

# Unit Three

## Conducting a psychosocial risk assessment (HEEADSSS)

### Activity 3.1 The risk and protective factor framework



#### Introduction (1 minute)

<b>Purpose</b>	Welcome participants, recap key points from Unit One and Two if needed and provide outline for Unit Three aims.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides
<b>Method</b>	<p><b>Show powerpoint slide 1</b> </p> <p><b>Welcome</b> participants to this training unit. If necessary, recap Units One and Two.</p> <p><b>Ask</b> if there any questions or comments from the previous two sessions.</p> <p><b>Show powerpoint slide 2</b> </p> <p><b>Present</b> the outline of Unit Three (slide 2) and describe the aims of Unit Three</p> <ul style="list-style-type: none"> <li>To understand and apply the risk and protective factor framework to young people's health problems.</li> <li>To perform a health risk assessment using the HEEADSSS psychosocial screening tool, as a demonstrated systematic approach to patient safety.</li> </ul>
<b>Key Points</b>	Provide outline for Unit Three.

#### Powerpoint presentation (9 minutes)

<b>Purpose</b>	To provide an understanding of the role of risk & protective factors in young people's health problems.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides <input type="checkbox"/> <i>Adolescent Health GP Resource Kit 2nd edition, section two - chapter five Risk Taking and Health Promotion pp. 55-57</i> <a href="http://www.caah.chw.edu.au/resources/gpkit/07_Section_2_chap_5_risk_taking.pdf">http://www.caah.chw.edu.au/resources/gpkit/07_Section_2_chap_5_risk_taking.pdf</a>
<b>Method</b>	<p><b>Introduce</b> this Unit by reminding participants that the major health problems of young people are psychosocial – the consequence of risk behaviours and exposure to social and developmental risk factors (refer to the information presented in Unit One on Young People's Health Status).</p> <p><b>Show powerpoint slide 3</b> </p> <p><b>Ask</b> the group: <i>What are some of the risk and protective factors for young people's health problems?</i></p> <p><b>Note</b> answers.</p> <p><b>Show powerpoint slides 4-12 on Risk and Protective Factors</b> </p> <p><b>Give</b> a brief presentation on the risk and protective factor framework.</p>

Here is some further information to supplement slides 4-12:

#### **Risk Factors (slides 4-6)**

- Help us to identify young people at risk of health problems and guide appropriate interventions
- Risk and protective factors encompass both individual characteristics and environmental conditions – eg personality traits; family background; social environment
- Hazards that, if present for a given young person, increase the likelihood of health and psychosocial problems
- Increased level of risk factors leads to an increased likelihood of risk behaviours

Characteristics of the young person themselves & their environment that increase their vulnerability to harm

- Socio-economic disadvantage
- Poor parenting
- Family conflict/breakdown
- School failure
- Bullying
- Lack of meaningful relationships with adults/peers
- Exposure to violence and crime
- Individual characteristics - such as low self-esteem, poor social skills
- Refugee experience
- Risk behaviours – activities in which young people engage which increase the likelihood of adverse psychological, social and health consequences
- Research shows that the presence of one risk behaviour raises the risk of the occurrence of other risk behaviours, e.g.
  - tobacco and marijuana use
  - substance use and unsafe sexual activity
  - school drop-out and anti-social behaviour

#### **Protective factors (slides 7-8)**

- Modify the influence of risk factors by helping or altering a person's response to environmental risks
- Act as a buffer to the negative effects of risk factors
- Interrupt the risk chain through which risk factors operate
- Can prevent the initial occurrence of a risk factor
- Connectedness – school; peers; community
- A caring family environment
- Supportive relationship with at least one caring adult
- Positive achievements and sense of belonging at school
- Social skills
- Sense of purpose & meaning

#### **Risk taking (slide 9)**

- Risk taking is a normal part of adolescent development
- Young people typically experiment with new behaviours as they explore their emerging identity and independence
- Not all risk taking is dangerous and detrimental to the young person's health
- A certain degree of risk taking enables a young person to test their limits, learn new skills, gain independence and assume greater responsibility for their life
- The majority of adolescent health and psychosocial problems are related to risk taking behaviours

