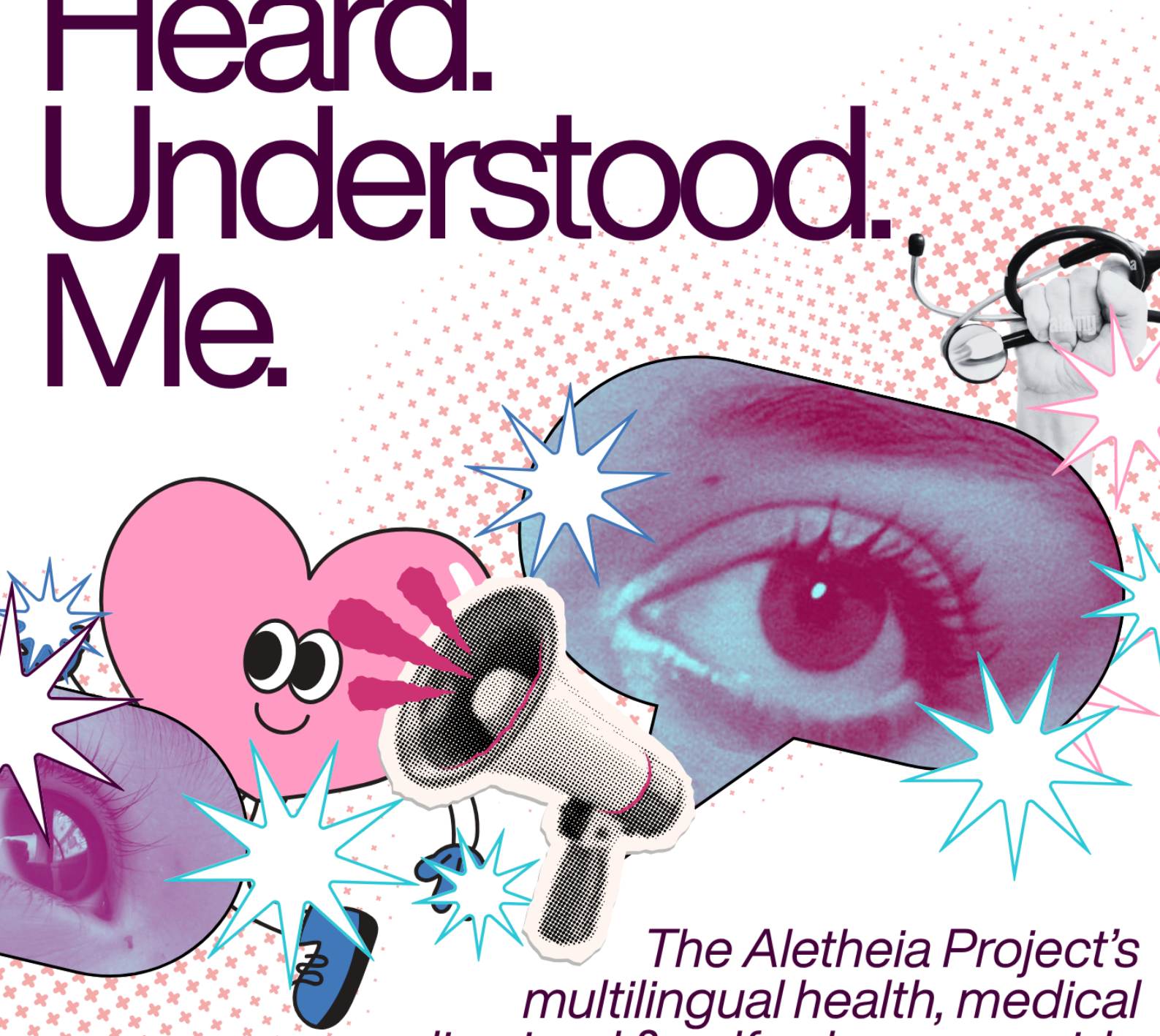
The Aletheia Project Voice Pack

Heard. Understood. Me.



The Aletheia Project's multilingual health, medical dismissal & self-advocacy guide for young people

ALETHEIA VOICE PACK • 5TH EDITION • OCTOBER 2026

Your voice is part of your health.
Let's go find it together!

There are moments when something feels wrong in your body, but you don't know how to explain it. This pack is for those moments.

Inside you'll find the words for what you're feeling, a way to tell your symptom story, what to say when you're not heard, your rights in the Australian health system, and how young people are turning their experiences into change.

— your voice is part of your health.

HEALTH EDUCATION, NOT MEDICAL ADVICE

This pack explains general health information so you can understand your body and talk about it. It can't diagnose you. If you're worried, speak to a doctor, nurse or other health professional. **In an emergency, call 000.**

MADE BY YOUNG PEOPLE

Written, designed and fact-checked by The Aletheia Project's youth resource development team. Shaped by the young people who shared their stories, questions and ideas with us.

what's inside

Contents

01	Welcome to your Voice Pack	4
02	Knowing your normal	5
03	Language is power	12
04	Your symptom story	22
05	Before, during, and after the appointment	24
06	When you're not heard	27
07	Your rights in the Australian system	30
08	Care that fits who you are	32
09	Health information online	33
10	From me to we	34
11	Your story, your voice	35
12	When to get help, and where	40
13	What Aletheia is, and why we exist	41
14	Sources and thanks	43

look for the red tab

The tabs on the right-hand edge show which section you're in, so you can flip straight to what you need.

start here

01 Welcome to your Voice Pack

This Voice Pack is a guide to your health, written by young people for young people. It exists because so many of us have sat in a doctor's office, or lain awake at night, knowing something wasn't right but not having the words, the information or the confidence to be heard.

Inside you'll find how your body works and what's worth checking, the words for what you're feeling, a way to tell your symptom story, what to say when you're brushed off, your rights in the Australian health system, where to go for help, and how to turn your experience into change for the next person.

Our hope is simple: that you walk into every appointment knowing your body, your words and your rights, and walk out understood. Aletheia is Ancient Greek for truth. Your truth about your body matters.

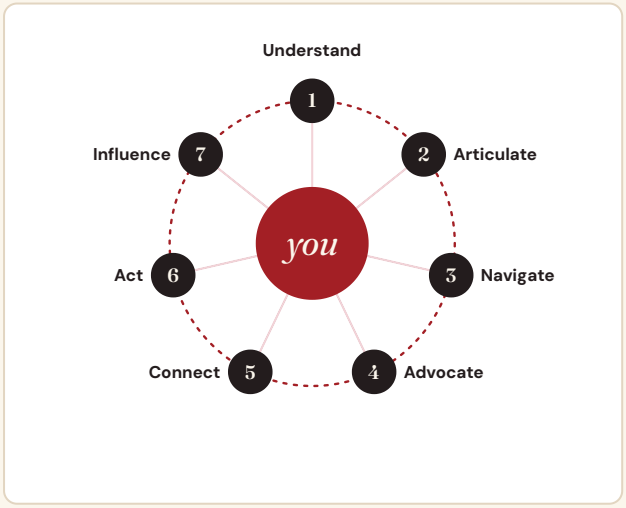
1
Start anywhere
You don't need to read it front to back. Use the contents or the red tabs to jump to what you need today.

2
Say it out loud
Every "You can say" bubble is a line you can use word for word, in the room or in a message.

3
Make it yours
Circle, highlight, fill in the reflection pages, and take photos of the pages you want with you.

4
Bring it with you
Show a page to your GP, your school nurse, a parent or a friend. That's what it's for.

The Aletheia loop: seven things you can do



1. **Understand**
   Know what's happening and the words for it.
2. **Articulate**
   Turn what you feel into a clear symptom story.
3. **Navigate**
   Know where to go, what it costs, what to bring.
4. **Advocate**
   Hold your ground when you're not heard.
5. **Connect**
   Find people who get it, and who can help.
6. **Act**
   Take the next step: follow-up, feedback, referral.
7. **Influence**
   Add your voice to change what others face.

Start where you are

UNDERSTAND
Something feels off
Find the words for what's happening.
→ page 12

ARTICULATE
I have an appointment
Build your symptom story and plan.
→ page 22

ADVOCATE
I wasn't heard
What to say, and what to do next.
→ page 27

INFLUENCE
I want to change things
Turn experience into change.
→ page 34

What this pack is, and isn't

It's health education, written by young people and checked against Australian health sources (listed at the end). It isn't medical advice, and it can't diagnose you. It can help you get the most out of the people who can. **In an emergency, call 000.**

how to use this pack

Read it front to back, or jump straight to the page you need. Fold corners, highlight lines, take photos of the pages you want in the room with you.

know your body · understand

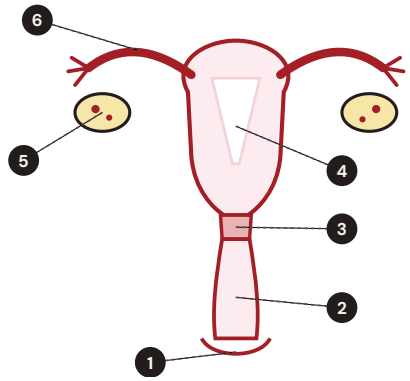
02 Knowing your normal

Nobody is born knowing how their body works, and a lot of us were never properly taught. This section covers the basics: what a cycle actually is, what's usually normal, and what's worth checking. Knowing your normal is what makes a change noticeable.

