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25 July 2007

The Secretary
Senate Community Affairs Committee
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Sir

Further to my conversation with Senator Allison, I am pleased to have the opportunity to make a submission to the Senate Community Affairs Committee Inquiry into mental health services in Australia and write to congratulate the Australian Government on the progress made since the development of the National Mental Health Plan 2003-2008.

It is encouraging to have recognition at a governmental level for supportive frameworks designed to develop and maintain mental health, particularly for children and adolescents whose early experiences shape their later mental health. For over 20 years the Peer Support Foundation has been providing school-based interventions to strengthen life skills and resilience for students from Kindergarten – Year 12. The Peer Support Foundation were one of the first organisations in Australia to recognise the need for and to provide specific anti-bullying programs to schools.

It is estimated that the Peer Support Program impacts on over **200,000** students annually and currently has 766 schools enrolled as members.

Funding

The priority given by Government to promotion and prevention has resulted in the Peer Support Foundation securing three year funding under the Department of Health and Ageing's Suicide Prevention Community Based Initiative. This funding is to assist the Peer Support Foundation to promote and expand the Peer Support Program to Queensland and Tasmania.

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Federal Department of Health and Ageing
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Based on NSW records it is estimated that the **cost for participation in the Peer Support Program is \$3 per child per year.**

The Peer Support Foundation is currently making approaches to the Directors for Mental Health in NSW, Queensland and Tasmania to request funding support for ongoing implementation of the Peer Support Program in their respective states.

NSW

The Peer Support Foundation has been supported by the NSW Health Department since the early nineties and funding has increased annually in accordance with CPI. No other increase has been forthcoming from NSW Health Department despite the increased popularity of the Peer Support Program and the resultant increased costs to the Peer Support Foundation.

It has been difficult to obtain a meeting with the Director for Mental Health in NSW due to restructure, but it is anticipated that a meeting will result before the end of August 2007.

Queensland

Attempts to support Queensland schools in implementing the Peer Support Program have been made in the past. This has been difficult to sustain due to insufficient funding.

A meeting took place with the Director for Mental Health in Queensland in February 2006. In February 2007 it was agreed to provide one off funding of \$20,000 to assist in promotion of the program in Queensland. It is hoped that further funding will flow from the 2007-2017 Mental Health Plan.

Tasmania

It is estimated that the Peer Support Program operates in about 70% of Tasmanian schools. Materials used were developed in the early nineties and no longer provide adequate support to schools. At one stage training was provided by the Education Department in Tasmania, however several restructures have resulted in the demise of the area responsible for training. Teachers in Tasmanian schools have commented on the difficulties experienced by having programs of this type controlled by the Education Department as their longevity is dependent on the commitment of the person with the role of overseeing implementation.

A meeting is scheduled with the Director, Mental Health Services in Tasmania in October 2007.

Concerns

Whilst the higher priority given to promotion and prevention has resulted in the Peer Support Foundation being successful in accessing funds to promote and implement the Peer Support Program in Tasmania and Queensland, we are concerned about the difficulties which may be experienced if unable to access funding directly from the States after June 2009. Funding allocated for restricted periods places constraints on long term planning and sustainability of programs. The Peer Support Foundation supports the goal of the Mental Health Plan to ensure that innovations found to be effective are adequately resourced to enable ongoing implementation.

The initiatives addressed in the National Action Plan 2006-2011, whilst comprehensive, do not appear to give sufficient priority to increasing the operational funds required to assist organisations to build capacity.

When an organisation is insufficiently funded, the more successful the service, the greater its financial struggle. There is a need to provide ongoing enhancement funding for organisations in this category. New initiatives often demand new projects and funding is not provided for routine service delivery costs. This is precisely the area that many organisations have difficulty funding.

The short time frames allocated from announcement of tenders to closing date and the restrictive guidelines provided can create difficulties for tightly resourced organisations to develop comprehensive applications in the face of conflicting priorities.

