



School Based Health Services Enhancement Partnership
National Youth Committee of School Based Health Services
August 27 – October 31, 2021

Overview

Services are designed with young people for young people.

Youth need to be considered significant agents of change in services that have a direct impact to their health and wellbeing. The development of leadership contributes greatly to the positive development of young people and their communities. Te Tatau Kitenga understands the importance to connect to youth in a variety of forms and arenas including governance such as a National Youth Advisory Group.

Te Tatau recommendations strongly advocates for rangatahi/youth to be included in leadership and governance as equal partners in the Stakeholder partnership group. Te Tatau undertook this engagement with rangatahi/youth that participated in their focus groups and/or known within same communities to form the National Youth Committee of SBHS 2021.



Membership

Name	Yr	School	Region	School Leadership Roles
Davontae Bristowe	13	Tikipunga High School	Whangarei	Head Boy
Savannah Cowan	13	Kamo High School	Whangarei	Head Girl
Koby Kelleher	12	Te Kura Kaupapa Māori o Kaikohe	Kaikohe	
Joyce-Ann Kapa	12	Te Kura Kaupapa Māori o Kaikohe	Kaikohe	
Pranav Nair	11	Aorere College	Auckland	Haroua Rōpū Leader
Moana Tongotongo	12	Aorere College	Auckland	Haroua Rōpū Group
Miracle Laga'aia	12	Hastings Girls High School	Hastings	Pacific Leadership Group
Sekolastica Brown	13	Flaxmere College	Hastings	Pacific Leadership Group
Jacob Siasosi	12	Taradale High School	Napier	Pacific Leadership Group
Georgia Dearing	12	Taradale High School	Napier	Student Council
Mila Botica	13	Motueka High School	Nelson	Community Services Leader
Astrid Sayer	11	Nayland High School	Nelson	

Stakeholder Partnership

We understand each stakeholder has leading documents that inform their mahi and will contribute to the Enhancement of SBHS and the collaborative efforts this will take. However, we understand the overarching strategy for all stakeholders is the Child and Youth Wellbeing Strategy which informs the 'Why' do we want to invest in rangatahi future.

We understand outcomes will be based around this strategy and have provided our kōrero on what it means to us.

Strategy	Child and Youth Wellbeing Strategy
Key message	What does it mean to be happy and healthy?
What works?	<ul style="list-style-type: none"> • Connection to people • Safe environment • Coping strategies • Mental & Physical health needs met • Support system • Fun and rest • Know services are available
What doesn't work?	Older generation seeing youth as lazy, not understanding current stressors <ul style="list-style-type: none"> • Invalidation of own challenges • Makes some youth not realise they need help

This has been a compelling opportunity for each of us and feel our voice is prioritized, powerful, and equal. Over the two months National Youth Committee was formed we met nearly every week via Zoom with Te Tatau led support in lead up to two full day hui with Te Tatau Kitenga (September) and Stakeholder Partners (October).

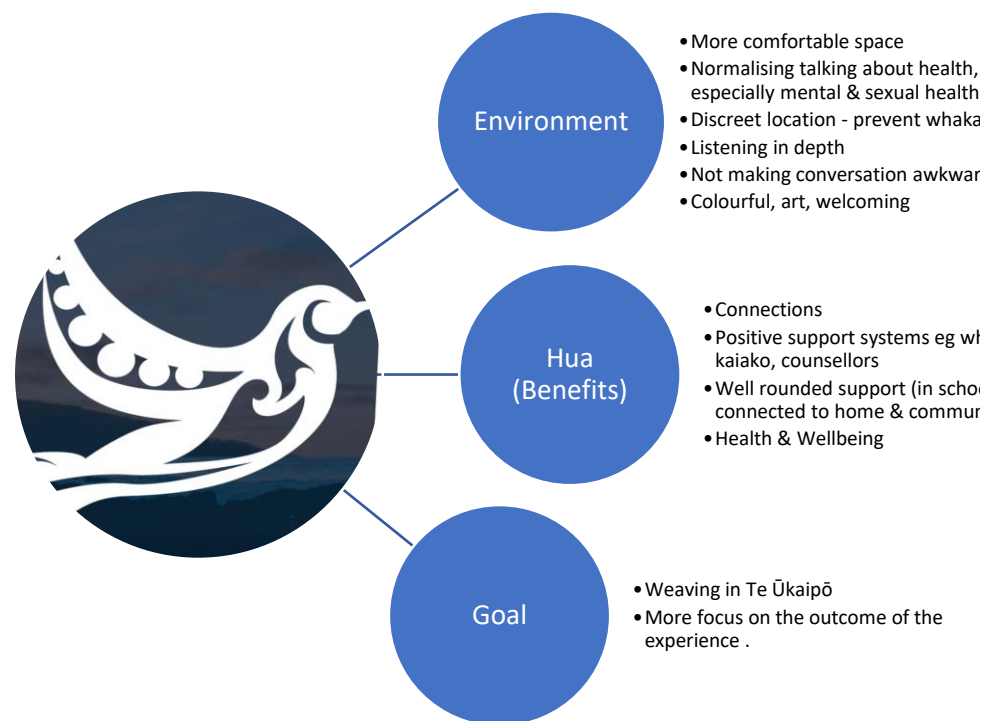
From this opportunity and leadership experience in schools we strongly support continuance of a national youth committee as an equal partner. Our shared kōrero shows in our short time together we felt valued and achieved the goals we set for this group:

