

STAYING RELEVANT AND CONNECTED IN YOUTH HEALTH PROMOTION

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INTRODUCTION

Health promotion seeks to enable people to “increase control over and improve their health” (WHO, 1986). In Singapore, increasing emphasis has been placed on health promotion, especially with the formation of the Health Promotion Board in 2001, which seeks to build a nation of healthy and fit Singaporeans.

The child and adolescent years are important developmental preludes to adulthood. Locally, there is a comprehensive range of preventive healthcare services to ensure the good health of the young. These include the National Childhood Immunisation Programme which provides vaccinations against infectious diseases. Booster immunisations against diphtheria, tetanus, poliomyelitis, measles, mumps and rubella are provided by the Health Promotion Board for the school-going 7- and 12-year-olds. The Health Promotion Board also conducts health screenings, growth and development monitoring for these same age groups. Basic dental services are provided for the school-going population as well to ensure their optimal oral health.

While such preventive healthcare services are important, health promotion is another crucial dimension of healthcare which needs to be leveraged upon to help individuals attain optimal physical, mental and social well-being.

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CAPITALISING ON THE CHILDHOOD AND ADOLESCENT YEARS

Many challenges including biological and emotional changes confront the young, especially during the adolescent years. Besides, parental influence may also start to wane with societal and peer pressures assuming greater importance during this phase of life. However, this is a crucial period when habits are formed and shaped. The child and adolescent years, therefore, lend themselves as opportunistic periods for health promotion to intervene and influence health behaviours and practices aimed at empowering the young to cope with the challenges of growing up and adopt a healthy lifestyle in later years.

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The Youth Health Division of the Health Promotion Board plans a variety of health promotion initiatives targeted at youth (pre-schoolers to tertiary students). These initiatives cover a range of pertinent health issues such as smoking control, mental wellness, STI/AIDS prevention, nutrition, physical activity promotion, obesity prevention, myopia prevention, oral health and childhood injury prevention. Such youth health promotion efforts seek to create a health promoting environment for the young and equip them with the necessary knowledge and skills to lead healthy lifestyles.

MAKING HEALTH PROMOTION RELEVANT AND STAYING CONNECTED WITH THE YOUTHS

Youths may reject apparently straightforward arguments for healthy behaviour partly because their thinking is still developing and also the perception of invulnerability to diseases and ill health predominates within them. Traditional forms of health communication therefore have to give way to more innovative methods which appeal to the young. To this end, the Youth Health Division has embarked on various youth-centric initiatives which include:

- a. **Peer-Led Health Promotion.** Peer education is especially important during adolescence as peer pressure has the potential to influence the behaviours of the young.

In 2005, the Health Promotion Board launched the Youth Advolition for Health (YAH) programme. The word “advolition” is coined from the words “Advocates” and “Revolution” thus highlighting the primary objective of the programme to nurture youth health advocates who will exercise creativity and passion in designing innovative health promotion initiatives for their peers. This programme is championed by an Executive Committee comprising youth leaders from the tertiary institutions. The Executive Committee sets the directions for the YAH programme and plans various initiatives for their peers. The Health Promotion Board assumes an advisory role and supports the youths in the planning and implementing their projects.

A signature event of the YAH programme is the annual World No Tobacco Day Youth Event. This year, the youths took to the streets of Orchard Road and organised a street parade to dispel common misconceptions of smoking (e.g. smoking helps one to lose weight and one can stop smoking anytime) among the youth. Through this event, the youths



A youth health advocate walking along Orchard Road to dispel common myths about smoking.

reached out to about 4,000 youths along Orchard Road.

For some of the YAH projects, the tertiary youth organised health education programmes for the younger primary school children. Their ability to establish rapport with their younger peers coupled with their creative ideas enabled them to effectively engage the younger ones in their health education efforts.



to propose and implement suitable HIV/AIDS prevention education campaigns on campus. These campaigns seek to raise awareness of the causes, consequences and prevention of HIV/AIDS as well as dispel common misconceptions of the disease among youth.



