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**Submission to the
Parliament of Australia
Senate Inquiry into Suicide in Australia**

from Peer Support Australia

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Supported by
◆ Department of Health and Ageing ◆ Federal Department of Education, Employment and Workplace Relations ◆
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“The Peer Support Program makes a significant contribution to schools’ endeavours to provide positive outcomes for students.”

Dr Louise Ellis BPsych (Hons) PhD (Psych), 2003

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Terms of Reference

The impact of suicide on the Australian community including high risk groups such as Indigenous youth and rural communities, with particular reference to:

- a) the personal, social and financial costs of suicide in Australia;
- b) the accuracy of suicide reporting in Australia, factors that may impede accurate identification and recording of possible suicides, (and the consequences of any under-reporting on understanding risk factors and providing services to those at risk);
- c) the appropriate role and effectiveness of agencies, such as police, emergency departments, law enforcement and general health services in assisting people at risk of suicide;
- d) the effectiveness, to date, of public awareness programs and their relative success in providing information, encouraging help-seeking and enhancing public discussion of suicide;
- e) the efficacy of suicide prevention training and support for front-line health and community workers providing services to people at risk;
- f) the role of targeted programs and services that address the particular circumstances of high-risk groups;
- g) the adequacy of the current program of research into suicide prevention, and the manner in which findings are disseminated to practitioners and incorporated into government policy; and
- h) the effectiveness of the National Suicide Prevention Strategy in achieving its aims and objectives, and any barriers to its progress.

“The results suggest the Peer Support Program promotes mental wellbeing, resilience and social connectedness. These are key protective factors for young people.”

Paul Bullen, Researcher, 2009

I. Introduction

Peer Support Australia is a not for profit, non government organisation. The Peer Support Program is a peer led, universal, intervention and preventative mental health program operating in both primary and secondary schools in Australia for almost 40 years. It is a skills based, experiential program with the emphasis on developing and enhancing skills amongst young people for lifelong learning. The Peer Support Program is integrated into curricula and linked to complementary educational initiatives such as the National Safe Schools Framework, National Framework for Values Education, Anti-bullying, Student Welfare/Pastoral Care and buddy programs.

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

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, Tasmania, Western Australia and the Northern Territory.

Peer Support Australia has been successful in completing 2 projects since 2007 as part of the National Suicide Prevention Strategy (NSPS) with funding from the Department of Health and Ageing (DoHA). This recognises the Peer Support Program’s positive impact on the mental health, resilience and connectedness of young people.

The *LIFE* Framework guides the NSPS and states 4 broad goals. One goal the Peer Support Program specifically addresses 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.

It also identifies 6 key actions with a variety of outcomes and strategies. Two of the key actions the Peer Support Program addresses are:

- promoting wellbeing, resilience and community capacity across Australia; and
- enhancing protective factors and reducing risk factors for suicide and self harm across the Australian community.

The first project provided the opportunities to promote and expand the Peer Support Program in Queensland and Tasmanian schools throughout 2007-2009. The second project provided the opportunities to conduct pilot programs in Western Australia and the Northern Territory in early 2009. Comprehensive reports and extensive evaluations have been conducted regarding the findings and outcomes of these 2 projects and will be addressed later in this submission.

DoHA has recently approved a third project as part of NSPS. This project will focus on a continued and coordinated approach to delivering the Peer Support Program in Queensland, Tasmania, Western Australia and the Northern Territory during 2009-2011.

2. Links to Terms of Reference

The following outlines the terms of reference to which the Peer Support Program aligns.

- a) the personal, social and financial costs of suicide in Australia

Every day there are approximately 6 suicides in Australia and a further 180 attempts.

Around 200,000 Australians die by suicide every year.

There are approximately 900,000 suicides a year world-wide. World Health Organisation (WHO) data show suicide is now one of the 3 leading causes of death among people aged 15-34 years.

WHO reports death from suicide accounts for more fatalities than either from armed conflicts globally or the number of people who die from car accidents.

The cost is in the enormous personal and emotional toll on families, significant financial costs to the community and it is also a concern for the criminal justice system. It is estimated suicide affects the lives of 6 more people, including relatives, friends and work colleagues of the deceased. The loss, pain and grief suffered by others is far greater than the financial loss.