Recommendations

- Increased priority placed on promotion and prevention
- Priority given to school based programs supporting promotion and prevention from an early age (eg in a primary school setting)
- Priority given to increasing the capacity of organisations currently fostering environments promoting mental health
- Consideration given to increasing funding support to organisations currently partially funded.
- Increased support given to supporting existing programs aimed at increasing mental health literacy and resilience
- Increased support given to universal preventive interventions

Thank you for the opportunity to make this submission and I await with interest the results of the Inquiry.

Regards

Sharon Austin

General Manager

Sharen Austin



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Submission to the

Senate Community Affairs Committee Inquiry into Mental Health Services in Australia

from

The Peer Support Foundation Limited

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Senate Select Committee on Mental Health Services in Australia Submission from the Peer Support Foundation

i Terms of Reference

- (1) Ongoing effects towards improving mental health services in Australia, with reference to the National Action Plan for Mental Health agreed upon at the July 2006 meeting of the Council of Australian Governments, particularly examining the commitments and contributions of the different levels of government with regard to their respective roles and responsibilities.
- (2) That the committee, in considering this matter, give consideration to:
 - (a) the extent to which the action plan assist in achieving the aims and objective of the National Mental Health Strategy;
 - (b) the overall contribution of the action plan to the development of a coordinated infrastructure to support community based care;
 - (c) progress towards implementing the recommendations of the Select Committee on Mental Health, as outlined in its report 'A national approach to mental health - from crisis to community'; and
 - (d) identifying possible remaining gaps or shortfalls in funding and in the range of services available for people with mental illness.
- (3) That the committee have access to, and have power to make use of, the evidence and records of the Select Committee on Mental Health.

1. Recommendations

The Peer Support Foundation applauds the ongoing efforts toward improving mental health services in Australia with reference to the national Action Plan on Mental Health July 2006 and is committed to progress towards implementing the recommendations of the Select Committee on Mental Health, as outlined in its report 'A national approach to mental health - from crisis to community.' The following outline the recommendations to which the Peer Support Foundation aligns.

• Recommendation 2

2.4

Ensure that the objectives in the next NMHS Plan increase emphasis on delivery of community care, **prevention and early intervention**, providing a more appropriate balance between these services and acute and emergency care.

- Recommendation 4
- 2.7
- be an advocate for mental wellbeing, resilience and illness prevention
- promote community and school based education
- Recommendation 20

3.1

- Australian government allocates recurrent funding to ensure prevention and early intervention programs in the education system are ongoing, including funding for evaluation and continuous improvement of these programs
- Recommendation 21

3.12

- review MindMatters in secondary schools and on this basis consider expanding it to all schools, including an equivalent program in primary schools
- Recommendation 28

3.19

- that with respect to the non-government, not for profit sector:
 - governments recognise the problems associated with short term, non recurrent grant approaches to funding and move to more secure funding based on evaluations of effectiveness

2. Introduction

A significant number of young people suffer mental health problems. The Peer Support Program improves the mental health of young people by addressing the 3 key indicators of depression posited by Sawyer.

Indicators for Mental Health

Researchers highlight the significance of protective factors in contributing to an individual's ability to demonstrate resilience. Resilience can be enhanced through explicit instruction involving a range of coping strategies. Indicators of good mental health among young people may include:

- · feeling connected to their school;
- having positive family-school links;
- feeling connected to peers;
- feeling cared for and supported by teachers;
- having a sense of belonging and worth;
- having one caring adult outside the family;
- knowing how to think optimistically;
- having skills for being resilient;
- · demonstrating competence in social skills; and
- being emotionally literate.

The Peer Support Foundation has identified a range of protective factors help students maintain mental, physical and social wellbeing and resist bullying behaviours. Some protective factors are social such as interpersonal relationships, family cohesion, social support and a sense of community. Some are life skills such as empathy, resilience, assertiveness, coping, decision making, problem solving, monitoring stress and conflict resolution.

Failure to build protective factors within students has significant long term consequences including difficulty in forming close relationships based on trust and negatively influencing student's perception of the wider community

Michael Sawyer 2004 found:

- 14% of 4-17 year olds suffer from mental health problems;
- young people with mental health problems experience problems in most areas of their life; and
- rates of depressions increase for young people when:
 - their relationship are poor
 - they are less connected
 - they are less involved.

