

# Abstract Booklet

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**AUSTRALIAN ASSOCIATION FOR ADOLESCENT HEALTH**

Higher Degree by Research Student Showcase

# Welcome



## **HIGHER DEGREE BY RESEARCH STUDENT SHOWCASE**

**30TH NOVEMBER - 4TH DECEMBER 2020**

The Australian Association for Adolescent Health is very proud to host this event, which brings together young people and professionals to hear about the work of future adolescent health research leaders.

Research in adolescent and young people's health remains unacceptably underinvested globally and in Australia. To advance the health of our young people, we need solid and sustained adolescent health research that is interdisciplinary, participatory and translational. We know that AAAH members and Youth Health conference delegates in previous years have highly valued learning about current and cutting edge research to increase knowledge and understanding, or to inform practice and policy.

The AAAH HDR Student Showcase 2020 will present current research that covers a range of issues, disciplines and methodologies among diverse populations of young people in Australia and internationally. We look forward to your participation in this event.

Dr Jacqui Hendriks (Convenor)  
A/Professor Melissa Kang (President)

### **ORGANISING COMMITTEE**

Dr Rohan Borschmann  
A/Professor Simon Denny  
Dr Sharon Medlow

With secretariat support from  
The Association Specialists Pty Ltd



## Our Vision

The Australian Association for Adolescent Health (AAAH) brings young people and professionals together to promote the health and wellbeing of adolescents and young adults throughout Australia, through local, national and international connections and collaborations.

## Our Objectives

- Promote public and professional interest in the health and wellbeing of adolescents and young people
- Develop strategies, in partnership with relevant organisations, to reduce the burden of ill health caused by mental health conditions, chronic illness, and preventable injury and disease that are prevalent among young Australians, using health promotion and population health approaches
- Advocate for, and contribute to, local, state, national and international policies and position statements relevant to adolescent and youth health and health care
- Encourage, foster and contribute to research activities and professional practices related to the health and well being of adolescents and young people
- Support education, training and skill development for those working in adolescent and youth health
- Provide networking and professional development events and opportunities, including the organisation of a regular national youth health conference
- Liaise with community and government agencies (at State, national or international level) regarding the provision and improvement of services relating to the health and health care of adolescents and young people. This may include all levels of the health system, relevant non-health sectors and transition services

# Program

A videoconferencing link will be emailed to all registered presenters and attendees prior to the event

## MONDAY 30TH NOVEMBER 2020, 3-4:30pm AEDT

1 Knowledge, attitudes and perceptions of Arabic parents in Australia toward Human Papillomavirus (HPC) Vaccination Program

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2 E-cigarette advocates on Twitter: a content analysis of vaping related tweets

McCausland K, Jancey J, Maycock B, Leaver T, Wolf K, Freeman B

3 Impact of a multimodal exercise program on tibial bone health in adolescents with development coordination disorder: an examination of feasibility and potential efficacy.

Tan JL, Siafarikas A, Rantalainen T, Hart NH, McIntyre F, Hands B, Chivers P

4 Preventing violence-related deaths among young people exposed to the youth justice system

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Tasker S

6 Assessment of dietary characteristics and associated determinants in Australian Aboriginal adolescents aged 10–24 years: an analysis of baseline survey data from the 'Next Generation Youth Well-being Study'

Hasan M, Gubhaju L, Gibberd A, Eades S

## TUESDAY 1ST DECEMBER 2020, 3-4:30pm AEDT

7 Social media is used as a support network for sexually and gender diverse adolescents

Berger MN, Taba M, Lewis L, Marino JL, Lim M, Skinner R

8 Loneliness in the millennium: a systematic review on adolescent and young adult loneliness in 99 countries and territories

Surkalim DL, Luo M, Eres R, Gebel K, Bauman A, Ding D

9 Weight-neutral interventions in young people with overweight or obesity: a systematic review

Hoare JK, Lister NB, Garnett SP, Baur LA, Jebeile H

10 Adolescent's lived experience of autism

Trew S., Plath D, Kalliath, P

11 Reproductive justice for young women with disability in Australia and the Pacific

Ricci CS, Goldblatt B, Steele L, Thomas M, Kang M

12 "I'm nervous to say..." a closer look at what goes in sex education classrooms

Carr G

# Program

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## WEDNESDAY 2ND DECEMBER 2020, 3:30PM AEDT

AGM OF THE AUSTRALIAN ASSOCIATION FOR ADOLESCENT HEALTH  
(separate videoconferencing link)

## THURSDAY 3RD DECEMBER 2020, 3-4:30pm AEDT

13 Livewire.org.au: exploring peer support and identity exploration in an online community for young people living with an illness or disability.

Platcher M, Macnamara J, Brooks F, Yerbury H

14 Sexual health services within Western Australia: exploration of the lived experience of female international students from east and southeast Asia

Takahashi H, Hendriks J

15 Images of young' peoples health. A contextual comparison

Marsden L

16 Prevention of adolescent pregnancy in anglophone Sub-saharan Africa: a scoping review of national policies

Ahinkorah BO, Kang M, Perry L, Brooks F

17 Social and digital media: The generation gap in Muslim families

Douglass CH, Borthwick A, Han E, Sertel Z, Erbas B, Eren S, Higgs P

18 Healthy body weight among Aboriginal adolescents: preliminary analysis of baseline data from the 'Next Generation Youth Well-being Study'

McKay CD, Gubhaju L, McNamara B, Azzopardi P, Roseby R, Eades SJ, on behalf of the 'Next Generation' investigators

## FRIDAY 4TH DECEMBER 2020, 3-4:30pm AEDT

19 My Vital Cycles™: a school-based ovulatory-menstrual health literacy program

Roux FI, Burns SK, Hendriks JL, Chih HJ

20 The social networks of adolescents and age of first sexual experience

Soelin K, Skinner SR, Chung KSK, Kang MS

21 Family planning, hospital admission, and neonatal outcomes of adolescent and adult pregnant women: findings from Maluku, a province in eastern Indonesia.

Wattimena J, McGeechan K, Black K

22 A psychometric evaluation of the Connor-Davidson Resilience Scale for Australian Aboriginal youth

Gorman E, Heritage B, Shepherd CCJ, Marriott R

23 The mechanistic role of social rejection sensitivity and its correlates in adolescent mental health

Minihan S, Kwok C, Schweizer S



# Abstracts

Abstracts are presented in the running order of the program

01

## **Knowledge, attitudes and perceptions of Arabic parents in Australia toward Human Papillomavirus (HPV) Vaccination Program**

Netfa NF[1,4], Tashani M[2], King C[1,3], Rashid H[1,3], Booy R[1,3], Skinner SR[1,4]

1 The Discipline of Child and Adolescent Health, The University of Sydney, The Children's Hospital Westmead Clinical School. 2 Faculty of Medicine, University of Tripoli, Ain Zara, University of Tripoli.