A report by the National Health and Medical Research Council (NHMRC) estimates in Queensland alone suicide costs due to lost productivity in life years is around \$40 million. With an estimated 30 parasuicides in Australia for every completed suicide these costs increase further. ¹

In 2007, 1,881 deaths by suicide were registered in Australia.

- males accounted for 77% of these deaths;
- this compares with 1,668 deaths by motor vehicle accidents in the same period; and
- suicide accounted for nearly 1/5 of all deaths amongst young men aged 20-34.²

- suicide is a leading cause of death among young people, second only to motor vehicle accidents;
- suicide rates among 15-24 year old males trebled between 1960 and 1990 but have fallen consistently since a peak in 1997;
- in remote rural Australia suicide rates for young males are nearly twice those of males living in capital cities;

¹ Australian Institute of Criminology

² Australian Bureau of Statistics

- suicide is rare in childhood (<14 years) but becomes much more common during adolescence;
- the rise in suicide is most rapid between the ages 15-19 years;
- rates of suicide in Indigenous communities have been increasing since the 1970s. The majority of Aboriginal people who suicide are under the age of 29; and
- the suicide rate in Indigenous communities may be 40% higher than the rate of non-Indigenous suicide.³

According to available data certain groups within the Australian community have a higher risk of suicide.

These include:

- men;
- Aboriginal and Torres Strait Islanders; and
- people in remote and rural communities;

The *LIFE* framework suggests the following risk factors related to suicide:

- mental health problems;
- gender - male;
- family discord, violence or abuse;
- family history of suicide;
- alcohol and other substance abuse;
- social and geographical isolation; financial stress; bereavement; and
- prior suicide attempt.⁴

Recently the Australian Bureau of Statistics (ABS) released data from the 2007 National Survey of Mental Health and Wellbeing. The survey found:

- 45% of Australians will experience a mental or substance disorder at some time of their life;
- 13% had suicidal ideation at some stage in their lives;
- 4% had made a suicide plan; and
- more than 3% had made a suicide attempt.⁵

Studies in Australia indicate 3 key circumstances preceding suicide:

1. relational problems - unhappy love, family/marital problems, shame and guilt;
2. instrumental problems - financial and unemployment, sense of failure in life; and
3. health problems.

³ Centre for Adolescent Health

⁴ LIFE Framework, Fact Sheet 21

⁵ LIFE News

The suicide rate has fluctuated in Australia within a so-called modest range compared to other developed countries. This may be in part due to Australia's relatively cohesive and stable social framework. This contributes to social and emotional wellbeing.

Further recent studies highlight the impact of suicide on young people. The findings from a range of key studies are summarised below.

Australian National Social and Emotional Wellbeing Survey 2007.

Michael Bernard, University of Melbourne, surveyed 11,526 students and 6,860 teachers from 2003-07.

- a large percentage of students are experiencing social and emotional difficulties.
- 4:10 students worry too much.
- 3:10 are very nervous or stressed.
- 2:10 have felt hopeless and depressed for a week and have stopped regular activities.
- 3:10 have difficulty calming down (poor resilience).

Mission Australia National Youth Survey 2008

- 45,558 young people surveyed aged between 11-24 years.
- 24.6% of respondents ranked suicide the 4th most frequent issue of concern.
- This represents a decrease since 2005 (41.3%), however physical/sexual abuse, coping with stress, depression, self-harm and discrimination are all separate categories so the real figure may be significantly higher. Family conflict ranked number three.
- suicide and personal safety were major concerns for around ¼ of male and female respondents.
- bullying and emotional abuse was a major concern for 1:5 female and male respondents.
- 1:5 respondents identified the internet as a important source of advice and support.
- friends were a major source of advice for 85.1% of respondents.

Kids Help Line - Australia 2007.

The national Kids Help Line (KHL) reported the following during 2007.

- suicidality was the 9th most common reason for contacting KHL. Current thoughts of suicide were reported during 3,289 counselling sessions. This equates to more than 9 counselling sessions per day, a 21% increase from 2006 and a 42% increase since 2005.
- mental health contacts continued to rise being the 3rd most common reason for contacting KHL.
- when combined with counselling sessions regarding suicide, it was the 2nd most common reason.
- mental health was the top concern for females aged 19-25 years.
- ¾ of the counselling sessions were with young people aged between 15-25 years.
- mental health, suicidal thoughts, deliberate self-injury and emotional or behavioural management presentations online (4.1%) was more than the rate of the telephone service (2.8%).