Bodies vary a lot. 'Normal' is a range, not a single number, and your own pattern matters most.

write it down in the moment Symptoms feel unforgettable when they happen, but details fade by the appointment. A quick note on your phone (date, what, how bad) is gold.

photos count A photo of a rash, swelling or how heavy a pad is can show a doctor what words can't. You're allowed to show them.



Name it: your reproductive anatomy

1. **Vulva.** Everything on the outside: the labia, clitoris, and the openings of the urethra and vagina. People often say "vagina" when they mean vulva.
2. **Vagina.** The stretchy passage from the vulva to the cervix. Periods leave the body through it.
3. **Cervix.** The narrow, lower end of the uterus, at the top of the vagina. Cervical screening checks it from age 25.
4. **Uterus (womb).** A strong, muscular organ about the size of a pear. Its lining builds up and sheds each cycle as a period.
5. **Ovaries.** Two small organs that store eggs and make hormones, mainly oestrogen and progesterone.
6. **Fallopian tubes.** Carry an egg from each ovary towards the uterus.

Not everyone has these organs, and bodies vary. Using the right words helps you say exactly where something hurts.

Your cycle, in four parts

1 Period

Days 1–7 or so

The lining of the uterus sheds. Bleeding usually lasts 2 to 7 days. Day 1 of bleeding is day 1 of your cycle.

2 Before ovulation

The follicular phase

Oestrogen rises and a new lining builds. Many people feel their energy lift.

3 Ovulation

Around the middle

An ovary releases an egg. Discharge often becomes clear and stretchy. Some people feel a twinge on one side.

4 Before your period

The luteal phase

Progesterone rises, then falls if there's no pregnancy. Bloating, sore breasts, spots and mood changes are common.

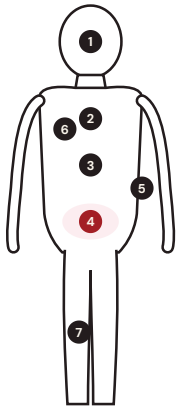
What's usually normal, and what's worth checking

TOPIC	USUALLY WITHIN NORMAL	WORTH CHECKING WITH A GP
Cycle length	In the first few years, anywhere from about 21 to 45 days. For adults, usually 21 to 35 days.	Cycles regularly longer than 45 days or shorter than 21, or no period for 3 months.
Bleeding	Lasts 2 to 7 days, heaviest on the first day or two.	Bleeding over 7 days, soaking a pad or tampon every 1–2 hours, clots bigger than a 50-cent coin.
Pain	Cramps for a day or two that ease with pain relief or a heat pack.	Pain that stops you going to school or doing things, or pain between periods.

What's usually normal, and what's worth checking (continued)

TOPIC	USUALLY WITHIN NORMAL	WORTH CHECKING WITH A GP
Discharge	Clear or white, changing through your cycle. It keeps the vagina healthy.	A strong smell, itching, soreness, or discharge that's green, grey or frothy.
Puberty timing	Breasts usually start developing between about 8 and 13. Periods usually start about 2 years later.	No breast development by 13, or no period by 15. It's worth a check-up, not a worry.

✦ Pain in different places, and what it can mean



Pain is information. Where it is, what it feels like and when it happens all help a doctor narrow things down.

WHERE	COMMON, USUALLY LESS SERIOUS	GET CHECKED URGENTLY IF…
1 Head	Tension headaches feel like a tight band and often link to stress, screens, poor sleep or not drinking enough. Migraines throb, often on one side, with nausea or sensitivity to light.	A sudden, severe 'worst ever' headache, or a headache with fever and a stiff neck, confusion, weakness, or after a head injury. Call 000.
2 Chest	Often muscular, from coughing or exercise, or linked to reflux or anxiety, which can feel very physical.	Chest pain with shortness of breath, pain spreading to the arm, jaw or back, sweating, or fainting. Call 000.
3 Upper tummy	Reflux and indigestion burn or ache under the ribs, often after eating. Pain on the upper right after fatty meals can come from the gallbladder.	Severe constant pain, vomiting blood, or black, tarry poo. Get urgent care.
4 Lower tummy and pelvis	Period pain, ovulation pain (a twinge on one side mid-cycle), constipation, UTIs, ovarian cysts and endometriosis all show up here.	Pain that starts near the belly button and moves to the lower right with fever (possible appendicitis), or sudden severe one-sided pain when you could be pregnant. Go to emergency.
5 Back	Usually muscles, posture, heavy bags or sport. Period pain often spreads into the lower back.	Pain in your side or back with fever, shivers or pain when weeing, which can mean a kidney infection.
6 Breasts	Tenderness and swelling in the week before a period is very common. Lumps in young people are usually harmless, like fibroadenomas.	A new lump that doesn't go away after your period, skin dimpling, or nipple discharge. Get it checked by a GP.

Pain in different places (continued)

WHERE	COMMON, USUALLY LESS SERIOUS	GET CHECKED URGENTLY IF…
7 **Joints and muscles**	Sport injuries, growth spurts and overuse are common causes.	Joints that are hot, swollen and stiff for more than 30 minutes in the morning, or that often dislocate or feel unstable.

Pain during sex

Common, and not something you should push through. Causes include dryness, infections, tension in the pelvic floor muscles, and endometriosis.

Always worth raising with a GP or sexual health clinic. It can be treated.

YOU CAN SAY

"Sex has been painful and I'd like to find out why."

Pain that moves or comes back

Pain that follows your cycle, wakes you at night, moves around, or keeps returning is worth tracking and raising, even if each episode passes.

Note where it starts, where it spreads, what it feels like, and what you were doing.

YOU CAN SAY

"This pain comes back every month in the same place."

✦ Hormones, explained

Puberty hormones

WHAT IT IS

Oestrogen, progesterone and testosterone (everyone makes all three, in different amounts) switch on the changes of puberty: growth, body hair, breasts, periods, voice changes, skin oil and sweat.

GOOD TO KNOW

Mood swings, oily skin and growth spurts are expected. If changes start before 8 or haven't started by 13, see a GP.

YOU CAN SAY

"Is this a normal part of puberty for my age?"

UNDERSTAND

Stress hormones

WHAT IT IS

Cortisol and adrenaline help you respond to pressure. When stress is high for a long time, they can affect sleep, appetite, digestion, skin, and even delay or skip a period.

WORTH CHECKING WHEN

Stress is affecting your body for weeks, or your periods have changed. Stress can be part of the picture without being the whole explanation.

YOU CAN SAY

"I've been really stressed, but I want to check nothing else is going on."

UNDERSTAND ARTICULATE

bring someone You can bring a friend, parent, partner or support worker to any appointment. They can take notes or help you remember your questions.

your results are yours You can ask for a copy of your test results and letters, and take them to another doctor.

Thyroid

WHAT IT IS

The thyroid, a small gland in your neck, sets your body's pace. An underactive thyroid can cause tiredness, feeling cold, weight gain, heavy periods and low mood. An overactive one can cause a racing heart, anxiety, weight loss, shakiness and feeling hot.

WORTH CHECKING WHEN

A few of these together, especially with a family history. It's checked with a simple blood test.

YOU CAN SAY

"Could we check my thyroid?"

UNDERSTAND ARTICULATE

Androgens

WHAT IT IS

Hormones like testosterone. Higher levels than usual can cause acne, extra hair on the face or body, hair thinning on the head and irregular periods, and are a key sign of PMOS.

YOU CAN SAY

"I've had acne, extra hair and irregular periods. Could my hormones be checked?"

UNDERSTAND ARTICULATE

Gender-affirming hormones

WHAT IT IS

For some trans and gender-diverse young people, hormone therapy is part of their care, provided through specialist services with consent and ongoing support.

GOOD TO KNOW

You deserve care that uses your name and pronouns. QLife (1800 184 527) offers peer support.

YOU CAN SAY

"I'd like to talk about gender-affirming care options."

NAVIGATE CONNECT

Insulin and blood sugar

WHAT IT IS

Insulin moves sugar from your blood into your cells. Insulin resistance, when the body responds less well to it, is linked to PMOS and type 2 diabetes.

WHAT IT CAN FEEL LIKE

Often nothing obvious. Sometimes darker, velvety patches of skin on the neck or armpits, tiredness, and cravings.

WORTH CHECKING WHEN

You have PMOS symptoms or a family history of diabetes. Ask about a blood test.

YOU CAN SAY

"Diabetes runs in my family. Should I be tested?"

UNDERSTAND NAVIGATE

Hormonal contraception

WHAT IT IS

The pill, implant, injection and hormonal IUD all use hormones. Common effects include lighter periods, spotting, and sometimes changes in mood, skin or libido.

WORTH CHECKING WHEN

A side effect is bothering you or your mood has changed. There are many options, and switching is normal.

YOU CAN SAY

"Since starting this, my mood has changed. Can we look at other options?"

UNDERSTAND NAVIGATE

one concern or three?

If you have more than one thing to talk about, ask for a long appointment when you book. Lead with the one that matters most.

you can change doctors

You can see a different GP or clinic at any time, and you don't have to explain why. Finding the right fit is part of good care.

Skin, sleep, gut and energy

Acne

WHAT IT IS

Blocked, inflamed hair follicles. Very common in puberty, when hormones increase skin oil. It isn't caused by being dirty.