	<p><b>Risk taking behaviour (slide 10)</b> can be dangerous and requires intervention when it:</p> <ul style="list-style-type: none"> <li>• Interferes with normal adolescent development</li> <li>• Poses serious risks to the young person's health and safety</li> <li>• Impairs healthy functioning</li> <li>• Becomes an established part of the young person's lifestyle</li> <li>• Leads to disconnection from family, school &amp; relationships</li> <li>• And when the risk factors in a young person's life outweigh the protective factors</li> </ul> <p><b>Making a risk assessment (slide 12)</b></p> <ul style="list-style-type: none"> <li>• Be opportunistic – routinely screen for risk and protective factors in adolescent patients</li> <li>• Identify risk and protective factors in the young person's life</li> <li>• Assess risk status:</li> </ul> <p><b>Low risk</b> – engaged in safe experimentation – 'healthy experimenter'  <b>Moderate risk</b> – engaged in behaviours with harmful consequences – e.g. impairment of positive functioning and developmental tasks – 'vulnerable'  <b>High risk</b> – major disruption or risk to health, safety or life - 'troubled' or 'out of control'</p> <p><b>Answer</b> any questions that participants have about risk and protective factors, and add any other relevant information.</p>
<p><b>Key Points</b></p>	<p><b>Emphasize</b> the following points:</p> <ul style="list-style-type: none"> <li>• It is essential for GPs to understand the role that risk factors and risk behaviours play in the onset of young people's health problems and to routinely screen for risk behaviours and the presence of both risk and protective factors.</li> <li>• Risk factors increase the likelihood that an individual will experience negative health or psychosocial outcomes.</li> <li>• Protective factors reduce the likelihood that an individual will experience these negative outcomes.</li> <li>• Risk and protective factors can be related to the individual (e.g. biological, psychological traits) or social (including family, school, and community-related factors).</li> <li>• For a CALD young person you may need to explore pre-and post-migration experiences and sense of acculturation and identity issues. For example, a young person who comes from a refugee or refugee-like background is at greater risk of developing mental health problems. A young person who feels a low sense of identification with both the Australian and their traditional culture may be at risk of feeling alienated.</li> <li>• Protective factors can counteract the effects of risk factors for problem behaviours.</li> <li>• Therefore it is important to identify protective factors for the young person, as well as their risks.</li> </ul> <p><b>Refer</b> participants to <i>Adolescent Health GP Resource Kit 2nd edition</i>, section two chapter five, Key Risk and Protective Factors p. 57.  <a href="http://www.caah.chw.edu.au/resources/gpkit/07_Section_2_chap_5_risk_taking.pdf">http://www.caah.chw.edu.au/resources/gpkit/07_Section_2_chap_5_risk_taking.pdf</a></p> <p> <b>GP Kit</b></p>

## Activity 3.2 Identifying risk and protective factors



### Case study discussion (20 minutes)

<b>Purpose</b>	To identify risk and protective factors.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides <input type="checkbox"/> Case Studies - Risk Factors
<b>Method</b>	<p><b>Distribute</b> a copy of Case Studies - Risk Factors to each participant.</p> <p><b>Show powerpoint slide 13</b> </p> <p><b>Divide</b> participants into small groups of about 5 to 6 participants.</p> <p><b>Allocate</b> one case study to each group (You can allocate case studies to groups on the basis of their relevance to the particular group needs, but make sure at least one case study is of a young person from a CALD background).</p> <p><b>Instruct</b> them to discuss and identify the questions for their allocated case study.</p> <p><b>Advise</b> groups they will have 15 minutes for this task. Ask the groups doing the Case Study 1 to present their findings. Ask the groups before they start their discussion to prioritize the risk factors, and then protective factors, in order of importance. Ask each group representative, prior to giving feedback, to briefly summarise the case study so that the feedback is contextualised.</p> <p><b>Give</b> a time for feedback.</p> <p><b>Continue</b> so that each group reports back.</p> <p><b>Provide</b> relevant feedback and comments.</p> <p><b>Consider</b> risks and protective factors, which factors to focus on, whether risk factors are low, medium or high and what interviews to consider.</p> <p><b>Conclude</b> this activity by saying that in the next activity, they will be practicing how to conduct a systematic risk assessment with a young person.</p>
<b>Key Points</b>	<p><b>See</b> powerpoint slides 4-8 on risk and protective factors.</p> <p><b>Refer</b> participants to <i>Adolescent Health GP Resource Kit 2nd edition</i>, section two chapter five, Risk Taking and Health Promotion, for further ideas about risk taking and interventions.  <a href="http://www.caah.chw.edu.au/resources/gpkit/07_Section_2_chap_5_risk_taking.pdf">http://www.caah.chw.edu.au/resources/gpkit/07_Section_2_chap_5_risk_taking.pdf</a></p> <p></p>

