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*ARE RUNNING THE PARTY STUDY: impact of health risk screening and counseling of
young people 14-24 yrs in primary care*

Adolescence is a critical time in life where health trajectories can be influenced. There is great potential for changing unhealthy life courses with conducive social, economic and political environments and with appropriate health interventions.

The greatest causes of years of life lost due to death and disability in the 12-24 year old age group are road traffic accidents, suicide and mental health problems, most commonly depression and substance abuse. These psychosocial problems and others tend to cluster in individuals so when a young person smokes for example, they are to varying extents also more likely to drink alcohol, use marijuana, have unprotected sex and have a psychiatric problem. Furthermore most adults with mental health problems and lifestyle risks such as obesity, smoking, substance use and unprotected sex had their first experiences with these during adolescence. The significant feature of these problems is that harms resulting from them are preventable if they are detected and intervened with early.

General practice is the most often used health care provider for young people with over 80% visiting at least once a year. Australian studies show that while one in four young people in the general population will suffer at any one time with psychological problems, the prevalence of these problems in young people sitting in the waiting room of a general practice is likely to be double this. Yet the reasons young people usually attend is for physiological reasons such as respiratory, skin and musculoskeletal conditions. The only way general practitioners or practice nurses will detect other problems is if they ask about them.

General practice professionals after training, appreciate the importance of screening and certainly alter their practice to accommodate it, yet have cited the time required and lack of re-imburement as barriers to sustaining this work – particularly for practice nurses whose income is often tied to the functions they perform that receive a Medicare rebate.

There is promising evidence emerging from the US about the benefits to young people's health of screening and providing follow-up care in 14-15 year olds at risk of accidents, unprotected sex and substance use. The PARTY study (Prevention Access and Risky Taking in Young people) will provide evidence on the effects of risk screening and follow-up of a wider age group (14-24 years) in the Australian context. This research has funding through The Australian Primary Health Care Research Institute and The Australian Health Ministers Advisory Council and beyondblue and is the first of its kind in Australia. The results will help inform policy and practice this area, including in the financing of it, such that the GP alone or collaboratively with their practice nurse can detect and intervene early with those at risk of premature death or disability due to preventable causes.

For more information on being involved in the PARTY study contact: Dr Lena Sancj by email l.sanci@unimelb.edu.au or Kitty Novy on 03 8344 4538 or Email: k.novy@unimelb.edu.au or FAX 9347 6136