



Royal Perth Hospital

Prevent Alcohol and Risk-Related Trauma in Youth (P.A.R.T.Y)



Summary

“Road traffic crashes are the leading cause of death for 10-24 year olds,” (WHO, 2007). Despite significant public education, Australia continues to have a high road toll. Common factors in road crashes include risk taking behaviour and youth. Health Promotion and Disease Prevention is arguably the most effective way to improve the health of our community.

The ‘Prevent Alcohol and Risk Related Trauma in Youth’ (P.A.R.T.Y.) Program has been operational at Royal Perth Hospital since 2006. The aim of the Program is to promote injury prevention through reality education, enabling youth to recognise risks and make informed choices about activities and behaviours.

The Program brings together groups within the hospital, from external agencies and victims of previous injuries, exposing youth to the potential physical and psychological impact that results from traumatic injury.

The Program, originating in Canada, has produced significant benefits in reducing alcohol related traffic offences, including speeding, seat belt and repeat offences. We anticipate similar results and a reduction in the road toll for our young citizens.

Outlining possible consequences of choices allows students to make more informed decisions about taking risks. Our target populations are youth between the ages of 15 and 24. Over 1200 students have participated in the Program so far, exploring the dynamic relationship between choice, independence and injury.

The success of the Program can be attributed to the various resources working together ensuring that the young generation of West Australians are given the best chance to learn about the realistic impact of risk taking behaviour.

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1. Introduction

Trauma and injury is the most common cause of death in young Australians, and road trauma is the most common agent in this group. Despite significant public education, Australia continues to have a high road toll. "In addition to the burden of personal suffering, the monetary cost of road crashes is an estimated \$15 billion annually", (Australian Government, 1996 data). The latest statistics from the Australian Government Road Deaths Australia, 2006, state that 439 road users died between the ages of 17 and 25. This accounts for 27.5% of all deaths in this category for all age groups.

The true cost of road trauma goes beyond the significant health costs of acute medical care and rehabilitation. As these individuals are young, productive members of the workforce, permanent or temporary loss of potential workforce is a further cost to the community.

In recent years, we have seen a devastating loss of young lives on WA roads. In spite of all the safety messages delivered via various media and school education programs, our road toll continues unabated. The common elements of road trauma are excess speed, lack of seatbelt use, alcohol, drugs and inexperience (youth). These elements are collectively labelled "risk taking behaviour".

The Prevent Alcohol and Risk Related Trauma in Youth, (P.A.R.T.Y.) Program is a dynamic, interactive health promotion Program aimed at youth and promotes injury prevention through reality education. It enables youth to recognise and minimise risks, and make informed choices about risk-taking behaviour and activities (P.A.R.T.Y., 1998).

Joanne Banfield, an Emergency Nurse at Sunnybrook Women's College Health Sciences Centre in Toronto, Canada, established the P.A.R.T.Y. Program in 1986, because of the high numbers of trauma incidents presenting to the Emergency Department (ED). This reality injury-prevention Program was intended to enable youths to make informed choices about their behaviour and risk-taking attitudes. Students who participated in the Program were followed up via their driving and infringement records and compared to those who had not participated in the Program. The results from a ten-year analysis were highly significant. There was a 75% reduction in alcohol related offences, 50% reduction in seat belt offences, and a 10% reduction in speeding offences within the student group exposed to this Program. (Banfield, 2004).

In March 2006 the Trauma Services at Royal Perth Hospital (RPH) implemented the P.A.R.T.Y. Program as a three month pilot Injury Prevention Strategy. Participation in the Program was initially offered to all schools within the Perth Metropolitan area for students in years 10 to 12, aged 14 years and above. Because of the Program's popularity with schools and students and due to wide media coverage, it was completely booked for the remainder of that school year. At the time of this report, the overwhelming success of the Program continues with school terms fully booked until the end of 2008.

2. The Program

The students spend a day at Royal Perth Hospital (RPH), with the afternoon session conducted at the Rehabilitation Division and Spinal Unit at Shenton Park Campus.