## Activity 3.3 HEEDSSS psychosocial assessment



The following training activities focus on how to conduct a specific psychosocial risk assessment using the HEEDSSS assessment framework.

### Powerpoint presentation (10 minutes)

<b>Purpose</b>	To familiarise participants with the HEEDSSS assessment as a tool for conducting psychosocial screening.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides <input type="checkbox"/> <i>Adolescent Health GP Resource Kit, 2nd edition</i> , section two - chapter two, Conducting a Psychosocial Assessment, pp.39-45 <a href="http://www.caah.chw.edu.au/resources/gpkit/04_Section_2_chap_2_psychosocial_assesment.pdf">http://www.caah.chw.edu.au/resources/gpkit/04_Section_2_chap_2_psychosocial_assesment.pdf</a>
<b>Trainer note</b>	Before commencing the skills practice activities, find out from the group what experience participants have with the HEEDSSS assessment framework. Some GPs may have heard of or used HEEDSSS before, as it is now used in undergraduate and professional development training programs. Those GPs with some familiarity with HEEDSSS should have their level of experience clarified and acknowledged, as this will help to set up and run the role plays at a level that suits the training needs of the group members.
<b>Method</b>	<p><b>Ask</b> the group who has experience in using the HEEDSSS screening tool. Remember, not all participants will necessarily be GPs so it might be appropriate to pair up those with experience with someone with less or no experience. Then to introduce the process present the slides.</p> <p><b>Show powerpoint slides14-21 on HEEDSSS Psychosocial Assessment</b> </p> <p><b>Give</b> a brief presentation about the HEEDSSS assessment process.</p>
<b>Key Points</b>	<p><b>Refer</b> to slides on HEEDSSS Psychosocial Assessment.</p> <p><b>Provide</b> an overview of the rationale and importance of conducting psychosocial screening with young people:</p> <ul style="list-style-type: none"> <li>• Screening for risk behaviours/factors increases the chance of providing effective intervention and preventive education.</li> <li>• Psychosocial screening can be performed even when a young patient presents with a minor complaint, even if only to enquire on a general level about the young person's functioning in key areas of their life such as home; school; friendships; mood; activities, etc.</li> <li>• By reassuring confidentiality and explaining your reasons for screening in these areas, you will help to normalize the process.</li> <li>• Emphasize that HEEDSSS is a systematic process for:             <ul style="list-style-type: none"> <li>- Detecting underlying health or social problems</li> <li>- Identifying risk behaviours, as well as risk and protective factors, in the young person's life</li> <li>- Assessing a young person's risk status</li> <li>- Gaining an overall picture of the young person's psychosocial and cultural background, as well as relevant history and current circumstances</li> <li>- Determining areas for intervention and treatment</li> </ul> </li> </ul>

