services across all regions of WA.

Focus on early childhood and adolescence

There is a growing understanding that positive physical and mental health in young people can provide a strong foundation for lifelong wellbeing. Young people who are healthy are more likely to achieve better educational outcomes, make a successful transition to work, develop healthy adult lifestyles, experience fewer challenges forming families and parenting children, and be actively engaged as citizens. Children and young people need to have a full range of programs and services available to them across the service and severity continuum, including promotion, prevention and early intervention, as well as the treatment of more severe issues.

Tackling health and wellbeing issues when they occur in childhood and adolescence is socially and economically more effective than dealing with enduring problems in adulthood. In a context of increasing pressure on health budgets and public spending, improving the health of young people helps to reduce future health care costs, protects previous investments made in child and maternal health and can ultimately contribute to a more sustainable health system.

Research overwhelmingly suggests that intervening in early childhood, and the antenatal period, is the most effective stage to impact the future health and development of children. To meet this priority area, parents and families must be provided with appropriate education and support to enable them to optimise the health and wellbeing of their children. I recommend there is a strong focus on antenatal, infant and child health matters within the SHR, to ensure priority is given to creating the best start for our children and young people.

The period of adolescence is also a significant time of developmental change. Young people have specific health needs that stem from the physical, behavioural, psychological and cognitive developments they are experiencing, including in areas such as sexual health and relationships, mental health, alcohol and drug use, body weight, nutrition and injury prevention.

During adolescence, young people form health-related attitudes and behaviours that can stay with them for life, making it a critical time for supporting positive health

practices. The opportunity to assess and respond to young people's psychosocial background including strengths and supports, and to detect underlying issues and risk factors is an essential step towards reducing adolescent morbidity and mortality.

I therefore recommend including adolescent health as a priority area in the SHR with a view to providing tailored approaches to the care of young people in children's, adult's, general and specialist hospitals, with particular attention to the transition from paediatric to adult services, and in other services in which young people receive health care. This also includes allocating sufficient funding and focus to meet the demand and type of services required for children and young people in both the Perth metropolitan area, and across regional WA.

Young people with experience of hospital care who participated in my office's consultation on youth health 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."

Services are also required to support young people as the severity and complexity of their needs change, particularly in relation to mental health service provision. It is recommended that step-up step-down facilities are designed to support young people who are either exiting hospital care, or who are requiring a higher level of service provision than can be provided at home. It is important these supports are flexible and determined by an understanding of the individual cognitive, emotional and developmental stages of a young person and their specific needs, rather than predetermined responses according to age or other categories.

Children and young people in regional areas

Significant gaps exist in regards to the services available for children and young people living in regional areas. As a result, many children and young people and their families are required to travel, often for extended periods of time, to the Perth metropolitan area or to other regional centres to access treatments. There is opportunity to further review the level of health service provision in regional areas, and prioritise funding and service provision based on the population of children and young people and service needs. I would also recommend utilising innovative and flexible models of service delivery and support, including the use of technology and developing the capacity of local workforces to respond to the health needs of children and young people in the regions.

Vulnerable children and young people

Dedicated programs, initiatives and capacity-building strategies are required to prioritise the needs of children and young people who are vulnerable and disadvantaged in any way. This includes workforce development for staff working with vulnerable young people; culturally secure service provision for Aboriginal children and young people; dedicated services or initiatives to improve the health service response for culturally and linguistically diverse children and young people; developing strategies and programs to meet the needs of children and young people in out-of-home-care, such as implementing the Rapid Response Framework; increasing funding to the Gender Diversity Service to meet the needs of transgender children and young people; building the capacity of the health workforce to support children and young people of diverse gender and sexuality; and collaborative initiatives for young people with other needs, for example, who are homeless, have a disability or who are involved in the justice system.

