

How can Youth Employment Initiatives (YEIs) contribute to public health?

An analysis of the health needs of young South African adults

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Integrated health programming in YEIs is needed, focusing on

1. Stress and Weight Management
2. Mental Health
3. Blood Pressure Control

To improve economic and health outcomes for youth.

BACKGROUND

Research Question: What are the health needs of South African youth not in employment, education, or training (NEET youth) participating in YEIs, and what is the need for YEIs to integrate health programming?

- Around one third of South Africa's population are aged 15-34 years, an estimated 21.6 million young people¹.
- Almost half of South African youth are NEET (42% men; 47% women)² giving South Africa one of the highest NEET rates globally³.
- Despite the knowledge that NEET youth are at higher risk for poor health behaviours and outcomes that exacerbate reduced economic engagement⁴, YEIs do not consider health in their programming.
- This research was undertaken to understand the health needs of youth joining YEIs to inform health programming.

METHODS

- NEET youth (n=193, 76% female, 97% black, mean age 24.6 ± 3.6y) were recruited from Gauteng YEIs.
- Psychosocial and health behaviour data (GAD-7 - anxiety, PHQ-9 - depression, PSS-10 -stress, WHO-AUDIT – alcohol use, Global Adult Tobacco Survey, Hunger Identification (CCHIP) index) were collected via online survey.
- Data were compared between younger (18-24y) and older age groups (25-35y) to inform targeted programming. A subsample (n=90) underwent cardiometabolic assessment (BMI and blood pressure, BP).
- Informed consent obtained was obtained prior to data collection.

RESULTS

Mental Health

78% reported moderate/high stress levels

31% of younger participants scores indicated moderate/severe anxiety

42% of younger participants scores indicated moderate/severe depression

Cardio Health

31% of younger participants had a BMI indicating overweight or obesity, compared to 68% in the older group

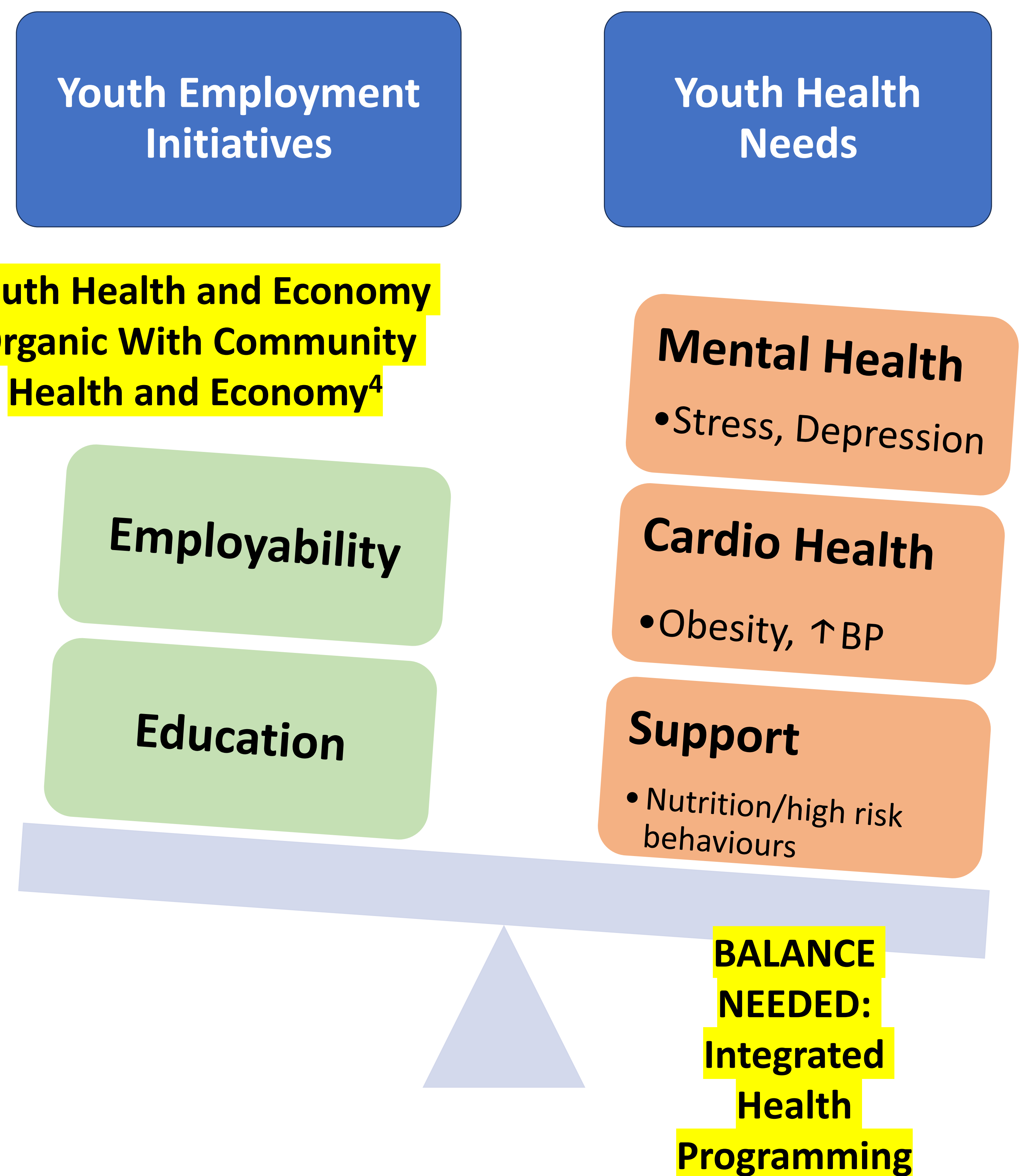
15% hypertensive and 37% prehypertensive

Substance Use & food insecurity

13% reported potentially hazardous alcohol use

11% current cigarette smokers

30% food insecure or at risk for food insecurity



CONCLUSIONS

- Non-communicable diseases (NCDs) and NCD risk factors are already prevalent in youth joining YEIs.
- YEIs should leverage their time with youth (usually 6-12 months) to deliver health programming focusing on stress and weight management, mental health, BP control, nutritious food access and substance abuse.
- Addressing these high rates of poor physical and mental health in previously NEET youth could deliver:
 - Improved youth wellness and capacity for maximal benefit from YEI programs
 - Reductions in both current and future prevalence of multiple NCDs.
- With thousands of learnership and internship opportunities open to NEET youth each year, the potential for public health impact is significant.

References

1. Statistics South Africa. Report no. 03-00-21 Youth in South Africa (2024)
2. Statistics South Africa. Quarterly Labour Force Survey Q2 2024.
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4. Gutiérrez-García RA et al. Emerging adults not in education, employment or training (NEET): socio-demographic characteristics, mental health, reasons for being NEET. BMC Public Health. 2018;18:1-11.