



YOUTH HEALTH ASSESSMENT



LEARNING OBJECTIVES.

At the end of this training, participants will be able to:

- Identify and demonstrate effective communication and engagement skills with young people.
- Understand principals of confidentiality.
- Describe why HEeADSSS is an essential tool to use in youth health.



WHY WORK WITH YOUNG PEOPLE?

Young people are resources to be developed, not problems to be solved”.

Pittman

ENGAGEMENT

- Attitude is important

Be...

- ✓ Yourself
- ✓ Caring
- ✓ Approachable
- ✓ Good at listening

BUILD A TRUSTING RELATIONSHIP

- Confident welcome
- Respond openly to adolescents initial reactions & feelings
- Clear introductions: yourself, your role, what you'll be doing & why
- Clear boundaries
- Outline confidentiality

CONFIDENTIALITY

Three exceptions must be made clear to the young person and their caregivers

1. harm to self
2. harm to others
3. Others harming you

It is Ok to set clear boundaries

- What is negotiable
- What is not negotiable (3 harms)

WHY CONFIDENTIALITY IS IMPORTANT

Provides safe environment for the young person to disclose information

Helps build trust and honesty

- *Assuring confidentiality indicates respect*
- *Maintaining confidentiality is a measure of honesty*

THE HEEADSSS ASSESSMENT

- A widely utilised model
- Well known in NZ context
- Adds to rather than replaces other professional assessment models
- It is a process. We use this tool every time we see a young person

HEEADSSS PROVIDES:

- An opportunity to develop rapport
- Develops an overview of the young persons risk and resiliency
- Assists the professional to cover their strong areas as well as their gaps
- A clinical impression of risk
- Ensures intervention and follow up is appropriate and maximally effective

HEEADSSS-THE ADOLESCENT PSYCHOSOCIAL ASSESSMENT

- H-Home
- E-Education/employment
- e- eating
- A-Activities(peer group)
- D-Drugs
- S-Sexuality
- S-Suicide/depression
- S-Safety

HEEADSSS-DO ASK

- *If you don't ask they won't tell* (Blum)
- If you do ask, in the right way at the right time they usually do tell
- Do ask even if you think you know the answer
- If you are not convinced, try it out

COMMUNICATION: ASKING QUESTIONS

Offer explanation for, ask for permission for questions

Normalise

- *There are some questions I ask all young people because they are important to their health*

Or follow the cue (if there is one)

- *I notice that.... I am worried that...*

If you get a positive

- *Tell me about that*

COMMUNICATION: ASKING THE QUESTIONS

- Don't be afraid to have an agenda and provide structure to the interview
- Move from less sensitive to more sensitive topics
- Move from the third person to the personal

ESSENTIAL QUESTIONS-HOME

- ✓ Who lives with you?
- ✓ Where do you live?
- ✓ Do you have your own room?
- ✓ Who are you closest to at home?
- ✓ Who can you talk to at home?
- ✓ Is there anyone new at home? Has someone left recently?
- ✓ Have you moved recently?
- ✓ Have you ever lived away from home? (Why?)



ESSENTIAL QUESTIONS EDUCATION/EMPLOYMENT

- ✓ What are your favourite subjects at school?
- ✓ Your least favourite subject?
- ✓ How are your grades? Any recent changes?
Any dramatic changes in the past?
- ✓ Have you changed school in the past few years?
- ✓ What are your future education/employment plans/goals
- ✓ Are you working? Where? How much?



ESSENTIAL QUESTIONS-EATING

We need to remember to ask about eating, however there is little evidence based interventions that work when dealing with young people and obesity or eating disorders

- ✓ What do you like and not like about your body?
- ✓ Have there been changes in your weight?
- ✓ How much exercise do you do in an average week?
- ✓ Have you dieted in the last year. How? How often?