WHAT IT CAN FEEL LIKE

Blackheads, whiteheads, red pimples, or deep, painful lumps (cysts). Hormonal acne often flares along the jaw and chin before a period.

WORTH CHECKING WHEN

It's painful, leaving marks or scars, or affecting your confidence. A GP can prescribe creams, tablets or hormonal options, and refer you to a dermatologist for stronger treatment.

YOU CAN SAY

"My acne is really affecting my confidence. What are my treatment options?"

UNDERSTAND NAVIGATE

Dizziness and fainting

WHAT IT IS

Often from standing up quickly, not eating or drinking enough, heat, or low iron. Some young people have POTS, where the heart races when standing.

WORTH CHECKING WHEN

It happens often, you faint, or it comes with chest pain or a racing heart. Urgent: fainting during exercise.

YOU CAN SAY

"I get dizzy and my heart races every time I stand up."

UNDERSTAND ARTICULATE

Sleep

WHAT IT IS

Teenagers need about 8 to 10 hours a night. Body clocks naturally shift later in adolescence, which is why early starts feel hard.

WORTH CHECKING WHEN

You're exhausted despite enough sleep, you snore loudly or stop breathing in your sleep, or you can't fall or stay asleep most nights.

YOU CAN SAY

"I'm sleeping enough but I'm still exhausted every day."

UNDERSTAND ARTICULATE

Gut symptoms: IBS and coeliac disease

WHAT IT IS

Irritable bowel syndrome (IBS) causes cramping, bloating, and diarrhoea or constipation, and often flares with stress or periods. Coeliac disease is an immune reaction to gluten.

WORTH CHECKING WHEN

Ongoing gut symptoms, weight loss, blood in your poo, or waking at night to go. Blood in your poo always deserves a check.

GOOD TO KNOW

Coeliac disease is tested with a blood test while you're still eating gluten, so don't cut gluten out before you're tested.

YOU CAN SAY

"I've had bloating and pain for months. Could we test for coeliac disease?"

UNDERSTAND ARTICULATE

it's okay to cry Getting emotional in an appointment doesn't make your concern less real. You can say, "I need a moment."

webchat is an option If talking feels too hard, Kids Helpline (5–25) and headspace (12–25) both offer webchat as well as phone support.

Puberty is a process, not a day

Puberty usually runs over several years. Growth spurts, body hair, breast development, sweat, spots and mood changes all arrive on their own timelines, and everyone's order is a little different.

Feeling awkward or out of sync with friends is really common. If something worries you, it's always okay to ask.

YOU CAN SAY

"Is this a normal part of puberty?"

Tracking your cycle

Note the first day of each period, how heavy it is, pain, mood and energy. After two or three cycles you'll know your pattern, and so will your doctor.

Use a paper diary, the Self-Advocacy Journal, or an app. If you use an app, check what it does with your data.

YOU CAN SAY

"I've tracked my last three cycles. Here's what I noticed."

IN THEIR WORDS

"My mum never really talked about periods, so when I got mine, I sat her down and asked questions instead. She was shocked — like no one had ever asked her before. Now she asks me what I've learned from TikTok doctors or school, and we kind of swap knowledge."

15, Italian-Australian high school student · shared with Aletheia

Periods and products

Pads, tampons, period underwear and menstrual cups are all safe choices. Change tampons every 4 to 8 hours and never leave one in overnight for more than 8 hours.

Needing to change very often is useful information for a doctor.

Questions you can always ask about your body

- Is this normal for someone my age?
- What would make this worth checking?
- What changes should I look out for?
- Is there anything I can track to help?
- Where can I read more that I can trust?

your normal is the baseline

You don't need to match anyone else. You just need to notice when your own pattern changes, and say so.

03 Language is power

There are moments when something feels wrong in your body, but you don't know how to explain it. You say "I just feel off", and the conversation moves on without you. Not because your experience isn't real, but because it hasn't been named.

This section gives you those names. Not so you can diagnose yourself, but so you can recognise patterns, ask better questions and stand your ground. You don't need to become an expert in medicine. You only need enough language to be heard.

Your body and your cycle

Period pain

medical word: dysmenorrhoea

WHAT IT IS

Cramping pain in the lower tummy, back or thighs around a period, caused by the uterus contracting. Common, especially in the teens.

WHAT IT CAN FEEL LIKE

Aching or cramping waves, sometimes with nausea, diarrhoea or headaches.

WORTH CHECKING WHEN

It stops you going to school or doing things, the usual pain relief doesn't help, it's getting worse each year, or you have pain outside your period.

YOU CAN SAY

"My period pain stops me going to school, and the usual pain relief doesn't help."

"It's been getting worse every year."

UNDERSTAND ARTICULATE

IN THEIR WORDS

"My grandmother told me drinking cold water during my period would make me infertile. I was so scared I avoided ice cream for years. When I finally learned the truth, I felt cheated — like I'd wasted years being afraid of my own body."

26, Korean international student · shared with Aletheia

Heavy menstrual bleeding

WHAT IT IS

Bleeding heavy enough to affect your physical, social or emotional life. It's common, and it can be treated.

WHAT IT CAN FEEL LIKE

Changing a pad or tampon every 1–2 hours, bleeding through at night, clots bigger than a 50-cent coin, periods over 7 days, feeling tired or dizzy.

WORTH CHECKING WHEN

Any of the above. Heavy periods are a common cause of low iron. Urgent: soaking a pad every hour for several hours, or feeling faint.

YOU CAN SAY

"I'm changing a pad every hour or two on my heavy days."

"Could we check my iron levels?"

UNDERSTAND ARTICULATE

IN THEIR WORDS

"In Somali, we just say 'caado' for period. But there's no separate word for discharge. So when I noticed stuff in my underwear, I thought something was wrong with me. No one told me that sometimes it's healthy."

16, Somali high school student · shared with Aletheia

Endometriosis

en-doh-mee-tree-OH-sis

WHAT IT IS

Tissue similar to the lining of the uterus grows outside it, causing inflammation and pain. About 1 in 7 people assigned female at birth in Australia are diagnosed by their late 40s. It can start in the teens.

WHAT IT CAN FEEL LIKE

Severe period pain, pain between periods, pain with bowel movements or weeing, pain during sex, fatigue.

WHY IT GETS MISSED

Symptoms are often normalised as 'just bad periods'. Australia's national guideline puts the average delay to diagnosis at 6 to 8 years.

WORTH CHECKING WHEN

Period pain stops your life, or pain is getting worse over time. A GP can refer you to a gynaecologist. Diagnosis may involve an ultrasound, MRI or keyhole surgery.

YOU CAN SAY

"My pain affects my daily life. Could this be something like endometriosis?"

"What would it take to investigate that?"

UNDERSTAND · ARTICULATE · ADVOCATE

period pain basics

Heat, gentle movement and anti-inflammatory pain relief taken early can help. If they don't, or you're missing out on life, that's worth raising.

iron helpers

Red meat, legumes, tofu and leafy greens contain iron. Vitamin C helps your body absorb it. If you're always exhausted, ask for a blood test rather than guessing.

interpreters are for families too

If your parent or carer is more comfortable in another language, the clinic can book a free interpreter for them too.

PMOS (formerly PCOS)

polyendocrine metabolic ovarian syndrome

WHAT IT IS

A common hormonal and metabolic condition affecting about 8–13% of women of reproductive age. In May 2026 it was renamed from polycystic ovary syndrome, because it affects the whole body and many people with it don't have cysts. You'll still hear "PCOS" for a while.

WHAT IT CAN FEEL LIKE

Irregular or missing periods, acne, extra hair on the face or body, hair thinning on the head, changes in weight or blood sugar.

GOOD TO KNOW

In teenagers, diagnosis needs both irregular cycles and signs of higher androgen ('male') hormones. An ultrasound isn't used to diagnose PCOS until 8 years after periods start.

YOU CAN SAY

"My cycle has been irregular for a long time, and I've had acne and extra hair growth too."

"Could this be PMOS (PCOS)? What tests would help?"

UNDERSTAND · ARTICULATE

Iron deficiency

WHAT IT IS

Not having enough iron. It's common in young people with periods, especially heavy ones, and can lead to anaemia (low red blood cells).

WHAT IT CAN FEEL LIKE

Tiredness that doesn't lift, being short of breath, dizziness, pale skin, poor concentration, feeling cold.

WORTH CHECKING WHEN

You're always exhausted, especially if your periods are heavy. It's checked with a simple blood test.

YOU CAN SAY

"I'm exhausted all the time and my periods are heavy. Could we check my iron?"

UNDERSTAND · ARTICULATE

Hormonal changes

WHAT IT IS

Hormones regulate your cycle, mood, energy, skin and sleep. They shift naturally through puberty and across each cycle.

WORTH CHECKING WHEN

Ongoing symptoms that disrupt your life: very irregular cycles, severe mood changes before periods, persistent acne, unexplained tiredness.

GOOD TO KNOW

'Hormonal imbalance' is a phrase you'll hear a lot, but it isn't a diagnosis. If someone says it, it's fair to ask which hormone, and what test would show it.

YOU CAN SAY

"Which hormone do you think is involved?"

"Is there a test that would show that?"

UNDERSTAND · ARTICULATE

say "I'm worried about..."

Naming your worry out loud ("I'm worried this could be endometriosis") helps a doctor address it directly instead of guessing.

check before you leave

Before you walk out, ask: "So what happens next, and when should I come back?" Then write down the answer.

screens and sleep

Bright screens late at night push your body clock later. Dimming them an hour before bed can make mornings easier.

