CHAPTER 4

The determinants of health and individual human development of Australia’s youth

WHY IS THIS IMPORTANT?
The youth stage of the lifespan is one of great change. In general, the health and individual human development of Australia’s youth is good although there are some areas that could be improved. Understanding the factors that influence health and development during this stage is vital for ensuring that young people live the fullest lives possible and achieve optimal individual human development.

KEY KNOWLEDGE
2.4 determinants of the health and individual human development of Australia’s youth (pages 112–14), including at least one from each of the following:
- behavioural, such as sun protection, level of physical activity, food intake, substance use, sexual practices, skills in developing and maintaining friendships and seeking help from health professionals (pages 115–23)
- physical environment, such as tobacco smoke in the home, housing environment, work environment, access to recreational facilities (pages 124–7)
- social environment: family and community, such as family cohesion, socioeconomic status of parents, media, community and civic participation (sport, recreation, arts and faith-based activities) and access to education (pages 128–33).

KEY SKILL
- explain the determinants of health and individual human development and analyse their impact on youth using relevant examples.

FIGURE 4.1 The youth stage of the lifespan is one of vast change.
KEY TERM DEFINITIONS

atherosclerosis  the build-up of plaque on blood vessel walls, making it harder for blood to get through

behavioural determinants  the actions or patterns of living of an individual or group that affect health (e.g. smoking, sexual activity, participation in physical activity, eating practices)

determinants of health  factors that raise or lower the level of health in a population or individual. Determinants of health help to explain or predict trends in health and why some groups have better or worse health than others (AIHW, 2006). Determinants can be classified in many ways such as biological, behavioural and those relating to the physical and social environment.

family cohesion  the closeness or bonds between family members

metastasise  when cancer cells spread from the primary site to other areas of the body

physical environment  the physical surroundings in which we live, work and play. The physical environment includes water and air, workplaces, housing, roads, nature, schools, recreation settings and exposure to hazards.

resilience  refers to an individual’s ability to face and cope with stressful and difficult situations, and to recover after misfortune

sedentary  undertaking no or very low levels of physical activity

sexually transmissible infections (STIs)  a range of conditions that are generally transmitted sexually from one person to another

skin cancer  uncontrolled cell growth in one of the layers of the skin

social determinants  aspects of society and the social environment that impact on health, such as poverty, early life experiences, social networks and support

socioeconomic status (SES)  a measure of an individual’s or family’s economic and social position within society relative to others, usually based on education, occupation and income
4.1 Determinants of health and individual human development during youth: four categories

**KEY CONCEPT** Understanding the determinants of the health and development of Australia’s youth

There are many factors that influence the health and individual human development of youth. These factors act together to determine health and development and hence are termed the ‘determinants of health and development’, sometimes shortened to the ‘determinants of health’.

There are four determinants of health and individual human development (see figure 4.2) Biological determinants have a significant impact on the health and development of youth and were explored in detail in chapters 1 and 2. In this section, we will explore three other determinants that relate to the decisions young people make and the physical and social environments in which they live.

The three determinants to be explored in this chapter are:
- behavioural determinants
- physical environment
- social environment.

**Behavioural determinants**

Behavioural determinants focus on the decisions people make and how they choose to lead their lives. Nutrition and food intake is a significant behavioural factor and was explored in detail in chapter 3. Other examples of behavioural determinants include using sun protection, participating in physical activity, the use of various substances, skills in developing and maintaining friendships and seeking help from health professionals.

**Physical environment**

The physical environment encompasses the physical things that make up the environment such as air and water, and available facilities such as housing, recreation and health care. Aspects of the physical environment can directly impact on health by affecting the body’s systems. Air and water quality can make people sick or promote good health (figure 4.3). Unhygienic or unsafe housing can spread disease and contribute to injuries. Mental health can be compromised if individuals do not have their own space within their physical environment. Social health is influenced by those who share the physical environment with an individual. For example, those who share a house, go to the same school or work with the individual, will impact on the person’s social health by providing opportunities for interaction and the formation of relationships.
Individual human development can also be affected by the physical environment. The opportunities provided for physical activity in the environment, for example, will influence motor skill development and social development.

**Social environment**

The social environment refers to the aspects of society and the social environment that impact on health. This includes the people with whom an individual associates, the decisions that are made on behalf of the community (e.g. policies and laws), and the position of an individual compared to others in the society (based on factors including income and occupation). These factors influence the opportunities available to an individual and are related to the level of health and individual human development experienced by that person.

The family provides an important part of our social environment. For young people especially, the family is generally the main social contact and provider of many resources such as shelter, food, clothing, emotional support and educational opportunities. Family cohesion and the **socioeconomic status (SES)** of parents are examples of social factors that are influenced by the family.

Most individuals live in a community. The quality of the relationships within the community and the services available in the community can affect health and development. Examples of social factors influenced by the community include media, community and civic participation, and access to education.

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**Case study**

**Lifestyles of the rich and anxious**

*By Rachel Browne*

The young and rich are seeking help for anxiety and depression at twice the rate of their poorer peers, according to recent research.

Australian mental health experts say the disorders are endemic among the young, especially the affluent. Their observations follow Columbia University research that found depression and anxiety occur at twice the national US average in the children of families with an annual income of more than $170,000.

Lina Ricciardelli, associate professor of psychology at Deakin University, said high status can be a risk factor in anxiety and depression.

‘These families should be the happiest families in the universe, shouldn’t they?’ she said. ‘The old adage that money doesn’t buy you happiness is true. In fact, it might even buy you a few problems.’

The US research found affluent children showed high rates of alcohol and drug abuse, eating disorders and criminal activity such as stealing from their parents or peers.

A theory behind the rate of anxiety and depression is the pressure high achieving parents put on their children.

Director of psychological services at the Black Dog Institute, Vijaya Manicavasagar, said the phenomenon was endemic in the developed world.

‘If the parents are focused on outcomes, then the kids are going to feel that their needs aren’t being met,’ she said. ‘Some kids could withdraw into their shell and become depressed or anxious. Other kids would rebel against it.’

The chief executive of youth mental health group Generation Next, Ramesh Manocha, said wealthy families were often headed by parents who were consumed by their jobs.

‘Affluent young people have access to alcohol, more access to illicit drugs and more time and knowledge about how to misuse the resources available to them.’

A survey of 15,000 people aged 14 to 19 released by Mission Australia last week found one of their biggest concerns was performing poorly in school and limiting future prospects.

(Source: Sun-Herald, 12 August 2013.)
4.1 Determinants of health and individual human development during youth: four categories

Case study review

1 Coming from a wealthy family is an example of which determinant?
2 Which behaviours are children from wealthy families more likely to take part in?
3 Outline the reasons that are said to contribute to higher rates of anxiety and depression among children from wealthy families.

TEST your knowledge

1 (a) Explain the three determinants of health and development addressed in this section.
   (b) Give one example for each.