3 National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases, The Children's Hospital at Westmead, 4 Kids Research, The Children's Hospital at Westmead, Sydney, Australia.

**Background and aims:** The National School-Based Human Papillomavirus (HPV) Vaccination Program in Australia achieves generally high uptake, however, there is variability in uptake across schools. Little is known about acceptability of the vaccine among parents of adolescents of culturally and linguistically diverse backgrounds. This study aimed to explore HPV vaccine knowledge and attitudes of parents from Arabic backgrounds in Australia towards HPV vaccination of their children and parents' decision-making around HPV vaccination. **Methods:** Qualitative interviews were conducted in Western Sydney, with parents of adolescents from Arabic backgrounds, whose children were offered HPV vaccine in schools (when they were 12-14 years of age). Recruitment was via informal personal contacts, and passive snowballing. Semi-structured interviews of 30 – 60 minutes duration were conducted face to face in Arabic. These were audio-recorded, transcribed and then translated into English. Thematic analysis was used to analyse the interview transcripts and identify emerging themes and sub-themes. **Results:** This research is the first study to identify the knowledge, attitudes and perceptions of parents from Arabic backgrounds in Australia toward the HPV vaccine. A number of common themes for fifteen interviews are reported: 1) lack of awareness and knowledge of HPV and HPV vaccination, 2) barriers to accessing and understanding the vaccine information sheet, 3) parents' preferences for information provision, 4) the role of parents' religious beliefs in forming attitudes, and 5) lost opportunities to educate parents about HPV vaccination during GP visits. **Conclusion:** The findings point to the need to address cultural, language, and communication barriers to improve awareness and acceptability of HPV vaccination in the Arabic community. A HPV vaccination information sheet is available in Arabic, but parents did not have access to Arabic versions. Educational strategies should be tailored to this community based on their specific information needs.

Disclosure of Interest Statement: No conflict of interest.

# Abstracts

Abstracts are presented in the running order of the program

02

## **E-cigarette advocates on Twitter: a content analysis of vaping related tweets**

McCausland K[1], Jancey J[1], Maycock B[2], Leaver T[3], Wolf K[4], Freeman B[5]

1 Collaboration for Evidence, Research and Impact in Public Health, School of Public Health, Curtin University. 2 College of Medicine and Health, University of Exeter. 3 School of Media, Creative Arts and Social Inquiry, Curtin University. 4 School of Marketing, Curtin University. 5 School of Public Health, University of Sydney

**Background and aims:** The Australian Secondary Students' Alcohol and Drug Survey is the largest and only national survey to have examined e-cigarette use among youth, reporting 14% of 12-17-year-olds have used e-cigarettes. Of those who have used an e-cigarette (n=2,403), 48% report never smoking a tobacco cigarette before their first vape. This data highlights that young Australians are accessing and using e-cigarettes despite Australia's restrictive regulatory approach to these products. Approximately 12% of Australians over 13 are active monthly users of Twitter, therefore exploring e-cigarette discourse on this platform will provide insight into the content young people are exposed too. This study aimed to identify key conversation trends and patterns over time, and discern the core voices, message frames and sentiment surrounding e-cigarette discourse on Twitter to better understand how these products are promoted. **Methods:** A random sample of data were collected from Australian Twitter users who referenced at least one of 15 identified e-cigarette related keywords during 2012, 2014, 2016 or 2018. Data collection was facilitated by TrISMA (Tracking Infrastructure for Social Media Analysis) and analysed by content analysis.

**Results:** A sample of 4432 unique tweets was analysed. Positive sentiment (85%) dominated the discourse surrounding e-cigarettes and vape retailers and manufacturers (26%), the general public (24%) and e-cigarette advocates (23%) were the most prominent posters. Data most frequently presented advertising and promotional content (46%), support for e-cigarettes as a smoking cessation product (95%), endorsed the perceived health and safety benefits of these products (67%), and supported liberal e-cigarette regulation (81%). **Conclusion:** The discourse posted by Australian Twitter users does not reflect the country's current regulatory approach to e-cigarettes. Rather, the conversation generally encourages e-cigarette use and promotes vaping as a socially acceptable practice, discredits scientific evidence of the health risks and rallies around the idea that e-cigarettes should largely be outside the bounds of health policy.

Disclosure of Interest Statement: No conflicts of interest to disclose

# Abstracts

Abstracts are presented in the running order of the program

03

## Impact of a multimodal exercise program on tibial bone health in adolescents with Development Coordination Disorder: an examination of feasibility and potential efficacy

Tan JL[1,2], Siafarikas A[2,3,4,5,7,8], Rantalainen T[2,4,5,6,9], Hart NH[2,4,5,6], McIntyre F[1], Hands B[1,2,5], Chivers P[2,4,5,6]

1 School of Health Sciences, University of Notre Dame Australia. 2 Western Australian Bone Research Collaboration. 3 Department of Endocrinology and Diabetes, Perth Children's Hospital. 4 Exercise Medicine Research Institute, Edith Cowan University. 5 Institute for Health Research, University of Notre Dame Australia. 6 School of Medical and Health Science, Edith Cowan University. 7 Medical School, Division of Paediatrics, University of Western Australia. 8 Telethon Kids Institute for Child Health Research. 9 Gerontology Research Center, University of Jyväskylä.

**Background and aims:** Developmental coordination disorder (DCD) is a neurodevelopmental condition occurring in approximately 5-7% of the population. A higher incidence of impaired bone health, including fractures, has been shown in adolescents with DCD, with the potential for long term health implications. Adolescence is a vital time for bone development, yet the potential of an exercise intervention to improve bone health parameters in adolescents with DCD has not previously been studied. This study thus aimed to determine if engaging adolescents with DCD in an individualized general exercise program, could improve bone health parameters. **Methods:** Twenty-eight adolescents (17 male, 11 female) aged between 12-17 years (Mage= 14.1) with DCD participated in a twice weekly, 13-week generalised multimodal exercise intervention. Eleven participants had previously participated in the intervention. Peripheral quantitative computed tomography scans of the tibia (4% and 66%) were performed over a six-month period. Lower body fitness measures (standing broad jump, vertical jump, 1RM leg press) were assessed at the first and last visit of the intervention. Generalised estimating equations were used to examine the impact of fitness measures on bone parameters over time. **Results:** An overall improvement trend was observed for bone health, with significant increases at the 66% tibial site for bone mass (4.12% increase,  $p=0.010$ ) and cortical area (5.42% increase,  $p=0.014$ ). The gains were greatest for those participating in the program for the first time, however, participants who had previously participated showed continued gains. Statistical modelling found that bone health parameters improved with fitness gains and were influenced by the degree of motor impairment present. **Conclusion:** A multimodal exercise intervention may be effective in improving bone health of adolescents with DCD. Given the impact of motor impairments, gains may be greater over an extended period of study.