- d) the effectiveness, to date, of public awareness programs and their relative success in providing information, encouraging help-seeking and enhancing public discussion of suicide

The *LIFE* Framework was developed in 2000 however during 2006 it became apparent a set of documents and resources were needed to assist the wider community in suicide prevention. The updated framework and resource materials were published in 2007 based on the understanding that:

- suicide prevention activities will first do no harm;
- there will be community ownership and responsibility for action to prevent suicide; and
- service delivery will be client centred.

A series of Fact Sheets providing practical information have also been developed and are widely available.

Universal interventions are at the forefront of suicide prevention initiatives. These programs engage the whole community to reduce access to means of suicide, reduce inappropriate media coverage of suicide and to create stronger and more supportive families, schools and communities.

Selective interventions entail working with those who have been identified of as 'at risk' to build resilience, strength and capacity and an environment that promotes self-help and support.

Key to determining the effectiveness of interventions to date include measures such as reduction in risk factors and vulnerabilities to suicidal behaviours and improvements in protective or resiliency factors.

A longitudinal study by the University of Western Sydney was published in 2003. The research was conducted to determine the efficacy of Peer Support Australia's secondary schools Peer Support Program and proved it gains positive long term benefits for students and school communities. Funded by the Australian Research Council and involving 2,300 secondary students across New South Wales 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.

In 2005, James Cook University, conducted case studies as part of the Values Education Good Practice in Schools (VEGPS) Project, Stage I to determine the efficacy of the Peer Support Program in primary schools. These studies involved seven schools in Townsville, Queensland and the findings were published in *The Double Helix of Values Education and Quality Teaching*, (Lovat and Toomey, 2007). Significant findings included:

- developing social relations and interactions;
- contributing positively to whole school activities; and

- demonstrating understandings of abstract concepts.

These results are relevant to educational practitioners and highlight significant benefits schools may achieve in the implementation of an effective Peer Support Program. The Peer Support Program can also be specifically used to help strengthen student connectedness. There is evidence to suggest the Peer Support Program is effective in increasing communications and social skills and enhancing optimistic thinking and resilience (Ellis, 2003). The research also demonstrated students developed a sense of their own worth and dignity and learned to value themselves for who they are. As the Peer Support Program is a universal intervention program, early intervention is paramount.

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.

Modules cover a range of focus areas such as:

- transition;
- relationships;
- optimism;
- resilience;
- values; and
- anti-bullying.

Meaningful learning occurs when students are able to relate new knowledge and skills to their existing frameworks.

Experiential learning as a methodology is incorporated into the Peer Support Program learning activities. Experiential learning relies on a holistic, integrated perspective combining experience, perception, cognition and action. It needs to be socially and culturally constructed. The Peer Support Australia modules provide this context. The Peer Support Program works best within a school culture that already teaches, models and supports positive and collaborative relationships between all groups embracing cooperative problem solving. The range of learning modules empower students to recognise, challenge and support each other. Students feel safer and more confident when they experience positive relationships with a high degree of openness and trust.

- f) the role of targeted programs and services that address the particular circumstances of high-risk groups

There are a number of risk and protective factors influencing whether someone is likely to be suicidal.

1. risk factors - increase the likelihood of suicidal behaviour;
2. protective factors - reduce the likelihood of suicidal behaviour.

People who attempt to take their own life usually have many risk factors and few protective factors.

Resilience is identified as a key protective factor for suicide prevention. Being resilient involves connecting and engaging with family and friends, using coping strategies and problem solving skills to work through challenging situations. Resilience based approaches emphasise the development of skills and building capacity to assist young people in negotiating risk and risky environments.

The *LIFE* Framework states school based competency and skill enhancement programs lead to positive outcomes.

Peer Support Australia has identified a range of protective factors help students maintain mental, physical and social wellbeing and may reduce suicide ideation. 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.

Peer led education is evidenced as being effective when it involves the use of identified and trained peers to provide information aimed at increasing awareness or influencing behaviour.

The *LIFE* Framework identifies factors which influence a person. The following outlines those factors the Peer Support Program directly enhances.