- Our voice is **HEARD**
- We are equal partners and feel **FULFILLED**
- We are all **EXPECTANT** of what is next.

In summary, we are keen to know what is next and will it shape up to what we need:

- **A supportive culture around accessing SBHS so services are accessible without barriers.**
- **All rangatahi youth in Aotearoa NZ, no matter what education they're receiving, or their background have access to all health services.**
- **The environment which rangatahi receive SBHS should be safe and comforting.**
- **A system that caters to all and isn't a "One-Size doesn't Fit All" approach.**

A. What Youth Need Out of Health Services



i. Video skits *(stored with Te Tatau Kitenga)*

We thought it was easiest to demonstrate what we know is happening in schools and also to show how it could be improved.

It would be preferred that members of National Youth Committee are present when the video skits are shown to lead kōrero and answer pātai.

ii. Kōrero

From Skit - Now:

- **People don't know where to go**
- **Stigma about going to see a counsellor**
- **Receptionist isn't welcoming**
- **Regarded as a number**
- **Counsellor also regarding the student as number and not as a human being**
- **Not really listening to the student**
- **Not treating the student with any respect**
- **Counsellor is using their own past experience to invalidate the student's current experiences**
- **Not giving the treatment/help they are asking for**
- **Using low resources as an excuse to not give the student**
- **Low staff**
- **Lack of services**

From Skit - Ideal:

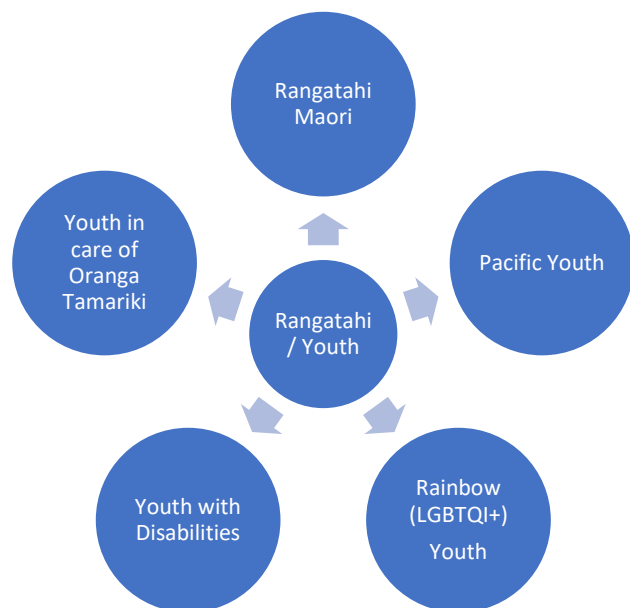
- **People know about where they can go to seek support**
- **No stigma of going to Counsellor as it is a 'Student Hub' with multiple care options such as physio, counsellor, guidance counsellor, sports uniforms etc**
- **offer options of seeing either male or female counsellor depending on preference, whether it's their preferred gender or someone they feel comfortable**
- **confidentiality**
- **making students and friends who want to support, feel comfortable and welcomed at all times**
- **students are more than a statistic and do not feel as though they are a burden**
- **counsellors are understanding and don't use their experiences to invalidate students' feelings**

My Experience:

I've been a student who has gone through Mental Health issues in the past and has overcome them, but I still face quite a few today. However, it wasn't as easy for me to overcome the problems I met during that time as how I deal with them now. I faced difficulties of being judged or labelled as "the depressed one," but later on, I had to realise I'm not the only one who goes through this, and there are many other students like me who don't dare to talk about their issues like how I do to people. I had to educate my friends and other students about this, and this is bigger than they think it is, and many others go through it, and they may also go through it but don't show it. This goes for the same for sexual health and myself, who hasn't had any problem with sexual health but has mental health; I guarantee the talk will be similar. Hence, I want the discussion about Mental Health and Sexual Health to be normalised slowly in the future, and I can guarantee it will.

B. Under-Represented Groups

i. Priority Groups for Enhancement of SBHS



ii. Kōrero

There are countless under-represented groups that have not been mentioned who are also affected in Aotearoa NZ under a 'one-size fits all' healthcare system designed for Pakeha.