After a short introduction to familiarise the students with the explanation and definition of the acronym 'P.A.R.T.Y', a pre Program questionnaire is completed by the students to identify their interpretation of a risk-taking activity.

Next, a session is presented outlining risk taking behaviours and possible consequences of bad choices, e.g. drug or alcohol use. A series of presentations follow. An Ambulance Paramedic outlines the pre hospital phase of a trauma patient, and a Trauma Doctor to illustrate the vulnerability of the brain and spinal cord.

Students are divided into three small groups and commence tours of the Emergency Department (ED), Intensive Care Unit (ICU), and Trauma Ward. The students are encouraged to touch and feel real equipment at mock bed spaces, and to ask questions. During the visit to the Trauma Ward, the students are given the opportunity to meet and talk to injury survivors about their accidents, and the choices that led to the experience of trauma.

Over lunch, the students are introduced to the impact of disability and impairment by the use of splints, neck braces and eye patches, simulating some injuries, whilst eating their meal. Although this is a light-hearted session, it has the ability to deliver a powerful message about the life long challenges, changes and handicaps that injury can result in.

The afternoon is spent at Shenton Park Rehabilitation Division and Spinal Unit commencing with a presentation from the Staff Development Nurse on the Spinal Ward. Under the supervision of experienced Physiotherapists, the students then gain some insight into life with a disability. They have the opportunity to sit in a wheelchair, manoeuvre up kerbs and steps, and problem solve some of the challenges faced with being in a wheelchair.

The final talk of the day is from an injury survivor who has experienced a spinal injury and lives with paralysis. The speaker focuses on choices they have made in life and the impact of those choices.

A short post-Program questionnaire and student evaluation is followed by a debriefing session to answer any questions or explain any components of the day.

A 'Contract for Life' is distributed for each student, and can be used as a tool to approach parents and inform them of the day. A 'P.A.R.T.Y.' bag is also given to each student, which contains alcohol related information, provided by the Office of Road Safety.

Further details of the Program can be found on the Royal Perth Hospital website:

<http://www.rph.wa.gov.au/traumaparty.html>

3. Introduction of P.A.R.T.Y. to Royal Perth Hospital

The P.A.R.T.Y. Program is licensed in Canada and, in order to set up the Program in Perth, the license agreement criteria had to be met by Royal Perth Hospital (RPH). Dr. Gope, working in the Emergency Department of RPH, joined the Canadian Program for an extended period in order to familiarise herself and obtain in-depth knowledge. Due to this allegiance and her continuous involvement in Trauma due to the nature of her position within RPH, she is able to deliver local support and consultation to the Program, and receive feedback from Canada that could be used in the Perth Program and vice versa.

The Program is fully supported and endorsed by the Education Department. Established guidelines to fulfil 'Duty of Care' regarding students resulted in a final plan, which satisfies all the requirements of the two institutions, and finally consumers – the schools. Paramount is the assured privacy for patients, safety (physical and psychological) of students, and clear learning structures and objectives.

Individual consultation with a variety of schools (state and private) was established to determine if there was interest in the Program. The response has been overwhelmingly positive, and all available sessions are rapidly booked. Our first priority is that the Program is available to schools, who attend the Program in term time only. The P.A.R.T.Y. Program offers sessions to the Juvenile Justice System and Mining Industry apprentices. Both these sessions are conducted in the school holidays.

The P.A.R.T.Y. Program has developed a close working relationship with the Paraplegic Benefit Fund who provides presenters with spinal injury. This Program has not only enabled students to gain an insight into the lives of those with spinal injury, but it has also had added benefit for the presenters themselves to talk about their injury in the hope that others will not go through the same ordeal. The educational section of the St John Ambulance service provides their services towards the success of the day. These presenters voluntarily give up their time to participate in the Program.