Individual health and wellbeing	<ul style="list-style-type: none"> • sense of self • social skills • sense of purpose • emotional stability • problem solving skills
Social and community support	<ul style="list-style-type: none"> • support and understanding from friends and school • level of connectedness • safe and secure support environments

Effective intervention programs require teachers, students and parents to work together. Universal and whole of school approaches can promote changes to the school environment, school ethos and personal skills development. A whole of school approach involves directing attention to all aspects of the school environment to ensure policies, procedures, programs and initiatives are consistent with the aim of promoting mental wellbeing of young people. Schools that encourage a sense of belonging and the involvement of all groups, particularly teachers and students will increase positive relationships.⁶

Sawyer indicates 14% of 4-17 year olds suffer from mental health problems. He also found rates of depression increased when relationships were poor, young people were less connected and young people were less involved.⁷

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.

The Peer Support Program:

- enhances wellbeing and resilience;
- develops coping skills;
- develops a sense of self efficacy;
- connects older students with younger students;
- develops responsibility and ownership; and
- engages students in fun activities.

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.

The Gatehouse Project is a significant study providing evidence of the effectiveness of universal, intervention programs in enhancing connectedness and reducing risk factors in young people. It found by

⁶ Pepler and Craig 2000
Campbell 2005

⁷ National Survey of Mental Health and Wellbeing 2000

enhancing one or more protective factors was likely to bring multiple benefits such as increased communication skills will reduce conflict with peers, parents and teachers. This work emphasised the importance of social relationships and the school as a social institution. The relationships between teachers and students in classrooms, opportunities for student participation and responsibility and support structures for teachers consistently emerge as associated with student progress and development.⁸

h) the effectiveness of the National Suicide Prevention Strategy in achieving its aims and objectives, and any barriers to its progress

The NSPS was established by the Australian Government in 1999. The goal of the NSPS is to reduce deaths by suicide across the population and among risk groups and reduce suicidal behaviour. The goal is to build resilience, resourcefulness and social connectedness in people, families and communities to protect against risk factors for suicide.

The strategic framework which guides the NSPS is *Living is For Everyone (LIFE): A framework for the prevention of suicide and self-harm in Australia*.

Despite the large number of suicide prevention initiatives few have been systematically evaluated for their effectiveness and impact. A range of reasons include short program duration, the diversity of the population being targeted and methodological difficulties. Suicide rates are influenced by a multitude of variables many of which cannot be controlled.

The *LIFE* Framework states “there is an urgent need for continued development of well planned, evidence based programs and research evaluating their effectiveness in Australia.”

In 2006 an evaluation report of the NSPS was developed. Key findings from this report regarding projects were:

- most utilised population based approaches that aim to address risk and protective factors for suicide;
- most were universal or targeted based; and
- most focused on enhancing resilience, protective factors and capacity building.

Key findings from this report regarding the effectiveness of the NSPS and its funded activities were:

⁸ Gatehouse Project 2000

- most gains have occurred in relation to capacity building;
- increased awareness of mental health issues among students and teachers;
- increased coping skills; and
- increased levels of social connectedness.

There was also evidence of an increase in young people seeking help for emotional and social wellbeing issues through their school.⁹

Research Project

Peer Support Australia has conducted evaluations focusing on the impact of the Peer Support Program as a suicide prevention initiative. This evaluation formed part of the NSPS projects for DoHA. The results suggest the Peer Support Program promotes mental wellbeing, resilience and social connectedness. As part of the project an Evaluation Package was designed and developed for schools who implement the Peer Support Program. The aim of this package is to enable schools to evaluate the impacts of the Peer Support Program on their students and the school as a whole over time.

Within this context the evaluation data generated by teachers and students in both primary and secondary schools across Australia demonstrated the implementation of the Peer Support Program had a positive impact.

A random sample of 749 schools across Australia completed surveys which then formed part of the Evaluation Package. The following summary is provided:

- 325 primary schools implementing the Peer Support Program; and
- 237 secondary schools implementing the Peer Support Program.

