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Health and Wellbeing of Children and Young People

Background

Children and young people with good health and wellbeing will have positive flow-on effects into adulthood. Our society is enriched and enhanced when we support children and their families to achieve optimal physical and emotional health. Researchers such as Fraser Mustard have also emphasised the critical need for investment in the early years, describing how “brain development in the early years can set trajectories that affect health (physical and mental), learning and behaviour for life”.¹

In general, the health of Australia’s children and young people has significantly improved since the 1980s, according to the Australian Institute of Health and Welfare. The mortality rate has more than halved from 30 to 13 deaths per 100,000 children between 1986 and 2006. Rates of cerebral palsy according to the Australian birth registers remain steady at an average of 1 every 500 births a year.

However, there is disparity across different demographic groups and regions. For example

- Aboriginal and Torres Strait Islander children have twice the hospitalisation rate for respiratory disease as compared to non-Aboriginal and Torres Strait Islander children.²
- Non-English Speaking people within Australia’s Culturally and Linguistically Diverse groups are reported to have lower rates of health literacy, affecting their access to health services and understanding of health issues.³
- In very remote Australia, 39.9 per cent of children were reported to be developmentally vulnerable or at risk on the physical and wellbeing domain of the Australian Early Development Index.⁴

There are also rising rates of chronic conditions, particularly obesity and physical inactivity. The AIHW reports that in 2004-05, 12.3 per cent of Australians aged 0-14, and 17 per cent aged 15-25 years had a chronic health condition.⁵ Nearly 1 in 4 children are overweight or obese, and with the rising level of physical inactivity and sedentary behaviour, this representing a significant number who are or will be at risk of comorbidities such as cardiovascular diseases⁶ and diabetes. Children and young people with physical disabilities are acknowledged to be at an even greater risk of becoming obese and physically inactive.

The APA supports the Australian Government’s efforts to address the rising prevalence of obesity, such as the Healthy School Communities Program, the Healthy Weight 2008 policy, the National Physical Activity Guidelines for Australians, and public awareness campaigns such as Go for 2 and 5 and Get Moving.

The APA also supports the Australian Government in recognising the need to invest in the provision of more early childhood services and services for children and young people with disabilities, and to promote child health and development. In particular, the APA commends initiatives such as the Better Start for children with a disability⁷, DisabilityCare Australia early intervention strategies⁸, Indigenous Child and Family Centres across Australia, and the Early Years Learning Framework, that has been developed for implementation across early childhood settings⁹.

The role of physiotherapists in promoting health and wellbeing

Physiotherapists can improve the health and wellbeing of children and young people and reduce or prevent the onset of secondary conditions by optimising mobility and strength, which impacts on psychosocial and emotional wellbeing, inclusion and level of participation.¹⁰ Paediatric physiotherapists have an in-depth knowledge of all aspects of development, and have the clinical assessment, reasoning and intervention skills for best practice management of acute, non-acute, lifelong and life limiting conditions.

Physiotherapists work within the International Classification of Functioning, Disability and Health, and in partnership with the family and their child can set and review goals in relation to the child's identified needs. Physiotherapists work closely with families and carers as important providers of programs to enhance their child's development.

Physiotherapists have the experience and clinical insight into the expected trajectory of a disability and can help assist in planning of long term management, and with navigation of health and disability services.

Working collaboratively with educators in preschools and schools, physiotherapists can optimise the development of children and young people, particularly if they have a disability. They can assess the rapidly changing needs of the developing and growing child and provide advice on management strategies. They can also advise on assistive technologies, specialised equipment and aids to optimise learning and maximise independence.

Adolescence is a time of rapid development, physically, cognitively and emotionally. Proactive preparation and support to transition from child-centred to adult-oriented health care systems¹¹ encourages young people to be successfully integrated into a comprehensive care system to meet their complex needs.¹² Physiotherapists are highly trained and possess the skills and knowledge to assume a lead navigator role in this transition process, and to facilitate capacity building of the young person as they become independent.

Physiotherapists also recognise that the health of an adult can be impacted upon by unresolved or unaddressed health conditions acquired when younger. For example, some musculoskeletal conditions if inappropriately or inadequately treated can progress into complicated health issues that cause chronic pain or reduce mobility with adverse effects on emotional health.

Barriers of access to physiotherapy

Across Australia, children and young people face barriers impeding access to an optimal level of physiotherapy for their conditions and individual physical health and wellbeing needs.