## Activity 3.4 Demonstration: HEEADSSS assessment ('H'; 'E'; 'A')



### Demonstration (10 minutes)

<b>Purpose</b>	To demonstrate skills for conducting HEEADSSS screening for the domains of Home; Education/Employment; Activities.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides <input type="checkbox"/> Chairs and space for demonstration <input type="checkbox"/> Actor or volunteer <input type="checkbox"/> Case Studies - Risk Factors <input type="checkbox"/> <i>Adolescent Health GP Resource Kit 2nd edition</i> section two – chapter two Conducting a Psychosocial Assessment, pp. 39-45 <a href="http://www.caah.chw.edu.au/resources/gpkit/04_Section_2_chap_2_psychosocial_assesment.pdf">http://www.caah.chw.edu.au/resources/gpkit/04_Section_2_chap_2_psychosocial_assesment.pdf</a> <input type="checkbox"/> <i>Adolescent Health GP Resource Kit 2nd edition</i> Appendix two - Youth Health Risk Assessment, pp.168 -171. <a href="http://www.caah.chw.edu.au/resources/gpkit/19_Appendix_2.pdf">http://www.caah.chw.edu.au/resources/gpkit/19_Appendix_2.pdf</a>
<b>Method</b>	<p><b>Show powerpoint slide 22</b> </p> <p><b>Inform</b> participants that you are now going to give a demonstration of using the HEEADSSS screening tool to conduct a risk assessment.</p> <p><b>Explain</b> that in the role-play you will demonstrate asking questions and exploring risk and protective factors in the first 3 domains of the HEEADSSS assessment i.e. Home ('H'); Education/Employment and Eating/Exercise ('E'); Activities ('A').</p> <p><b>Refer</b> to Kit appendix two for examples of questions to ask in each of the HEEADSSS domains.</p> <p>While setting up, participants can read the nominated case study in preparation for the role play.</p> <p>Set up two chairs in front of the group. Explain that you will play the role of the GP. The young person will be played by either the co-facilitator, a volunteer from the group, or by a young actor (Whoever you use, it is important to prepare them in advance for participation in the role play – see Introduction, Guidelines for Conducting Role Plays for more information on this).</p> <p><b>Inform</b> participants which Case Study character you will be using and the name of the character.</p> <p><b>Conduct</b> the role play as follows:</p> <ul style="list-style-type: none"> <li>• Begin the role play by greeting the young person and explaining confidentiality</li> <li>• Then demonstrate asking questions, exploring risk behaviours and identifying risk and protective factors in each of the three domains (spend no more than 3 minutes on each domain)</li> <li>• You can pause the role play after asking questions in each domain and explain what you have been doing</li> <li>• You can also ask for feedback from the 'young person' and then comments from the participants – then proceed on to the next domain</li> <li>• If some areas take more time, explain to the young person that what they are telling you is important, and make another appointment to explore further with them</li> </ul> <p><b>Answer</b> any questions they have about the HEEADSSS process.</p>

<b>Key Points</b>	<p>You can use HEEADSSS as a way of engaging the young person and building rapport – getting to know the young person's life while gathering a more in-depth history.</p> <p>HEEADSSS is a guide not a prescription; don't use it as a checklist, and be flexible in how you apply it.</p> <p>Let the interview flow naturally in an interactive style and come back to any areas not covered.</p> <p>Ask open-ended questions when possible; move to more focused or probing questions where necessary in order to gather more detail about a particular area of the young person's life.</p> <p>The HEEADSSS assessment is not simply an information gathering exercise; listen carefully to the young person's verbal and non-verbal responses.</p> <p>You may not have time to cover all of the HEEADSSS areas in the one session.</p>
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## Activity 3.5 Skills practice: Conducting the HEEADSSS assessment



### Skills practice (20 minutes) + intro and debrief (10 minutes)

<b>Purpose</b>	To practice conducting HEEADSSS screening for the domains of Home; Education/Employment; Activities.
<b>Materials</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Space and chairs for role plays</li> <li><input type="checkbox"/> Case Studies - Risk Factors</li> <li><input type="checkbox"/> <i>Adolescent Health GP Resource Kit 2nd edition</i> Appendix two - Youth Health Risk Assessment, pp.168-171 <a href="http://www.caah.chw.edu.au/resources/gpkit/19_Appendix_2.pdf">http://www.caah.chw.edu.au/resources/gpkit/19_Appendix_2.pdf</a></li> </ul>
<b>Method</b>	<p>Participants will now have the chance to practice conducting a HEEADSSS assessment.</p> <p><b>Emphasize</b> that while some of them may be familiar with the HEEADSSS process, the following activities will provide them with an opportunity to practise the application of the skills of conducting a psychosocial risk assessment.</p> <p><b>Divide</b> participants into small groups of five to six participants.</p> <p><b>Allocate</b> case studies to the group members.</p> <p><b>Give</b> clear instructions for the activity:</p> <ul style="list-style-type: none"> <li>• One participant will begin by role playing the young person from that case study. Make sure to include at least one CALD case study.</li> <li>• Another group member will play the role of the GP. They should start the role play by explaining confidentiality and then begin asking questions in the first domain ('H')</li> <li>• After about 5 minutes the role play will stop and the participant playing the young person will give feedback to the GP (Refer to Guidelines for Giving Feedback in the Introduction to the Trainer Guide)</li> <li>• The others in the group should stay quiet and act as observers during the role plays and not interrupt. The observers can also give some feedback at the end of the role plays</li> <li>• Then another participant will take a turn to role play another young person and a different group member will play the role of the GP</li> <li>• The new pair can move on to explore one of the other domains ('E' &amp; 'A')</li> <li>• Rotate roles so that as many participant have a turn as GP and/or young person in the time available – each pair will spend about 5 minutes on their role play, before giving feedback (Inform participants that those who don't get a turn this time, will have an opportunity in the next role play activity on screening for Drug use and Sexual behaviour)</li> </ul>

