



Yonder: a diverse selection of primary care relevant research stories from beyond the mainstream biomedical literature

Adolescence, vaccination, leadership, and fashion models

Adolescence. Although mental health problems are very common in the adolescent years, even those patients with extreme symptoms often avoid seeking help and experience considerable delay in accessing appropriate care. As we know, if these conditions are left undetected and untreated, they can have long-lasting effects into adulthood and are associated with considerable costs to education, employment, physical health, welfare, and the criminal justice system. A group of researchers from Northern Ireland recently completed an exploratory study that included focus groups with 54 adolescents between the ages of 13 and 16 years in eight schools.¹ Their findings suggest that young people do not trust their GPs, perceiving them as strangers, and as impersonal and uncaring. Although the authors' suggestion of running designated 'adolescence clinic' sessions may prove difficult in the overstretched NHS, they highlight that broader policy objectives such as improving access, increasing continuity, and promoting shared decision making would all help improve relationships with patients in this age group.

Vaccination. With President Trump energising the antivaccine movement with his outspoken tweets and public messages, the scientific community has renewed its focus on how to maximise acceptance and coverage rates for current vaccination campaigns. Recognising the importance of the internet in seeking health information, a group of Italian researchers completed a research study that used Google Trends to assess how people search the internet for vaccination-related information.² They found that the frequency of searches in this area is gradually increasing and that searches about vaccine side effects are particularly popular. The five most searched vaccines were those against influenza, meningitis, DTaP, yellow fever, and chickenpox. The authors suggest that, by regularly monitoring public interest in this way, healthcare workers can more effectively tackle people's concerns and doubts.

Leadership. Leadership has become such a buzzword in the NHS in recent years that it is now offputting for many disenfranchised and cynical frontline healthcare workers. GPs, for example, seem to be either struggling with the bureaucratic burdens of leading in a partnership model or else actively escaping it through sessional or salaried work. A Norwegian research team recently explored GPs' views on leadership, interviewing a group of clinicians who were attending a 5-day leadership course.³ Participants felt a tension between their clinical and leadership roles. Although they recognised that they needed to take on leadership roles, they felt their training in this area was insufficient and that the structure of the system was not conducive to their involvement. In the UK, despite the system being well set up to facilitate GPs to take on leadership roles, the low staff morale and high pressure on the system mean that finding volunteers to engage in these roles continues to be a major challenge.

Fashion models. Although eating disorders are complex and multifactorial, unrealistic standards of beauty and thinness are clearly important contributing factors. The fashion industry plays a key role in marketing representations of beauty, and fashion models are important stakeholders in this process. In a recent US study, 85 fashion models (mean age = 22.7 years) completed an online survey. Somewhat unsurprisingly, models reported high levels of pressure to lose weight, which was associated with higher odds of engaging in unhealthy weight control behaviours. The policy approaches rated as most impactful were those to increase worker protection, though they were rated as only moderately feasible. One cannot help but think there is still a long way to go before the fashion industry is ready to stop glorifying extreme thinness in the media.

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