PREVENTION OF YOUTH SUICIDE IN NEW SOUTH WALES

Organisation: Upper Hunter Where there's a Will

Name: Mrs Pauline Carrigan

Position: Founder

Date Received: 30 August 2017

SUBMISSION

Prepared by: Upper Hunter Where there's a Will

For: Parliament of New South Wales – Committee on Children and Young People

TERMS OF REFERENCE

- a. Any gaps in the coordination and integration of suicide prevention activities and programs across all levels of government
- b. Governance arrangements and accountabilities for suicide prevention
- c. Provision of services in local communities, particularly in regional and rural areas
- d. Provision of services for vulnerable and at-risk groups
- e. Data collection about the incidence of youth suicide and attempted suicide
- f. Provision of high-quality information and training to service providers
- g. Approaches taken by primary and secondary schools
- h. Any other related matters

PREAMBLE

UNIFIED LANGUAGE

Currently the Department of Education and Department of Health and all the various service providers use a mixed language that until streamlined will continue to be confusing and unclear to the Australian community. Each person/group must have a clear understanding of the service they should be providing and where they sit in the delivery of that service based on an individuals needs. Before we can comment effectively on the Terms of Reference, it is important that we establish what we believe should be a 'Unified Language' when talking about mental illness on a national level.

- Prevention
- Intervention
- Treatment

Prevention - educating our youth in the hope that they will never require intervention and as a result, treatment. Prevention can arm our youth with the knowledge and tools to recognise and control risks to developing mental health and wellbeing issues. Prevention can provide our youth with the skills to recognise if they or someone they know does need to ask for assistance.

Intervention - assisting an individual with diagnosis and/or controlling a mental health issue. Intervention of a suicide episode does not stop the underlying mental health issue so should not be confused with prevention. Intervention of the person at risk does not return them to a mental health free state.

Treatment – treatment will always be needed. Prevention and intervention will not capture or stop all mental health issues. It is important that everyone knows when, how and why treatment is needed and how it is administered.

TERMS OF REFERENCE RESPONSES

a. Any gaps in the coordination and integration of suicide prevention activities and programs across all levels of government.

Upper Hunter Where there's a Will (UHWTAW) does not believe that we are positioned to make comment on this reference.

b. Governance arrangements and accountabilities for suicide prevention.

UHWTAW believes that suicide prevention is actually intervention. If an individual has attempted suicide they are already ill and therefore the situation has not been prevented at an early enough stage through education and training of our youth.

Once a person is ill and invention has commenced, there is no clear continuity of care for that person. They are often not taken seriously and/or dismissed quickly as being ok because they have survived their attempt. However they are still very ill.

Recently in our community, a 16 year old male attempted to take his own life. To be in that situation, you are already ill. His parents made contact with the service providers that UHWTAW were advised to use and due to the parents not using what was deemed as the "correct" terminology, they were scheduled an appointment for him for 8 weeks later. How many times in that 8 weeks would it seem feasible to expect that this teenager might try to take his life again?

UHWTAW would recommend that a journal or record of commencement on the path of a mental illness journey be created. Our youth need to be able to document who/what/where/when and if any medication is prescribed so that they have one place to keep all the information they have and the path that they have followed. We have to remember that these youth are already unwell and suffering with a mental illness so are quite often not in the correct mindset to make and/or remember conversations / decisions that they have made. This can be then copied to any service provide they come into contact with but it gives the sufferer and their parents/carers an understanding of the journey they are on.

c. Provision of services in local communities, particularly in regional and rural areas.

Upper Hunter encompasses both regional and rural areas and we have a distinct lack of services that are easily accessible for youth in crisis, their parents and carers. There is a significant discrepancy between what is funded by the Government and what is actually delivered in the region. Just because Government funding is allocated does not mean that it is available to the Upper Hunter community.

Our schools do not have enough counsellors and when they do come there is no longevity in their tenure. The often leave within a 12 month period to seek employment in Coastal and Urban areas. Our private counsellors and psychologists are overloaded and wait times for appointments can be very long.

We do not have specialised youth counsellors in the region.

GP's are generally our first point of contact for youth suffering from mental illness and readily admit that skills and training are lacking in the area of mental health.

d. Provision of services for vulnerable and at-risk groups.

GP's are the generally the first point of contact and they lack training/skills in the area of mental health. For youth that are at increased risk or vulnerable, there are no additional services that can be accessed easily or readily across the Upper Hunter.

e. Data collection about the incidence of youth suicide and attempted suicide.

Upper Hunter Where there's a Will have not been able to gain access to any data for the incidence and attempts on youth suicide. To our knowledge this data either does not exist or is certainly not available to the Upper Hunter community.

We have been advised that media have their hands tied about releasing this type of information which we believe contributes to keeping the very real crisis in mental health and suicide hidden and enveloped in stigma and secrecy.

f. Provision of high-quality information and training to service providers.