Disclosure of Interest Statement: No conflicts of interest to disclose

# Abstracts

Abstracts are presented in the running order of the program

04

## **Preventing violence-related deaths among young people exposed to the youth justice system**

Willoughby M[1,2], Spittal M[3], Borschmann R[1,2], Young TJ[1,2], Kinner SA[1,2]

1Justice Health Unit, Melbourne School of Population and Global Health, The University of Melbourne. 2 Centre for Adolescent Health, Murdoch Children's Research Institute. 3 Mental Health Policy and Practice, Melbourne School of Population and Global Health, The University of Melbourne

**Background and aims:** Violence is a leading cause of death among young people aged 10-24 years. Remarkably little is known about the risk of violence-related death (VRD) among young people exposed to the youth justice system. In this population, we aimed to: (1) calculate the incidence of VRD, (2) describe the circumstances of VRD, (3) compare the rate of VRD to that in the general population. **Methods:** We conducted a retrospective data linkage study examining all young people (aged  $\leq 18$  years) who had contact with the youth justice system from 1993-2017 in Queensland, Australia (N=48,963). Youth justice records were linked probabilistically with the death, coronial, and adult correctional records. Crude mortality rates (CMRs) and standardised mortality ratios (SMRs) were calculated overall and stratified by sex and Indigenous status. **Results:** Over the study period, 51 (3.5%) deaths resulted from violence-related causes. The VRD CMR was 8.1 deaths per 100,000 person-years (95%CI: 6.1-10.6). Risk of VRD in the cohort was 4.9 times higher than in the general population (95%CI: 3.7-6.4). Indigenous young people had the greatest elevation in risk of VRD with a mortality rate 10.8 times that of the general population matched on age and sex (95% CI: 7.2-16.1). Young women were 6.9 times more to die from violence compares to the general population matched on age and sex (95% CI: 3.70, 12.76) **Conclusion:** Young people exposed to the youth justice system have an increased risk of VRDs in the community. Violence-related deaths in this population are a public health issue that warrants urgent attention. Our findings highlight the need for violence prevention programs and interventions that target young people who have contact with the youth justice system.

Disclosure of Interest Statement: No conflicts of interest to disclose.

# Abstracts

Abstracts are presented in the running order of the program

05

## Youth digital health practices during COVID-19

Tasker S[1]

1 Wellbeing, Health & Youth Centre of Research Excellence Young & Resilient Research Centre Institute for Culture and Society

**Background and aims:** Australia's young people are increasingly using and generating health data with digital health platforms and devices (ACMA, 2016). This increased activity has been amplified by the spread of Coronavirus (COVID-19). With the urgent need to transition many existing health services online, traditional face-to-face doctor/patient relationships have had to evolve rapidly. New relationships to health expertise online, combined with the proliferation of unregulated digital health technologies raises significant concerns regarding how young people's health data is captured, used and re-purposed. **Methods:** This research explores the role of expertise in shaping young people's digital health practices and health data during COVID-19. Participatory research design and digital ethnographic methods have been adopted to investigate these phenomena. This paper will present preliminary findings collected from in-depth qualitative interviews with young people aged 12-24, story-board completion methods and recorded digital media-go-along's conducted on zoom via screen-share. **Results:** Preliminary findings challenge the way digital health is defined in policy, expanding the definition to include platforms and devices not intentionally designed to deliver and accommodate for the health needs of young people. This consequentially affects how young people's health data is generated, used and repurposed; creating new ethical challenges and opportunities to address the complex needs of young people in Australia. In addition, health expertise online is mediated by many factors including (but not limited to) context, access, affect, ability, need and (digital) literacy. This indicates that we need to re-theorise health expertise to accommodate for new health connections which are digitally mediated. **Conclusion:** In order to avoid exacerbating existing inequalities in health delivery for young people, we need to develop our understanding of digital health, health data and young people's experiences of health during COVID-19. To do this, I propose in this paper we seek guidance from young people themselves about their experiences of digital health during COVID-19.

Disclosure of Interest Statement: No conflicts of interest to disclose

# Abstracts

Abstracts are presented in the running order of the program

06

## **Assessment of dietary characteristics and associated determinants in Australian Aboriginal adolescents aged 10–24 years: an analysis of baseline survey data from the ‘Next Generation Youth Well-being Study’**

Hasan M[1], Gubhaju L[1], Gibberd A[1], Eades S[2]

1 Indigenous Epidemiology and Health, Centre for Epidemiology and Biostatistics, School of Population and Global Health, The University of Melbourne. 2 Curtin Medical School, Curtin University

**Background and aims:** Suboptimal nutrition, particularly during childhood and adolescence is a risk factor for developing chronic diseases later in life. Colonization and the on-going impacts have had a significant influence on the diet of Australian Aboriginal people. This study aimed to assess the dietary patterns and associated social-demographic and health-related determinants among Aboriginal adolescents and young people. **Methods:** Baseline survey data from Aboriginal adolescents residing in Central Australia, Western Australia, and New South Wales aged 10-24 years were used for this study. Self-reported data on serves of fruits and vegetables and discretionary foods was collected. The age-specific enabling factors for meeting the recommended dietary guidelines were examined. **Results:** Data from 1309 adolescents were included in this analysis (60% 10-15 years; 57% female; 66% from WA). A higher proportion of 10-15 year olds met the recommended intake of fruit compared to 16-24 year olds (73% vs 58%). A slightly higher proportion of 16-24 year olds met the recommended serves of vegetables (15% vs 10%). Consuming discretionary foods; like salty snacks or fast foods, for 2-3 times a week was typical among younger adolescents. Overall, the factors associated with meeting recommended fruit intake included: availability of weekly pocket money of  $\geq \$21$  (adjusted odds ratio (aOR) 1.99, (95% CI 1.06-3.74)), at least 7 hours of physical activity per week (aOR 3.73 (1.12-12.44)) and having something to eat for breakfast (aOR 1.81 (1.05-3.13)). Amongst 16-24-year-olds,  $\geq 3$  days of physical activity per week was the single most significant predictor (aOR 2.18 (1.17-4.05)) in meeting recommended fruit intake. It should be noted that these data are still preliminary, and analyses are currently on-going. **Conclusion:** These early findings indicate that priority should be given to food security programs targeting adolescents and health promotion programs should target overall healthy behaviours to improve dietary intake among adolescents.