The commitment and interest of all staff has been overwhelming. Three Patient Care Assistants (PCA's) are assigned to guide the students to and from the designated areas with minimal delay. The PCA's also have a good working knowledge of the hospital and are able to answer some questions from the students. Medical and Nursing staff at all levels, in all departments, work closely together to ensure that the Program runs on time and with minimal disruption to patients. This activity is additional to their usual clinical duties. Staff such as the hospital chaplain and allocated sick nurse is on standby to provide care should a student become emotionally or physically unwell.

4. Serving the Community

This Program has the aim of protecting our most important resource – the next generation. It will deliver healthy communities and prevent risk taking behaviour regarding road safety incorporating lifestyle, drugs and alcohol. The lessons learned on this single day can provide the best opportunity for the next generation to live better and healthier lives.

P.A.R.T.Y. is unique in bringing health promotion into a tertiary hospital. The Program, already adapted to suit West Australia and the resources at Royal Perth Hospital, adheres to P.A.R.T.Y. standards established in Canada. These standards are flexible and allow for a certain amount of creativity. Changes can be made to the Program to suit current trends in youth. . The Program is flexible in order to respond to changes in society. Although the Program currently focuses on alcohol and road trauma, other areas of risk taking behaviour can be addressed, for example, other drugs, if the demand requires it.

Ongoing assessment of the Program will continue and changes in resources may be necessary over time. Currently, many different services are combined, including the educational components, and meeting with people living with a long term disability that the students may not otherwise meet in their social sphere.

One important point to highlight is that results show that students post P.A.R.T.Y. would reduce risk-taking behaviour as a result of the Program. It is hoped that this change in behaviour will lead to fewer hospital admissions and therefore less pressure on the health service. 709 students (58%) who participated said they would reduce risk-taking behaviour because of this Program.

A further initiative, albeit still in the initial planning stage, is to offer this Program to the rural communities. Meetings with the Regional Directors of Public Health highlighted an interest within the rural areas. A modified Program via a tele-link to interested communities will be available next year. The proposed Program will offer an initial welcome to students and staff rurally, in addition to the students in the lecture theatre at RPH. This will be followed by the usual presentations conducted in the morning. Unable to tour Royal Perth Hospital, our rural guests will be presented with short videos of ED, ICU and Trauma Ward. We plan to reconnect briefly to watch a video of an injury survivor before lunch. The Program will be interrupted shortly for the rural area until the students arrive at Shenton Park Rehabilitation Division and Spinal Unit. The tele-link will be reconnected upon arrival to the Spinal Unit and continue until the closing presentation. It is a very exciting and innovative addition to an already dynamic Program, using the latest technology.

5. Initiatives used in Western Australia

Australian research has demonstrated that over the past 20 years young adults are consuming alcohol at an earlier age, and are at increased levels of high risk alcohol related injuries and accidental death due to their lack of experience of drinking and its effects, (ICCWA, 2004). P.A.R.T.Y. Program objectives include the aim to empower youth to recognise risk and make informed, safe choices and to increase awareness of personal responsibility for those choices.

Royal Perth Hospital is the first hospital within Australia and New Zealand to acquire the license for the P.A.R.T.Y. Program. Although the Program is prescriptive and has clear guidelines from Canada, there is a large element of flexibility to allow adaptation for local communities. This is a Program encouraging smart choices and thus reducing risk related trauma. It addresses numerous teenage issues such as drink driving, drugs and the use of restraints (seat belts) or lack of them, in an innovative and non-offensive way. The P.A.R.T.Y. Program team encourages open-ended questions, from all presenters throughout the day, to allow students to communicate easily. The students are openly challenged through discussion with their peers to explore what they believe are smart choices.

The Program has attracted strong media interest, and from other hospitals within WA. Other states have also shown a keen interest in establishing the Program. Initiating the Program in Australia provides a role model allowing other hospitals the chance to examine its effectiveness and to incorporate regional variances within the licence. We have incorporated specific elements to the basic Program that are truly unique, inventive and exciting to Western Australia.