In rural and remote regions of Australia, children and young people with chronic conditions often require the services of a range of health providers which may not be easily or locally accessible, making it challenging to access appropriate and timely interventions and support for their care needs at a critical stage in their lives.

Children and young people with complex needs require health and support services provided by a range of specialist paediatric clinics within tertiary centres, community agencies, or non-government organisations and/or private services, and may face barriers of access due to poor coordination, transition, and translation of health information relating to the child or young person between these agencies.

In addition, differences between the paediatric and adult health systems and a lack of coordination between these services entrenches further barriers to accessing optimal levels of health care. Transition planning to adult services that is not effectively managed may also prove to be a barrier to accessing appropriate services. An effective, organised and coordinated process in which the young

person is transferred from the paediatric to the adult health care system is crucial to address barriers faced in managing transition across health care systems.^{13 14 15}

Access to physiotherapy for children across Australia, may also be limited by barriers such as:

- A lack of integrated health and education settings in the community where families or carers can access the broad range of services that may be required for their child.
- Financial barriers preventing families or carers from affording adequate levels of paediatric physiotherapy for their child.
- Shortage of physiotherapists trained in paediatrics in certain regions that may, for example, be due to a lack of senior physiotherapy staff available to provide mentoring and supervision, inadequate funding of paediatric physiotherapy services, or more generally a lack of physiotherapists working in the region.
- Availability of long term provision of physiotherapy for chronic health and life long conditions
- Inequitable and inconsistent access for provision of aids and equipment, including low and high technological equipment
- Access to telehealth technologies for communication between regional and city health services.

The APA position

Ensuring the good health and positive wellbeing of Australia's children and young people is critical to the future health of Australia.

It is essential that the Australian government continue to invest in our children and young people, and in the supports necessary to provide for their health and wellbeing needs prior to birth, throughout childhood and adolescence, and into their early adult lives. This investment should encompass services universally available and provided in hospitals, in communities and education settings, and must also consider the targeted needs of children and young people from Aboriginal and Torres Strait Islander communities and Culturally and Linguistically Diverse communities, as well as those living in vulnerable circumstances. Services should also support the families of children and young people within the context of their community and be flexible to meet their differing needs.

It is the APA's position that

- All children and young people have access to timely paediatric physiotherapy assessment and treatment using child and family-centred care models. For children and young people with complex conditions or a disability, this includes access to the appropriate early intervention services, and aids and equipment to support the needs of the child and the family to assist attainment of their physical potential.
- Children and young people with chronic or complex health conditions or with a physical disability, can access physiotherapy to maximise function and encourage physical and social activity which is critical to healthy development.
- Improving access to health care resources to meet the needs of children and young people with chronic conditions is vital to supporting and encouraging them to maintain engagement with the healthcare system and to optimally manage their health and well-being.
- Physiotherapists are well placed to assist children, young people and their families or carers with service navigation and long term planning and management, and support self-directed care decisions, for example, in relation to individualised funding under DisabilityCare Australia.

- Employment or participation in community activities can have benefits for individual health and wellbeing and improve the productivity of the Australian community. Physiotherapists can support children and young people to increase engagement in employment as they reach adulthood.
- Barriers that prevent access to appropriate aids and equipment and appropriate maintenance should be identified and addressed across Australia.
- Systems to support health and disability providers and services, including non-Government providers, to work in collaboration with each other and their clients to ensure a seamless service and or transition, should be encouraged and implemented.
- Sufficient resources are allocated to optimally support age-appropriate transition. Workforce gaps including improving access to specialist physiotherapists needs to be addressed, dedicated resources should be established and, funding should be provided to expand collaborative multidisciplinary teams and integrate transition coordinators in the appropriate paediatric and adult settings.
- Adequate support needs to be provided for undergraduate and postgraduate training pathways for physiotherapists to work in paediatrics, particularly to address the lack of access to training in rural areas.
- Optimal use of technology to help engage children and adolescents, such as development of apps, use of social media as an education tool on the benefits of exercise and electronic reminders of appointment times. In addition, advantage should be taken of telehealth and assessment and management strategies.
- Integrated care settings and collaborative models of care involving health, education and non-government providers are ideal for the provision of services to children and their families, and continued investment is required.
- Specialist physiotherapists and physiotherapists with extensive experience, knowledge and skills across a sub-discipline area, for instance musculoskeletal, neurological or paediatric physiotherapy can effectively engage and review individual treatment plans, and act in the capacity of a consultant and be involved in the management of complex cases.
- Governments must ensure appropriate child protection strategies are in place with national protocols.

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