Sexual and reproductive health

STIs (sexually transmissible infections)

WHAT IT IS

Infections passed on through sexual contact, like chlamydia, gonorrhoea, herpes and HPV. Chlamydia is the most commonly notified STI among young people in Australia.

WHAT IT CAN FEEL LIKE

Often nothing at all. Sometimes unusual discharge, burning when you wee, sores, itching, or pain during sex.

WORTH CHECKING WHEN

You've had unprotected sex, a new partner, or any symptoms. Testing is usually a quick urine test or swab, and it's confidential.

YOU CAN SAY

"I'd like an STI check, please."

"What does the test involve, and when will I get results?"

UNDERSTAND · NAVIGATE

UTI (urinary tract infection)

WHAT IT IS

A bacterial infection in the bladder or urinary tract. Very common, and easily treated.

WHAT IT CAN FEEL LIKE

Burning or stinging when you wee, needing to go often or urgently, cloudy or bloody urine, lower tummy pain.

WORTH CHECKING WHEN

Symptoms don't settle in a day or two, or keep coming back. Urgent: fever, shivers, or pain in your back or side, which can mean a kidney infection.

YOU CAN SAY

"It burns when I wee and I need to go all the time."

"This is my third one this year. Can we look into why?"

UNDERSTAND · ARTICULATE

Contraception

WHAT IT IS

Ways to prevent pregnancy. Options include condoms, the pill, the implant (a small rod in the arm), hormonal and copper IUDs, and the injection. Some also help with heavy or painful periods.

WORTH CHECKING WHEN

You'd like to start, change or stop contraception, or you're having side effects. A GP, sexual health clinic or family planning service can talk you through options confidentially.

GOOD TO KNOW

Condoms are the only option that also protects against STIs. Emergency contraception is available from pharmacies without a prescription, and works best the sooner you take it.

YOU CAN SAY

"I'd like to talk about contraception options that suit me."

"Could this also help with my heavy periods?"

UNDERSTAND NAVIGATE

Thrush

WHAT IT IS

A common yeast infection of the vulva and vagina. It isn't an STI and isn't caused by being unclean.

WHAT IT CAN FEEL LIKE

Itching, redness, soreness, and thick white discharge that usually doesn't smell.

WORTH CHECKING WHEN

It's your first time, you're not sure it's thrush, it keeps coming back, or treatment from the pharmacy hasn't worked.

YOU CAN SAY

"I think it might be thrush, but I'm not sure."

"It keeps coming back. What else could it be?"

UNDERSTAND ARTICULATE

PMDD

premenstrual dysphoric disorder

WHAT IT IS

A severe form of premenstrual symptoms, mostly affecting mood. Symptoms start in the week or two before a period and ease within a few days of it starting.

WHAT IT CAN FEEL LIKE

Intense sadness, anxiety, irritability or anger, feeling out of control, and physical symptoms like bloating or tiredness, every cycle.

WORTH CHECKING WHEN

Mood changes before your period affect school, work or relationships. Track your mood across two cycles so the pattern is clear.

YOU CAN SAY

"My mood changes a lot in the week before my period, every month."

"I've tracked it for two cycles. Could this be PMDD?"

UNDERSTAND ARTICULATE

✦ Mind, brain and energy

Anxiety

WHAT IT IS

Your body's alarm system. Useful in small doses. It becomes a problem when it's frequent, intense, or out of proportion to what's happening.

WHAT IT CAN FEEL LIKE

Constant worry, racing thoughts, trouble sleeping, a fast heartbeat, nausea, tight muscles, avoiding things.

WORTH CHECKING WHEN

It's most days, for weeks, or it stops you doing things. headspace (12–25) and your GP are good first stops.

YOU CAN SAY

"I've felt anxious most days for a while, not just occasionally."

"It's affecting school and sleep. What support is there?"

UNDERSTAND · ARTICULATE · CONNECT

Depression

WHAT IT IS

More than sadness. A health condition affecting how you think, feel and function over weeks or longer. It isn't a personal failure.

WHAT IT CAN FEEL LIKE

Low, flat or numb, losing interest in things, changes in sleep or appetite, low energy, feeling worthless or hopeless.

WORTH CHECKING WHEN

It's lasted two weeks or more. If you have thoughts of suicide or self-harm, get help now: call Lifeline on 13 11 14, Kids Helpline on 1800 55 1800, or 000 in an emergency.

YOU CAN SAY

"I haven't felt like myself for a while."

"I think I need support with my mental health."

UNDERSTAND · ARTICULATE · CONNECT

Fatigue

WHAT IT IS

Persistent exhaustion that doesn't go away with rest. Different from normal tiredness after a busy day.

WHAT IT CAN FEEL LIKE

Waking up drained, brain fog, simple tasks taking huge effort.

WORTH CHECKING WHEN

It's lasted weeks, it's affecting your life, or it comes with other symptoms. It has many possible causes (iron, thyroid, mental health, sleep, infections), so it deserves a proper look.

YOU CAN SAY

"This isn't normal tiredness. I'm exhausted even after resting."

"Can we look for possible causes?"

UNDERSTAND · ARTICULATE

Sensory overload

WHAT IT IS

When your brain gets more input (noise, light, touch, crowds) than it can process at once. Common for autistic and ADHD people, and for anyone who's unwell, exhausted or stressed.

WHAT IT CAN FEEL LIKE

Suddenly overwhelmed, irritable or panicky. Needing to leave, cover your ears or go quiet.

AT APPOINTMENTS

You can ask for adjustments at appointments: a quieter room, dimmer lights, fewer people, written information.

YOU CAN SAY

"I'm feeling overwhelmed by the room. Could we dim the lights or find somewhere quieter?"

ARTICULATE · ADVOCATE

ADHD

WHAT IT IS

A neurodevelopmental difference in how the brain regulates attention, activity and impulses. In girls it's often the less visible, inattentive type.

WHAT IT CAN FEEL LIKE

Losing focus, forgetting things, starting lots and finishing little, time slipping, restlessness inside, exhaustion from masking.

WHY IT GETS MISSED

It can be mistaken for being disorganised, dreamy, anxious or 'not trying'. Many girls are diagnosed later than boys.

WORTH CHECKING WHEN

It's been going on since childhood and affects school, work or relationships. A GP can refer you for assessment.

YOU CAN SAY

"I've struggled with focus and organisation for as long as I can remember."

"Could I be assessed for ADHD?"

UNDERSTAND · ARTICULATE · ADVOCATE

Self-harm

WHAT IT IS

Hurting yourself on purpose, often as a way to cope with overwhelming feelings. It's more common than people think, and it deserves care, not judgement.

WORTH CHECKING WHEN

Any time. You can talk to a GP, headspace or Kids Helpline (1800 55 1800). If you're in danger, or thinking about suicide, call 000 or Lifeline on 13 11 14.

YOU CAN SAY

"I've been hurting myself and I want some help."

"I don't know how to stop, and I need support."

UNDERSTAND · CONNECT

Eating disorders and body image

WHAT IT IS

Serious mental health conditions involving eating, exercise and how you see your body. They affect people of every size, gender and background, and recovery is possible.

WHAT IT CAN FEEL LIKE

Constant thoughts about food, weight or shape, strict rules or guilt around eating, bingeing, compensating after eating, feeling out of control.

WORTH CHECKING WHEN

Food or body worries are taking up a lot of your day, or someone close to you is worried. Early support helps. Butterfly Foundation: 1800 33 4673.

YOU CAN SAY

"I've been really worried about food and my body."

"I think I need help with my eating."

UNDERSTAND · ARTICULATE · CONNECT

Autism

WHAT IT IS

A lifelong neurodevelopmental difference in how people communicate, socialise and experience the world. Many autistic girls and women are diagnosed later, partly because they learn to mask.

WHAT IT CAN FEEL LIKE

Finding social rules confusing or exhausting, strong focused interests, needing routine, being sensitive to sound, light or textures, needing recovery time.

WORTH CHECKING WHEN

These differences have been there since childhood and you'd like to understand yourself better or get support. A GP can talk about assessment.

YOU CAN SAY

"I've always found social situations exhausting, and I wonder if I could be autistic."

"Could I be referred for an assessment?"

UNDERSTAND · ARTICULATE

When it's long-term

Chronic pain

WHAT IT IS

Pain lasting more than three months. Over time the nervous system can become more sensitive, so pain can continue even when tissues have healed. It is real pain.

WHAT IT CAN FEEL LIKE

Constant or recurring pain that affects sleep, mood, concentration and movement.

WHY IT GETS MISSED

When nothing shows up on a scan, people are sometimes told it's 'in their head'. Pain doesn't have to be visible to be valid.

YOU CAN SAY

"This pain has been ongoing for months and it affects my daily life."

"Can we talk about a plan to manage it, not just the cause?"

UNDERSTAND · ARTICULATE · ADVOCATE

IN THEIR WORDS

"My auntie always called endo pain just 'women's problems.' When I said my cramps were so bad I couldn't stand, she told me to drink hot tea and be quiet. I didn't even know there was a name for what I was feeling until I was 20."

23, Vietnamese-Australian · shared with Aletheia

Chronic condition

WHAT IT IS

A health condition that lasts a long time and needs ongoing management, like asthma, endometriosis, diabetes or depression.