National Survey of Mental Health and Wellbeing 2000 concluded:

- 75% of mental illness begins between the ages of 15-25 years;
- anxiety and depression are the most common mental health problems for young people aged 12-17.

Kids Helpline 2006 indicates:

- 10% of all counselling sessions nationally relate to mental health, more than twice the calls in the past 3 years;
- 1 in 4 young people receive professional help;
- 24.4% of young people experience mental health issues;
- 15% of young people self harm;
- 1:10 have suicidal thoughts;
- 32% of contacts are from 10-14 year olds, 55% from 15-18 year olds;
- 36.3% rank bullying as the second most frequent issue of concern; and
- boys are more likely to experience mental health problems than girls.

The Peer Support Program links to the National Mental Health Plan 2003-2008:

- mental health promotion aims to protect, support and sustain the emotional and social wellbeing from the earliest years through adult life;
- knowledge about risk and protective factors for mental health contribute to emotional resilience;
- opportunities to improving the mental health knowledge and skills are suitable for education; and
- protective factors give people resilience in the face of adversity.

Further studies from Mission Australia's 2006 Youth Survey found:

- 66.8% of young people valued their friends highly;
- 86.4% of young people seek advice from friends and peers; and
- 2:5 20-24 year olds are concerned about depression.

In 1999 the British Medical Journal published findings from an Australian study which demonstrated students who were bullied tended to be unhappy at school. However these students enjoyed school but felt isolated and unsupported. This study also found students who bullied and were bullied had the greatest number of psychological and psychosomatic symptoms.

3. Background

The Peer Support Foundation is a non government, not for profit organisation, partially funded by the NSW Health Department. The Peer Support Program is a valuable learning experience for students and in conjunction with other strategies provides a powerful tool for bringing about positive cultural change in school communities. It currently operates in over 1,400 schools in NSW, ACT, Queensland and Tasmania.

The mission of the Peer Support Foundation is to provide dynamic peer led programs which foster the physical, social and mental wellbeing of young people and their community.

The Peer Support Foundation has been supported by the NSW Health Department, Centre for Mental Health, for a number of years in recognition of the significant positive benefits on the mental health of young people. Recently the Peer Support Foundation has been successful in securing funding and developing partnerships with Federal Department of Health and Ageing (DOHA); Mental Health and Drug and Alcohol Office, Queensland Government, Mental Health Branch and Federal Department of Education, Science and Training (DEST).

The Peer Support Program is skills based, experiential and linked to curriculum areas and other complimentary educational initiatives across a number of states. In addition, the Peer Support Program is aligned with national frameworks including the National Safe Schools Framework (NSSF), National Framework for Values Education, MindMatters, KidsMatter and the National Coalition Against Bullying (NCAB).

3.1 The Peer Support Program

The Peer Support Foundation provides an integrated program of training and learning materials for both primary and secondary schools, which can support schools in achieving these changes successfully. Peer Support modules have been designed to be used in conjunction with teacher and student leadership training.

In primary schools, peer groups are facilitated by two Year 6 students with small multi-age groups from Kindergarten-Year 5. In secondary schools, the traditional approach is Year 10 facilitating small groups for Year 7 to support them through their transition phase to secondary school. Both primary and secondary students are trained as Peer leaders through a 2 day leadership training program. Peer leaders work with students for approximately 30 minutes per week for 8 sessions using Peer Support Foundation modules.

Students are supported at every stage through briefing and debriefing sessions conducted by teachers. Briefing and debriefing are vital to the success of the Peer Support Program. Some modules have Teacher Debriefing Notes to be used in class. Newsletter items and Parent Information Leaflets have been included in modules to encourage schools to involve parents in the Peer Support experience by providing ongoing information.