APPLY your knowledge

2 (a) Which group of determinants do you think would have the greatest impact on the health and development of:
   i. a five-month-old baby in Sydney?
   ii. a 16-year-old mother in Ethiopia?
   iii. a 45-year-old unemployed person in Melbourne?
   iv. a 70-year-old retired grandparent in remote Western Australia?
   (b) Justify your choices and discuss your responses with other students.

3 (a) Make a list of the determinants that have an impact on your health and development.
   (b) Rank them in order from ‘most influential’ to ‘least influential’.
   (c) Discuss your list in small groups.

4 ‘The social environment often leads to the health behaviours that people engage in’. Write a response (either agreeing or disagreeing) to this statement using examples to support your point of view.
4.2 Determinants of health and individual human development during youth: behavioural

KEY CONCEPT Understanding the behavioural determinants of the health and development of Australia’s youth

Behavioural determinants

During childhood, a lot of the health behaviours that people engage in are based on the decisions made for them either by law and policy makers, or by their family. As individuals enter the youth stage, they start to take more responsibility for the choices they make. The choices made during this stage can have short- and long-term consequences for the individual.

Sun protection

Australia’s climate is among the harshest in the world and skin cancer is the most commonly diagnosed cancer. Sunburn is one of the biggest risk factors for skin cancer (figure 4.4). Skin cancers can be categorised into two groups: melanoma and non-melanoma skin cancers.

Non-melanoma skin cancers are the most commonly diagnosed skin cancers and comprise approximately 95 per cent of all skin cancers. Such cancers are generally easily removed but can lead to complications if left undiagnosed and untreated for extended periods of time. Melanoma skin cancer, on the other hand, is an aggressive form of skin cancer that can metastasise and cause death if not treated.

The amount of UV radiation that a person is exposed to during childhood and youth is one of the most detrimental risk factors for skin cancer. People with fair skin that burns easily, those with freckles and/or moles and those with a family history of skin cancer are also at an increased risk. Although skin cancer becomes more common in later life, young people are still at great risk. In fact, according to the Australian Institute of Health and Welfare in 2011, skin cancer was the most commonly diagnosed cancer among people aged 12–24, accounting for around 30 per cent of all newly diagnosed cancers. A key reason for this is that youths are less likely to engage in sun protection behaviours than adults (table 4.1).

Sun protection behaviours describe any actions that individuals take to avoid over-exposure to UV radiation. These include:

- using sunscreen with a high protection factor
- staying in the shade
- wearing long trousers and long-sleeved shirts
- wearing sunglasses.

<table>
<thead>
<tr>
<th>TABLE 4.1 Sun protection behaviours during peak UV periods among young people aged 12–24 years, 2003–04 and 2006–07 (per cent)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sun protection behaviours</strong></td>
</tr>
<tr>
<td>Head wear (hat, cap or visor)</td>
</tr>
<tr>
<td>15+ sunscreen</td>
</tr>
<tr>
<td>3/4 length or long top</td>
</tr>
<tr>
<td>3/4 length or long leg-cover</td>
</tr>
<tr>
<td>Stayed mostly in the shade</td>
</tr>
<tr>
<td>Wore sunglasses</td>
</tr>
<tr>
<td>Sunburnt</td>
</tr>
</tbody>
</table>

Note: Multiple responses were permitted therefore the total responses exceed 100 per cent.
Source: AIHW 2011, Young Australians: their health and wellbeing 2011, cat. no. PHE 140, Canberra, p. 72.
4.2 Determinants of health and individual human development during youth: behavioural

By using such sun protection methods, individuals can reduce the damage caused to skin cells as a result of exposure to UV radiation and thereby reduce their risk of contracting skin cancer.

While overexposure to UV rays can cause skin cancer, insufficient exposure can also be detrimental. Exposure to UV rays triggers the production of vitamin D in the skin. This nutrient is required to assist in the absorption of calcium, which is turn is needed for the development of bones. Lack of UV exposure can lead to a deficiency in vitamin D and therefore a lower than optimal bone mass. This increases the chances of fractures and osteoporosis in later life. However, a lack of sun exposure is not a significant problem for youth in Australia.

Physical activity

According to a study carried out by the Australian Bureau of Statistics in 2011–12, 8.2 per cent of those aged 12–17 participated in levels of physical activity recommended by the national guidelines to obtain a health benefit. However, many young people were sedentary.

Physical activity is an important part of a healthy, balanced lifestyle. Patterns established in youth can carry through to adulthood and increase the likelihood of maintaining an ideal weight. Other short- and long-term benefits of physical activity include the prevention of:

- cardiovascular disease — being obese is a risk factor for cardiovascular disease. Exercise can assist in maintaining an optimal body weight and maintaining cardiovascular health.
- high blood pressure — overweight and obesity are risk factors for high blood pressure. Maintaining a healthy body weight through exercise can help to reduce this risk.
- some forms of cancer — exercise can enhance immune function and improve the body’s response to cancerous growths.

For health benefits to occur, the federal government recommends that youth engage in at least 60 minutes daily of moderate-to-vigorous intensity physical activity. Table 4.2 shows the average number of days that youth met this requirement in a seven-day period in 2011–12.

**TABLE 4.2 Average number of days that youth met the federal government recommendation for physical activity in a seven day period (per cent of youth), 2011–12**

| Per cent | Males | | Females | |
|----------|-------|---|---|---|---|---|---|---|---|
| None     | 3.4   | 12.4 | 7.1 | 24.9 |
| 1–2 days | 22.3  | 29.2 | 33.8 | 30.8 |
| 3–4 days | 25.2  | 29.5 | 27.6 | 29.1 |
| 5–6 days | 36.5  | 22.8 | 22.9 | 9.0 |
| 7 days   | 12.5  | 5.4  | 8.6  | 6.2 |
| Total(a) | 100.0 | 100.0 | 100.0 | 100.0 |

(a) Numbers may not sum to the total due to rounding.
Source: Adapted from ABS, Australian health survey: physical activity, 2011–12.

Many forms of physical activity (e.g. tennis, golf and soccer) promote social interaction, which is an aspect of social health. Youth may also be exposed to
different social groups and learn different social skills, which is an area of social development.

Physical activity can have a positive impact on mental health. Exercise has been shown to relieve stress and anxiety. As well as providing an outlet for excess energy, physical activity releases hormones in the body that can promote feelings of well-being and therefore positive mental health.

Physical activity can also affect individual human development:
• Exercise (particularly weight-bearing exercise) assists in strengthening bones and increasing bone density, which promotes physical development.
• Individuals participating in physical activity may learn new games and strategies associated with different sports, promoting intellectual development.
• Concepts such as sharing and taking turns can be reinforced by cooperative exercises such as team sports, which promote social development.