Disclosure of Interest Statement: No conflicts of interest to disclose

# Abstracts

Abstracts are presented in the running order of the program

07

## Social media is used as a support network for sexually and gender diverse adolescents

Berger MN[1], Taba M[1], Lewis L[1,2], Marino JL[3,4,5], Lim M[3,6,7], Skinner R[1]

1 Discipline of Child and Adolescent Health, Faculty of Medicine and Health, University of Sydney, Sydney, NSW, Australia. 2 The Kirby Institute, University of New South Wales, Sydney, NSW, Australia. 3 University of Melbourne, Parkville, VIC, Australia. 4 Murdoch Children's Research Institute, Parkville, VIC, Australia. 5 Royal Women's Hospital. 6 Burnet Institute, Melbourne, VIC, Australia. 7 Monash University, Melbourne, VIC, Australia

**Background and aims:** Adolescents are the most frequent users of social media compared to other age groups. Social media has been described as a safe environment for sexually and gender diverse (SGD) adolescents but use as a support network has not been well explored. This is part of a mixed-methods study on social networks and sexual agency.<sup>1</sup> This study explores how SGD adolescents connect online to form support networks and how that differs to non-SGD peers.

**Methods:** Three sets of semi-structured interviews were conducted over 18 months with adolescents. Thematic analysis was used to address the perceptions and experiences of the participants. **Results:** A total of 61 were interviewed with a mean age of 16.71 years (SD = 0.88). Participants were often members of Facebook groups with the goal of connecting with others who also identified as SGD (51%). These groups are used for various activities including 'meet-ups'; Facebook also proved vital to support those with psychological concerns including suicidal ideation. Participants were willing to help others within the group via chat, phone calls and in-person. This was useful for those feeling isolated or victimised. SGD adolescents formed friendships, romantic relationships and gained sexual information from these groups. Some issues include discrimination within the community, mismanaged groups and exposure to anti-SGD material. Heterosexual and cisgender adolescents used social media similarly to connect but not for sexual identity and support. **Conclusion:** Social media is an environment where SGD adolescents can support each other. There remains issues with social media including discrimination against and within SGD communities.

Disclosure of Interest Statement: No conflicts of interest to disclose.

### References:

Lim MSC, Cooper S, Lewis L, Albury K, Chung KSK, Bateson D, et al. Prospective mixed methods study of online and offline social networks and the development of sexual agency in adolescence: the Social Networks and Agency Project (SNAP) protocol. *BMJ Open*. 2019;9(5):e024329. doi:10.1136/bmjopen-2018-024329

# Abstracts

Abstracts are presented in the running order of the program

08

## **Loneliness in the millennium: a systematic review on adolescent and young adult loneliness in 99 countries and territories**

Surkalim DL[1,2], Luo M[1,2], Eres R[3,4], Gebel K[1,5], Bauman A[1,2], Ding D[1,2]

1 Prevention Research Collaboration, Sydney School of Public Health, Faculty of Medicine and Health, The University of Sydney, Camperdown, New South Wales, Australia. 2 Charles Perkins Centre, The University of Sydney, Camperdown, New South Wales, Australia. 3 Social Health and Wellbeing (SHAW) Laboratory, Iverson Health Innovation Research Institute, Swinburne University of Technology, Melbourne, Victoria, Australia. 4 Centre for Mental Health, Swinburne University of Technology, Melbourne, Victoria, Australia. 5 Australian Centre for Public and Population Health Research, School of Public Health, Faculty of Health, University of Technology Sydney, Ultimo, New South Wales, Australia

**Background and aims:** The adolescent period is one filled with substantial and rapid life changes. This becomes more evident due to social changes related to education and vocational transitions. This period of time leaves adolescents particularly susceptible to developing loneliness. Problematic loneliness has been associated with a range of adverse health effects. Despite this, global loneliness surveillance has gone under-reviewed, in terms of international comparisons and standards. The findings of this review aim to draw estimates regarding loneliness prevalence on such a global scale. **Methods:** A systematic search was done in databases EMBASE, MEDLINE, PsycINFO, Google Scholar and Open Grey. Inclusion criteria included (1) appropriate sampling frames for deriving national/regional level prevalence, (2) use of a validated and comparable loneliness measurement instrument, (3) presented data was post January 2000, (4) a sample size >292, and (5) a score of 5+ on the Joanna Briggs Institute Critical Appraisal Checklist. Study characteristics and prevalence of loneliness were extracted by two independent researchers, and further summarised by different measurement instruments. **Results:** Loneliness prevalence data was available for 99 countries/territories. There is a dearth of available data in African, Eastern Mediterranean, South-East Asian, Western Pacific, and low-income countries. Lowest prevalence of loneliness is in Switzerland (1.3%), whilst highest is in Afghanistan (28.5%). **Conclusion:** There is a lack of available data in many countries worldwide. Loneliness prevalence has also reached concerning levels in several countries that have reported data available. Greater surveillance and standardised measurement tools are required to monitor, control, and help alleviate growing levels of loneliness and its associated health outcomes.

Disclosure of Interest Statement: No conflicts of interest to disclose.