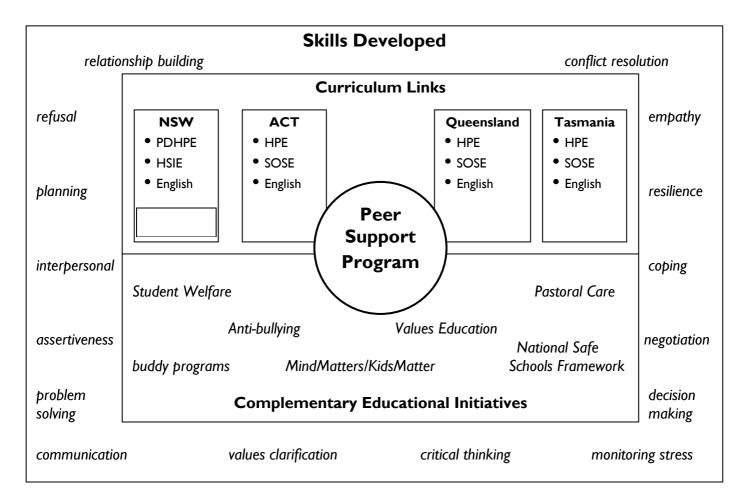
Student learning materials, known as modules, are underpinned by current pedagogy, have a cross curricula focus and are consistent with key educational policies and perspectives.

Curriculum areas provide opportunities for students to develop and demonstrate a range of skills.

The Peer Support Program enhances this skill acquisition. In addition, the program:

- assists students to develop protective factors;
- · empowers students to become more socially connected; and
- · encourages lifelong learning.

The following highlights the integrated whole school approach to the Peer Support Program.



Modules cover a range of focus areas such as orientation, relationships, optimism, resilience, values and anti-bullying. Sessions within all modules include opportunities to develop positive relationships with others; engage learners; develop skills, understandings and attitudes; work

cooperatively and collaboratively; and reflect on their experiences. All of these enhance a young person's mental health over time.

Many forms of peer support have been implemented in Australian schools and have been given a range of titles such as peer education, peer tutoring, peer mentoring, buddy programs, peer mediation, peer counselling, peer support, and peer support groups.

The outcomes of an effective Peer Support Program include:

- · building positive relationships;
- developing skills;
- enhancing mental health;
- taking personal responsibility;
- · embracing lifelong learning;
- developing key concepts; and
- encouraging participation.

Key concepts, determined by research and evidence based, form the basis of the Peer Support Program and all training programs and student learning materials. The Peer Support Foundation believes the development of these key concepts will contribute to students' physical, social and mental wellbeing. The key concepts are:

- sense of Self;
- resilience;
- · connectedness; and
- · sense of possibility.

4. Research

4.1 University of Western Sydney 2003

A longitudinal study by the University of Western Sydney, Self Concept Enhancement and Learning Facilitation (SELF) Research Centre was published in 2003. The research was conducted to determine the efficacy of the secondary schools Peer Support Program and the development of the key concepts espoused by the Peer Support Foundation. This research proved the Peer Support Program gains positive long term benefits for students and school communities.

Funded by the Australian Research Council and involving 2,300 secondary students across NSW during 2001-2002, some of the findings demonstrated the Peer Support Program:

• assists students to successfully negotiate transition from primary to secondary school;

- improves relationships with others peers and teachers; and
- successfully changes attitudes toward bullying behaviours.

These results are relevant to educational practitioners and highlight that the Peer Support Program can be specifically used as a means of countering aggressive behaviour, decelerating anger arousal and reducing bullying in schools. Evidence suggests the Peer Support Program is effective in decreasing the negative effects of bullying behaviours.

The Peer Support Program is a universal intervention program and early intervention is paramount in decreasing the negative effects of bullying behaviours as one example of mental health concerns amongst young people. Effective intervention programs require whole school communities to work together to encourage a sense of belonging and the involvement of all members of the community.

Research suggests students who experience bullying behaviours are more likely to speak to their friends about it, making a peer led approach to addressing the issue more appropriate. In evaluating the efficacy of the Peer Support Program in 2003, Dr Louise Ellis wrote "The positive results suggest the program is worthwhile, especially in changing the attitudes to bullying, which is one of the study's significant findings."

The implementation of the Peer Support Program has the potential to make a significant contribution in addressing students' mental health problems.

