

The health experiences and needs of young people moving to independence from care and youth justice settings



ORANGA TAMARIKI

Action Plan



ORANGA TAMARIKI
Ministry for Children

Focus of this assessment

The assessment considers how children's agencies are currently meeting the health and wellbeing needs of young people who are transitioning from Oranga Tamariki care or custody to independence.

The focus areas for this assessment were the transitioning population's health literacy and engagement and experience of primary healthcare, sexual and reproductive health care, gender-affirming health care, oral health care, and services and supports for mental health, addiction and trauma recovery needs.

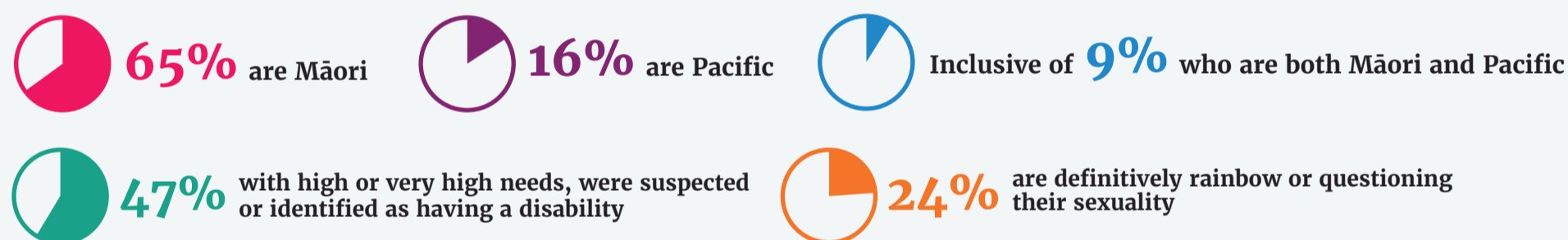
Who we listened to

Oranga Tamariki conducted focus groups with: care and youth justice-experienced young people (including Māori and Pacific), social workers and other relevant frontline or operational employees including Transition Support Service staff, regional disability advisors, senior health and education advisors and clinical staff, transition workers and service providers, Manatū Hauora, Te Whatu Ora and Te Aka Whai Ora including clinicians, and mental health providers.

“Holistic, culturally safe care focused on wellbeing can help our mental health and wellbeing. We also need connections to trauma-informed, well-supported, care experienced peers; opportunities to engage with inspirational care-experienced leaders; and support from knowledgeable, trauma-informed professionals.”
– composite statement crafted with care experienced young people contributing to this assessment.

Current state

There are 5147 young people aged 15 years and up to 25 years who are eligible for any Transition Support Service, which means they have been under a care or custody order for a continuous period of three months after the age of 14 years and nine months.



The assessment focuses on approximately 3843 young people aged 18 years and up to 25 years who are eligible for Transition Support Services, including young people who choose not to access these services.

“Accessing health care is not low priority for young people – but accommodation and having enough to eat come first – young people are conscious they cannot afford health care and are afraid of the ongoing costs burden.”
– composite statement crafted with care experienced young people contributing to this assessment.

Analysis of the data in the Integrated Data Infrastructure as of 31 March 2023 found the population of young people aged 18–20 years who have left care and are eligible for the Transition Support Service, have significantly worse health outcomes across key indicators than the general population:

- **22%** have had a hospitalisation compared to **7%** general population.
- **36%** have had an emergency department admission compared to **14%** of the general population.
- **3%** have had a potentially avoidable hospitalisation compared to **1%** of the general population.
- **86%** have experienced mental health treatment in their lifetime compared to **21%** of the general population.
- **16%** have experienced mental health treatment in the last year compared to **10%** of the general population.
- **51%** have experienced substance use treatment compared to **3%** of the general population.
- **6%** have a chronic condition (mainly traumatic brain injury or diabetes) compared to **2%** of the general population.

Oranga Tamariki support for young people preparing to transition to independence

Oranga Tamariki has a role preparing eligible young people to transition to independence and this includes a mandatory life-skills assessment, early engagement with a transition worker, and involving the young person, family, whānau, health services, and others in the development of a holistic transition plan that addresses health needs.

Transition Service Support for young people transitioning to independence

“The frustration for me is negotiating or trying to get to some sort of outcome with other services. The majority of young people get what we’re saying – they understand what they’ve got to do – they’ll try do it. To be honest sometimes I just feel really really sorry for them because they just get pushed back and told no left, right, and centre when they really need whatever it is.” – transition worker.