# Abstracts

Abstracts are presented in the running order of the program

09

## **Weight-neutral interventions in young people with overweight or obesity: a systematic review**

Hoare JK[1], Lister NB[1,2], Garnett SP[1,2], Baur LA[1,2], Jebeile H[1,2]

1 The University of Sydney, Children's Hospital Westmead Clinical School, Sydney. 2 Institute of Endocrinology and Diabetes, and Weight Management Services, The Children's Hospital at Westmead, Sydney

**Background and aims:** First line management for young people with overweight and obesity includes age-appropriate, family-based lifestyle intervention aiming for weight maintenance or weight loss, while improving health. Weight-neutral interventions are an emerging area of interest in adults, aiming to improve physical and psychosocial health, without focusing on weight. This systematic review describes findings from weight-neutral interventions in young people with overweight or obesity. **Methods:** Six databases were searched to October 2019. Studies were eligible if weight loss was not the intention of the intervention and included young people (10 to 24 years), with overweight or obesity, seeking treatment. **Results:** Six articles met the inclusion criteria, representing three pilot studies. Study 1 (n=37, 14-17y) compared a 6-week mindful eating program with a single lifestyle education session; Study 2 (n=35, 14-17y) delivered a 12-week non-diet lifestyle education program with/without guided imagery promoting health behaviours; and Study 3 (n=33, 12-17y at risk of type 2 diabetes with depressive symptoms) compared a 6-week mindfulness intervention with cognitive-behavioural depression prevention intervention. Results from all studies concluded that weight-neutral interventions were acceptable and feasible. Studies 1 and 3 reported no change in mindfulness. Study 2 reported a greater increase in intuitive eating (Hawks' Scale, score 1-4) post-intervention in the non-diet plus guided imagery group ( $0.32 \pm 0.36$ ,  $p < 0.05$ ), compared with non-diet alone ( $0.15 \pm 0.29$ ). Study 1 reported a significant decrease in mean BMI ( $-1.1 \text{ kg/m}^2$ ) in the mindful eating group and significant increase ( $+0.7 \text{ kg/m}^2$ ) in the lifestyle education group; Studies 2 and 3 reported no between-group differences in BMI. The quality of evidence was limited. **Conclusion:** Findings from these small pilot studies suggest weight-neutral interventions are feasible in young people with overweight and obesity, but data are limited. Further research is warranted.

Disclosure of Interest Statement: No conflicts of interest to disclose

# Abstracts

Abstracts are presented in the running order of the program

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## Adolescent's lived experience of autism

Trew S[1], Plath D[1], Kalliath, P[1]

1 Faculty of Health Sciences, Australian Catholic University

**Background and aims:** Autism Spectrum Disorder is considered a serious developmental condition that impairs a person's ability to communicate and interact (American Psychiatric Association, 2013), thus impacting one's mental health, quality, and experience of life. After persistent and continued efforts from healthcare professionals to find the cause of, and cure for autism, attention has shifted to provide more inclusive and individualised healthcare in attempts to bolster mental health and enhance the quality of life for those with autism. However, current conceptions of the condition remain understood in medical and psychological models, meaning the majority of experts in these fields typically operate from a deficit understanding of the condition, and place greater emphasis on illness and abnormality, over difference and diversity. This framing can have significant impacts on the mental health of those with autism, especially adolescents. Given we have an in-depth understanding of autism from the perspective of those who have no experiential experience of the condition, it is time to afford an expert opinion of autism. The aim of this transcendental phenomenological analysis is to explore; how do adolescents perceive and describe their experience of autism? **Methods:** Data from semi-structured in-depth interviews of 11 adolescents 12-19 years of age with an Autism Spectrum diagnosis were analysed using a transcendental phenomenological method of analysis. **Results:** Interpretation of the analysis illustrates an alternative and nuanced understanding and description of autism. Adolescents place greater emphasis on difference and diversity, rather than difficulty, as they highlight positive elements of the condition and characteristics that manifest in themselves. The essence of adolescents' experience of autism is presented. **Conclusion:** The findings generated from analysis of adolescents insights provides healthcare professionals important information for their approach to working with adolescents with autism, encouraging them to consider autism in relation to adolescents' strengths and abilities, offering a potential to improve wellbeing and mental health of adolescents.

Disclosure of Interest Statement: No conflicts of interest to disclose.

# Abstracts

Abstracts are presented in the running order of the program

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## **Reproductive justice for young women with disability in Australia and the Pacific**

Ricci CS[1], Goldblatt B[1], Steele L[1], Thomas M[1], Kang M[2]

1 Faculty of Law, University of Technology Sydney. 2 Discipline of Public Health/ Australian Research Centre for Public and Population Health, Faculty of Health, University of Technology Sydney

**Background and aims:** Globally, young women with disability are being denied their sexual and reproductive rights. Comprehensive data and guidelines are lacking. **Aim:** To survey available data (statistics, experiences, laws, policies) in relation to sexual and reproductive rights of young women with disability in Australia and the Pacific.

**Methods:** Review of (publicly available) information: statistical data, published research, reports, legislation, policy documents, case law, concluding observations from treaty bodies, and published submissions and personal stories. **Results:** Approximately one in ten young women are young women with disability. In Australia and the Pacific, young women with disability experience: forced sterilisation (often authorised by courts/tribunals); forced abortion; forced contraception (often leading to chemical sterilisation); higher rates of all forms of violence (including reproductive violence); and, barriers accessing sexual and reproductive health services and information. They are more likely to have their babies/children removed from their care despite no evidence of any neglect, abuse or parental incompetence. Substitute decision-making prevails and young women with disability are not recognized as equal before the law. Some laws deny young women with disability the capacity to consent to sex, prohibit marriage or criminalise sex with them. Many laws and policy frameworks offer limited/no protection against the forms of violence they experience. **Conclusion:** Young women with disability are being denied the opportunity to make reproductive decisions and are experiencing multiple and extreme violations of their sexual and reproductive rights, including torture. This is a result of both systemic discrimination and prejudice and an absence of, or partial or inconsistent, laws and policies to protect these rights. Human rights-based disability research that is informed and led by women with disability is being undertaken that will lead to the development of guiding principles to help drive change.

Disclosure of Interest Statement: No conflicts of interest to disclose.

# Abstracts

Abstracts are presented in the running order of the program

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## "I'm nervous to say..." A closer look at what goes on in sex education classrooms

Carr G[1]

1 The University of Sydney

**Background and aims:** Comprehensive sex education has been proven to contribute to positive health outcomes as well as a range of positive social outcomes (UNESCO 2018). School-based sex education has the greatest capacity to achieve these outcomes, being ideally placed to deliver sex education which is age-appropriate, and part of a regular program of sufficient duration (Pound et al., 2017, Fisher et al. 2019, UNESCO 2018, Opie et al. 2018). While frequently the focus of research, schools have often been observed 'from a distance', that is through surveys, interviews and focus groups. While there is plenty of literature about classrooms, there is far less work conducted in classrooms. As such, we have plenty of evidence for the effectiveness of comprehensive sex education, but far less understanding of how this is achieved. This paper aims to document and describe sex education pedagogy by observing and analysing actual sex education lessons. **Methods:** This paper will analyse sex education pedagogy using educational linguistics, specifically Systemic Functional Linguistics (SFL, Halliday 1985[1994]). Results will be presented for a non-linguistic audience. **Results:** 30 sex education lessons were observed and video recorded at a girls' high school in Sydney. Two different teachers were observed, one male and one female, each teaching 15 lessons over 10 weeks. Written assessment tasks were collected from 21 students, with a range from high scoring to low scoring. The lessons covered a range of sex and relationships content within stage 5 of the NSW syllabus, including consent, healthy relationships, pregnancy and contraception, STIs, sexuality and gender diversity, and sexual harassment and assault. The assessment was a scenario-based task focussing on consent and the ability to effectively manage complex situations. Preliminary data analysis will be presented.