As previously referenced, GP's are our first point of contact in the Upper Hunter and they admit to a lack of training and skills in mental health. There are no clear pathways available to youth that are suffering and in an acute phase of their illness.

The existing Service providers that can be State, Federal or Private are highly competitive, their services can overlap and not always able to provide accountable outcomes.

g. Approaches taken by primary and secondary schools.

Schools should be our first line of defence for mental health wellbeing and suicide prevention. We are not using the strength of the school community to its full potential to effect major and sustainable to change on the current statistics.

The State Government and Department of Education delivered a wellbeing framework to the schools and little else to support the implementation.

There is a significant miscommunication about what is trying to be achieved with the wellbeing framework, significant miscommunication about how much needs to be achieved and a huge void in Principal's belief on the need for such programs.

Upper Hunter Where there's a Will (UHWTAW) was founded in 2016 to address the challenging and significant mental health issues and suicides facing the Upper Hunter community. We do this through support and funding for Prevention through Positive Education in our 23 schools. When we first approached schools, Department of Education and some parents, they all thought that they were doing enough. In the past 12 months, the transformation in attitude across the Upper Hunter community and our schools has been overwhelming. Almost all schools have enthusiastically adopted Positive Education initiatives, retraining of teachers, and embraced how some small changes and a little understanding can achieve a lot.

UHWTAW firmly believes that the following be made mandatory:

- A wellbeing assessment similar to Naplan be implemented across all schools to gauge schools response to the wellbeing framework and measure their wellbeing
- Teenage Mental Health First Aid program be rolled out in every school in year 9 or 10 as part of the Australian curriculum.

h. Any other related matters.

Lack of Awareness

On a daily basis UHWTAW educates the Upper Hunter community on the dangers that currently exist for our youth. We believe this is working as the stigma/barriers to mental health issues and suicide appear to be breaking down in the Upper Hunter. Our community engages in the conversation for improved mental health wellbeing.

Recommendation

A National awareness campaign similar to the AIDS (Grim Reaper) / Youth Road Toll / Slip Slop Slap (Sun Safety) be developed and delivered across Australia to educate parents about the current mental health crisis facing our youth.

In National campaigns (as above), supporting documentation was delivered to households and families outlining risks and consequences for not taking part but also hope for change and ongoing improvement of each of the situations.

Parents need to be informed by the Government (Federal and State) about Mental Health Awareness. Relevant documentation and data on all areas that contribute to RISK of mental health issues – diet, rest, drugs and alcohol, anxiety –must be handed to parents so they can make informed decisions about their own families.

At present, children and youth are encouraged and almost brainwashed into thinking they must seek help outside of their own family unit. It is understood that some children and youth lack the family support required for this. However, if statistics were kept on suicide and available to the public, we would find the situation to be that many of those that had suicided were from caring families who had little to no indication or knowledge of the mental health issue being faced by their loved one. Families often piece the 'signs & symptoms' together afterward and are left feeling that they should have seen and/or recognised the signs and known the risks their child was facing.

Families must be given back the right to knowledge of the situation and provided with options for the best path for themselves and their loved ones.

Mental Health First Aid (MHFA)Program

The Government (Federal and/or State) must subsidise the development of a consistent MHFA program to make it affordable to all youth, parents and carers across Australia. Following a National awareness campaign we must offer MHFA training to support those that are involved with our youth on a daily basis – parents, teachers, carer's, coaches and the like.

Stringent accreditation for MHFA practitioners - not all people who train in MHFA are capable of delivering MHFA and from our research it is far too easy to become accredited. This needs to be addressed so that the courses that are being delivered provide optimal benefit to the student.

Youth Mental Health First Aid training as a mandatory part of TAFE apprenticeship training in Australia.

MHFA training needs to be as readily available and affordable as St Johns First Aid training as the Mental Health crisis continues to pose a greater health threat than heart attack and snake bite.

Currently in Australia organisations such as: Blackdog, Beyond Blue, batyr and headspace rely heavily on the premise of being invited into an individual situation or community to assist. A national awareness campaign would give much needed support and focus on these wonderful resources that already exist and how they can be of benefit to individuals/families/schools/communities that need their services and support.

Funding Allocation

While giving funding to the Primary Health Networks is to be applauded, too much funding is given outside this area to the competing service providers and it is money wasted. The attempt to bail out the sinking ship of Mental Health Services is not working.

The current market of service providers in the Mental Health industry is too competitive and quite often contradictory in their various approaches. We are continually shocked and disappointed by the myriad of pathways that in many cases lead to nowhere for those suffering mental health crisis's. It is not good enough and as a result our youth continue to suffer at increasing levels and the rate of suicide in Australia continues to rise.