GOOD TO KNOW

A GP can create a care plan that coordinates your care, and may give access to Medicare-rebated allied health visits.

YOU CAN SAY

"This seems to be long-term. Can we make a plan for managing it?"

UNDERSTAND · NAVIGATE

Inflammation

WHAT IT IS

The immune system's response to injury or infection. Short-term, it helps you heal. Long-term inflammation is part of some conditions, like endometriosis, inflammatory bowel disease and arthritis.

GOOD TO KNOW

'Inflammation' on its own is a process, not a diagnosis. Some blood tests show it, but not all inflammation shows up in them. The useful question is what might be causing it.

YOU CAN SAY

"Could there be an inflammatory cause for this?"

"What tests would help show that?"

UNDERSTAND · ARTICULATE

Migraine

WHAT IT IS

A neurological condition that causes severe, often one-sided, throbbing headaches. Hormonal changes around a period can trigger them.

WHAT IT CAN FEEL LIKE

Throbbing pain, nausea or vomiting, sensitivity to light and sound. Some people get an 'aura' first, like flashing lights or zigzags.

WORTH CHECKING WHEN

Headaches are frequent, getting worse, or stopping you doing things. Urgent: a sudden, severe 'worst ever' headache, or one with weakness, confusion, a stiff neck or fever. Call 000.

YOU CAN SAY

"I get severe headaches with nausea, and they're stopping me going to school."

"They seem to come around my period. Could that be connected?"

UNDERSTAND ARTICULATE

✦ Words for the healthcare itself

Diagnosis

WHAT IT IS

Working out what's causing your symptoms, based on your story, an examination and sometimes tests. It can take several appointments.

GOOD TO KNOW

A doctor may give a 'working diagnosis' while they rule other things out. It's fair to ask what else is being considered.

YOU CAN SAY

"What could this be?"

"What else are you considering, and how will we rule it out?"

UNDERSTAND NAVIGATE

Informed consent

WHAT IT IS

Agreeing to a test or treatment after understanding what it is, why it's suggested, the risks and the alternatives. You can ask questions, take time, say no or change your mind.

IF YOU'RE UNDER 18

Under 18, you can usually consent yourself if the doctor thinks you understand the decision (a 'mature minor'). The exact rules vary by state.

YOU CAN SAY

"Can you explain what this involves?"

"What are my options, including waiting?"

"I'd like some time to think about it."

NAVIGATE ADVOCATE

Confidentiality

WHAT IT IS

Health professionals must keep your information private, except in limited cases, such as a serious risk of harm.

IF YOU'RE YOUNG

From 14, Medicare generally needs your consent before releasing your claims information to parents. From 15 you can have your own Medicare card.

YOU CAN SAY

"Will this stay confidential?"

"Is there anything you'd have to share, and with whom?"

NAVIGATE ADVOCATE

Referral

WHAT IT IS

A letter from your GP to a specialist or service. For most specialists you need one to get a Medicare rebate.

ASK ABOUT

Ask why, who, how much it costs, how long the wait is, and how long the referral lasts. Public clinics may cost less but have longer waits.

YOU CAN SAY

"Would a specialist help here?"

"Is there a public option, or someone closer?"

NAVIGATE ACT

Implicit bias

WHAT IT IS

Assumptions people hold without realising, which shape whose pain is believed and what gets investigated. In Victoria's Inquiry into Women's Pain, 71% of respondents said they'd felt dismissed by health professionals.

WHY IT MATTERS

Bias isn't always intentional, but it has real effects. Recognising it can help you see that being dismissed isn't about you.

YOU CAN SAY

"I don't feel my concerns have been fully understood yet."

"Can we take another look at my symptoms?"

UNDERSTAND ADVOCATE INFLUENCE

Second opinion

WHAT IT IS

Seeing another health professional about the same issue. It's a normal part of healthcare and doesn't need anyone's permission.

GOOD TO KNOW

You can ask for copies of your test results to take with you.

YOU CAN SAY

"I'd like a second opinion."

"Could I have a copy of my results?"

ADVOCATE ACT

IN THEIR WORDS

"At school, girls told each other that you couldn't get pregnant the first time you had sex. We all knew someone who believed it. I still remember a friend crying in the bathroom after her first time, thinking she was safe, only to find out she wasn't."

21, Australian university student · shared with Aletheia

Self-advocacy

WHAT IT IS

Speaking up for your needs and your health. It isn't about being loud or perfectly confident. It can be one question, one pause, one "I don't understand".

YOU CAN SAY

"This is important to me."

"I'd like to understand this better."

ADVOCATE

Medicines and side effects

WHAT IT IS

Prescription medicines need a script. Many are cheaper through the Pharmaceutical Benefits Scheme (PBS), and concession card holders pay less.

GOOD TO KNOW

Pharmacists are medicine experts, and you can ask them anything, for free, without an appointment.

YOU CAN SAY

"What is this for, and how long until it works?"

"What side effects should I look out for, and what should I do if I get them?"

NAVIGATE ACT

Tests and scans

WHAT IT IS

Blood tests, urine tests, swabs, ultrasounds and other scans help rule things in or out. A normal result doesn't mean nothing is wrong, just that this test didn't show it.

ASK ABOUT

Ask what the test is for, what it involves, what it costs, how you'll get results and what happens if it's normal.

YOU CAN SAY

"What is this test looking for?"

"If it comes back normal, what's the next step?"

NAVIGATE ADVOCATE

My Health Record

WHAT IT IS

The national online summary of your health information, like medicines, test results and immunisations. From 14, you can manage your own record, and parents no longer have automatic access.

YOU CAN SAY

"Can this be uploaded to my My Health Record?"

NAVIGATE

IN THEIR WORDS

"I was using a translator app to help my mum understand my doctor's notes about PCOS. But when I typed in 'ovulation,' it just spat out something like 'egg time.' My mum laughed, and then she brushed it off. How do you explain something serious when the word sounds like a joke?"

21, Pakistani-Australian university student · shared with Aletheia

articulate

04 Your symptom story

Doctors think in patterns: what, where, when, how much. Turn what you're feeling into six short lines and you can say it in thirty seconds, even when you're nervous.

My symptom story

six lines · thirty seconds

WHAT	*Sharp, cramping pain* What it feels like, in your words
WHERE	*Low tummy, left side, into my back* Where exactly, and does it spread?
WHEN	*First 2 days of every period, for 18 months* Start, pattern, how long it lasts
HOW MUCH	*Usually 6, worst 9. Missed 5 school days this term* Your number AND what it stops
SO FAR	*Ibuprofen helps a bit. Heat pack. Not enough.* What you've already tried
I WANT	*To find out why, and a plan that works* What you need from today

What & where

Use feeling words: cramping, sharp, burning, throbbing, dragging, pressure. Then the exact place, and whether it spreads.

YOU CAN SAY

"Sharp, low on the left, into my back."

When & how much

When it started, when it happens, how long it lasts. Give your usual number and your worst number, plus what it stops you doing.

YOU CAN SAY

"Usually 5, worst 8. I miss the first day of school."

So far & I want

What you've tried, and what you need today: an explanation, a test, a plan, a referral, or to be believed.

YOU CAN SAY

"I'd like to find out what's causing it."

Score pain by what it stops you doing

0	1	2	3	4	5	6	7	8	9	10

0 No pain

2 Notice it, carry on

4 Distracting, need a break

6 Hard to focus or move

8 Have to stop and lie down

10 Worst I can imagine

Give your usual number AND your worst: "Usually 4, at worst 8."

Track it for two or three cycles

A few weeks of notes turns "it's bad sometimes" into a pattern anyone can see. Track bleeding, pain, mood, energy and missed days. The Aletheia Self-Advocacy Journal has a tracker built in.

IN THEIR WORDS

"I was using a translator app to help my mum understand my doctor's notes about PCOS. But when I typed in 'ovulation,' it just spat out something like 'egg time.' My mum laughed, and then she brushed it off. How do you explain something serious when the word sounds like a joke?"

21, Pakistani-Australian university student · shared with Aletheia

When you have the words to describe what you are feeling, everything changes. You ask better questions. You recognise patterns others might overlook.

reading from notes is normal

Write your six lines on your phone or in the Self-Advocacy Journal, and read them out. Doctors do it all day.

05 Before, during, and after the appointment

Healthcare can feel confusing, not because it's impossible to understand, but because nobody teaches you how it works. Knowing where to go, what it costs and what to bring changes the whole experience.

1 Before

- Write your symptom story
- Decide your top 1–3 concerns
- Book a longer appointment if needed
- Choose a support person (optional)

2 During

- Lead with your main concern
- Use your story: what, where, when, how much
- Ask: "What could this be?"
- Repeat back what you heard

3 Wrapping up

- What's the plan?
- What should I watch for?
- When do I come back?
- Can this be noted in my file?

4 After

- Write down what was said
- Keep tracking
- Book the follow-up
- Not better? Take the next step

you Where to go

GO DIRECTLY

GP or youth GP
First stop for most things. Can refer you on.

headspace
Ages 12–25. Free or low-cost. No referral.

Sexual health clinic
Confidential, often free. Some don't need Medicare.

Community health
Usually no referral needed.

USUALLY VIA A REFERRAL OR PLAN

Specialist
Usually via a GP referral (needed for a Medicare rebate).

Psychologist
A Mental Health Treatment Plan from your GP gives rebates for up to 10 sessions a year.