Substance use
Youth is often a stage of the lifespan where people experiment with different substances. The reasons for this are related to youths experimenting with aspects of their identity and to the brain development that makes youths more likely to take risks. The substances most commonly experimented with by youths are drugs, tobacco and alcohol (table 4.3).

Many of these substances can lead to health issues in the short and long term. Effects could include hospitalisation, accidents, conflict with friends and family, financial difficulties, legal issues, organ damage, mental illness and various forms of cancer.

Drug use
According to the Australian Institute of Health and Welfare (2014), illicit drug use includes:
• using illegal drugs
• using substances as inhalants (e.g. glue and petrol)
• using prescription medicine for non-medical purposes.
Recent illicit drug use (in the previous 12 months) of selected substances among youth is shown in table 4.4.

Illicit drug use during youth has been linked to many physical health problems, such as:
• blood-borne diseases (when injected) — needles can transfer diseases from one person to another. Hepatitis C and HIV are two diseases that can be spread by sharing needles.
• violence — the behaviour of people using drugs can be altered. This can make them more prone to violent acts that can result in physical injuries.
• malnutrition — adequate food intake is often not a priority to those suffering from a drug addiction. Drug use may also interfere with appetite and further contribute to malnutrition. In addition, some substances can affect the retention of different chemicals in the body. For instance, some painkillers can reduce the retention of vitamins and minerals. All these can weaken the immune system and make youth more susceptible to infection and disease.
• cardiovascular disease — some illicit substances can significantly increase heart rate and blood pressure, which can contribute to cardiovascular disease in youth.
• certain cancers — the risk of most cancers is increased when substances are smoked.
• drug overdose resulting in disability/death — body systems can shut down if the body has an adverse reaction to the substance.
As well as the effects on physical health, substance use can have an impact on the social and mental health of youths. For example, the risk of developing mental illnesses is higher for drug users. Many illicit drugs can cause hallucinations and an altered perception of reality, and can change the chemical make-up of the brain. The chemical changes occurring in the brain can act as a trigger for a range of mental illnesses such as depression, anxiety and psychosis. If drug use leads to mental illness, the risk of suicide may also be increased.

If an individual experiments with drugs, the effects can extend to their circle of friends. Some friends might disapprove and distance themselves. If other friends are similarly experimenting with drugs, the individual might spend more time with this group of people. Either way, drug use will generally affect social health.

Long-term substance use can have a range of effects on individual human development. The person may not be able to hold down a job or participate in full-time study. This can affect social development, as they do not learn the social skills associated with full-time employment or tertiary education. The individual might also find it hard to maintain a relationship in which valuable social skills such as communication and sharing are further developed. It can also have an impact on intellectual development, as the knowledge that could have been gained may never be learned. Drug use can leave people with insufficient money to pay for social experiences such as holidays or to attend gatherings such as weddings, which could further impact on social development.

Because the mental health of an individual might be affected by substance use, emotional development does not have a secure foundation on which to build. If a person is using drugs to escape their problems, they will not get the opportunity to deal with their issues and mature emotionally.

According to the Australian Institute of Health and Welfare, many factors can put young people at risk of drug use. They include:
- maternal drug use during pregnancy
- early behavioural problems
- emotional problems and early exposure to drugs
- peer antisocial behaviour
- poor parental control and supervision
- poor family bonding
- drug use among family members
- poor connection with family, school and community
- academic failure
- low self-esteem
- leaving school early.

Tobacco

The percentage of young Australians who smoke has decreased significantly over the past decade (figure 4.7), although around 8 per cent continue to smoke. Tobacco has many effects on youth health in the short and long term. In the short term, tobacco smoking increases heart rate and blood pressure. The immune system can also be adversely affected, increasing the risk of developing an infection.

Smoking is less acceptable than it was in the past, and laws have been passed that prohibit smoking in many public spaces. This means that youths must leave venues to smoke. Continually leaving a social activity to smoke could affect social experiences for young people. The financial costs associated with tobacco smoking could leave less money available for other activities such as socialising with friends.

FIGURE 4.6 Experimental drug use can lead to a range of other health issues.
People with depressive symptoms are more likely to smoke, although it is not clear if smoking contributes to depression or vice versa. There is also evidence that tobacco use has a relationship with the use of other drugs such as alcohol and marijuana.

The longer a youth smokes, the more likely they are to develop long-term conditions including:

- cardiovascular disease — tobacco smoking increases the rate of atherosclerosis in the body and therefore increases the risk of cardiovascular disease
- many forms of cancer — tobacco smoke can facilitate the development of cancerous cells in many parts of the body, including the lungs and breasts
- respiratory conditions such as emphysema.

As fitness levels decrease, the young smoker may be less inclined to participate in sporting activities. This could affect all areas of development including physical development, especially motor skills, and social development. It could also make the youth less likely to participate in sporting activities in later life, which could lead to an increased risk of cardiovascular disease and cancers.

### Alcohol use

Alcohol is the most common social drug used in Australia. Table 4.5 shows the alcohol consumption status across age groups.

<table>
<thead>
<tr>
<th>TABLE 4.5 Alcohol consumption status of people aged 12–17, by age and sex, 2013 (per cent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
</tr>
<tr>
<td>Weekly</td>
</tr>
<tr>
<td>Less than weekly</td>
</tr>
<tr>
<td>Ex-drinker(a)</td>
</tr>
<tr>
<td>Never a full serve of alcohol</td>
</tr>
</tbody>
</table>

(a) Consumed at least a full serve of alcohol, but not in the previous 12 months.


The National Health and Medical Research Council (NHMRC) is a federal government body that developed guidelines relating to young people and alcohol:

The NHMRC’s guidelines state that for children and young people under 18 years of age, not drinking is the safest option.

- Dangerous behaviour is more likely among young people when they drink compared to older drinkers. Young people are more likely to drink more and take risks.
- The brain is still developing during the teenage years and drinking alcohol during this time may damage the brain and lead to health complications later in life.
- The earlier a child is introduced to alcohol the more likely they are to develop problems with it later in life. Young people should therefore delay their first drink for as long as possible. (Australian Drug Foundation, 2015).

In small amounts, alcohol may pose minimal risks to health. Excessive alcohol intake, however, puts individuals at an elevated risk of many causes of morbidity and mortality. Experimentation with alcohol often starts during youth (figure 4.8) when the individual may not have the knowledge, experience or supervision to moderate their drinking. As a result, binge drinking is the major concern associated with alcohol consumption by youth. Binge drinking results in many hospitalisations and other short-term effects on youth health each year. In fact, according to the Australian Institute of Health and Welfare's 2010 National drug strategy household...
4.2 Determinants of health and individual human development during youth: behavioural

survey, youths often experience one or more negative short-term effects associated with binge drinking. Examples of these include:

• violence
• accidents such as drowning
• unsafe sexual practices
• unconsciousness
• vomiting.