We struggled to decide on how to speak about underrepresented groups, without 'othering' them. We then realised we lack the cultural competency to define all groups affected appropriately and accurately such as the disabled community or homeschooled students. During the

short time we were together we were unable to either consult or have someone from these groups within our committee.

Some initial whakaaro from the National Youth Committee on engaging rangatahi/youth includes:

1. Engage with rangatahi through focus groups or directly
 - a. not surveys (creates barriers and limitation of who is participating)
 - b. Principals/senior leadership can gatekeep and only use students that will make school look good or same students all the time
2. National Youth Committee suggestions
 - a. Tap into head students/prefects who tend to know what students are working on or groups to engage (gather feedback)
 - b. Feed this feedback into National Youth Advisory Group who are equal stakeholders

This is our whakaaro and experiences in some key areas:

1. Cultural Barriers	
Challenges	<ul style="list-style-type: none"> • For Māori, we see a disproportionate outcome for healthcare in Aotearoa, including for rangatahi in schools. • Our current systems do not have enough focus on specific services to different people. <ul style="list-style-type: none"> - One problem that stays relevant for these groups is the lack of understanding they receive. - Cultural differences can often become a barrier within healthcare. - Inadequate understanding from a health professional of cultural differences can result in the wrong approach being taken for an individual. - Having more Māori/Pasifika counsellors and nurses would ensure they will be able to grasp a better understanding of the struggles that Māori/Pasifika students face, along with additional underrepresented groups also struggling with a lack of cultural understanding from current SBHS.
Enhancements	<p>Providing healthcare professionals (including school counsellors) of different ethnic backgrounds in schools would help provide a safer environment for individuals also from different backgrounds.</p> <p>Creating services that are specific to these people is necessary for an effective school-based healthcare system.</p>

2. LGBTQI+	
Challenges	<ul style="list-style-type: none"> • For the LGBTQI+ we have noticed a lack of representation in schools, as well as acknowledgment towards students who may identify themselves with this community. <ul style="list-style-type: none"> ○ Due to this, it has excluded these students from being provided health services that fit their needs. ○ Sexual health services are currently more focused towards heterosexuality, so students may not have their full needs met if they are not a part of this majority. • Health and wellbeing issues for an LGBTQI+ student may not be treated properly, or at a level of understanding the student may need under our current SBHS systems.
Enhancements	<p>Services such as creating inclusive council groups can help make these environments not only feel more inclusive but help encourage these students to seek help.</p> <p>By having health professionals who are a part of the rainbow community, the process becomes a lot easier for students:</p> <ul style="list-style-type: none"> ○ having someone who has gone through similar struggles due to systemic barriers can help make the process of understanding one another a lot easier, ○ having LGBTQI+ more normalised throughout schools can open up the conversations of sexuality (for example having schools celebrate pride month).

3. Disabled community	
Challenges	Making things a lot more accessible not only through the physical barriers but also through being inclusive would be beneficial for the disabled community. This could be through installing elevators as it's more convenient.
Enhancements	<p>Not all people of disability have the same privilege as others.</p> <p>With an environment put in place in schools where they could go to when they are low, or just having a disability specialist in schools to support them as they can relate to what they are feeling, will also create a sense of belonging and can improve on their well-being.</p>
4. Low socio-economic groups	
Challenges	<ul style="list-style-type: none"> • In low socio-economic groups, mental and physical healthcare are often more difficult to access. • For rangatahi, this means that individuals may not receive the support they need in school due to this
Enhancements	<p>Providing more free services in schools gives an opportunity for students who are financially struggling a reach out for help.</p> <p>Making services, such as counseling easier to access can help lift stress off of these students.</p>

	<p>Would help in bettering their futures and be beneficial:</p> <ul style="list-style-type: none"> ○ through making things like bus assistance more available for students who are unable to afford transportation cost due to living location, ○ for students who work and go to school or who are having problems with schools' cost and people who don't attend a school site (eg who may be Homeschooled, attend Te Kura).
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My Experience:

For example, there's a student with disability who attends my Kura. This young lady always receives awards at prizegiving, unfortunately she cannot walk across the stage to shake her principal's hand and get awarded her certificate for hard work and dedication, because the stairs have been a barrier for her every year.

If stair lifts and elevators were put in place it would make her more comfortable when receiving an award as she is receiving her award the same as her peers.