QUICK OR URGENT HELP

Pharmacist
Advice, no appointment.

Urgent Care Clinic
Walk in. Not life-threatening.

Hospital ED · 000
Serious or emergency.

Not sure how urgent it is? healthdirect: **1800 022 222**, 24/7. For the full map, costs and what to bring, see the Aletheia Health Navigator.

Costs and access in Australia

QUESTION	THE SHORT ANSWER
Will it cost anything?	Bulk-billed GPs charge Medicare directly, so you pay nothing. Private billing means paying up front and claiming part back. Ask when you book: "Do you bulk bill young people?"
Do I need a Medicare card?	It helps. From 15 you can get your own. Many sexual health clinics and headspace centres can see you without one.
How do I get rebated psychology?	Your usual GP can make a Mental Health Treatment Plan, which gives Medicare rebates for up to 10 individual sessions a year. headspace doesn't need a referral.
What if I need an interpreter?	Ask when booking. GPs can book one for free through TIS National.
Can I do it by phone or video?	Yes. Telehealth works well for follow-ups, results and mental health appointments.

Booking

YOU CAN SAY

"I'd like a long appointment. I have a few things to discuss."

"Do you bulk bill?"

"Could I see a female GP?"

Before you leave

YOU CAN SAY

"What's the plan?"

"What should make me come back sooner?"

"Could you note this in my file?"

Seeing a doctor on your own

You can ask to see a GP on your own, or for part of an appointment without a parent in the room. Doctors often offer this to teenagers anyway.

From 15 you can have your own Medicare card. From 14, Medicare generally needs your consent to share your claims information with parents, and you can manage your own My Health Record.

YOU CAN SAY

"Could I have some time with the doctor on my own?"

Questions to ask about a medicine

What is it for? How and when do I take it? How long until it works? What side effects are common, and which ones mean I should come back? What if I miss a dose?

Pharmacists can answer these for free, without an appointment.

YOU CAN SAY

"Is there a cheaper generic version?"

Speaking up at school, uni or work

Health affects everything else. You can ask for special consideration, extensions, a quiet space, rest breaks or other adjustments. A medical certificate or a letter from your GP can help.

School wellbeing staff, student support services and HR can all be part of your team.

YOU CAN SAY

"I have a health condition that's affecting my study. What support is available?"

Sexual health and confidential care

Sexual health clinics give confidential, non-judgemental care for contraception, STI testing, pregnancy questions and questions about your body. Many are free, and some can see you without a Medicare card.

Your health doesn't become less important because it's uncomfortable to talk about. You are allowed to ask. You are allowed to know.

YOU CAN SAY

"I'd like to ask some questions about my sexual health."

"I'd like to get tested."

Mental health support

You don't have to wait until it's bad. **headspace** (12–25) is free or low-cost with no referral. Your usual GP can make a Mental Health Treatment Plan for Medicare rebates on up to 10 psychology sessions a year. **Kids Helpline** (5–25): 1800 55 1800, 24/7. **Lifeline**: 13 11 14. **Beyond Blue**: 1300 22 4636.

Seeking help is not a last resort. It is a valid first step.

YOU CAN SAY

"I think I need someone to talk to."

"I'd like support for how I've been feeling."

ask when you book

"Do you bulk bill young people?" and "Can I have a long appointment?" are two of the most useful questions in this pack.

fighting medical dismissal · advocate

06 When you're not heard

You might walk out of an appointment knowing something wasn't right. Maybe you were interrupted, rushed, or told it was "just stress" before anything was explored. That feeling matters.

Medical dismissal isn't always obvious. It can sound polite. It can come from people who mean well. This section isn't about confrontation. It's about clarity: for each moment, what might be going on, what you can say, and the next move. Say it quietly or firmly, however feels natural. Advocacy doesn't look one way.

YOU HEAR

"It's probably just stress."

WHAT MIGHT BE GOING ON

Stress does affect the body. But it's sometimes offered before physical causes are checked.

YOU CAN SAY

"I understand stress can play a role. I'd still like to rule out physical causes."

"What would you want to check before putting this down to stress?"

Next move → Ask what would change their mind, and when to come back if it doesn't improve.

YOU HEAR

"You're too young for that."

WHAT MIGHT BE GOING ON

Many conditions, including endometriosis, PMOS (PCOS), ADHD and depression, can start in the teenage years.

YOU CAN SAY

"I understand I'm young, but this is affecting me now."

"Can we look into it properly, regardless of my age?"

Next move → Bring your tracker: a pattern over months is hard to wave away.

YOU HEAR

"That's normal."

WHAT MIGHT BE GOING ON

Something can be common and still not be manageable for you.

YOU CAN SAY

"I know it may be common, but it isn't manageable for me."

"At what point would this need investigating?"

Next move → Describe what it stops you doing. Impact is harder to dismiss than a number.

YOU HEAR

"You're overreacting."

WHAT MIGHT BE GOING ON

How calm you seem says nothing about what you're feeling.

YOU CAN SAY

"It feels significant to me, and it's affecting my life."

"I'd like to focus on the cause rather than my reaction."

Next move → Ask for your concern to be noted in your file.

YOU HEAR

"It shouldn't hurt that much."

WHAT MIGHT BE GOING ON

Pain is personal. It doesn't have to match anyone's expectations to be real.

YOU CAN SAY

- *"I'm not asking you to agree with the level of pain. I'm asking for help understanding it."*
- *"It's consistent, and it's getting worse over time."*

Next move → Use your symptom story, and ask what else it could be.

YOU HEAR

"Okay, so we'll just—" (you feel rushed)

WHAT MIGHT BE GOING ON

Appointments are short. Important details get lost when things move too fast.

YOU CAN SAY

- *"I don't feel I've explained everything yet."*
- *"Could we book another appointment to go through this properly?"*

Next move → Next time, book a long appointment and lead with your main concern.

YOU HEAR

(You're interrupted mid-sentence.)

WHAT MIGHT BE GOING ON

Interruptions are common in busy clinics, and can cut off key information.

YOU CAN SAY

- *"I'd like to finish explaining this before we move on."*
- *"There's one more part that I think is important."*

Next move → Keep your notes in front of you, and go back to where you stopped.

YOU HEAR

"Let's just wait and see." (you're not taken seriously)

WHAT MIGHT BE GOING ON

Waiting can be reasonable, but only with a plan.

YOU CAN SAY

- *"This has been affecting me consistently. It's important to me that we look into it."*
- *"What are we watching for, and when do I come back?"*

Next move → If you still feel unheard, ask for a second opinion.

YOU HEAR

(Medical words you don't understand.)

WHAT MIGHT BE GOING ON

Clinicians use shorthand. It's their job to make sure you understand.

YOU CAN SAY

- *"Could you explain that in simpler terms?"*
- *"So, just to check, you're saying... Is that right?"*

Next move → Ask for it in writing, or for something you can read at home.

YOU HEAR

(You feel intimidated.)

WHAT MIGHT BE GOING ON

There's a power imbalance in the room. You don't have to perform confidence.

YOU CAN SAY

- *"I'd like to ask a few questions before we continue."*
- *"I need a moment to process this."*

Next move → Bring a support person, or ask to pause and come back.

YOU HEAR

"So, shall we go ahead?" (you're not ready)

WHAT MIGHT BE GOING ON

Most decisions aren't urgent. You're allowed time.

YOU CAN SAY

- *"I'd like some time to think before deciding."*
- *"Is there any risk in waiting a little?"*

Next move → Take the information home, look it up on a trusted site, and come back with questions.

YOU HEAR

(The way it's explained doesn't work for you.)

WHAT MIGHT BE GOING ON

If you process information differently, the standard format may not fit.

YOU CAN SAY

- *"I may need more time to process this."*
- *"Could you explain it step by step, and write it down?"*

Next move → Ask for reasonable adjustments when you book.

YOU HEAR

"Come back if it gets worse."

WHAT MIGHT BE GOING ON

Without a clear plan, it's easy to fall through the gaps.

YOU CAN SAY

- *"What should I do if this doesn't improve?"*
- *"How long should I wait before coming back?"*

Next move → Book the follow-up before you leave the clinic.

YOU HEAR

(The appointment isn't in your language.)

WHAT MIGHT BE GOING ON

You have a right to understand your care. GPs can book a professional interpreter for free.

YOU CAN SAY

- *"I would like an interpreter for this appointment."*
- *"Can we speak without my family translating?"*

Next move → Ask when you book, so the interpreter is ready. TIS National is 131 450.

YOU HEAR

(You want it on the record.)

WHAT MIGHT BE GOING ON

Notes create a timeline, and make the next appointment faster.

YOU CAN SAY

- *"Could you please include that in my medical record?"*
- *"I'd like this concern to be noted."*

Next move → Keep your own record too: date, what you said, what they said.

YOU HEAR

"I don't think we need tests."

WHAT MIGHT BE GOING ON

Sometimes true. But you can ask for the reasoning.

YOU CAN SAY

- *"Is there anything that would help us understand this better?"*
- *"I'd feel more comfortable ruling out possible causes first."*

Next move → Ask what would make testing appropriate, and note the answer.

YOU HEAR

(You still don't feel it's resolved.)

WHAT MIGHT BE GOING ON

A second opinion is a normal and responsible part of care.

YOU CAN SAY

"I'd feel more comfortable getting a second opinion."