Tertiary youth participating in an on-campus StompAIDS event.



A primary school nutrition education programme organised by a group of tertiary youth.

To date, over 30 peer-led projects covering a range of health issues such as healthy lifestyle promotion, smoking control, mental wellness and STI/AIDS prevention have been implemented and these projects have achieved a coverage of over 40,000 youths.

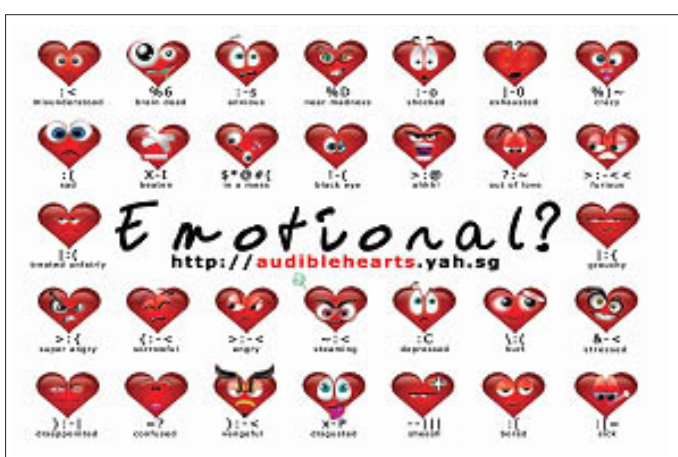


b. Exploiting youth-centric communication channels and settings. The young are becoming increasingly media and IT savvy. It is therefore important to identify suitable new outreach settings and channels such as websites and blogs and exploit such youth-popular media to advance health promotion efforts.

Several online initiatives have been launched to remain connected with the youths. For example, the YAH website (www.yah.sg) was launched in 2006. This website includes a blog where youths can access and share their thoughts and views about various health issues.

Another recent online initiative is the Shisha microsite (<http://yah.blogis.sg/shisha/>) which aims to raise awareness among the young about the harmful effects of Shisha smoking and dispel common misconceptions about it.

Smoking cessation for the young has also assumed an



Another youth-for-youth peer-led initiative is the Audible Hearts project which was conceptualised (www.audiblehearts.yah.sg) by a group of youth leaders from the National Youth Forum 2006. This is a confidential online platform for youths to share and discuss common issues of growing up (e.g. relationships with families and friends, school life, career choices) with their peers. A team of YouthPals, selected through a stringent recruitment process and equipped with basic counseling training provided by trained counselors, lend a listening ear and provide youth perspectives to the issues posted by their peers online. Since its launch, 7,600 people have visited the Audible Hearts website.

The StompAIDS Challenge is also a peer-led programme which engages tertiary youths in a marketing competition



online presence with the introduction of a web-based programme which seeks to help youths quit the habit. Through this Stay-Free Adventure programme (www.hpb.gov.sg/teencentral2/stayfree/), youth smokers learn more about smoking, its harmful effects and embark on a quit journey.



Electronic messaging such as SMSes and MMSes has gained much popularity especially among our young. Therefore, youth-centric MMS downloads have also been developed for youths to forward to their friends. These MMSes carry health messages and appealing visuals which encourage the young to adopt positive health behaviours such as healthy eating and regular physical activity.

Other youth-centric forms of communication media such as ZoCards are also used to bring health education messages to the young in a refreshing way. These cards are made available at various youth hot spots across the island for the young to pick up.



Zo-Cards used to dispel common myths youths have about smoking.

CONCLUSIONS

The youths are usually nonchalant about health and have a perceived invulnerability to diseases especially chronic lifestyle conditions which tend to manifest in later life. This phase of life, however, lends itself as an opportune period for health promotion to intervene and influence health behaviours and practices aimed at empowering the young to cope with the challenges of growing up and also adopt a healthy lifestyle. It is therefore imperative to identify new and innovative ways to connect with the young and effectively engage them in health promotion interventions.

For further enquiries or information on youth health promotion programmes, please contact Dr Wong Mun Loke at Wong_Mun_Loke@hpb.gov.sg.