- previous research indicates adolescents' willingness to both provide and receive support from their peers; and
- 2) evidence suggests young people prefer their friends rather than adults as a source of support and assistance.

Given these findings, traditional mental health programs may not succeed in providing effective intervention. Schools remiss in capitalising on the help seeking patterns of young people may be forfeiting valuable opportunities to address students' wellbeing.

4.2 James Cook University 2006

Case study vignettes, conducted by James Cook University, were published in 2006. This study comprised the Teachers And Educators Around Castle Hill (TEACH) cluster of 7 primary schools in the Values Education Good Practice Schools (VEGPS Stage 1) project in Townsville. Interviews were conducted with teachers and students and findings have been reported in *Values*

Education and Quality Teaching, The Double Helix Effect, Professor Terry Lovat and Ron Toomey, 2007

The VEGPS project for TEACH cluster focused on the implementation of the Peer Support Program and to evaluate the impact of the Peer Support Program in each of the 7 schools. Significant findings included:

- constructing a common language for discussing and shaping values;
- · developing social relations and interactions;
- · contributing positively to whole school activities;
- · demonstrating understandings of abstract concepts; and
- applying understandings to concrete instances.

Lovat, 2007, pg 89 discusses immersing the "whole person in a depth of cognition, social and emotional maturity, and self knowledge" is required. Evidence from these case studies clearly demonstrates an holistic approach to the implementation of values education is apparent through the Peer Support Program.

4.3 Current study 2007-2009

Recently secured funding from DOHA, as part of the National Youth Suicide Prevention Strategy, is a further recognition of the Peer Support Program's positive impact on the mental health of young people. The DOHA funding will provide the opportunities to promote and expand the Peer Support Program in Queensland and Tasmanian schools.

Over the next 2 years an extensive evaluation strategy will be undertaken to further provide evidence of the outcomes of the Peer Support Program and its efficacy as a prevention program.

5. Mental Health Initiatives

5.1 KidsMatter

KidsMatter is the Australian *National Primary School Mental Health Promotion, Prevention and Early Intervention Initiative.* KidsMatter recognises the fundamental importance of students' mental health to their learning and wellbeing. KidsMatter builds on the work schools are already undertaking in relation to the mental health of their students. It is not a set of curriculum materials, but a whole school approach investigating protective factors which can be strengthened through the school context, the family and the student.

The KidsMatter initiative has 3 major aims:

• improve the mental health and wellbeing of primary school students;

- · reduce mental health problems amongst students; and
- provide greater support for those students at risk of experiencing mental health problems.

The Peer Support Program is one of the interventions articulated in the KidsMatter Program Guide which outlines a range of mental health programs available for use in Australian schools. It is included in the component which acts as a framework for schools to address student mental health and wellbeing - 'Positive School Community'. The Peer Support Program also has an identified theoretical framework, constructivism. During 2006, 50 schools across Australia were chosen to be part of the Stage 1 Pilot Study. At present, KidsMatter have begun planning for the expansion of the pilot study to include another 50 schools for late 2007.

5.2 MindMatters

The MindMatters resources support secondary schools and provide a framework and planning tools to assist schools to develop structures, strategies, partnerships and curriculum programs to promote and protect the mental health of all members of the school community. It also includes classroom resources and programs.

The Peer Support Foundation is a representative on the MindMatters Redevelopment Expert Forum and is a contributor to the Expert Reference Group.

5.3 LIFE framework

The Peer Support Foundation has been successful in receiving three year funding from DOHA for the National Youth Suicide Prevention Strategy. This is in recognition the Peer Support Program increases resilience and connectedness of young people. One the goals stated in the framework is to:

 enhance resilience and resourcefulness, respect, interconnectedness and mental health in young people, families and communities, and reduce the prevalence of risk factors for suicide.

In addition, the guising principles of the *LIFE* Framework articulate the following:

- suicide prevention is a shared responsibility across the community;
- requires a diversity of approach;
- must be evidence based and outcome focused;
- must incorporate community involvement;
- activities need to be accessible and appropriate to social and cultural needs; and
- must be sustainable and evaluated.