	<p><b>Emphasize</b> that when participants are playing the role of the ‘young person’, they should not make it too difficult for their partner. On the other hand it should not be unrealistically easy (see Guidelines for Conducting Role Plays in the Introduction to the Trainer Guide).</p> <p><b>Give</b> the groups about 20 minutes for this activity.</p> <p><b>Debrief</b> the role plays.</p> <p><b>Ask</b> for feedback from the participants about their experience of doing that exercise:</p> <ul style="list-style-type: none"> <li>• What was difficult about asking questions?</li> <li>• What worked or didn’t work in interviewing the young person?</li> <li>• What risk and protective factors did they identify for the young person in their role play?</li> <li>• Were there any salient cultural issues that arose?</li> </ul>
<b>Key Points</b>	<b>See</b> powerpoint slides 15-17 on HEEADSSS assessment.

## Activity 3.6 Demonstration & skills practice: HEEADSSS assessment (‘D’ & ‘S’)



### Presentation (5 minutes)

<b>Purpose</b>	To understand approaches to conducting screening in sensitive areas.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides
<b>Method</b>	<p><b>Inform</b> the group that in this next activity, they will be exploring approaches to conducting screening in the areas of ‘D’ (Drug use) and ‘S’ (Sexual behaviour &amp; relationships; Suicide and depression; Safety).</p> <p><b>Show powerpoint slides 23-25 on HEEADSSS – Asking Sensitive Questions</b> </p> <p><b>Give</b> a short presentation about approaches to discussing sensitive topics.</p> <p><b>Emphasize</b> that these topics are often more sensitive areas, and that the interviewers need to use sensitive questioning and communication skills in order to elicit information from the young person.</p> <p><b>Discuss</b> approaches that the provider can use to raise these issues and ask questions in a non-threatening way such as the “third person” technique for asking questions.</p> <p><b>Discuss</b> any questions or concerns they have about screening in these sensitive areas.</p>
<b>Key Points</b>	<p><b>See</b> powerpoint slides 23-25 on asking sensitive questions.</p> <p><b>Refer</b> to <i>Adolescent Health GP Resource Kit 2nd edition</i>, section two – chapter two, Conducting a Psychosocial Assessment: Asking Sensitive Questions, p. 40.  <a href="http://www.caah.chw.edu.au/resources/gpkit/04_Section_2_chap_2_psychosocial_assesment.pdf">http://www.caah.chw.edu.au/resources/gpkit/04_Section_2_chap_2_psychosocial_assesment.pdf</a> </p>