Excessive alcohol consumption may begin in youth and continue into adulthood. The long-term effects associated with alcohol consumption include:

• weight gain and obesity — alcohol is energy dense and often contributes to weight gain. If alcohol consumption results in obesity, this increases the risk of developing a range of related conditions including cardiovascular disease, type 2 diabetes and some cancers.
• cancer — according to the Cancer Council, alcohol use increases the risk of cancers of the mouth, pharynx, larynx, oesophagus, bowel (in men) and breast (in women)
• mental illness — alcohol consumption can contribute to long-term mental health problems and has been linked to increased rates of anxiety and depression.

Youth might socialise with other young people who drink and, while under the influence of alcohol, could behave in a way they regret. Their mental health may suffer as a result of feelings of regret and guilt.

The individual human development of youth can also be significantly affected by alcohol consumption. Alcohol can reduce the absorption of nutrients, which can contribute to malnutrition. If the essential nutrients required for physical development are not present, then body systems such as the skeletal and muscular system may not develop optimally.

Socialising regularly under the influence of alcohol could prevent the individual from developing social skills while sober, and they might begin to rely on alcohol to make friends or socialise effectively. Their self-concept could be affected by alcohol consumption, especially if they had negative experiences while drinking.

Regular alcohol consumption during youth impacts on brain development and can contribute to problems with verbal skills. This can interfere with the way in which youth communicate and therefore affect social development.

Excessive alcohol consumption can lead to lethargy (tiredness), which can reduce concentration levels and ultimately performance at school, thereby affecting intellectual development. Alcohol can also affect brain function and impair brain development. This can contribute to memory problems and reduced capacity for problem solving, similarly affecting intellectual development.

Sexual practices

Sexual development is a significant milestone occurring in the youth stage of the lifespan. Some people start experimenting with sexual behaviour at this point in their lives (figure 4.9). Being involved in a sexual relationship may affect the people that an individual associates with, especially if their friends are not sexually active. The person may attach feelings of love to the sexual relationship, which can impact on mental health and emotional development. It may also increase the feelings of sadness and loss should the relationship end.

The sexual practices that young people undertake can have long-term consequences. Teenage pregnancy and sexually transmissible infections (STIs) are two examples. The more sexual activity that a person engages in, the greater their chance of contracting an STI or conceiving a baby.

STIs are passed from one person to another through sexual contact. This includes oral, genital and anal sex. The rates of many STIs increased between 2002 and 2012. This includes HIV/AIDS, chlamydia and gonorrhoea. According to the
Australian Bureau of Statistics (2012), more than half of all STI notifications in 2011 were for young people.

STIs have a range of effects on health. Diseases such as HIV and herpes have no cure and stay in the body for life. Although treatments are available for HIV, the virus slowly destroys the immune system and can lead to an increase in infections such as pneumonia and premature death. Genital herpes is the same virus that causes cold sores and can cause recurrent blisters on or around the genitals.

All STIs can have long-term consequences ranging from fever and infertility to death, but (other than HIV and herpes) they can be cured with antibiotics or other medication. Some STIs have few or no symptoms in some people, so they can go undiagnosed for a long period of time, increasing the impact of the infection on the person.

Social health could be affected by a person contracting an STI. If it is contracted within a relationship, the relationship could break down.

STIs can affect mental health by contributing to stress and anxiety. The individual might feel embarrassed and uncomfortable about having to discuss sexual issues with their doctor and then inform previous sexual partners. They could also feel anxious about their condition and may experience feelings of denial.

The impact of contracting an STI on individual human development would depend on the type of STI contracted, the amount of time the person suffers from it and the personality of the individual concerned. Self-esteem could suffer from contracting an STI, but the person could also learn to deal with the emotions they experience as a result of the STI (e.g. anger, fear, remorse) or develop assertiveness by confronting the person who infected them.

**Skills in developing and maintaining friendships**

As already discussed, the peer group is increasingly influential during youth. Young people rely on each other more heavily as they move through this stage of the lifespan.

The skills required for developing and maintaining friendships begin to develop early in the lifespan and are refined further during youth. Common skills required to develop and maintain meaningful friendships include:

- Being trustworthy — being able to keep secrets and maintaining trust
- Accepting other's mistakes — not judging people based on past mistakes promotes acceptance
- Sharing and compromising — sharing possessions, ideas, goals, space and interests promotes deep friendships. Compromising is essential in order to maintain friendships.
• Listening — active listening is important in maintaining adequate levels of communication.
• Commitment — friends are committed to each other and dedicate time to spend with one another when possible.
• Being supportive — one of the key benefits of friendship is to provide each other with support in times of need. Youth is a time of vast change and friends can support each other through these events.
• Participating in conversations — real friends value each other’s opinions and want to hear what the other has to say.
• Providing compliments — providing positive feedback to others is required for the promotion of self-esteem and shows others that their friends care.
• Being honest — although compliments are important, friends are often in a position to be honest with each other when advice is sought. Respect should always be maintained when offering advice.

Using these skills in interactions with others is influential in developing and maintaining meaningful relationships. Developing mutual and respectful friendships during youth can provide a valuable resource for all individuals involved (figure 4.10).

Having mutual and respectful friendships means that the individual is valued for who they are. This allows youth to express their feelings without being judged, to discuss concerns about the present and future and to share experiences with those they trust. Friendships give an alternative to the family from which youth can seek advice and gain support during times of crisis. Friends can also guide each other through the sometimes difficult period of youth and assist in building resilience.

Developing and maintaining a friendship requires effort from all the individuals involved. As a result, friendships can dissolve if the effort is not made. Friendships during youth can influence many aspects of health and development. Friends may:
• influence other behaviours that youth participate in such as exercise, substance use and risk-taking activities. All of these can affect physical health and development.
• encourage social development by engaging the youth in a range of social activities. These may assist in building communication skills and social roles.
• encourage and support each other. This promotes mental health.
• lead the youth to experience strong bonds with individuals outside the family, promoting emotional development.

**Seeking help from health professionals**

As medical technology and knowledge have advanced over the past century, many conditions have become curable and/or preventable. Health professionals can help youths in numerous ways, particularly in providing treatment and advice about optimising health and individual human development (figure 4.11). Health professionals can:
• give advice about nutrition, which can promote physical health and individual human development.
• provide immunisation against conditions such as meningococcal infection, which can enhance physical health.
• give advice on stress and anxiety management, which is an aspect of mental health.
• correct eye disorders, which can promote intellectual development.

Parents often make choices for children in deciding when to seek help from health professionals, but during youth the responsibility falls on the individual to make the decision to seek help when issues arise. Youth may be intimidated at the thought of visiting a health professional or may feel they have to manage
issues themselves. Confidentiality is another major concern of many youth. They may not want their parents to know the nature of their medical conditions and may fear that the health professionals will discuss these issues with their parents. Youth are eligible to obtain their own Medicare card and can therefore visit doctors by themselves, which ensures confidentiality. However, maintaining open lines of communication with parents is an important aspect of maintaining all areas of health and individual human development. As a result of failing to access health care, any health and development issues and concerns may go unaddressed. Over time, these issues can lead to physical complications and increase feelings of stress and anxiety.