Discussions with the Juvenile Justice Service of WA gave us reason to believe that the Program could benefit teenagers who were involved within the system. We provide regular allocated sessions during the year as part of their rehabilitation. Following referral from either the Police or the Courts after committing an offence, Juvenile Justice Teams will formulate an action plan to assist in reforming the behaviour of that particular youth. This process is utilised as a Court Diversionary Process to allow the youth the chance to make amends for their offence. If the Juvenile Justice Teams identify a youth as a high risk taker and subsequent risk of trauma is identified, the P.A.R.T.Y. Program will be incorporated into their action plan. The Program is endorsed by the Juvenile Courts of Western Australia. If the youth does not attend the Program, in order to achieve objectives of the action plan, a scheduled offence may ensue under normal court conditions.

In addition to this group, allocated sessions are also provided to Mining Apprentices as part of their induction Program within the industry. Both these role model initiatives are unique to Perth P.A.R.T.Y.

As previously mentioned, the rural communities will be exposed to P.A.R.T.Y. in the future, incorporating some of their own recourses, along with the resources available at Royal Perth Hospital. This initiative has been initially investigated and we plan to incorporate the Program to all rural hospitals in the near future.

6. Enhancing quality of life and wellbeing of Western Australians

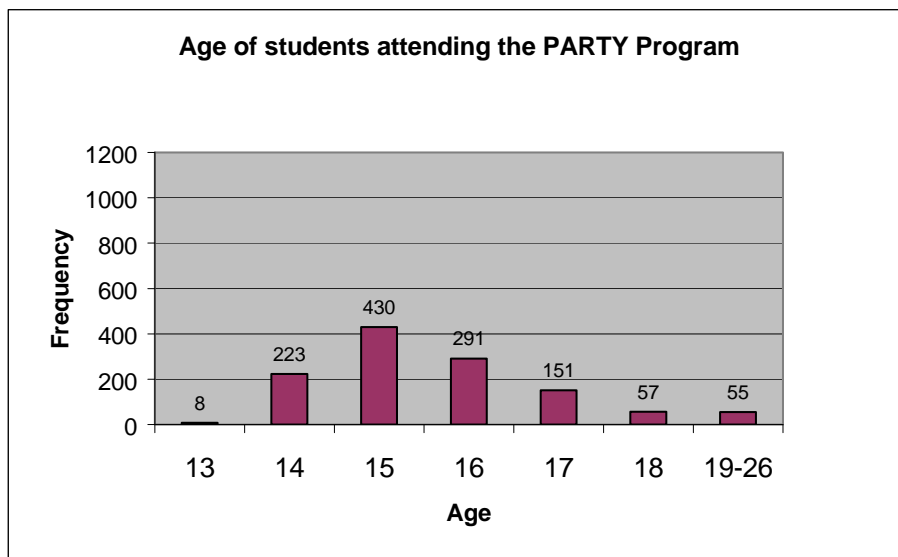
Royal Perth Hospital (RPH) plays a leading role in the treatment of severe trauma victims. Prevention of injury and the promotion of healthy communities is a major focus of the RPH Trauma Services along with other sectors within the health service. It is anticipated that P.A.R.T.Y. will provide support for young peoples' futures through effective intervention.

The success of the Program can be directly attributed to the commitment of the various departments, staff and administration of a large organization who all work together to ensure that the young generation of West Australians are given the best chance to learn about the realistic impact of risk taking behaviour.

Evidence from Canada shows that we can expect a >50% reduction in road traffic offences due to participation in this Program. Our own data suggests that not only are students' behaviours altered, because of the Program, but also their attitudes towards making safer, smarter choices. Pre and post questionnaire analysis in the Perth students shows a significant change in attitude, and knowledge of the risks that were discussed in the Program.