What children and young people say

The Commissioner's office identified youth health as a priority area of work in 2013 after hearing concerns from young people, parents and clinicians about the way health services were being coordinated and delivered. The office consulted more than 1,000 young people from diverse backgrounds in WA about their experiences and views of health services, including what works well and where they would like to see improvements.

The views of young people in the consultation and a review of other literature suggest that young people in WA have generally positive experiences with health services, particularly those staffed by professionals trained to work with young people; however there was identified room for improvement.

"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."

"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."

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

This highlights the importance of strengthening and promoting training and resources to support health professionals to establish youth-friendly practices and conduct broader wellbeing inquiries with young people. Efforts should particularly focus on general practitioners and school-based services.

Most young people in the consultation said they rely 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. Young people increasingly access health information and support online, before talking to someone about their health questions or concerns.

"[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."

"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."

However many young people express their preference for talking and interacting with a real person.

"It's better to talk to someone in real life, most of the time. They can give you a hug or something."

Given the prevalence of digital technologies and online information sources in the lives of young people, I support the SHR's exploration of digital innovation and new technologies to improve performance. Furthermore, I recommend greater investment in resources and health promotion campaigns to increase health literacy among young people and their families, their capacity to identify problems early and to understand how to navigate the health system and access services when needed.

Many young people in the consultation 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

"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."

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

"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."

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.

"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."

"[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."

"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."

The integration or co-location of services, and referral pathways between service providers, to provide holistic health and wellbeing support can go a long way to enabling greater access to health services and supports for young people and their families, and I encourage the review team to explore these as a mechanism for improving quality and efficiency of health care. Furthermore, to drive greater efficiency, safety and quality of care, a review of the collection, sharing and use of data on young people's health and wellbeing must be undertaken to guide policy and service development.

In addition to an increased focus on children and young people, it is important that they are involved as a stakeholder in the SHR processes. There is enormous value in including young people in planning and decision-making processes to achieve better policies, services and outcomes. Young people have unique insights into issues, can offer creative solutions and can help ensure services are relevant and sustainable. I therefore recommend that children and young people are given the opportunity to participate in the SHR processes.

"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."

The Participation Guidelines developed by the Commissioner's office are a useful tool in determining how to engage with children and young people, and involve them in the decision-making process. They are available on my office's website: www.ccyp.wa.gov.au.

WA Youth Health Policy

My office has been advocating for and supporting the current development of the WA Youth Health Policy by the Child and Youth Health Network, which sets priorities and strategies for optimising the health and wellbeing of WA young people. I have emphasised the need for the policy to include an outcomes framework which will be actively monitored and reported on, to ensure there is robust accountability and transparency, and to measure the impact of the policy. I have also advised on the need for the policy to outline mechanisms to ensure there is cross-government commitment to, and implementation of, the policy, as service integration is critical to achieving positive gains in youth health.

In summary, the priority areas I recommend to ensure a focus on children and young people in this review are:

- Youth mental health
- Early childhood programs and services
- Adolescent health services that respond to young people's needs in developmentally appropriate ways
- Accessible and culturally secure health service provision for children and young people in regional areas and those who are vulnerable for any reason
- Use of digital technologies to engage young people in the health system
- Participation of children and young people in the design and delivery of health services, supports and policies.

I remain committed to advocating for these important areas of youth health. Policy makers, service providers, researchers and young people all have important roles for further advocacy and reform. A collaborative approach by these stakeholders and a shared commitment to young people's health can shape a clear path for youth health within the WA health system. In order to achieve sustained improvements, there must be robust oversight of the recommendations developed by the SHR, to ensure progress and achievements are regularly monitored and reviewed.

Thank you again for the opportunity to comment on SHR Terms of Reference. Should you wish to discuss any of these matters in more detail, please contact me on or via info@ccyp.wa.gov.au

I include copies of my office's publications on youth health and mental health to accompany this submission.

Yours sincerely

COLIN PETTIT

Commissioner for Children and Young People

20 September 2017