According to the Australian Psychological Society, the following patterns with regards to youth accessing professional help have been noted:

- Young people are more likely to seek help from friends as opposed to health professionals.
- Males are less likely to seek help for mental health problems than females, and this can contribute to higher suicide rates among males.
- Youths do not access health services at the same rates as people in other lifespan stages.

### TEST your knowledge

1. Identify four types of sun protection behaviours.
2. Why is skin cancer more common later in life when adults exercise more sun protection behaviours than youths?
3. (a) Identify two trends evident in Table 4.2.
   (b) Discuss reasons that may account for the trends identified in part (a).
4. (a) Which sex is more likely to meet the recommended amount of physical activity for those aged 12–14 overall?
   (b) Why do you think this is the case?

### APPLY your knowledge

5. Brainstorm a list of the short- and long-term effects of substance abuse.
6. How could substance abuse lead to conflict in relationships?
7. What is the average age at which lifetime smokers start smoking?
8. Tobacco has been referred to as the ‘gateway’ drug, meaning it often leads to experimentation with other drugs. Explain why tobacco may lead to other drugs.
9. Do you think that most people who have tried illicit drugs also have a history of alcohol use? Explain your response.
10. (a) In what ways can weekly drinking be more of a concern than daily drinking?
    (b) What associated effects can this type of drinking have on health?
11. (a) Discuss how alcohol consumption patterns change as youth get older, according to Table 4.5.
    (b) Outline possible reasons for these changes.
    (c) Discuss how these changes could impact on youth health and individual human development.

12. Kate is in year 12 and has a boyfriend two years older than her. Two weeks ago, she decided to have sex with him for the first time. She was a virgin and had wanted to wait until she was in a committed relationship before having sex. A few days ago, she started to feel a burning sensation and has seen some redness around her vagina. She has become worried and suspects that her boyfriend has recently had other sexual partners and has given her an STI. Kate is too embarrassed to talk to her friends and is avoiding going to the doctor.
    (a) Identify ways that Kate’s physical, social, emotional and intellectual development could have been affected by her sexual experience.
    (b) What advice would you give Kate if she approached you asking for help?
    (c) Suggest ways that Kate could have decreased her chances of contracting an STI.
    (d) Brainstorm reasons why Kate might not be willing to visit a health professional.
    (e) Suggest a strategy that could be introduced to combat STI infection rates for people of Kate’s age.

13. Select one of the behavioural determinants covered in this chapter and draw up a table to show how it might affect all aspects of the health and development of youth.

14. Use the Sexual health links in the Resources section of your eBookPLUS to find the weblink and questions for this activity.
4.3 Determinants of health and individual human development during youth: physical environment

**KEY CONCEPT** Understanding the physical environmental determinants of the health and development of Australia’s youth

**Physical environment**

The physical environment encompasses many factors that have a direct impact on health and individual human development such as air quality, the housing and work environments, and access to facilities for recreation and health care. Aspects of the physical environment are often out of the individual’s control but their relationship with health and individual human development makes them significant determinants in the lives of youth.

**Tobacco smoke in the home**

When a non-smoker is exposed to environmental tobacco smoke (ETS), they are exposed to more than 4000 different types of chemicals. The impact of ETS on youth health and individual human development can be significant. ETS can prevent lungs functioning at their optimal level, which could have an adverse effect on physical activity and therefore motor development. Young people exposed to ETS are also more likely to suffer from asthma and other breathing problems. Exposure to ETS leaves people more likely to become sick and increases their risk of developing heart disease by 25 to 30 per cent and lung cancer by 20 to 30 per cent.

Young people in households with a smoker are more likely to take up smoking themselves, and this can have long-term effects on their health and individual human development. The household smoking status of young people in 2013 is shown in figure 4.12. According to the ABS National Health Survey (NHS), between 1995 and 2013 the proportion of Australian households with dependent children where household members smoked inside decreased from 31 per cent to around 4 per cent.

![Figure 4.12: Household smoking status of young people aged 15 years and under, 2013](source: AIHW 2014, National drug strategy household survey 2013, supplementary tables.)

**Housing environment**

Youth generally spend a lot of time at home, and the housing environment can affect their health and individual human development.

Some of the physical aspects of the housing environment that can affect health and development include:

- **indoor pollutants**: Dust and tobacco smoke, for example, can cause asthma and other respiratory conditions. This may reduce the individual’s capacity for...
physical activity which in turn can affect fitness (physical health) and motor skill development (physical development).

- **Kitchen facilities.** Youth is a time of rapid physical development and specific nutrients are required to optimise the development of many structures such as hard and soft tissues. If kitchen facilities are inadequate, it may impact on the individual’s ability to consume adequate levels of nutrients.

- **drinking water quality.** Inadequate water quality can lead to infections or dehydration. This can affect concentration and intellectual development.

- **warmth.** People living in dwellings that are damp, cold or mouldy are at greater risk of respiratory conditions, meningococcal infection and asthma.

- **the number of bedrooms (figure 4.13).** Cramped living conditions can lead to stress and other mental health issues. It may also mean that the young person cannot find a quiet place to study, and this can impact on intellectual development. It may not be possible for an individual to entertain friends at their house, thereby affecting social health and development.

- **safety of the housing.** An unsafe housing environment can increase the risk of falls, electrocution and other injuries.

Research published by the Australian Housing Urban Research Institute suggests that overcrowded houses are associated with a greater risk of infectious disease and poor mental health. As young people are usually dependent on others, they may have little control over the number of people who share their living environment.

![Figure 4.13](image)

**Work environment**

Many youths will take on a part-time job for the first time during this stage or will leave school to commence full-time employment (table 4.6). Work allows the individual to earn their own income and develop skills relating to all areas of development. In the work environment, the young person may learn skills such as cooking, cleaning, cooperation and responsibility, and gain knowledge relating to their job. But there are often risks associated with the workplace as well.

| TABLE 4.6 Participation in employment among those aged 15–19 years, 2014 |
|-----------------|-----------------|-----------------|-----------------|
|                 | National %      | Female %        | Male %          |
| Employed full-time | 1.2             | 1.0             | 1.4             |
| Employed part-time | 35.9            | 37.6            | 33.3            |
| Not in paid employment, looking for work | 35.4 | 32.9 | 39.3 |
| Not in paid employment, NOT looking for work | 27.5 | 28.5 | 26.0 |

Note: Part-time is considered to be less than 35 hours per week and full-time is 35 hours or more.

4.3 Determinants of health and individual human development during youth: physical environment

Occupational health and safety laws in Australia are designed to ensure that employers provide a safe environment for all of their employees, including youth. These laws relate to physical space as well as machinery, training and supervision. They are intended to promote the health and individual human development of those working in Australia.