SCONE HIGH SCHOOL

"Helping young people create their futures"



TO WHOM IT MAY CONCERN.

It is with enthusiasm and commitment that I write to support in full, the work of the charity "Where there's a Will" in applying for funding to support the implementation of Positive Education across the nineteen schools in the Upper Hunter Region of NSW.

In the NSW Department of Education schools alone, we have significant needs in relation to addressing the mental health issues of our young people. We suffer from distance from training facilities, but also from service providers in the Upper Hunter. This means that our schools are often left to bear the brunt of helping young people, some with very significant mental health issues.

As principal of Scone High School, I am committed to ensuring that our school implements strategies across the school to ensure that young people develop the necessary skills to manage themselves through life's "ups and downs." We are always looking for new ways to deliver such skills to prepare our students adequately and Positive Education "ticks all of the boxes" in this area. It will be so positive to have other schools to be able to communicate with and learn from about the program and how others are implementing it in their schools.

To have links between our partner primary schools and secondary schools so that we are all working towards a common goal in the mental health and wellbeing of our young people would be an amazing opportunity which we look forward to.

To have a teacher trained in all five secondary schools in the Upper Hunter and have all principals attend the Positive Education conference would be an amazing boost to existing programs, not only within Scone High School, but also across the Upper Hunter. This training will also help to establish a local group of educators who can plan and work together for the future of our young people and their wellbeing. Not having to travel to Sydney or Melbourne to access the training means that it is so much more accessible for our schools.

It is wi5thout hesitation that "Where there's a Will" has scone high school's support for this project which has already shown to have made a positive difference in so many other schools in Australia. I would be only too pleased to speak further in support of the application if necessary.

I can be contacted at Scone High School on

Lindy Hunt Principal Scone High School 19th September 2016



Segenhoe Street PO Box 12 ABERDEEN NSW 2336 Phone (02)6543 7444 Fax (02)6543 7924 www.aberdeen.catholic.edu.au admin@aberdeen.catholic.edu.au

St Joseph's High School ABERDEEN



Diocese of Maitland-Newcastle Directorate of Catholic Education

TO WHOM IT MAY CONCERN

On behalf of the St Joseph's High School Community, I wish to express our full support for the "Where There's A Will" Foundation and I strongly endorse the application for funding and support. In a short period of time, Pauline and her committee have not only answered a need in our community, but through their commitment and competence, the school has already benefited by their hard work, with the "Batyr" program offered to our Year 12's, who have expressed very positive feedback and appreciation for this opportunity.

A 2015 national survey of the mental health of young people, presented a very confronting picture of teenage depression, self-harm and suicide, pointing out that over half a million young people experienced a mental health disorder in the past year and one in 13 children had seriously considered suicide.

While an increasing number of young people are seeking help (it has doubled in the past 15 years) too many youths suffer in silence, and refuse to seek help. Family and friends do not know enough about Mental Health to effectively support those who suffer ill health. Improved education and support is needed.

Due to the noted causal effects of education we need to invest more into Mental Health education. There is ample evidence to show how education will improve health outcomes.

It is important that more funding be available to provide "Mental Health First Aid" Programs to train teachers who are at the front line of dealing with students. With the rates of suicide for Australian youth at an all-time high, Mental Health training of teachers is a must. However, the limited funding to conduct courses or training is a critical issue. For this reason, the work of the "Where There's A Will" Foundation, in attempting to gain resources and funding for schools, will make an enormous difference.

With the funding and support, courses and professional learning will effectively equip teachers with an awareness of mental health issues that relate to young people, and will also equip their students with the skills to more effectively deal with mental health issues, especially those who do not know where to turn to find help and support.

With further funding, schools who are already committed to a holistic approach, and committed to creating quality learning opportunities for all students, will deliver more effective programs and individual support. Through quality teaching, learning and engagement, the well-being of each student will be optimized.

We are well aware that a student's experience at school has a significant impact on their well-being, and that quality classroom teaching has a profound influence on a student's learning and well-being. However, with improved funding resourcing, and training, schools are able to build more effective <u>Wellbeing Frameworks</u> to support all the needs of students. With productive partnerships between teachers, schools and the wider community, as is the case of the "Where There's A Will" Foundation, we will more effectively expand our capacity to support the well-being of students, especially if we can expand the pedagogical framework by offering a range of services and external support to students, their families, and their teachers.

In summary, Mental Health Promotion, and support, is not a stand-alone 'thing' in the curriculum, or a one-off event in the year's calendar. For education to be effective and have long term benefits, school and the community need to work together to develop programs and approaches to promote mental wellbeing. For schools and teachers to be better equipped, funding is needed.

I endorse and support the great work done by the "Where There's A Will" Foundation. For a range of strategies to promote healthy minds and healthy mental health *we need your help*.



Principal

21 September 2016