"Could you refer me to another specialist?"

Next move → Take copies of your results and your symptom story.

IN THEIR WORDS

"When I complained about cramps, my aunties said, 'That's just what being a woman is.' No one mentioned endo or PCOS. So when I missed days of school, I thought it was my fault for not being tough enough."

17, Lebanese high school student · shared with Aletheia

IN THEIR WORDS

"My pastor's wife once said periods were 'Eve's punishment' and that pain was just part of God's plan. When I started fainting from cramps, I thought it was a spiritual test. It took me years to realise it was endometriosis."

34, Nigerian–Australian · shared with Aletheia

There is no single way to advocate for yourself. Some days it looks like asking one question. Other days it looks like holding your ground. Both matter. You don't need perfect words, only the willingness to say: "This matters to me."

being taken seriously isn't something you earn. it's something you're entitled to.

navigate · advocate

07 Your rights in the Australian system

The Australian Charter of Healthcare Rights applies to everyone getting care in Australia, whatever their age. Knowing it turns "I hope they'll listen" into "I'm entitled to be involved".

The seven rights and what they mean for you

RIGHT	WHAT IT MEANS FOR YOU
Access	Healthcare that meets your needs, including interpreters and adjustments.
Safety	Care that's safe, in a place where you feel safe.

The seven rights and what they mean for you (continued)

RIGHT	WHAT IT MEANS FOR YOU
Respect	Being treated with dignity, with your culture, identity, beliefs and choices respected.
Partnership	Asking questions and being involved in decisions, with support people if you want them.
Information	Clear information about your condition, options, risks and costs, in a way you understand.
Privacy	Your personal and health information kept private and confidential.
Give feedback	Commenting on or complaining about your care, and having it taken seriously.

Consent

You can ask what a test or treatment involves, why, the risks and alternatives. You can take time, say no, or change your mind. Under 18, you can usually consent yourself if you understand the decision; the rules vary by state.

Confidentiality

What you say is private, with limited exceptions such as serious risk of harm. From 14, Medicare generally needs your consent to share claims with parents; from 15 you can have your own card. Sexual health clinics are confidential and often free.

✦ If something went wrong

1
Raise it with the clinician or practice

If it feels safe. Ask for the practice manager if you prefer.

2
Put it in writing

What happened, when, and what you'd like done. Keep a copy.

3
Go to your state's health complaints body

It's free. In Victoria, that's the Health Complaints Commissioner. Complaints are also how services find patterns and change.

FREE, INDEPENDENT COMPLAINTS BODIES

ACT ACT Human Rights Commission

NSW Health Care Complaints Commission

NT Health and Community Services Complaints Commission

QLD Office of the Health Ombudsman

SA Health and Community Services Complaints Commissioner

TAS Health Complaints Commissioner Tasmania

VIC Health Complaints Commissioner

WA Health and Disability Services Complaints Office

connect

08 Care that fits who you are

Culture, language, gender, sexuality, disability and age shape how people are heard. Good care adapts to you. Here's what you can ask for.

Culturally and linguistically diverse

Ask for a professional interpreter, free at GP appointments. It's okay to see a doctor without family present. If health is taboo at home, confidential services exist for exactly this.

YOU CAN SAY

"Can we speak without my family translating?"

LGBTQIA+

You choose what to share and can ask what stays private (some limits apply). Correct your name and pronouns, and ask if a service is inclusive. QLife: 1800 184 527.

YOU CAN SAY

"I use ___ pronouns."

Aboriginal and Torres Strait Islander

Aboriginal Community Controlled Health Organisations offer culturally safe care, run by community. 13YARN (13 92 76) is 24/7 crisis support.

Neurodivergent or disabled

Ask for adjustments: more time, a quiet room, written information, step-by-step explanations, a support person.

YOU CAN SAY

"Could you write that down for me?"

Young

Your age is a reason to be thorough. You may be able to see a GP on your own: ask what stays private and when information might be shared.

YOU CAN SAY

"Could I have some time with the doctor on my own?"

Faith and family

You can ask for care that respects your beliefs, like a doctor of a particular gender, or modesty during an examination.

YOU CAN SAY

"Is it possible to see a female doctor?"

IN THEIR WORDS *Why care has to fit the person*

"Even when I taught my mum the word 'endometriosis' in English, it didn't land. In Spanish, she still just says 'dolor de mujeres' — women's pain. It's like the word doesn't stick if the culture doesn't have space for it."

25, Colombian-Australian queer woman · shared with Aletheia

"When I came out, I realised my family had no language for queer bodies. So I brought books, podcasts, TikToks to the dinner table. At first it was awkward, but now my mum asks questions. We're both unlearning the silence together."

23, queer Australian · shared with Aletheia

Real words shared with Aletheia and first published on our blog. Names removed.

digital health literacy · understand

09 Health information online

Many young people look up their symptoms online, and that's fine. The internet can help you find words and questions. It can also sell you fear, fake cures and confident wrong answers. Here's how to tell the difference.

1
Who made it?
A health service, university or charity, or someone selling something?

2
When?
Health advice changes. Look for a recent date.

3
What's it based on?
Research and experts, or one person's story?

4
Is it selling you something?
A product, a supplement, a program, or clicks?

5
Does it match trusted sources?
Check it against two of the sites below.

RED FLAGS

- "Doctors don't want you to know this"
- Miracle cures or detoxes
- One personal story presented as proof
- Pressure to buy, fast
- Advice to stop a prescribed medicine
- No author, date or sources

Social media, apps and AI

Creators with lived experience can help you feel less alone and find the right words. Treat their advice as a starting point, not a diagnosis.

AI chatbots can help you prepare questions, but they can be confidently wrong. Check important answers with a trusted site or a health professional, and be careful what personal health details you share online.

Places you can trust

healthdirect
healthdirect.gov.au
Government health information and a 24/7 nurse line: 1800 022 222.

Better Health Channel
betterhealth.vic.gov.au
Plain-language health information from the Victorian Government.

Jean Hailes
jeanhailes.org.au
Women's health: periods, endometriosis, PMOS, and more.

headspace
headspace.org.au
Mental health for 12 to 25-year-olds.

Kids Helpline
kidshelpline.com.au
Information and counselling for ages 5 to 25.

Royal Children's Hospital
rch.org.au/kidsinfo
Fact sheets on puberty, periods and teen health.

act · influence

10 From me to we

Every time a young person is dismissed, it affects them. When it happens to thousands, it tells us something about the system. Aletheia exists to connect the two: to help you get care today, and to turn what young people go through into evidence that changes what the next person faces.



Me
my experience

Us
others have it too

Evidence
a pattern we can show

Change
a decision shifts

THE EVIDENCE

13,000+

responses to Victoria's 2024 Inquiry into Women's Pain. Of those who responded, 71% felt dismissed by health professionals.

THE EVIDENCE

6–8 years

average delay to an endometriosis diagnosis in Australia, with symptom normalisation named as a key cause.

THE RESPONSE

Youth voice

Young people's experiences, gathered safely and shared with decision-makers, are how that pattern starts to shift.

Sharing your story safely

- [ ] I'm sharing because I want to
- [ ] I know where it will go and who will see it
- [ ] I've chosen my name, first name only, or anonymous
- [ ] I've left out details that identify other people
- [ ] I can review or withdraw it before publishing
- [ ] I have someone to talk to afterwards

To review, change or withdraw something you've shared, email contact@thealetheiaproject.org.

Where your voice goes at Aletheia

These are the structures we've built so young people's experience reaches the people who make decisions:

- Youth Consultation: your input on real decisions
- Youth Roundtables: young people and decision-makers in one room
- Youth Research and the Youth Research Journal: lived experience as evidence
- Aletheia Voices and Aletheia Talks: sharing stories and writing
- Youth Executive Council: young people leading Aletheia

You're not just reading this. You can help write the next one.

Every Voice Pack is shaped by young people. Join the resource development or translation teams, apply to the Youth Executive Council, share your writing through Aletheia Talks, or tell us what should be in the next edition: **thealetheiaproject.org/get-involved**

reflect

11 Your story, your voice

There are so many places where you're expected to have answers. This isn't one of them. Your experience doesn't need medical language, or to sound "serious enough". It only needs to be yours.

Write here, think here, or leave it blank. The moment you start putting your experience into words, you're no longer carrying it alone.

What have you been told about your body?

- *What have you been told is normal?*
- *What have you been told isn't worth mentioning?*
- *What has your body been telling you, despite that?*

What do you wish someone believed?

- *Something physical: a pain that never fully went away?*
- *Something emotional: a weight you carried quietly?*
- *Something you're still trying to understand?*

What does your body feel like today?

- *Is there tension, heaviness, lightness, discomfort anywhere?*
- *Is there something you've been ignoring?*
- *What would you tell a doctor about today?*

What does advocating for yourself look like?

- *What feels manageable right now: one question? Writing things down?*
- *Who could back you up?*
- *What would you say if your voice shook?*
- *Could a written note, a support person, more time or help explaining make it easier?*

What would you change for the next person?

Your experience can make it easier for someone else. What would you want a doctor, a school or a government to understand?

- *One thing I wish had been different...*
- *Who could change it...*
- *One small step I could take...*

support

12 When to get help, and where

Most things in this pack are about everyday care. Some things can't wait. Know the difference.