The key action area the Peer Support Program addresses is 'Promoting wellbeing, resilience and community capacity across Australia.' "Childhood and adolescence are particularly important periods for building protective factors, and the evidence indicates programs directed to these age groups can effect significant and long lasting change." *LIFE* Framework, 2000, pg 29.

5.4 National Safe Schools Framework

The NSSF incorporates existing good practice and provides an agreed national approach to assist school communities address the issue of bullying behaviours. The Framework is underpinned by a set of guiding principles and related key approaches and elements schools can incorporate to effectively provide a safe and supportive learning environment. Mandatory reporting from 2006 requires school communities to demonstrate how they are addressing these elements:

- 1. school values, ethos, culture, structures and student welfare;
- 2. establishment of agreed policies, programs and procedures;
- 3. provision of education/training for staff, students and parents;
- 4. managing incidents of abuse/victimisation;
- 5. providing support for students; and
- 6. working closely with parents.

"The school develops programs and strategies to empower students to participate in a positive school culture, eg peer support systems." National Safe Schools Framework, 2004.

Approaches encourage all members of the school community to

- value diversity;
- contribute positively to the safety and wellbeing of themselves and others;
- act independently, justly, cooperatively and responsibly in school, work, civic and family relationships; and
- contribute to the implementation of appropriate strategies that create and maintain a safe and supportive learning environment.

The Peer Support Foundation has also formed a partnership with The Alannah and Madeline Foundation (AMF) in recent years. NCAB is an initiative of AMF and brings together a group of individuals from key organisations to draw national attention to the issue of bullying and to bring about a social change in our community. NCAB and the Peer Support Foundation endeavour to empower individuals to realise the issue of bullying behaviours affects all school communities and each individual can make a difference. NCAB and the Peer Support Foundation provide a positive focus and commitment for the wellbeing of young people.

NCAB is a 'clearinghouse' of information to share the latest information, knowledge and research for teachers, students, parents and the wider community. NCAB, in drawing national attention to the issues of bullying behaviours will concentrate on the main issue of young people in schools to make schools a better place for our citizens of the future.

5.5 National Framework for Values Education

The Peer Support Program supports the *National Framework for Values Education for Australian Schools* which states schools provide "values education in a planned and systematic way." Effective values education is based on shared understandings of key concepts as well as a common language for values education in each school. The Framework provides a vision, a set of core shared values and guiding principles for fostering values education.

The *National Framework* describes values education as "Any explicit and/or implicit school based activity which promotes student understanding and knowledge of values, and which develops the skills and dispositions of students so they can enact particular values as individuals and as members of the wider community." This definition suggests students learn about values and to internalise and practise these through both explicit and implicit education from the school. Schools provide supportive environments where students, teachers and parents explore their own values.

The Framework recognises the values education policies and programs already in schools and acknowledges that schools in all sectors are developing effective approaches to values education. Common values emerged from the 2003 Values Education Study and these became the 9 Core Values.

- 1. care and compassion
- 2. doing your best
- 3. fair go
- 4. freedom
- 5. honesty and trustworthiness
- 6. integrity
- 7. respect
- 8. responsibility
- 9. understanding, tolerance and inclusion.

Values education is essential in fostering relationships, personal achievement and improved student wellbeing across the school community.

6. Conclusion

The Peer Support Foundation's work with school communities over the past 20 years aims to provide a positive and safe learning environment for students and staff. Taking a whole school approach allows staff to support their students to become young people who can:

- take responsibility for their own wellbeing;
- deal positively, proactively and resiliently with their life experiences; and
- be actively involved in, and supported by, their community.

The Peer Support Program's strength is in being a peer led, skills based, experiential learning program which is integrated into curricula and sustained through all year groups. The Peer Support Program:

- provides students with a supportive learning environment in which to develop the skills, understandings, attitudes and strategies to make healthy life decisions;
- enhances peer connections throughout the school;
- develops and maintains positive relationships within the school community;
- develops skills in resilience, assertiveness, decision making, problem solving and leadership; and
- Is endorsed by all education sectors.

Sharen Austin

Sharon Austin General Manager July 2007