ANNEX OF RESOURCES

Services

Areas of Concern	Association	Tel. Number	Operating Hours
General	Community Development Council (CDC): A one-stop helpline and referral services for anyone in need of help.	6370-9901	8:30am – 5:30 pm, Mon – Fri 8:30am – 1:00 pm, Sat
	AMP Hotline (Association of Muslim Professionals): Malay/Muslim families in crisis or those who need help.	6416-3960	9:00am – 6:00pm Mon-Fri (except public holidays)
	Care Corner 800 Hotline (Care Corner Mandarin Counselling Centre): Mandarin-speaking community with family, marital and personal problems.	1800-353-5800	10:00am – 10:00pm, Mon – Sat (except public holidays)
	Child Welfare Section (Ministry of Community Development) Those needing assistance regarding child welfare issues.	1800-258-6378	8:30am – 5:00pm, Mon – Fri 8:30am – 1:00pm, Sat

Addictive Behavior	SANA Hotline (Singapore Anti-Narcotics Association): Drug abusers, their families and the general public.	1800-733-4444	7:30am – 12 midnight daily
	Teenage Crisis Centre (Teen Challenge): Drug addicts, inhalant abusers, teenage gangsters, runaways, school-dropouts, delinquents, crisis counseling.	6793-7933	9:00am – 6:00pm, Mon – Fri
	QuitLine: (Health Promotion Board) A toll free and confidential telephone advice service, offers Quit Smoking Therapy over the phone, making quitting smoking convenient and less stressful.	1800-438-2000	8:30am – 5:00pm, Mon – Fri 8:30am – 1:00pm, Sat
	Alcoholics Anonymous Those who are alcohol dependent and their families.	6475-0890	24 hours
Mental Health	TOUCHLINE (TOUCH Youth Service): Youths between 12 and 19 years old, who are struggling, frustrated or depressed and badly in need of a listening ear.	1800-377-2252	9:00am – 6:00pm, Mon – Fri
	Youthline (Youth Challenge) :Young people with interpersonal, family, stress/depression/anxiety and sex-related problems.	6336-3434	9:30am – 6:30pm, Mon – Fri
	Tinkle Friend (Singapore Children's Society - Bukit Merah Centre): Primary school students, who need someone to chat or discuss problems with.	1800-274-4788	9:30am – 11:30am, 2:30pm – 5:00pm, Mon – Fri
Eating Disorders	SGH Eating Disorder Clinic: Referral of patients with eating disorders	6321-4377 (Appointment Line)	8:00am – 9:00pm, Mon – Fri 9:00am – 2:00pm, Sat
	Child Guidance Clinic: Referral of patients with behavioral problems	6435-3879 (Appointment Line)	8:00am – 5:00pm, Mon – Fri 8:00am – 1:00pm, Sat
Sexual Development and Sexual Health	DSC Clinic Helpline: Department of STI Control Clinic for counseling and pre-recorded messages on STIs.	1800-252-1324 (Counseling Line) 24-hour pre-recorded messages on HIV/STI: 6295-2944	8:00am – 12:00pm, 1:00pm – 5:00pm Mon-Fri
	Action for AIDS Helpline: For those requiring AIDS/HIV counseling	6254-0212	6:30pm – 8:00pm, Tue & Wed 1:30pm – 3:30pm, Sat
	Pregnancy Crisis Service (Family Life Society) Unmarried mothers and mothers-to-be having trouble coping with their pregnancy	6339-9770	24 hours
	SPPA Counseling Centre (The Singapore Planned Parenthood Association) To help young people and adults deal with sexuality-related problems and concerns	1800-775-8582	9:00am – 5:00pm, Mon – Fri

Useful Websites

Organisaton	Website
National Council of Social Services	http://www.ncss.org.sg/ncss/social_services/helplines.html
Ministry of Education	http://schools.moe.edu.sg/jj/PCCG/Self-HelpMaterials/Helplines.htm
Health Promotion Board	http://www.hpb.gov.sg/hpb/default.asp?pg_id=1076