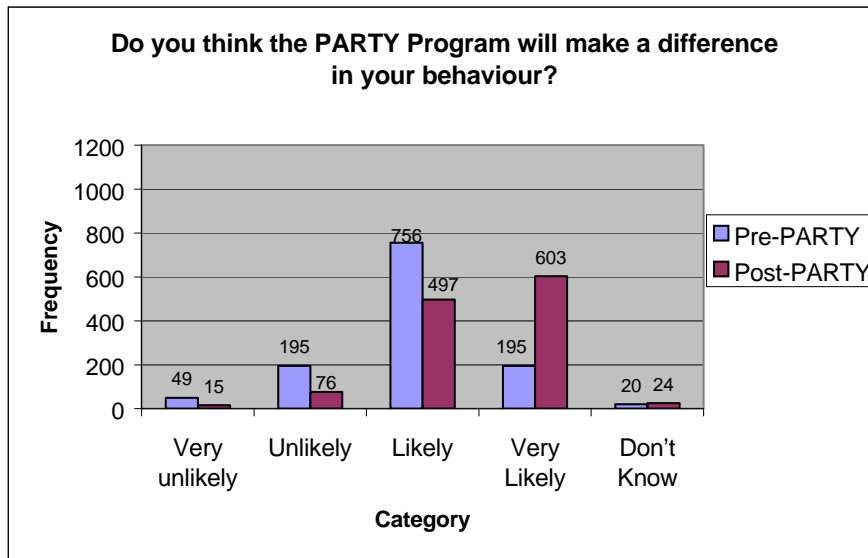
Over 1200 students have participated in the Program so far with 47% male and 53% female. The majority of students were within our target age range of 15-24 years (**Graph 1**).

Graph 1



When asked if the P.A.R.T.Y. Program would make a difference in future behaviour, **(Graph 2)** 603 students (50%) said it would be “very likely” post P.A.R.T.Y.

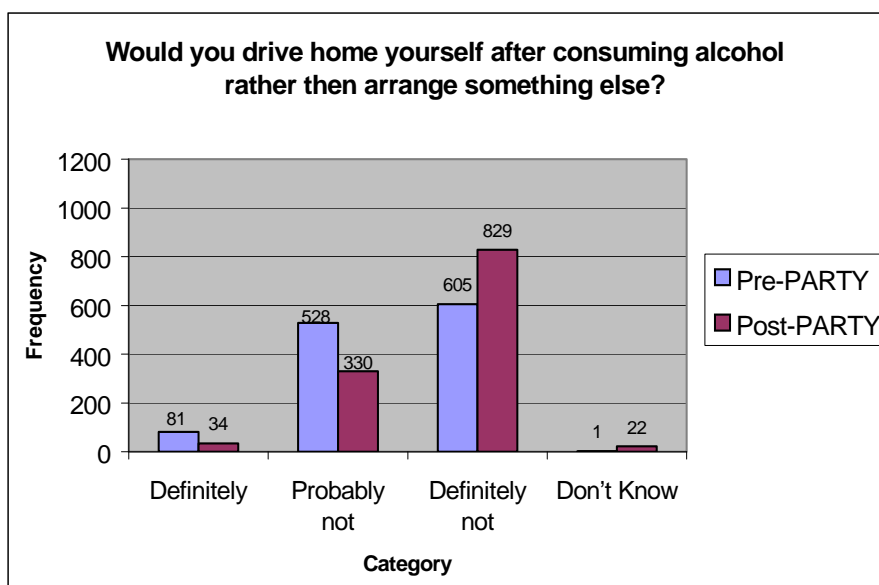
Graph 2



Students are asked a series of questions in the pre-Program questionnaire in order to learn about their opinions in relation to risk taking behaviour. The Program questionnaires also assessed students’ decision-making in hypothetical situations. The post-Program questionnaire repeated the hypothetical questions to establish whether the students had changed their views or attitudes because of the Program.

Students are asked pre and post the Program whether they would drive after consuming alcohol at a party **(Graph 3)**. The results are encouraging with 68% stating they would definitely not drive home post Program.