**Demonstration (10 minutes), small group discussion (15 minutes) and powerpoint presentation (5 minutes)**

<b>Purpose</b>	To demonstrate practice conducting HEEADSSS screening for the domains of Sexual behaviour & relationships; Suicide and depression; Safety.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides <input type="checkbox"/> Chairs and space for demonstration <input type="checkbox"/> Actor or volunteer <input type="checkbox"/> Case Studies - risk factors <input type="checkbox"/> <i>Adolescent Health GP Resource Kit 2nd edition</i> section two – chapter three, Negotiating a Management Plan, pp. 47-50 <a href="http://www.caah.chw.edu.au/resources/gpkit/05_Section_2_chap_3_management_plan.pdf">http://www.caah.chw.edu.au/resources/gpkit/05_Section_2_chap_3_management_plan.pdf</a>
<b>Method</b>	<p><b>Go back</b> to the demonstration role play case study.</p> <p><b>Repeat</b> the above activities (the demonstration followed by the small-group role-play practice), this time interviewing the co-facilitator/volunteer in the domains of 'D' and 'S' – 10 minutes for demonstration; 15 minutes for small groups.</p> <p>It is important to <b>remind</b> the 'young person' about your confidentiality agreement before beginning to ask questions in these areas.</p> <p><b>Pause</b> the demonstration as necessary to explain the techniques you are using, discuss any difficulties and get feedback from the 'young person'.</p> <p>Following your demonstration, <b>ask</b> them to return to the same groups as before.</p> <p><b>Instruct</b> the groups to practise conducting screening (as they did in the previous activity) – this time in the domains of 'D' (Drug use) and 'S' (Sexual activity).</p> <p>Any participants who did not have a turn in the first role-plays, should now be given an opportunity to play the GP and/or young person.</p> <p><b>Give</b> the groups 20 minutes for this activity and then ask them to return to the large group.</p> <p>Debrief the role play.</p> <p><b>Ask</b> them for feedback about their experience of conducting screening in the more sensitive areas of drug use and sexuality:</p> <ul style="list-style-type: none"> <li>• <i>What was difficult about asking questions in these areas?</i></li> <li>• <i>What worked or didn't work in interviewing the young person?</i></li> <li>• <i>What risk and protective factors did they identify for the young person in these areas?</i></li> </ul> <p><b>Conduct</b> a brief discussion on the challenges of conducting a HEEADSSS assessment:</p> <ul style="list-style-type: none"> <li>• <i>What are some of the challenges in conducting an assessment and how can you ensure that you cover the key issues and concerns, especially if you only have a short consultation time?</i></li> <li>• <i>How would you wrap-up the interview with the young person?</i></li> <li>• <i>What would you emphasize in summarizing the information that the young person has shared with you?</i></li> <li>• <i>How would you get the young person to return for a follow-up consultation if needed?</i></li> <li>• <i>What would you do if it is clear the young person is unlikely to return?</i></li> </ul> <p>In summarising, <b>emphasise</b> that using a screening tool such as HEEADSSS provides a systematic way to remind you to explore particular issues and a systematic approach to patient safety. HEEADSSS provides a guide to covering a broad range of issues that may impact on young people's health.</p> <p><b>Show powerpoint slides 26-28 on wrapping up the interview</b> </p> <p><b>Give</b> a brief presentation on wrapping up the interview and negotiating a management plan.</p>

<b>Key Points</b>	<p><b>See</b> powerpoint slides 26-28 on wrapping up the interview.</p> <p><b>Refer</b> to the <i>Adolescent Health GP Resource Kit 2nd edition</i>, section two – chapter three, Negotiating a Management Plan, pp. 47-50.  <a href="http://www.caah.chw.edu.au/resources/gpkit/05_Section_2_chap_3_management_plan.pdf">http://www.caah.chw.edu.au/resources/gpkit/05_Section_2_chap_3_management_plan.pdf</a></p> <p> <b>GP Kit</b></p>
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## Activity 3.7 Conclusion, evaluation and distribution of reinforcing activity



### Closing (5 minutes)

<b>Purpose</b>	To wrap up the group.
<b>Materials</b>	<input type="checkbox"/> Powerpoint slides <input type="checkbox"/> Evaluation forms <input type="checkbox"/> Reinforcing activity
<b>Method</b>	<p><b>Ask</b> participants:</p> <ul style="list-style-type: none"> <li>• What have you found most valuable or interesting about the topics and activities covered in the ALM?</li> <li>• What knowledge or skills have you learnt that you will be able to apply in your work with young people at your practice?</li> <li>• What areas do you need further training in to improve your skills in youth-friendly practice?</li> </ul> <p><b>Explain</b> and distribute evaluation forms. Give time for participants to complete and hand them in.</p> <p><b>Inform</b> participants that they will need to complete and return the reinforcing activity to the course coordinator within four weeks. Refer to reinforcing activity in their Participant Resources and ask if there any questions about completing this activity.</p> <p><b>Thank</b> the participants and volunteers (young people; co-facilitators; etc.) for their participation in the training.</p> <p><b>Show powerpoint slides 29-30</b> </p>
<b>Key Points</b>	<b>Wrap</b> up the group and ensure that participants are clear about where when and how to complete the reinforcing activity.

## References

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