The physical space in which a youth works can impact on their health and development. Working outdoors for instance can leave them exposed to UV radiation and other elements such as heat and cold, all of which can affect physical health. The tools and instruments that young people use at work can lead to injuries such as strains and cuts. Youths may be required to stack shelves, which can increase strength but also the likelihood of back injury.

Many youths work in fast-food outlets or other commercial kitchens. Facilities within these environments pose particular risks to youths including:

- burns from hot water, deep fryers, ovens and other appliances
- falls and injury caused by slippery floors
- cuts and lacerations from sharp objects.

Unpleasant or unfavourable working conditions can also influence mental health by affecting self-esteem and contributing to feelings of depression.

The distance of the workplace in relation to the home can also provide opportunities and risks for health and individual human development. Riding or walking to work can increase the level of physical health and promote physical development, but traffic conditions might increase the risk of injury.

Access to recreational facilities

Opportunities for physical activity are affected by the facilities available to people (figure 4.15). As many youth do not drive, the distance from home to a venue will influence whether or not they become involved in activities that interest them. Recreational facilities (e.g. sporting grounds, parks, beaches, natural environments and social clubs) provide young people with opportunities for social interaction optimise social health. By being able to be physically active, youth can maintain a healthy body weight and promote fitness levels which improves physical health. Physical activity acts to reduce stress and promote feelings of wellbeing, which enhances mental health.
Having access to recreational facilities also promotes individual human development. Regular weight-bearing activity assists in building bone density and enhances physical development. Motor skills are also developed through regular physical activity. If participating with others, social skills and self-concept are promoted and knowledge of different activities can also occur.

**TEST your knowledge**

1. How can environmental tobacco smoke affect the health and development of young people in the:
   (a) short term?
   (b) long term?

2. List three aspects of the housing environment that can affect health and individual human development.

3. Outline some benefits to your health that have occurred as a result of participating in recreational activities (make sure you cover the three areas of health).

4. (a) According to table 4.6, what proportion of males and females aged 15–19 have some form of job?
   (b) Discuss the impact that having a job can have on youth health and development.

**APPLY your knowledge**

5. Suggest reasons why indoor tobacco smoke has decreased in recent years.

6. Why would young people whose parents smoke be more likely to take up the habit themselves?

7. (a) According to figure 4.13, approximately what percentage of 15–24 year olds live in housing that is considered less than adequate and much less than adequate in terms of the number of bedrooms?
   (b) Why might this scenario be particularly difficult for youth?
   (c) How could inadequate housing lead to poor health? (Remember that health is not just physical.)

8. Use the Young Workers links in the Resources section of your eBookPLUS to find the weblink and questions for this activity.
4.4 Determinants of health and individual human development during youth: social environment

KEY CONCEPT Understanding the social environmental determinants of the health and development of Australia’s youth

Social environment

Social determinants of health and individual human development affects youth in numerous ways. Some of these social factors are related to the influence of the family and others are related to the wider community in which youth live.

Youths rely on their families for many aspects of their lives. Parents, siblings and extended family members guide young people through their childhood and youth, when development is occurring at a rapid rate. Physical, social, emotional and intellectual development are all influenced by family members. The health behaviours (e.g. food intake and exercise) that young people partake in are also influenced by family members (figure 4.18).

The wider community such as schools, sporting groups and social/cultural groups play an important role in influencing the health and individual development of youth. They provide opportunities for young people to be involved in the community in which they live, which can promote health. Social determinants within the community include the media, community and civic participation and access to education. Each of these determinants will be explored in more detail.

Family cohesion

Family cohesion refers to the closeness or bonds within a family. The ability of families to get along is an indicator of family cohesion and data relating to this measure are shown in figure 4.17.

According to the national youth survey published by Mission Australia in 2014, 73.4 per cent of people aged 15–19 ranked family relationships as one of the most valuable things in their lives. Friendships with those other than family members came first at 75.9 per cent.

According to the Australian Institute of Health and Welfare, family cohesion, or lack thereof, is a risk factor for youth health and individual human development. It is difficult to say whether lack of family cohesion leads to poor health and development outcomes or vice versa. Issues such as substance abuse, mental illness and suicide may be the result of poor family cohesion or may in fact lead to it.

If the family is close, then social health may be reliant on the family. If the family is not close, then friends may play this role. The family may also provide a resource...
for young people. They can discuss their problems and seek advice. This could increase the level of mental health experienced.

Individual human development is also influenced by the family. A family that regularly socialises and communicates could assist in the development of social skills and the emotional development of youth. Intellectual development could also be improved by gaining new knowledge from family members such as parents and grandparents.

**Socioeconomic status of parents**

Socioeconomic status (SES) includes three key areas: education, occupation and income. The relationship between socioeconomic status and health is undeniable. People from higher SES groups have lower mortality and morbidity rates and display lower rates of risk factors.

In terms of the effects that socioeconomic status has on youth health and development, it is important to also look at the socioeconomic status of the youth’s parents. For youth living under their parents’ roof and undertaking full-time education, the socioeconomic status of parents is directly related to the socioeconomic status of youth. It is therefore generally the socioeconomic status of parents that influences the health and individual human development of youth.

Unemployment among parents (figure 4.18) can have long-term effects on the development, educational outcomes and employment prospects of young people. Families without an employed parent generally have low incomes and therefore live in lower economic circumstances with less economic stability. Long-term unemployment can lead to high levels of stress, family conflict and social isolation, which can in turn have an impact on the health and individual human development of the youth. A low income could also mean that money is not available to spend on resources that can promote health and development — adequate food, social experiences (e.g. dining out or going to a concert), or the purchase of computers, internet access, musical instruments/lessons, adequate housing or new clothing.

![Figure 4.18: Young people in families where no parent is employed, 2009–10](source: Adapted from ABS data)

Lack of education can lead to unemployment or low-paid employment. Low-paying jobs can have effects that are similar to unemployment but are not as severe.

**Media**

The media influences many of the decisions youth make (figure 4.19). By influencing social trends — from food items to clothing, music and recreational activities — the media has a pronounced impact on the health and development
4.4 Determinants of health and individual human development during youth: social environment

In recent decades the use of media (particularly electronic and social media) has increased significantly. This exposes young people to many forms of information.

Exposure to many forms of media can have negative or positive influences on health and development. Media can be a valuable education tool. Access to the internet and television can promote learning and intellectual development if the material being viewed is age appropriate and relevant. On the other hand, many young people spend hours at a time on activities such as browsing the internet, engaging in social media, watching television and playing video games (collectively called ‘small screen recreation’). These forms of media expose youth to a range of subjects and themes that can have a detrimental impact on their health and development. The violence and explicit language and images often presented in the media may influence the way youths communicate or behave around others, which affects social development. Stereotypes that portray certain groups of people in a negative light (e.g. men being violent) are often displayed in the media. As values are being formed during youth, the internet and television can be extremely influential.