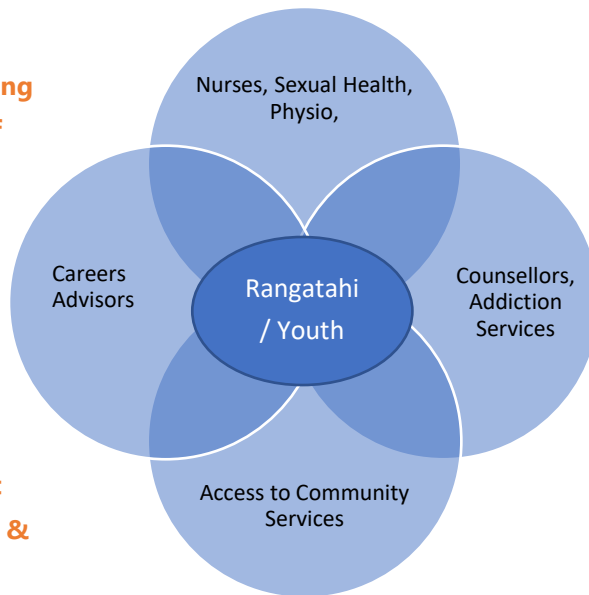
My Experience

With my personal experience through our own SBHS I had faced many problems with confidentiality and clashing cultures. For example I had gone through one of our school counsellors and was immediately greeted with my parents being called and random teachers being pulled into my sessions. The teacher that was there in this had instantly started looking at me and treating me different to usual. This experience messed with my trust with this counsellor.

My first experience with my SBHS had showed no sort of relatability as I was instantly bombarded by my counsellor to consult my auntie. I constantly explained how my family doesn't understand the concept of the things I was going through but had instantly called my parents and had a random teacher come sit in while she was telling my parents about my problems. If I were to have a Samoan counsellor they would of understood the fact that my parents wouldn't know about the things I was going through. The counsellor insisted that she was doing the right thing and would make things better but my parents not being educated made it worse for me and my family.

C. Our Ideal SBHS Hub

- Designated building
- Different types of services
- Easy to access & utilise
- No stigma/whakama
- Seeking help is normalised
- Safe environment
- Youth feel valued & accepted



i. Kōrero

There has been a lot of talk about review and services. As youth, we think a lot about action, how will this play out? And what will it look like in our schools?

Challenges

One of the main issues for youth, is accessing the health services.

This includes:

- Knowing where the services are and how to get there?
- No whakama around going – “remove that stigma”- we are valued, and our problems **DO** matter
- Knowing what services are there? (eg what’s there, who’s there). This can be done in an assembly or presentation from all SBHS workers at the beginning of the year.
- Communication around what is available? eg told on arrival to school, as a year 9 student, assembly

My Experience

At school I was struggling with my mental health. I wasn't coping with school pressures but could not talk with anyone at home as didn't want to disappoint my family. I did not feel I could trust or relate to the school counsellor and nurse. It wasn't until the School Principal came to me because she could see I was not coping that I opened up to talk. I felt I could trust the School Principal and felt she understood my cultural background. This relationship made a big difference for my mental wellbeing.

In an ideal world, we see a youth health service hub, where barriers are removed, and all youth can and do access all types of school-based healthcare.

- a. Judgement free - if you ask a school nurse for contraception, they should not impose their ideas on you or 'disprove' they should provide what we need as youth.
- b. Nurses - we discussed that it would be great to have nurses of multiple genders, as some youth feel comfortable with the same or different gendered people to speak to.
- c. Physio - with sports, PE, and Outdoor Education classes in schools, it only makes sense to have an in school physio available to students. We understand this might be hard, but even a physio for each area or region who could do like one day a week could work?
- d. Counsellors - Multiethnic, various genders e.tc., to make it more relatable. Confidentiality is an important thing for us as youth, and for everyone. One of the big barriers and reasons for youth not to access health services in their school is the thought that the counsellor will share it with someone. This barrier needs to be overcome, to improve health services in schools.
- e. Access To Community Services - SBHS should direct youth in the direction of other community services available to them, e.g., pharmacies, family planning, sexual reproductive health services, doctors and DHBs etc
- f. Careers Advisors - School is stressful, along with the added stress of trying to gain NCEA in a world where lockdowns are our new reality is hard. So, careers and school advisors are important services to be able to access in school. This also helps to remove the stigma of accessing health services, instead, youth can attend the Hub to access a variety of services, so someone could be going for any number of reasons, (e.g., to get a uniform)
- g. Sexual Health Services - Not only should a sexual health service be able to give all students contraceptives but also educate them what is safe sex and how. This is especially necessary for religious schools as many of the families are unwilling to educate/encourage this.
- h. Addiction Services - many young people struggle with addictions, it's important to mention and remember this in this upgrade. How will the SBHS help them? We haven't heard what the improvements of SBHS will improve for youth struggling with addiction.

Citation: Society of Youth Health Professionals Te Tatau Kitenga. [2021].
[National Youth Committee Report of School Based Services 2021].

Published in [2021] by the SYHPANZ Te Tatau Kitenga
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