The Transition Support Service has a limited mandate to address unmet health and wellbeing needs. For help navigating and accessing health services a young person can:

- up to age 21 years, access a transition worker
- up to age 25 years, access the transition service helpline, last resort financial assistance for meeting health needs including counselling, dental treatment, primary health care, vision, assessment costs, medication, psychological treatment, surgical treatment, and transport to appointments.

“Iwi, Open Home Foundation, the Youth Justice residence, Corrections, other governments agencies and NGOs, schools and tertiary education providers, health providers, and other community service providers, are all partners (or potential partners) for a robust and successful service. We regularly meet to strengthen relationships, share information, and support each other with our clients.” – quarterly report from transition service provider.

Key Findings	Focus Areas
<p>High unmet health need on leaving care – young people transitioning to independence from care or custody have unmet health needs from their time in care and before coming into care. On leaving care, they struggle to access the health care they have missed out on, to have their ongoing health needs met, and to achieve their aspirations to live healthy lives. Their unmet needs compound and are a further pressure on their transition to independence. A large cohort of the transitioning population has multi-layered health and disability support needs, and they struggle the most to address that need and access ongoing health care. Oranga Tamariki transition planning requires strengthening, including ensuring health needs are met and removing barriers to accessing health services in preparation for young people leaving care.</p>	<p>Oranga Tamariki to continue to work on improving transition planning, increasing its focus on ensuring connections to health and wellbeing services can be made earlier. Putting in place supports during this phase has the potential to reduce the pressure on the transition service to respond to needs that could have been met earlier.</p>
<p>Health and wellbeing supports and services have a key role to play supporting the transition to adulthood – health services have an opportunity to engage the transitioning population in relational ways to support their transition to adulthood and meet their health needs as well as building positive engagement with the health system. This can be with the support of the Transition Support Service where needed.</p> <p>Inaccessibility and lack of support to access health services – there are real challenges accessing general practitioners and mental health and addiction services. Health services often do not recognise these young peoples’ multi-layered health and disability support needs. Youth One Stop Shops and kaupapa Māori and Pacific health services recognise need but often lack the capacity, specific professional expertise, and geographic reach to meet that need. The Transition Support Service and young people devote significant resources trying to access health services, at the expense of meeting other important needs. Young people transitioning from care or custody to independence often give up on having their health needs met, driving poor outcomes.</p> <p>Cross-agency, locality-based, multi-disciplinary collaborative forums take time but do work – meeting the multi-layered health and disability support needs of young people in the transitioning population is beyond the scope, or ability, of any one service on its own to solve. Services need to participate in locality-based, collaborative forums and work together to determine service lead, role and contribution.</p>	<p>Improve access to health services and supports, including through Youth One Stop Shops, and Kaupapa Māori and Pacific health services, and oral health that can meet the health needs of the transitioning population, particularly the cohort with multi-layered needs. This will need to investigate how to support effective connection to mental health and disability supports and services.</p>

Support needed for young people transitioning to independence's recovery journeys – for young people the transition to independence may resurface trauma as well as present opportunities for recovery. Improvements in system capability to work with people who have experienced trauma and access to appropriate supports could help to support their recovery journey.

Explore opportunities to support the transitioning population with their recovery from trauma, recognising their need to do so as part of the transition to adulthood. This should include exploring further development of care-experienced peer support services and increasing the accessibility of primary mental health services for the transitioning population.

Improving access to other key services to meet health and disability support needs – work to improve the transitioning population's access to health services should include oral health services, primary mental health services, and ACC-funded supports. It is also important that health services work with disability services and supports to improve integration and ease of access where applicable.

Investigate the role of both ACC and Whaikaha in meeting both the in-care and the transitioning populations' health needs.

Voice of the Child

We want to acknowledge that the young people who contributed to this assessment gave their expertise, experiences and insights with the strong desire to make things better. Rangatahi Māori and Pacific young people emphasised the vital importance that health services fulfil their Treaty of Waitangi obligations - upholding the mana of tamaiti and rangatahi Māori and are culturally safe. These young people took a strengths-based and solution-focused approach consistent with their hope and aspirations for themselves and all care-experienced young people transitioning to independence now and in the future.