Advertising is prominent in most forms of media and can influence the behaviour of youth in their choices of food, non-alcoholic drinks and alcohol. This can have both long and short-term impacts on health and development.

Youth who spend a lot of time engaged in small screen and social media may spend less time exercising, socialising and studying. As a result, physical health may be affected by weight gain, social skills may not be learned and knowledge development may be limited. The Australian government’s physical activity recommendations for children and young people state that no more than two hours should be spent on small screen recreation on any one day. The average number of days that youth met these requirements over a seven-day period is shown in figure 4.20.

![Figure 4.19 Common forms of media that influence youth](image)

**FIGURE 4.19** Common forms of media that influence youth

![Figure 4.20 Average number of days that youth met the recommendations for small screen activities over a seven-day period, 2011–12](image)

Source: Based on data from ABS, Australian health survey: physical activity, 2011–12.

The amount of time spent on different types of small screen activities is shown in figure 4.21.
Social media sites such as Facebook, Twitter and Tumblr allow youth to interact online. This can assist with developing and maintaining friendships and enhance social and mental health by facilitating online interaction and promoting self-esteem. It can also have negative effects on social and mental health by being used as a platform to bully, harass or exclude others. Social media may reduce face-to-face interaction among youth, which can contribute to reduced social and emotional development by limiting the experiences youth have.

**Case study**

**The net result: an irritable, addicted child gamer**

*By Sarah Whyte*

ADDICTION to the internet has moved a step closer to being classified as a mental illness with the inclusion of ‘internet use disorder’ in a worldwide psychiatric manual. The move has been welcomed by Australian psychology professionals in response to a wave of always-on technology engulfing children.

The *Sunday Age* has spoken to parents of children as young as seven who are aggressive, irritable and hostile when deprived of their iPads or laptops.

Psychologists say video game and internet addictions share the characteristics of other addictions, including emotional shutdown, lack of concentration and ‘withdrawal symptoms’ if the gadgets are removed.

Other fallout can include devastating impacts for children and families as social interaction and even food are neglected in favour of the virtual worlds the children inhabit.
Case study review

1 Identify the term used in the article to describe addiction to the internet.
2 (a) What characteristics do video game and internet addictions share with other addictions?
   (b) Explain how these characteristics could impact on health and/or individual human development.
3 Explain how neglecting social interaction and food could impact on the health of individuals.
4 Explain how internet addiction could impact on the physical health and intellectual human development of youth.
5 Discuss reasons that may account for 70 per cent of the people being treated in Mr Hodzic’s clinic being children and teenagers.
Community and civic participation

Being involved in community groups gives young people a social network and can generate a sense of achievement and worth (figure 4.22).

Although relatively few young people volunteer compared to people in other lifespan stages (table 4.7), many youth are involved in sport, recreation, arts and faith-based activities. This gives them a chance to mix with like-minded people, which promotes social health and is a source of relaxation and stress relief, which promotes mental health.

<table>
<thead>
<tr>
<th>TABLE 4.7 Percentage of young people aged 15 to 19 years involved in selected activities, 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>National 2014 %</td>
</tr>
<tr>
<td>Sports (as a participant)</td>
</tr>
<tr>
<td>Sports (as a spectator)</td>
</tr>
<tr>
<td>Volunteer work</td>
</tr>
<tr>
<td>Arts/cultural/music activities</td>
</tr>
<tr>
<td>Student leadership activities</td>
</tr>
<tr>
<td>Youth groups and clubs</td>
</tr>
<tr>
<td>Religious groups or activities</td>
</tr>
<tr>
<td>Environmental groups or activities</td>
</tr>
<tr>
<td>Political groups or organisations</td>
</tr>
</tbody>
</table>

Note: Items are listed in order of national importance.

Self-concept is a key area of emotional development that can be significantly enhanced by volunteering or being involved in other community activities. By contributing to the community in which they live, young people can derive a sense of pride and pleasure, enhancing self-esteem.

Access to education

Education is one of the key defining aspects of youth. Education in schools and higher education institutions such as universities and TAFEs provides opportunities for youth to develop knowledge and skills that will prepare them for work in later years and enhances their social, emotional and intellectual development.

The resources available in each school will also influence the type of education received by youth. Having access to multimedia and information technology resources can increase their opportunities.
Education is also linked with better health outcomes (figure 4.23). Those with higher levels of education report lower levels of illness and better mental health than those with lower levels of education. Education can promote awareness of healthy behaviours such as not smoking tobacco and maintaining adequate levels of physical activity. Those with higher levels of education are also more likely to secure jobs with better pay and prestige, which can lead to lower levels of stress and more income to pay for things like private health insurance and an adequate food supply.

A number of factors can contribute to youth not accessing education services. They include:
- geographical barriers — those in rural and remote areas of Australia may find it difficult to get to a school because it could be hundreds of kilometres away.
- social/cultural factors — some parents may not place importance on formal schooling. As a result, children may be home-schooled or may receive little or no formal education.
- socioeconomic reasons — some individuals may not be able to meet the costs associated with education (particularly tertiary education), and this may influence their decision on whether to continue with formal study.

**TEST your knowledge**

1. Explain what is meant by family cohesion.
2. List the three components that make up SES.
3. Why is it important to look at the SES of parents when estimating the effect that SES has on youth?
4. List three ways that media could affect the health and/or individual human development of youth.
5. Identify two trends from figure 4.20.
6. Outline factors that might prevent youths from accessing education.

**APPLY your knowledge**

7. (a) What percentage of males and females aged 15–19 rated their family’s ability to get along as fair or poor?
   (b) Explain how their family’s fair or poor ability to get along could impact on the health and individual human development of youth.
8. What effect might caring for a parent have on the health and development of a young person?
9 Youth generally rely on their families for many things. Discuss two ways that your family impacts on your own health and individual human development.

10 Discuss the ways that having no parent in paid employment could affect the health and individual human development of youth.

11 Using figure 4.19, brainstorm how each form of media might impact on health and individual human development in both positive and negative ways. (A table might be useful for this.)

12 (a) How many minutes per day on average were spent on the following small screen activities for 12–14 year olds according to figure 4.21?
   i. Watching TV, DVDs or videos
   ii. Using the internet/computer for non-homework purposes
   iii. Using the internet/computer for homework purposes

   (b) Explain how each small screen activity in part (a) could impact on health or individual human development.

13 Brainstorm a list of social factors in the community that affect your health and individual human development. Compare your list with someone else’s.

14 (a) Design a survey that could be used to gauge people’s participation in community and civic activities. Make sure your questions allow data collection about:
   • the nature of the activities
   • how often people participate
   • the perceived health benefits of participation.

   (b) Use the survey to collect data on youth participation and collate the results.

   (c) Draw conclusions about community and civic participation in your school.