**Conclusion:** Findings will contribute to our understandings of sex education pedagogy as a key site for the promotion of sexual health. This includes how students learn about the risks associated with sex, as well as how they learn to navigate safe and healthy relationships.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## **Livewire.org.au: exploring peer support and identity exploration in an online community for young people living with an illness or disability**

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**Background and aims:** Online communities are a promising avenue for adolescents and young adults (AYA) living with an illness or disability to access developmentally appropriate, psychosocial support in addition to their clinical care. Emergent research suggests these platforms afford AYA's opportunities to build peer support and explore their identity in relation to their condition. However, integrating one's condition into their wider sense of self as young person enhances normative development and condition-specific coping. Therefore, investigating how these online communities and peer norms may facilitate identity exploration of AYA's young person selves in tandem with their condition is warranted. **Methods:** To address this concern, this study undertook a netnographic investigation of the Starlight Children's Foundation online community, Livewire.org.au. It employed the methods of participant-observation, fieldnotes, online focus groups and online interviews with Livewire.org.au youth members and adult moderators, to qualitatively examined how the cultural model of the site impacted AYA's ability to build peer support and explore their identity in relation to the social identities of (a) living with a condition (patient selves), and (b) who they are a young people beyond it (teenage selves). **Results:** Findings indicate AYA's valued connecting with peers in a secure, moderated, non-clinical space to share illness/disability concerns alongside youth interests. The shared understanding and experience of living with a condition engendered a sense of relatability and a norm of 'getting it' that facilitated the expression of a diverse array of patient selves. While youth culture fostered exploration of AYA's teenage selves, and served as a source of diversion from condition-specific challenges. Identity tensions were negotiated and validated through peer conversations. **Conclusion:** This study indicates the importance of designing online community interventions for AYA's living with an illness or disability with a dual condition and youth-oriented focus to enhance identity integration, development and condition-specific coping.

Disclosure of Interest Statement: The Starlight Children's Foundation Michelle Platcher received an industry-linked scholarship for her PhD research on Livewire.org.au

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## **Sexual health services within Western Australia: exploration of the lived experience of female international students from east and southeast Asia**

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**Background and aims:** Current research has reported a high prevalence of sexually transmitted infections (STIs), blood borne viruses (BBVs) and unwanted pregnancies among international students (IS) in Australia. However, the utilisation of sexual health clinics is relatively low compared to local students. IS in Australia consist of a diverse range of nationalities from 194 nations around the globe, meaning health care services need to be culturally responsive and adaptable. This research is currently investigating the post-arrival lived-experience of accessing sexual health services, from the perspective of female east Asian and southeast Asian IS. The research also seeks to identify shared enablers and barriers to access which transcend diverse sociodemographic and cultural backgrounds. **Methods:** In-depth semi-structured interviews are currently underway with participants who are female, originate from a country in east Asia or southeast Asia and are currently completing tertiary studies as an IS in Western Australia (WA). Interview data is being transcribed and thematic analysis, using NVivo, is being conducted. **Results:** Data collection is still underway. At present, 13 participants have consented to an interview and eight are aged less than 25 years. Further interviews are anticipated in the coming weeks. Preliminary results indicate variability in the lived experience of accessing and using sexual health services in WA. Some common barriers and enablers to accessing sexual health services are being identified. **Conclusion:** Findings from this study, will help inform policy makers, health practitioners, and educational institutions regarding the lived experience of ISs and their accessibility to sexual health services. It is anticipated that evidence-based recommendations will be developed.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## **Images of young' peoples health. A contextual comparison.**

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**Background and aims:** Research on social media and health in young people frequently adopts a deficit approach or utilises a risk paradigm situating young people's digital practices as a risk to health. The popular discourse around social media also frequently discredits social media and the role it plays in young people's lives; however social media platforms are increasingly the carrier for complex and conflicting health messaging. This messaging is often highly visual and frequently includes images of bodies. This research set out to explore young people's health-related meaning-making in digitally mediated spaces, especially when viewing, responding to, taking, editing or sharing images of self. **Methods:** This project employed participatory and creative research methods. Group workshops with between 2 and 15 people included photo-elicitation, word responses, drawing and mapping activities. Semi-structured, one on one interviews, subsequent to the workshops allowed for detailed discussion. Participants to date include five females and 19 males, between 15 and 24 years of age. **Results:** Early analysis indicates that personal context is highly relevant in young people's health-related image taking and sharing practices. Young people within this study demonstrate highly developed skills to manage their digital presentation and consumption habits to maximise their health within the constraints of personal context. Highlighted within this presentation are the differing approaches and priorities young people have depending on their personal contexts. **Conclusion:** This research demonstrates that, contrary to popular discourse, social media can be an important tool for young people to support their health. Furthermore, young people utilise highly nuanced production and consumption strategies for their social media content, which is part of a constellation of approaches employed to enhance their health.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## **Prevention of adolescent pregnancy in anglophone Sub-Saharan Africa: a scoping review of national policies**

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**Background and aims:** Despite the existence of preventive policies across sub-Saharan Africa, countries within the sub-region lead global rankings for rates of adolescent pregnancy. The aim of this scoping review was to identify and review national policies on the prevention of adolescent pregnancy in Anglophone sub-Saharan Africa. **Methods:** Relevant policies were identified from searches of national government websites and the search engine Google. Recognized screening and data extraction processes were used; data were subjected to content analysis using a published Framework for Evaluating Program and Policy Design on Adolescent Reproductive Health. The PRISMA extension for scoping reviews guidelines was used in reporting the review. **Results:** All policies were backed by political recognition, were government and public initiatives, acknowledged a range of determinants of adolescent pregnancy and allocated human resources to policy activities. Few specified financial resourcing. Most policies acknowledged the importance of coordination and collaboration among public and private actors. All policies had objectives that addressed adolescent pregnancy but none were measurable or included timeframes. Provision of comprehensive sexuality education and adolescent reproductive health services were the most common recommendations. Monitoring and evaluation plans were present in all policies. However, youth involvement in policy formulation, and plans for implementation, monitoring and evaluation were scarce. **Conclusion:** Overall, national policy strengths were seen in relation to their political recognition, and all aspects of policy formulation. Policy implementation strengths and weaknesses were identified, the latter in relation to clear descriptions of financial resources. Importantly, the absence of measurable and time-bound objectives or formal evaluation of policy effectiveness confounds demonstration of what has been delivered and achieved. Youth involvement was notably absent in many policies. For future policy-setting, governments and policy makers should make efforts to engage young people in development and to be transparent, realistic and address the necessary financial resourcing.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## **Social and digital media: The generation gap in Muslim families**

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**Background and aims:** Online technology is central in young people's lives. Our study explored social and digital media use among young Muslims and parents.