Graph 3



7. Continuous Improvement

The participants were asked if they would change anything in the P.A.R.T.Y. Program. 587 students (48%) would not change anything, 196 students (16%) reported they would like to meet and chat to more patients.

857 students (70%) stated they would pass on the information they have gained from the Program to their peers, ensuring the students who experienced this unique opportunity would inform the students who were unable to attend. 226 (19%) of students reported that they felt more aware of keeping themselves and others safe. 427 students (35%) answered that meeting patients was what they remembered most.

The evaluation goes on to ask which section they liked the best and why. 382 students (31%) reported that direct patient interaction was the best section, followed by 296 students (24%) who rated the visit to Shenton Park Rehabilitation Division and Spinal Unit as the best.

P.A.R.T.Y. personnel continually evaluate and monitor the effectiveness of each session. The data is then coded in categories and entered into a database. Students report so far that the three most important things they learned at the session were:

- First: **“don’t drink and drive”**
- Second: **“your choices impact on family and friends”**
- Third: **“to be safe at all times”**

A follow-up questionnaire is administered 3-5 months post Program to identify whether the behavioural changes, if any, have been sustained.

Evaluations by accompanying adults are very important and again, these are coded and analysed. Comments are sought on the individual presentations and tours to identify if there are any areas that may be improved upon from an adult perspective. To date, 173 adult evaluations have been distributed and returned, comprising teachers, school staff, other volunteers such as parents/chaplain and members of the Juvenile Justice Team and Mining Industry personnel. Overall, the consensus was that the presentations and tours were excellent. 87% rated the paramedic presentation excellent, 88% the ED tour, 92% ICU tour, and 80% the Trauma Ward. Comments such as “an eye opener”, “excellent” and “good varieties were documented. When asked if they would recommend the Program, all adults (100%) stated they would. Furthermore, 108 adults (62%) reported that the Program had increased their own awareness a great deal, as well as that of the students.

We also asked the adults if they would like to change anything in the Program, 60 adults (35%) stated they “wouldn’t change anything”. Asked if they had any more comments, 86, (50%) stated that they thought “it was a fantastic Program and that everybody should be exposed to it”. As part of the licensing agreement, the P.A.R.T.Y. Program is required to produce documented evidence to support its effectiveness at a local level. This evidence is further evaluated in Canada to ensure that, as a whole, we continue to strive to continuously assess, plan, implement and evaluate change and, as such, continue to grow, improve and be more effective in addressing trauma prevention.

8. Testimonials and evidence

P.A.R.T.Y. received a Healthy WA Award 2006, from the Department of Health, as part of the Achieving Excellence in WA Conference.

A P.A.R.T.Y. staff member will deliver an oral presentation later this year at the 3rd International Congress on Innovative Nursing, Perth, Western Australia.

Comments from schools support the view that this Program is of benefit to students and the larger community. Small selections of examples are:

“Our students and staff were astounded at the harsh reality of the “choices and consequences” and effects trauma has, not only on the patient, but also on the patient’s family and friends as well. I recommend this Program to everyone”
(Year 10 Coordinator) Murdoch College (2006).

“Thanks for a great day. On the bus ride back to school it was obvious by the discussion the students were having that the sombre message of the day had certainly hit home. Thanks also to all the patients who volunteered to speak to the students, and made the message so much more real”
(Teacher) Belmont Senior High (2006).

“As a parent I was apprehensive but also keen for her to be part of this Program through her school. The reaction from my daughter and her friends was all positive. Seeing and talking to real patients, at Royal Perth and Shenton Park Campus, how a decision to drive under the influence or be a passenger changed their lives forever and how they now coped with day to day living. It also opened the doors to discussion around the dinner table, covering alcohol, drugs and friendships. Thank you for opening the eyes of our youth.”
-Mrs. D B

“Should be compulsory for all senior school boys – prevention found to counter false expectations generated by media of there being minimal/zero consequences for ‘extreme’ activities.”
(School Psychologist) Hamilton Senior High School (2007).

“Fabulous concept in preventative health.”
(Teacher) Mindarie Senior College (2007).

