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Sandwell Adolescent Health Needs Assessment

Executive Summary



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- Workers from a range of organisations, who helped organise the research and access to young people.

We are very grateful to all these individuals and groups, and hope that they find the information collected useful and interesting.

Executive Summary

Aim of the project

This project was commissioned by Sandwell Primary Care Trust (PCT) and undertaken by Young People in Focus. Following a competitive tendering process, YPF was awarded a contract to undertake an adolescent health review in Sandwell, over an eight week period at the end of 2009. The aim was to feed the findings into the adolescent health strategy that is currently being prepared by the PCT.

Methods used and information collected

There were three elements to the project:

1. A review of national adolescent health policies and strategies, and local health data, strategies, and services. This included the identification of any initiatives or approaches being undertaken elsewhere in the country, and that could be implemented and/or modified for use in Sandwell.
2. Interviews with a range of stakeholders locally, to explore their views on young people's health needs locally, what is working well, and what the priorities for the future should be. In total 10 stakeholders were interviewed.
3. Recruitment, training and support of a group of young researchers in Sandwell, to undertake research into adolescent health with other young people locally. A diverse group of six young people aged 15-21 were trained as Young Researchers. They undertook research with 62 young people, asking about the health needs of young people locally, what constitutes a 'healthy' young person, and how services can be made more young people friendly.

Main findings

Strategy, data and services

- The main strategies and policy drivers from government, which aim to improve adolescent health, were identified. The key areas included: tackling substance misuse, improving responsible and safe drinking, promoting physical activity, and reducing obesity.
- Sandwell statistics were summarised in the report. Key information includes: rates of poverty and deprivation are high in Sandwell; in addition rates of obesity, smoking, and teenage pregnancy are higher than the national average.

- The Sandwell Children and Young People's Thematic Partnership Plan 2009-12 was detailed. It identifies key adolescent health plans and ambitions, with a focus on key groups such as young carers and looked after young people.
- Possible gaps in local provision were identified, including: A more dynamic approach to tackling underage drinking and binge drinking, particularly amongst vulnerable young people with low aspirations; trialling innovative sexual health services that address teenage pregnancy in a preventative way; support services for young fathers; mental health support for young people from Black and minority ethnic groups; holistic support for young people at risk of becoming, or already involved with crime.
- A range of adolescent health projects that could be trialled in Sandwell were identified. These included, for example:
 - Breaking Barriers – a project that uses digital storytelling to help 'difficult to reach' members of the community to share their stories. The project has been particularly successful in highlighting the dangers of risky, binge drinking.
 - Teens & Toddlers Project - T&T works with vulnerable young people to help build their skills and resilience in order to prevent early pregnancy. Throughout a 20-week course, teenagers work in nurseries and in a classroom setting to learn about child development, parenting skills, sexuality and relationships.
 - Sleepin Safe, Sexin Safe - run by the fpa, this is a new project promoting sexual health choices for homeless young people in the North East and London.

Stakeholder views

Needs and issues of young people locally included: poverty and deprivation; poverty of aspiration; low self-esteem; alcohol, drugs and smoking; sexually transmitted infections (STIs) and pregnancy; obesity, poor diet, lack of exercise.

Services and activities working well included: the Drug Education, Counselling and Confidential Advice service (DECCA); dental health; sexual health services; engagement of young people in decision-making; healthy schools work.

Priorities for the future included: early identification of young people at risk (with GPs seen as crucial); better signposting of services to young people; more counselling and advice services, in accessible locations;

support for young fathers; address street safety; better alcohol services.

What young people think about Health

- The main health issues identified by young people were: drugs, drug abuse and addiction; smoking; alcohol, binge drinking and alcohol abuse; poor diet and junk food; street crime, stabbings, shootings and gangs; pregnancy, under-age sex and abortion; STIs; obesity; poor fitness and lack of exercise; mental health problems and depression; litter, pollution and graffiti.
- A healthy person was identified as someone who: does not binge drink, smoke or take drugs; is fit and takes exercise; eats a healthy and balanced diet; is hygienic and washes regularly; has good sexual health and relationships, and does not get pregnant at a young age; is happy and emotionally and mentally stable.
- Young people were prompted to think about their health and do things differently as a result of: they or someone they knew becomes ill; TV programmes and advertisements; their physical condition during sport and exertion; things they see in magazines, on radio and the internet; comments from friends and family; comparing themselves with other people; getting advice from GPs or other health professionals.
- Health advice and services for young people locally were identified as including: the GP; local hospital; family planning clinics; dentist; Brook services; the Lyng; DECCA; Connexions; and the local chemist or pharmacy.
- Services could be made more young people friendly by: having friendly and welcoming staff; seeing the same person on each visit; ensuring confidentiality; not criticising young people or making them feel awkward.

Peer Research

Very positive feedback was received from the Young Researchers in relation to their involvement in the project. A number of positives about the peer research process are identified, in addition to some challenges and issues to be considered if this model is to be used in the future.

Recommendations

In relation to gaps in services, innovative projects that could be trialled, and stakeholder views:

- **Gaps in services identified** above need to be discussed and addressed.
- **Some of the innovative projects outlined in the report could be trialled in Sandwell**, if necessary on a small scale and as pilots. They must be evaluated in order to inform any future roll out.
- GP's were identified by young people and stakeholders as key settings for providing young people with health advice, information and support. **More training and support needs to be provided to GPs**, in order to help earlier identification of young people at risk. This would also enable GPs to signpost young people to advice, and to communicate more effectively with them.
- There should be **more work with parents and carers of young people** in Sandwell. This should focus on reinforcing and encouraging positive health messages and work undertaken in other settings.
- Work needs to be undertaken in relation to **young people's perceptions and experiences of street crime, gangs, and use of weapons**. This should involve the police (amongst others), in order to address the reality of the situation and make young people safer.
- There needs to be a **greater focus on supporting young fathers (and fathers-to-be)** in Sandwell. A variety of strategies and project ideas are included in YPF's young fathers website www.youngfathers.net
- There needs to be **a renewed emphasis on raising aspirations of young people in Sandwell**, enabling young people to experience and consider alternative prospects and lifestyles to those pursued by many young people locally.

In relation to future peer research work, recommendations include:

- The recruitment and training of the Young Researchers went very smoothly, and they undertook some excellent research in the short timescale available. If they undertake further research and consultation work, **the young people will require additional training and support**. Specific topics to address include: probing and getting more detail during fieldwork; ethics; and boundaries.

- If the Young Researcher work is continued, it is likely that some of the existing six will move on to other things, or choose not to take part. Therefore there needs to be ***a rolling programme of recruitment and training of peer researchers.***
- ***Additional research needs to be undertaken with groups*** who were not included in the project, because of the short timescale involved. This includes young offenders and young carers. All these groups are likely to have specific health needs.