**Methods:** This qualitative study was developed with Muslim community members and Green Crescent Australia. Focus groups were held at mosques, office spaces and online. Young Muslims (16-22 years) and parents discussed their social and digital media use, benefits and harms. **Results:** From seven focus groups with 33 young Muslims and 15 parents, we generated five themes. Social and digital media integrated into daily life: Young people and parents used social and digital media to consume news, manage school and work and contact relatives and friends. Online time increased substantially during COVID-19. Representation and belonging: Young people described social media enabled representation of their culture, religion and minority groups. It allowed them to create safe spaces and feel a sense of belonging. Feelings of inadequacy: Young participants followed people they admired online and were frequently exposed to unrealistic standards of success and beauty which contributed to feelings of inadequacy and negative body image. Online bullying, racism and Islamophobia: Both parents and young people agreed online bullying caused significant harms for young people and families. Some young people observed online racism and Islamophobia through social media and perceived there were few consequences. Intergenerational differences: While young participants easily brainstormed benefits, parents focused on harms and believed social media robbed young people of "real world" experiences. Parents wanted to protect young people from online harms but felt generational differences hindered their efforts. **Conclusion:** Our study identified benefits of digital and social media among Muslim participants including communication, representation and belonging. Similar to the general population, harms included online bullying and reduced self-esteem. Interventions are needed to support parents in implementing mitigation strategies and negotiating use with young people.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## Healthy body weight among Aboriginal adolescents:" preliminary analysis of baseline data from the 'Next Generation Youth Well-being Study'

McKay CD[1], Gubhaju L[1], McNamara B[1], Azzopardi P[2,3], Roseby R[4,5], Eades SJ[1,6], on behalf of the 'Next Generation' investigators

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**Background and aims:** Due to inequalities in Australian society, Aboriginal young people experience increased burden from the childhood obesity epidemic. While the disparity in the obesity burden is well-established, there is little published evidence about healthy body weight among Aboriginal children and adolescents and the factors that promote it. The 'Next Generation' study assessed healthy body weight at baseline among a cohort of Aboriginal adolescents and the context in which it occurs. **Methods:** Aboriginal adolescents aged 10-24 years were recruited through community networks by Aboriginal research officers based in Alice Springs, Perth and Sydney. At baseline, body mass index (BMI) was calculated from measured height and weight. BMI was categorised using age and sex specific cut-offs according to International Obesity Task Force criteria. Healthy body weight corresponds with adult BMI cut-offs of between 18.5 and 25 kg/m<sup>2</sup>. Participants were surveyed about exposures, including physical and mental health, social determinants, and cultural and community engagement. We examined relationships between healthy body weight and exposures. **Results:** Of 1309 participants, 1042 with complete BMI data were included (median age 14.4 years, 56% female, 65% from Western Australia). Overall, 49% had healthy body weight, 23% overweight, 20% obese and 8% underweight. Participants aged 10-14 years were most likely to be of healthy weight (55%), declining for 15-19 years (46%) and 18-24 years (33%,  $P < 0.001$ ). Preliminary associations of healthy body weight with other contextual factors will be presented. **Conclusion:** Healthy body weight was common among the Next Generation cohort at baseline, with highest levels in early adolescence and declining into young adulthood. This highlights the importance of supporting communities to intervene early in adolescence to promote healthy body weight and help prevent obesity and its consequences.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## **My Vital Cycles™: a school-based ovulatory-menstrual health literacy program**

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**Background and aims:** A high prevalence of adolescent girls experience ovulatory-menstrual (OM) health difficulties such as painful periods, premenstrual symptoms, irregular cycles and abnormal bleeding patterns. These difficulties are associated with school absenteeism, reduced concentration in class, a negative body image, the onset of eating disorders, non-suicidal self-injury, and poor quality of life. A review of school-based resources suggests that this stigmatized subject can be presented negatively. Furthermore, some teachers can find this subject awkward to teach. This may account for a tendency to outsource reproductive health education to external facilitators. This research project aimed to develop and trial a school-based whole person OM health literacy program to address these issues. **Methods:** A Delphi Panel was convened with experts in medicine, education, and public health. Together with a systematic literature review of school-based OM health programs, they informed a draft program and draft questionnaire to teach and to test adolescent girls' OM health literacy. These drafts were reviewed by adolescent girls, parents, teachers and school healthcare professionals in focus groups and one-on-one interviews. The draft questionnaire was then test-retested to establish its validity. **Results:** The Delphi Panel validated the content of the draft program. Based on the principles of Positive Education, the program was mapped to the Western Australian curriculum, Nutbeam's Health Literacy Model and the WHO's Health Promoting School framework. The focus groups and one-on-one interviews face validated the program and questionnaire, and suggested additional refinements (e.g. website, animations, videos, and the name My Vital Cycles™).

**Conclusion:** My Vital Cycles™ recognizes the OM cycle as a biopsychosocial phenomenon and it practically addresses common OM health difficulties with the aim of improving OM health literacy. Its impact on OM health literacy will be trialed in a single-sex school. The trial results will be used for further refinement.

Disclosure of Interest Statement: No conflicts of interest to disclose.

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## **The social networks of adolescents and age of first sexual experience**

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**Background and aims:** Adolescents today integrate on- and off-line social networks to communicate with peers as well as intimate partners. Social network analysis is learning of adolescents' positions and characteristics of the people (alters) in their social networks. This study aimed to investigate the influence of adolescents' social networks on age of first vaginal sex.