9. Sustainability

Road trauma, and the need to make a significant impact on the constant annual road fatality rate, is uppermost in the objectives of health, police, education, Main Roads, the Office of Road Safety and injury research organisations. The road safety campaigns and public awareness messages via the media continue, as there is a new generation of drivers every year. Similarly, Programs such as P.A.R.T.Y. will enhance the awareness of young people to the risks involved in certain choices.

The P.A.R.T.Y. Program has built very strong links, within a very short space of time, with the schools that have so far attended this Program. Parents, helpers and teachers have shown great support and interest. Schools in the Metropolitan area of Perth have a growing number of multicultural students. The Program is available to everyone above a certain age and is non-discriminatory. The Program accommodates for diversity and social sustainability, as it focuses on choices youth make, whether it be in their native community or in the larger community of Australia.

The Program can accommodate twenty-eight students, along with three teachers/volunteers, per session per week. In order to provide the Program to students that are unable to attend, an abridged Outreach version is conducted in the school, upon request, to students above the age of fourteen. In addition to the Outreach Program, a tele-link service will be operational next year to provide the service to geographical areas in Western Australia unable to attend Royal Perth Hospital. This initiative will utilise infrastructure already in place and, in doing so, will not put a burden on the environment.

This Program is funded by Royal Perth Hospital and is free to all schools and the Juvenile Justice System. There is no pressure on the Department of Health or Education as the P.A.R.T.Y. Program utilises resources already in place in the hospital setting and schools do not have to apply for funding to attend. The Mining Industry similarly is not charged, but monies are donated throughout the year from the Companies who attend, which is used to improve the Program with the purchase of visual teaching aids and other educational resources.

The P.A.R.T.Y. Program is greatly supported by people volunteering both their time and experience. The success of the Program relies heavily on the good will and generosity of both professional individuals and injury survivors who donate their time and share their personal stories with students every week. Without this support, it would be impossible to conduct such a dynamic Injury Prevention Program to the youth of Western Australia.

10. Objectives of the Service

The Department of Health (WA) has established six priority areas documented in their Strategic Intent 2005-2010 with the purpose of ensuring healthier, longer and better lives for all Western Australians. The Program fully complies with two of the six strategic directions, Healthy Partnerships, and Healthy Communities:

Healthy Partnerships

The continuing success of the health system as a whole is dependent on strong relationships with other health care related bodies...

Healthy Communities

Our intention is to focus on improving lifestyles, working on the prevention of ill health, and the implementation of a long-term, integrated health promotion Program...

All of government, community and society are working to reduce the increasing road toll (especially among young West Australians). This Program brings together many of the stakeholders in a partnership that is innovative, exciting, and most importantly, has the promise of significant reduction in risk taking behaviour by youth (especially on the road). This Program can only work because of the partnerships that have been cemented together within the Health Department and external agencies.

Royal Perth Hospital, as an established teaching hospital, provides the environment to promote, conduct and support the P.A.R.T.Y. Program. One statement outlined in the hospitals mission states:

“Provides selected specialist healthcare services to the community of Western Australia, including communities living in rural and remote areas”

The above statement supports and encourages the future vision of P.A.R.T.Y. to continue to deliver our services locally and to expand to rural areas.

The Mission statement for P.A.R.T.Y. is:

**“To promote injury prevention through reality education, enabling youth to recognise risk and make informed choices about activities and behaviours”
(P.A.R.T.Y. 1998)**

This leads us to conclude that the P.A.R.T.Y. mission statement is achievable. Furthermore, the Government's goals highlighted within the Strategic Intent Plan 2005-2010 have been addressed through this Program. Evidence supports that students are changing their attitudes towards risk-taking behaviours.

The vision of the Strategic Intent for current and future generations to live better, longer and healthier lives is nurtured and underpins the overall long-term aim of this injury prevention initiative, bringing health promotion and primary prevention right into the heart of a busy tertiary city hospital

11. References

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