EVERYDAY

Keep an eye on it

- New symptoms that are mild
- Things you want to understand better
- Track it, and see a GP if it keeps up

BOOK A GP

Worth an appointment

- Symptoms stopping school, work or plans
- Pain or bleeding getting worse
- Low mood or anxiety most days for two weeks or more
- Anything that worries you. That's reason enough.

URGENT · 000

Get help now

- Sudden, severe pain
- Very heavy bleeding with dizziness or fainting
- Trouble breathing, chest pain
- Thoughts of suicide or harming yourself, or someone else is in danger

Supporting a friend

- Listen without rushing to fix it, and believe them.
- Ask what would help, rather than assuming.
- Offer to help them book, or go with them to an appointment.
- Share a service that fits, like headspace or Kids Helpline.
- If they're in danger, call 000. You don't have to keep that secret.
- Look after yourself too. Supporting someone is a lot.

After hours and not sure where to go?

healthdirect (1800 022 222) has registered nurses 24/7 who can tell you how urgent something is and where to go. Pharmacists can also help with many everyday problems without an appointment.

In Victoria, you can also call **NURSE-ON-CALL** on 1300 60 60 24.

Who to call

Emergency
000
If you or someone else is in danger or needs urgent medical help.

Kids Helpline
1800 55 1800
Free, 24/7 phone and webchat, ages 5–25.

Lifeline
13 11 14
24/7 crisis support. Text 0477 13 11 14.

headspace
headspace.org.au
Free or low-cost support, ages 12–25. Online: eheadspace.

13YARN
13 92 76
24/7 crisis support by Aboriginal and Torres Strait Islander people.

QLife
1800 184 527
LGBTIQ+ peer support, phone and webchat, 3pm–9pm daily.

healthdirect
1800 022 222
24/7 nurse advice: is this urgent, and where should I go?

TIS National
131 450
Interpreting in your language. Free in many situations: the service usually covers the cost.

Beyond Blue
1300 22 4636
24/7 mental health support by phone, plus webchat at beyondblue.org.au.

1800RESPECT
1800 737 732
24/7 support for sexual, domestic and family violence. Chat online.

Butterfly Foundation
1800 33 4673
Support for eating disorders and body image. Phone, chat or email.

Suicide Call Back Service
1300 659 467
24/7 phone and online counselling for anyone affected by suicide.

the aletheia project

13 What Aletheia is, and why we exist

The Aletheia Project is a youth-led not-for-profit. It exists because of a gap many young people feel but can't always name: the gap between having access to healthcare and actually knowing how to use it.

Aletheia is Ancient Greek for truth. We're not here to replace healthcare. We're here to strengthen your position in it, and to make sure young people's truth reaches the places where decisions get made.

HEALTH LITERACY
Understanding your body, and the language for it.

SELF-ADVOCACY
Being able to speak, ask and hold your ground.

SYSTEMS CHANGE
Young people shaping the services and policies that affect them.

More from Aletheia

- **The Self-Advocacy Journal and Health Navigator** (September 2026 editions): a fill-in journal and a plain-language map of the health system
- **The Voice Pack Archive**: four earlier editions, from "Know Your Body" to "From Voice to Change"
- **Empower Packs**: essentials plus a Voice Pack and Health Navigator for young people who need them
- **Youth workshops, roundtables and consultation**: young people in the room where decisions are made
- **The Youth Research Journal**: young people's own research, published
- **Multilingual resources**: translated editions of our packs are in development

How to get involved

Aletheia is not just something you read. It's something you can be part of. You don't need to be an expert. You only need to care.

- Volunteer with our resource development or translation teams
- Apply to the Youth Executive Council
- Share your writing or story through Aletheia Talks and Aletheia Voices
- Take part in youth consultations, roundtables and the Youth Research Journal
- Follow @aletheia.au and share what resonates

CONTACT

Get in touch

contact@thealetheiaproject.org · thealetheiaproject.org · @aletheia.au

Want printed copies for your school or organisation? Email us. Want to see how we got here? Explore the Voice Pack Archive on our website: four earlier editions, from "Know Your Body" to "From Voice to Change".

Your body is yours. You're allowed to question it, understand it, and speak about it. And when you do, you already begin to change it.

The Aletheia Project, 2026

checked and cited

14 Sources and thanks

Every fact in this pack has been checked against the Australian sources below (accessed September 2026). Health information changes, so if something here doesn't match what your doctor says, ask them about it.

1. AIHW (2023): Endometriosis in Australia, 1 in 7 diagnosed by age 44–49. www.aihw.gov.au/reports/chronic-disease/endometriosis-in-australia-2023/contents/endometriosis
2. Australian Government Department of Health: Australian Living Evidence Guideline, Endometriosis (diagnostic delay of 6–8 years; symptom normalisation). www.health.gov.au/news/australian-living-evidence-guideline-endometriosis
3. Jean Hailes for Women's Health: Endometriosis consult guide. www.jeanhailes.org.au/clinical-resources/endometriosis-consult-guide/
4. The Lancet (2026): Polyendocrine metabolic ovarian syndrome, the new name for polycystic ovary syndrome: a multistep global consensus process. www.thelancet.com/journals/lancet/article/PIIS0140-6736(26)00717-8/fulltext
5. Jean Hailes for Women's Health: Polyendocrine metabolic ovarian syndrome (PMOS, formerly PCOS). www.jeanhailes.org.au/health-topics/pmos/
6. Medical Journal of Australia (2018): International evidence-based PCOS guideline, 8–13% of reproductive-age women. www.mja.com.au/journal/2018/209/7/translation-and-implementation-australian-led-pcos-guideline-clinical-summary
7. Monash University / Centre for Research Excellence in Women's Health in Reproductive Life: 2023 International Evidence-based Guideline for PCOS. www.monash.edu/medicine/mchri/pcos/guideline
8. ACOG: Heavy menstrual bleeding (patient FAQ). www.acog.org/womens-health/faqs/heavy-menstrual-bleeding
9. Royal Children's Hospital Melbourne, Teen Health Info: Periods – owning your cycle. www.rch.org.au/teeninfo/fact-sheets/Periods_%E2%80%93_owning_your_cycle/
10. Australian Commission on Safety and Quality in Health Care: Australian Charter of Healthcare Rights (2nd ed., 2019). www.safetyandquality.gov.au/consumers/understanding-your-rights
11. Services Australia: Personal information releases (Medicare records of young people aged 14 and over). www.servicesaustralia.gov.au/personal-information-releases?context=64107
12. Family Planning NSW: Confidentiality and privacy for young people. www.fpnsw.org.au/health-information/under-25s/confidentiality-and-privacy-young-people
13. TIS National: Free Interpreting Service (private medical practitioners). www.tisnational.gov.au/Free-Interpreting-Service
14. Health Complaints Commissioner (Victoria): Make a complaint. hcc.vic.gov.au/make-complaint
15. Victorian Department of Health: Inquiry into Women's Pain (more than 13,000 responses; 71% felt dismissed by health professionals). www.health.vic.gov.au/inquiry-into-womens-pain
16. Victorian Department of Health (2025): Bridging the gender pain gap, Inquiry into women's pain report. www.health.vic.gov.au/sites/default/files/2025-11/bridging-the-gender-pain-gap-pain-inquiry-report.pdf
17. Australian Government Department of Health: Better Access initiative (Medicare-rebated mental health sessions). www.health.gov.au/our-work/better-access-initiative
18. headspace: National Youth Mental Health Foundation (ages 12–25). headspace.org.au/
19. healthdirect Australia: 24/7 health advice line and service finder. www.healthdirect.gov.au/australian-health-services
20. The Aletheia Project: Health Navigator (2026).
21. healthdirect Australia: periods, puberty, UTIs, thrush, migraine, STIs and contraception fact sheets. www.healthdirect.gov.au
22. Royal Children's Hospital Melbourne, Kids Health Info: puberty and periods. www.rch.org.au/kidsinfo
23. Better Health Channel (Victorian Government): menstrual cycle, contraception, sexual health. www.betterhealth.vic.gov.au
24. Australian Digital Health Agency: My Health Record, young people aged 14 and over. www.myhealthrecord.gov.au
25. Services Australia: getting your own Medicare card from age 15. www.servicesaustralia.gov.au
26. Butterfly Foundation: eating disorders and body image. butterfly.org.au
27. Kirby Institute: annual surveillance of STIs in Australia. www.kirby.unsw.edu.au

THANKS

Written, designed and fact-checked by The Aletheia Project's youth resource development team, with the young people who shared their stories, questions and ideas. Quotes are real words shared with Aletheia, with names removed.

We acknowledge the Wurundjeri Woi-wurrung people of the Kulin Nation, the Traditional Owners of the land where Aletheia was founded, and pay our respects to Elders past and present.

one last thing

You don't need perfect words. You only need the willingness to say, "this matters to me."

Keep this pack. Bring it to appointments. Pass it to someone who needs it.
And when you're ready, help us write the next one.

EMERGENCY
000

KIDS HELPLINE
1800 55 1800
ages 5–25, 24/7

LIFELINE
13 11 14
24/7 crisis support

THE ALETHEIA PROJECT
thealetheiaproject.org · contact@thealetheiaproject.org · @aletheia.au
Voice Pack · 5th edition, revised and updated October 2026. Health education, not medical advice.
We acknowledge the Wurundjeri Woi-wurrung people of the Kulin Nation, where Aletheia was founded.