



## Youth Friendly Care: Engaging with Teens

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### Disclosures

- I have no commercial relationships
- I will not discuss off-label usage of drugs


### Objectives

- Review key neurodevelopmental changes of adolescence
- Recognize strengths
- Privacy & confidentiality
- Reducing barriers
- Resources



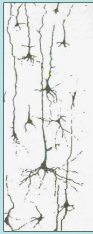


# I LOVE ADOLESCENTS

- Jon



### Synaptic Pruning

Synaptic Density

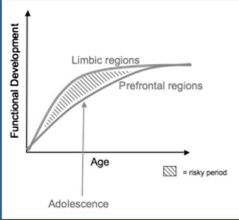
At birth	6 years old	14 years old
		

Source: Rethinking the Brain, Families and Work Institute, 2008; Shatz, 1997; Families Network Guide

Shore 1997 Families and Work Institute

### Adolescent Brain Development & Risk Taking

- Unbalanced development btw limbic system & prefrontal cortex
- Heighted emotional response, reward seeking, impulsive
- Hot cognition & cold cognition
  - Hypothetical, moral decisions → logical cognition
  - Immediate personal decisions → emotional response



Casey 2008 *Ann NY Acad Sci*; Spear 2013 *JAH*

### Exaggerated Amygdala Response

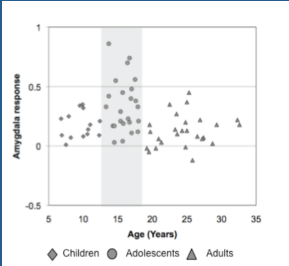
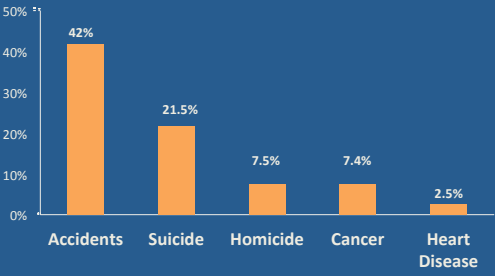


Figure 2. Exaggerated Amygdala Response in Adolescents. Amygdala response to empty threat (fearful faces) as a function of age. Adapted from Hare et al., 2008

### Causes of Death In Canadian Youth, age 15-24, 2008



Cause of Death	Percentage
Accidents	42%
Suicide	21.5%
Homicide	7.5%
Cancer	7.4%
Heart Disease	2.5%

Statistics Canada, Canadian Vital Statistics, Death Database, 2008

### Strengths Based Approach

- Contribution
- Confidence
- Competence
- Connection
- Character



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Little, R. Positive Youth Development

### Engaging Youth in the Visit

- Set the stage once
- Interview alone (partially)
- Move from less private topics to more private
- Show respect *and* concern for risks
- Listen
- End on a positive note

Adapted from Ken Ginsberg

### Setting the Stage



- Focus on the youth
- Discuss confidentiality and its limits
- Lay out the agenda with youth input
- Use clear language and open ended questions
- Promote honesty & trust
- Be non-judgmental
- Help her reach her goals while keeping her safe

Adapted from Ken Ginsburg, [www.fosteringresiliency.com](http://www.fosteringresiliency.com)

### What do Teens Want?

- Hand washing
- Clean instruments
- Honest
- Respect toward teens
- Cleanliness
- Know-how
- Carefulness
- Experience
- Seronegativity for HIV
- Equal treatment of all patients
- Confidentiality

Ginsburg KR. JAMA. 1995

### Confidential Services

- Adolescents value confidentiality
- Adolescents forego care because of confidentiality concerns
- Providing confidentiality assurances increases care

Ginsburg KR. JAMA. 1995; 273:1913-1918.  
Ford CA. JAMA. 1997; 278:1029-1034.

### Privacy & Confidentiality

- Review confidentiality and its limits with every new patient
- Yet, our job is to protect the health of our patients
- Parents should be included in the treatment plan when in the best interest of the patient<sup>1</sup>
- Share information within the circle of care on a need to know basis<sup>2</sup>

1 Harrison, Canadian Paediatric Society Position Statement 2004  
2 Representatives for Children & Youth, 2013


### Decision Making Capacity

- Ontario, Alberta, BC, Manitoba, Saskatchewan
  - no age of capacity; physician must determine the capacity to consent
- New Brunswick
  - 16 or under 16 if 2 practitioners agree the patient is capable and it is in his best interest
- Quebec
  - 14 unless it is not medically necessary and entails a health risk

Royal College. Medical Decision Making and Mature Minors

### What about parents?

- Parents are the most important thing for resilient youth
- Include parents when possible
- Disclosed information to parents should be met with strategies for safety rather than punishment
- Recognize and encourage effective parenting
- “Adult allies” also important



Ginsberg AAP 2007

### Risk or Resiliency?

- Diagnosed with ADHD at age 9
- Arrested for driving intoxicated
- Probation for 18 months
- Caught smoking marijuana, lost trust from family and friends

## Risk or Resiliency?



## Reducing Barriers

- Accessible appointments
- Open communication (text, email, phone)
- Medications available on site
- Youth friendly front line staff
- Meet the youth where they are
  - School based health centres, outreach clinics, evening hours, etc.



But I only have  
10 minutes!

## Time is a Burden

- You can't do it in 10 minutes!!!
- Teens doing well might take 10 minutes
- Teens not doing well take less, OR much, much more
- Ideas: walk-in, longer appointments with acute overbooking, support staff, residents, last appointments of the day, close follow-up



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## Build a team

- You can't do this alone!
- Which staff are youth friendly?
- Who is youth friendly in your community?
- Get to know school counselors, therapists, D&A workers, nurses, social workers, and therapists
- Build a good referral list



ICLIPART

## Bookmarked Resources

- Kelty Mental Health Resource Centre
  - Keltymentalhealth.ca
- Suicide crisis line
  - 1-800-SUICIDE
- Kidshelpphone.ca
- Self-Harm:
  - sioutreach.org
- Transition
  - ontrac.bc.ca
  - My Health Passport at SickKids
- SexualityandU.ca
- Youngwomenshealth.org
- [familyproject.sfsu.edu/](http://familyproject.sfsu.edu/)
- [www.pflagcanada.ca](http://www.pflagcanada.ca)
- [www.plannedparenthood.org/info-for-teens/](http://www.plannedparenthood.org/info-for-teens/)
- For parents:
  - [www.caringforkids.cps.ca](http://www.caringforkids.cps.ca)
- **Bullying:**
  - [Teamorangstrong.com](http://Teamorangstrong.com)

### Take Home Points

- Adolescence and early adulthood is a major time of growth and development
- Strengths and protective factors are critical to development
- Time and clinical space need to be considered in terms of youth needs
- You can't do this alone!

### And finally... Direct Quotes From Youth

- *"Try to make time to talk to me and get to know me, I like it when [they] do that"*
- *"Treat us like a person, not a disease."*
- *"Offer me choices where I have them"*
- *"[We] need privacy, space and a safe zone"*
- *"Share information with me"*



Courtesy of Sabrina Gill & the BCCH Youth Advisory Group

### Thank you!

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Thanks to my colleagues in the  
 Division of Adolescent Health and Medicine, UBC