Results in primary schools

In a survey completed by teachers in 325 Primary Schools from NSW, Queensland and Tasmania implementing the Peer Support Program in 2007, the main reasons identified for implementing the Peer Support Program were:

(*the percentages are the percentage of schools ranking the item as the most important or 2nd most important)

- *66% opportunities for authentic student leadership;
- 56% building student friendship networks;
- 35% overall impact on the school community; and
- 25% vertical student connections within the school.

The impacts of the Peer Support Program as viewed by teachers are:

- 98% opportunities for authentic student leadership;

⁹ DoHA Summary Report

- 94% building student friendship networks;
- 94% providing support networks for younger students;
- 92% vertical student connections within the school;
- 93% improving the quality of relationships in the school community; and
- 93% older students more likely to be supportive of younger students.

Other impacts teachers noticed included:

- 87% younger students more likely to approach student leaders for help;
- 78% younger students more likely to approach older students for help;
- 69% at playtime more tolerance on the playground;
- 86% building school spirit;
- 73% reduction in inappropriate playground behaviour;
- 64% students have a strong sense of self; and
- 62% students improve problem solving skills.

They also noticed impacts for the Peer leaders:

- 93% leaders are more likely to be supportive of younger students;
- 84% leaders being more resilient;
- 95% leaders growing in self-confidence; and
- 95% leaders developing leadership skills.

Results in secondary schools

In a survey completed by teachers in 237 Secondary Schools in NSW, Queensland and Tasmania implementing the Peer Support Program the main purpose identified for implementing the Peer Support Program were:

(*the percentages are the percentage of schools ranking the item as the most important or 2nd most important)

- *81% easing transition to secondary school for Year 7 students (or Year 8 in some states);
- 45% opportunities for authentic student leadership; and
- 42% building student friendship networks.

The impacts of the Peer Support Program as viewed by coordinating teachers are:

- 85% easing transition to secondary school for Year 7 students (or Year 8 in some states);
- 91% opportunities for authentic student leadership;
- 79% building student friendship networks; and
- 81% providing support networks for younger students.

Teachers also noticed the following:

- 68% Year 7 students (or Year 8 in some states) more likely to approach Peer leaders for help;
- 61% Year 7 students (or Year 8 in some states) being more resilient;
- 61% Year 7 students (or Year 8 in some states) having a stronger sense of self;
- 64% building school spirit; and
- 59% improving student mental health.

Staff also viewed the effects on the Peer leaders as:

- 85% leaders are more able to be supportive of younger students;
- 97% leaders being more resilient;
- 95% leaders growing in self confidence;
- 96% leaders developing leadership skills; and
- 71% leaders improve their future employability.

Teachers completing the surveys who were implementing the Peer Support Program identified specific impacts for the school as a whole, students generally and Peer leaders. The results prove the development of the following:

- communication skills;
- social skills;
- coping strategies;
- decision making; and
- problem solving.

Additional results demonstrate an increase in student:

- self confidence;
- stress management; and
- enjoyment at school.

The research also indicates students have the ability to:

- think positively;
- make new friends; and
- improve relationships with peers and teachers.

Key conclusions are as follows:

- 65% of the schools participating in training workshops are implementing the Peer Support Program in 2009 and/or will be implementing in 2010;
- implementation of the Peer Support Program is likely to continue in most of these schools for 2 to 3 years (with 40% of the schools that had attended workshops continuing for 3-5 years); and

- approximately 80,000 students (30,000 primary and 50,000 secondary) will be impacted by the Peer Support Program in the next 3 years.¹⁰

Recommendations from this project are:

- provide continued support to schools for the implementation of the Peer Support Program;
- provide continued support for the evaluation of the implementation of the Peer Support Program and its impact; and
- build on the work in developing and piloting the Peer Support Program Evaluation Package requires an ongoing evaluation plan.

DoHA has recently approved a third project as part of NSPS. This project will focus on a continued and coordinated approach to delivering the Peer Support Program in Queensland, Tasmania, Western Australia and the Northern Territory during 2009-2011.