ESSENTIAL QUESTIONS-ACTIVITIES

- ✓ What do you and your friends do for fun? (with whom, where and when?)
- ✓ What do you and your family do for fun?
- ✓ Do you participate in any sports or other activities?
- ✓ Do you regularly attend a church group, club, or other organized activity?



ESSENTIAL QUESTIONS-DRUGS

- ✓ Do any of your friends use cigarettes? Alcohol? Or other drugs?
- ✓ Does anyone in your family use cigarettes? Alcohol? Or other drugs?
- ✓ Do you use cigarettes? Alcohol? Or other drugs?
- ✓ Is there a history of alcohol or drug problems in your family?
- ✓ Does anyone at home use cigarettes?



ESSENTIAL QUESTIONS-SEXUALITY

- ✓ Have you had sex education at school
- ✓ Have you ever been in a sexual relationship?
- ✓ Tell me about the people you have had a relationship with? OR tell me about your sex life?
- ✓ Have any of your relationships ever been sexual?
- ✓ What does the term 'safer sex' mean to you?
- ✓ Have you ever been touched sexually by someone when you didn't want to be?



ESSENTIAL QUESTIONS- SUICIDE & DEPRESSION

- ✓ Do you feel sad or down more than usual?
- ✓ Do you find yourself crying more than usual?
- ✓ Are you 'bored' all the time?
- ✓ Are you having trouble falling asleep?
- ✓ Have you thought a lot about hurting yourself or someone else?



ESSENTIAL QUESTIONS-SAFETY

- ✓ Have you ever been seriously injured? (How?)
How about anyone else you know?
- ✓ Do you always wear a seatbelt in the car?
- ✓ Have you ever ridden with a driver who was drunk or high? When? How often?
- ✓ Do you use safety equipment for sport or other physical activities (eg bike helmets)
- ✓ Is there any violence at your school? In your neighbourhood? Among your friends?
- ✓ Have you ever been physically or sexually abused? Have you ever been raped, on a date or at any other time? (If not previously asked)

OARS

Open ended questions

Affirmations

Reflective Listening

Summary Statements



Jane come to see you where you work. She is 17 old NZ European young woman. She tells you she has been having sex without condoms or other contraceptive.

She is ambivalent about getting pregnant. She has recently dropped out of school and feels like it might be a good time to have a child since she is not doing anything else.

She has had a steady boyfriend in the last few months who is encouraging her to get pregnant. She lives with her mother who does not know about this.

Use Motivational interviewing/ OARS to discuss the situation with the teenager and attempt to increase

OARS

Good things about having a baby?

Not so good things about having a baby?

- Sione is a 14 year old Tongan young person who has been seen at clinic for school refusal and behaviour issues.
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- Sione is well built, height 5ft 9 “ and weighs 120kgs. He has been shaving for the last year. He has been teased about his body odour and weight.
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- He hates his parents thinks that they are boring and doesn't understand why he can't spend time with is best friend. Will often go to friends home and not tell his parents, has stayed overnight and not informed his parents. Has three younger siblings all girls but thinks they're boring too. Only enjoys playing x box and watching tv at home. He is also refusing to attend church with his parents.
- Hates school refuses to go back. Doesn't know why he has to go. Wants to be an All Black. Not participating in sport at the moment used to play at primary school.
- Has been getting into lots of fights at school, not his fault, blames the other kids for causing them. When he is told off he cries and thinks the teachers pick on him.

PRINCIPLES OF INTERVENTION

- Plan and allow time to finish, provide a brief summary, opportunity for questions
- Help young people define the options and make choices
- Based on young persons level of risk
 - Decrease risk factors
 - Increase protective factors
- Possible foci: environment & social context, family, individual

KEY TO EFFECTIVE INTERVENTION

- A positive relationship
- Thorough assessment
- Inclusive of family & young person
- Plans made with the young person & family
- Move from a risk focussed “fix youth” to a healthy youth development , interacting & connecting with youth offering opportunities & support