**Methods:** This study analyzed the data from the Social Networks and Agency Project (SNAP study); an on-line prospective cohort study, conducted in Australia in 2015-2018. We calculated the social network properties of adolescents including degree centrality (the count of relationships) and constraint (a closely tied network where new information becomes redundant quickly), then examined associations between social network properties, characteristics of alters and age of first vaginal sex using UCINET and STATA. **Results:** Eighty-six participants aged 15-17 years completed the survey (70% female, 85% born in Australia, 91% secondary school students, 23% attracted to the opposite sex only, 70% attracted to both sexes, 80% were sexually active). We dichotomized age of first vaginal sex as early (<16 years) and later. Later first vaginal sex was more likely in participants with more people in their network (Odds Ratio- 4.11, 95% Confidence Interval: 1.02 - 16.67) and less likely in those whose social networks were more constrained (OR- 0.24, 95% CI 0.06 - 0.98). That was more likely in those who had more friends (Adjusted OR 5.88, 95% CI 1.13 - 30.63), more high school students (AOR 7.9, 95% CI 1.41 - 44.71) and greater number of 'very close to' people (AOR 36.35, 95% CI 2.27 - 581.47), and less likely in those with more non-students in their networks (AOR- 0.14, 95% CI 0.03 - 0.64). **Conclusion:** Our analyses suggest that adolescents with more friends, more high school students and people they were 'very close to' in their networks have their first experience of sex at a later age. We should interpret with the caution that adolescents with higher constraints had first vaginal sex earlier.

Disclosure of Interest Statement: No conflict of interest reported.

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## **Family planning, hospital admission, and neonatal outcomes of adolescent and adult pregnant women: findings from Maluku, a province in eastern Indonesia.**

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**Background and aims:** There is little published data in Maluku on the difference between adolescent and older pregnant women who access and are treated by a health facility. We aimed to compare the differences in the past use of family planning methods, hospital admission, and neonatal outcomes according to maternal age in women presenting for hospital-based pregnancy and childbirth care. **Methods:** This is a retrospective cohort study using data from medical records of two general hospitals in Maluku, Indonesia. We included all women between 15 and 49 years of age who were admitted for pregnancy and childbirth inpatient care in 2017. Proportions across four maternal age groups (15 – 19, 20 – 24, 25 – 34, and ≥35) were compared using the Chi-square and Fisher's exact tests. **Results:** Of 2433 women, 5% were adolescents (15 – 19 years of age). Before the current pregnancy, adolescents were less likely to have used any family planning methods (11% vs. 28%, 51%, and 56%;  $p<0.001$ ). On admission to the hospital, adolescents were more likely to present without a referral (85% vs. 76%, 60%, and 61%;  $p<0.001$ ). At hospital discharge, adolescents and young adults (20 – 24 years of age) were less likely to be covered by health insurance than the other adult groups (64% vs. 63%, 79% and 85%;  $p<0.001$ ). Of 2180 live births, babies of adolescents mothers were at greater risk of low birth weight (20% vs. 16%, 10%, and 8%;  $p<0.001$ ), being small for gestational age (30% vs. 25%, 15% and 13%;  $p<0.001$ ), and asphyxia (23% vs. 13%, 11%, and 8%;  $p<0.001$ ). **Conclusion:** Pregnant adolescents were more likely to have a lack of family planning, an unplanned admission, inadequate health insurance coverage, and poorer neonatal outcomes. The present study contributes additional evidence that suggests the need to improve youth health policies and programs.

Disclosure of Interest Statement: No conflicts of interest to disclose

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## **A psychometric evaluation of the Connor-Davidson Resilience Scale for Australian Aboriginal youth**

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**Background and aims:** There is a distinct paucity of quantitative measures of resilience that have been specifically validated for use with young Aboriginal people in Australia. We undertook the first investigation of the validity and reliability of the Connor-Davidson Resilience Scale (CD-RISC) in a sample of Australian Aboriginal people, with a focus on youth. **Methods:** We conducted a cross-sectional study of resilience issues among a sample of Aboriginal youth (15-25 years old) in New South Wales and Western Australia, featuring self-completes of the 10-item CD-RISC in online and face-to-face settings. A Rasch analysis was conducted using 122 responses to the CD-RISC to determine item independence, response category adequacy, differential item functioning, unidimensional measurement, person and item reliability and item fit. Confirmatory factor analysis was also conducted, complementary to the Rasch analysis. **Results:** Four problematic items from the original instrument were removed, on the basis of item dependence and differential item functioning. The final 6-item instrument exhibited improved item separation and reliability index values - suggesting an improved structure - however several limitations such as a prominent ceiling effect were evident. **Conclusion:** Our findings suggest that the CD-RISC instrument should be applied in Aboriginal contexts with caution. Further psychometric examination of the CD-RISC with Aboriginal youth is warranted before it can be used with confidence by researchers and clinicians.

Disclosure of Interest Statement: No conflicts of interest to disclose.

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## The mechanistic role of social rejection sensitivity and its correlates in adolescent mental health

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**Background and aims:** Adolescence is characterised by substantial development of social behaviour and functioning. During adolescence, young people begin to reorientate towards their peers and become more sensitive to rejection by others. Adolescence is also a vulnerable period for the development of mental health difficulties. A number of key risk factors for emotional disorders emerge during adolescence, including social rejection sensitivity, which has been associated both cross-sectionally and longitudinally with adolescent mental health. Theoretical models propose that social rejection sensitivity is expressed in a negative interpretation of ambiguous social scenarios and is related to early experiences of rejection. The present study explored the theorised associations between social rejection sensitivity, interpretation bias, parental rejection, and mental health from adolescence to adulthood. **Methods:** Participants (N = 362, M (SD) age = 19.7 (4.8), median (IQR) age = 18 (6), range: 11 – 45 years, 63% female) completed self-report measures of social rejection sensitivity, parenting, and mental health as well as an ambiguous social scenarios task, in which participants had to learn to resolve ambiguous social scenarios positively. A scrambled sentence task served as a measure of interpretation bias, and was completed before and after the ambiguous social scenarios task. **Results:** All variables of interest were positively correlated and varied as a function of parental rejection, such that those who reported greater parental rejection also reported greater social rejection sensitivity, interpretation bias, and mental health symptoms. Social rejection sensitivity partially accounted for the relationship between parental rejection and mental health as well as the relationship between interpretation bias and mental health. Individuals with greater social rejection sensitivity demonstrated less of a shift in bias following ambiguous scenario resolution, suggesting that negative interpretation bias is more entrenched in these individuals. The effects appeared stable across adolescence to early adulthood, as indicated by a non-significant effect of age. **Conclusion:** The results suggest that social rejection sensitivity is an important risk factor for mental health from adolescence to early adulthood.

Disclosure of Interest Statement: No conflicts of interest to disclose.