15 Select one form of social media and design a pamphlet that could be used to educate youth about the positive and negative aspects of its use.

16 Explain how education could promote health and individual human development among youth.
KEY SKILLS The determinants of health and individual human development of Australia’s youth

KEY SKILL Explain the determinants of health and individual human development and analyse their impact on youth using relevant examples

In order to complete this key skill, a knowledge of the determinants of health and development is important. As well as being able to explain each of the three determinants addressed in this chapter (behavioural, physical environment and social environment), the ability to predict the likely effect of at least one factor or example from each determinant is also required. Remember that the focus of this key skill is on youth and any discussion should be about this particular age group.

Completing a summary table (like table 4.8) can provide practice in predicting likely effects.

<table>
<thead>
<tr>
<th>TABLE 4.8 A summary table for analysing the impact on health and individual human development of the determinants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determinant: Media</td>
</tr>
<tr>
<td>Area of health</td>
</tr>
<tr>
<td>Physical</td>
</tr>
<tr>
<td>Social</td>
</tr>
<tr>
<td>Mental</td>
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<tr>
<td>Area of development</td>
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<tr>
<td>Physical</td>
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<tr>
<td>Social</td>
</tr>
<tr>
<td>Emotional</td>
</tr>
<tr>
<td>Intellectual</td>
</tr>
</tbody>
</table>

Consider the following example:

Ralph is 15 years old and in year 10 at school. He has well developed motor skills and excels in football and cricket. Earlier this year, Ralph sustained an injury during a cricket match and could not play sport for four months. His body weight increased during that time and his BMI now places him in the ‘overweight’ category.

To identify two determinants of health and development, and discuss how each might influence the health and/or individual development experienced by Ralph, a response might be as follows.

**Behavioural — physical activity**: Ralph had to take four months off sport after his injury, which may have decreased his overall levels of physical activity. If Ralph is not getting as much physical activity as he did in the past, this may be contributing to his increase in body weight, which is an aspect of physical health.

**Physical environment — access to recreational facilities**: If Ralph lives relatively close to recreational facilities such as ovals and sporting clubs, this may have influenced his ability to become involved in a range of sports and activities. By being able to play a range of sports, Ralph’s motor skills may have been enhanced (physical development).

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1. Note that a choice is given in this scenario and links can be made to health and/or individual human development.
2. As the task is to identify and discuss the determinants, the first step is to identify the determinant. Then discuss how it may have contributed to aspects of Ralph’s health and/or individual human development.
3. Identifying the aspect of health and/or development can assist in ensuring a clear link has been made.
PRACTISE the key skills

1. (a) Explain what is meant by the term ‘determinants of health and development’.
   (b) List the three categories of determinants of health addressed in this chapter and explain (using examples) what is meant by each one.

2. Natalie is in year 11 at a school in Melbourne. She lives with her mother and brother and has a good network of friends. Natalie’s mother has recently become unemployed and is currently looking for work. Her mother is a smoker and smokes in their house. Although Natalie plays netball with her school friends at the local sports centre once a week, she has started to put on weight in recent months and this has taken her above her healthy body weight. In recent weeks, Natalie has been going out with her friends and experimenting with alcohol and smoking cigarettes.
   (a) Identify four examples of determinants of health and development for Natalie.
   (b) Explain their possible impact on her health and development.

Key skills exam practice

3. Danny is 15 and left school around the same time he was kicked out of home by his stepfather. He has been spending his time with a group of older people on the streets and they have introduced him to drugs. One night, Danny was out with his friends and he decided to try ecstasy. After two hours, he began hallucinating and started thinking that his friends were out to get him. He could not control his thoughts and by the next day was in a psychiatric hospital diagnosed with drug-induced psychosis (where perception of reality is altered and people see, hear, smell and touch things that are not there). Psychosis can be treated but many individuals will experience further episodes of psychosis in the future.
   (a) Identify three examples of determinants of health and development for Danny.

   (b) Select one of these and explain how they may affect Danny’s health and development.

   (c) Discuss ways that Danny’s illness may impact on his:
       i. social health
       ii. social development.

   (d) Explain how Danny’s family situation may impact on his recovery from his illness.
Chapter summary

- The level of health and development experienced throughout life is determined by a broad range of factors called determinants.
- Behavioural, physical environment and social determinants all combine to affect youth health and development.
- Behavioural determinants include the behaviours that people engage in that have an impact on health and development, including smoking and exercise.
- A lot of the behaviours that youths engage in can have long-term consequences. Habits that are established during this stage are important for future health and development.
- Lack of sun protection remains an issue for Australian youth although awareness of its importance has increased in recent years.
- Levels of physical activity are not as high as they should be and contribute to a range of health and developmental problems.
- Tobacco, alcohol and substance use is often first tried during the youth stage and can lead to lifelong health problems.
- The rates of many STIs have increased significantly in recent years. Infections among youths and early adults are largely responsible for this increase.
- A number of skills are required to develop and maintain friendships.
- Mutual and respectful friendships can be a great support for youth as they develop.
- Health professionals are a valuable resource in terms of maintaining optimal health and development yet many youth are reluctant to seek help from them.
- The physical environment includes air and water quality and pollution. The physical environment in Australia generally promotes good health.
- Housing issues such as unsafe housing and overcrowding can contribute to injuries and mental health issues.
- Many youth start employment during this stage of the lifespan, and the work environment can present many challenges and opportunities for health and development.
- Indoor tobacco smoke can cause detrimental health outcomes for young people such as respiratory problems.
- Having access to recreational facilities can promote physical activity and social interaction, which be beneficial to health and development.
- The social environment refers to the people in the environment and the impact they have on our health. Social factors can be related to family or the wider community.
- The family is an important component of the social environment that influences many aspects of health and development such as schooling and the formation of values.
- Family cohesion relates to the family's ability to get along and impacts significantly on the health and individual human development of youth.
- Socioeconomic status relates to a person's position relative to others in society based on income, education and occupation. The socioeconomic status of parents affects the resources, knowledge and behaviours that parents pass on to youth.
- The media is extremely influential with regards to the recreation pursuits youth participate in and the information that is made available to them.
- Community participation such as volunteering can build links between the individual and society, which can enhance health and development.
- Levels of education are related to levels of health but some youths are unable to access education, particularly higher education.
**APPLY the key skills**

1. Explain what is meant by ‘determinants of health’.

**APPLY your knowledge**

2. For each of the determinants of health and development, list one example and discuss how it can influence the health and development of youth.

3. Brainstorm how the determinants of health and development might differ for someone living in remote Australia (the outback) compared with someone living in a city. Explain the possible consequences these differences may have on health and development.

4. Select an area of health that could be improved for young people and design a strategy that the government could introduce to address the issue.

5. Choose five of the following and suggest ways they might influence social development during youth: peers, parents, siblings, school, workplace, music, media, and sporting teams.