Other relevant matters:

- Peer Support Australia is part of the Wellbeing Australia Advisory Group whose primary purpose is the development of caring, inclusive school communities which foster the wellbeing of all students, teachers and families. This is linked to improving the wellbeing of communities in general and the development of a civil, safe, inclusive and just society.
- Peer Support Australia is a signatory to the Australian Research Alliance for Children and Youth (ARACY) commitment to Young Australians. This is a statement of principles to guide ARACY member organisations in their decision making and actions related to children and young people. Member organisations are assisting in creating social, cultural, political and economic environments which support the wellbeing and development of children and young people.
- 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.
- Peer Support Australia has formed a partnership with The Alannah and Madeline Foundation (AMF) in recent years. The National Centre for Anti-bullying (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 social change in our community.
- 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.” Values

¹⁰ Peer Support Australia

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

The Peer Support Program links to the COAG National Plan for Mental Health 2006-2011:

- 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 mental health knowledge and skills are suitable for education; and
- protective factors give people resilience in the face of adversity.

3. The Peer Support Program

Peer Support Australia has been supported by the NSW Health Department, Mental Health and Drug and Alcohol Office, for a number of years in recognition of the significant positive benefits on the mental health of children and young people. Recently Peer Support Australia has been successful in securing funding and developing partnerships with DoHA; Mental Health and Drug and Alcohol Office, Queensland Government, Mental Health Branch and Federal Department of Education, Employment and Workplace Relations (DEEWR).

The Peer Support Program is:

- a promotion and prevention program;
- peer led;
- schools-based;
- a universal early intervention program;
- targeted to children and young people;
- skills based and 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 NCAB.

Peer Support Australia provides an integrated program of training and learning materials for both primary and secondary schools, which can support schools in achieving positive cultural 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 (or Year 7 in some states) with small multi age groups from Kindergarten-Year 5 (or to Year 6 in some states). In secondary schools, the traditional approach is Year 10 (or Year 11 in some states) facilitating small groups for Year 7 (or Year 8 in some states) 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 Australia 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.

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.

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

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

4. Further research on the Peer Support Program

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 Peer Support Australia. 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 the Peer Support Program can be specifically used to help strengthen student connectedness. There is evidence to suggest the Peer Support Program is effective in increasing communications and social skills and enhancing optimistic thinking and resilience.

The Peer Support Program is a universal intervention program and early intervention is paramount in decreasing 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 suicide ideation are more likely to speak to their friends about it, making a peer led approach to addressing the issue appropriate. In evaluating the efficacy of the Peer Support Program in 2003, Dr Louise Ellis wrote “The findings suggest the Peer Support Program provides an excellent mechanism for facilitating social interchange across year groups and hence creating a positive school climate.”

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

- 1) previous research indicates adolescents’ willingness to both provide and receive support from their peers; and
- 2) evidence to suggest 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 Pilot study in conjunction with Deakin University 2008

This pilot study examined the efficacy of Peer Support Australia's anti-bullying module for primary schools'. A quantitative questionnaire was used to survey 77 students from two primary schools (mean age 10.1 years) in the greater Sydney, Australia area. One school implemented the anti-bullying intervention module, *Speaking Up*, (intervention school) the other school did not (non-intervention school). Students completed a survey containing questions relating to bullying behaviours in their school. This questionnaire was developed from Peer Relations Assessment Questionnaire Students (PRAQ) devised by Rigby and Slee (1993).

This study has provided further evidence to suggest intervention programs are effective in help seeking behaviours. It has quantified the assumptions made regarding the efficacy of *Speaking Up* as a module which reduces bullying behaviours which was the principal purpose of this study.

The current study into the anti-bullying intervention module, *Speaking Up*, provided further evidence for the following:

- students developed friendships across the year groups;
- students were more inclusive of others;
- students developed the skills to support target students; and
- students developed the skills to report bullying behaviours.

The anti-bullying intervention module, *Speaking Up*, was shown to:

- reduce the incidence of bullying behaviours;
- change attitudes towards bullying behaviours in the culture of the school;
- provide greater awareness of the different types of bullying behaviours;
- provide support for the longer term benefits of the intervention program.

Peer Support Australia's primary schools anti-bullying module, *Speaking Up*, is an effective intervention strategy supporting students to develop the skills, knowledge and attitudes necessary to make a positive contribution to the creation and maintenance of a safe school environment by reducing bullying behaviours. The findings of the current study make a contribution to research already undertaken in this area.

5. Conclusion

Peer Support Australia's work with school communities over almost 40 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, universal, skills based, experiential learning program which is integrated into curricula and sustained through all year groups. It is a program which is evidence based.

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 implemented across all education sectors.

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