QUESTION

1. What is the current allocation for school counsellors, how is it determined and it respond to an identified level of need?

ANSWER

There are 790.8 FTE positions allocated across NSW public schools.

School counsellor positions are allocated to regions on the basis of need, taking into account student enrolments, students with a disability who have significant support needs, and disadvantage indicators.

Currently the indicators of need include: the actual current year enrolment data which has a 70% weighting; the number of school communities serviced which has a 5% weighting; the number of students receiving support from a disability related program which has a 10% weighting; and the Index of Community Socio-Educational Advantage (known as ICSEA) which has a 15% weighting.

ICSEA is a scale of relative educational advantage used on the MySchool website to compare schools' performance. The variables used in calculating a value on the ICSEA scale include student level data on the occupation and education level of parents/carers and/or socio-economic characteristics of where the students live; whether a school is in a metropolitan, regional or remote area; proportion of students from a language background other than English; as well as the proportion of Indigenous students in the school.

Each year, regional committees with secondary and primary principal representation, allocate the school counsellor time to individual schools. This process incorporates a review of the current year's allocation, local needs and a determination of any adjustments that may be required to reflect current or emerging local need.

QUESTION

2. Are there specific recommended teaching aids for Drug and Alcohol?

ANSWER

Schools can promote a sense of belonging and provide opportunities for experiencing success for all students through their teaching and learning and student welfare programs. A supportive environment for students is very important in the prevention of drug problems. A positive school climate and good discipline provides a safe and supportive environment where the personal and social needs of all students can be considered.

Schools in their day to day work use a wide range of materials and resources; these may come from within the department, from the NSW Board of Studies, or from other sources including other education jurisdictions and specialist non-government organisations.

In NSW the *Personal Development, Health and Physical Education (known as PDHPE) 7-10 Syllabus* provides the curriculum context for drug education. Drug education is mainly included in the Individual and Community Health strand. This strand focuses on health issues of significance and also includes mental health, sexual health and road safety.

In this strand, students have opportunities to consider the concept of risk and analyse the factors that influence risk behaviours. They appreciate that different circumstances can mean individuals have varying degrees of control over these influencing factors. They describe strategies to minimise harm in a range of relevant contexts and develop an understanding of the interrelationship of factors that can increase the potential for harm.

The choice of resources supporting drug and alcohol education is best made locally as the teacher in the classroom is in the most appropriate position to determine what will best meet the needs of students to achieve the relevant required syllabus outcomes. This means that individual teachers and schools may choose to use different resources for their particular students even when they may be of a similar age. The nature of the support needed will vary as every student is an individual with different needs, coming from different circumstances and having different experiences depending on diverse family, cultural or community experiences.

Nationally every state and territory, as well as the Commonwealth Department of Education, Employment and Workplace Relations, and a range of non-government organisations, has produced drug and alcohol resources which are used by both government and non-government schools throughout Australia. The Department of Education and Communities has contributed to this resource bank to provide teacher

professional learning and curriculum resources to support school based drug education. Information can be found on the department's website at: https://detwww.det.nsw.edu.au/lists/directoratesaz/stuwelfare/dpp/index.htm.

Resources on this website: inform staff about research on drug issues and the effectiveness of drug education strategies; support the implementation of government policy; and support the teaching of drug education within the syllabus.

QUESTION

3. What is the level of teaching recommended for Drug and Alcohol and does this relate to identified need?

ANSWER

NSW public school students learn about drug education through the mandatory Personal Development, Health and Physical Education (known as PDHPE) key learning area. Drug education is best taught as part of a sustained, whole school program.

Schools work with their communities to identify localised issues and plan and implement teaching and learning programs to reflect student learning and support needs within the context of the PDHPE key learning area.

Schools have flexibility in how they deliver learning programs, provided that:

- in Years K-6 approximately 50% of time is allocated for English and Mathematics and 40% of time for the other key learning areas, including PDHPE and sport
- students are provided with 300 hours for PDHPE, over Years 7 10, in each of the years
- students in Years 11 and 12 complete the 25 hour personal development and health education course, called Crossroads.

Teachers are best placed to deliver drug and health education to their students. Teachers know the curriculum, the needs and abilities of their students, and the way they learn. They are also aware of the peer groups and the communities in which the students live.

QUESTION

4. Are early intervention Drug and Alcohol resources made known to students including those provided by Drug and Alcohol specialist organisations or bodies?

ANSWER

Schools in their day to day work use a wide range of materials and resources; these may come from within the department, from the NSW Board of Studies, or from other sources including other education jurisdictions and specialist non-government organisations. Principals and their teachers are best placed to make decisions about which resources and supports will best suit their students and local circumstances.

For example, through SchoolLink, an initiative established with the NSW Ministry of Health, school counsellors have close contact with their mental health professional colleagues. This enables schools to provide current, up-to-date advice to school staff and students where appropriate, and about the relevant services available locally that might suit individual students.

A wide range of resources are available for school staff to use with or provide to students where a school has concerns about possible or potential use of drugs.

Examples can be found at:

http://www.schools.nsw.edu.au/media/downloads/schoolsdrug/learning/yrk12focusareas/druged/yp_booklet.pdf

http://www.schools.nsw.edu.au/leavingschool/next/.

http://www.dec.nsw.gov.au/students/high-school/help-when-you-need-it

QUESTION

5. Are web based and social media supports made known to students or included in the PDHPE curriculum?

ANSWER

In the mandatory key learning area Personal Development, Health and Physical Education students learn about health services and products, and accessing and assessing health information. As students work towards achieving the syllabus outcomes they are provided with opportunities to become competent, discriminating and creative users of Information and Communication Technologies (ICT).

In primary school, students learn to gather accurate information about drugs from reliable sources and make judgements on the reliability of information from different sources, including websites and advertising. They learn to identify individuals and services in the community that help protect their health and wellbeing. These may include community members, local community services or web based supports where appropriate.

In secondary school, students learn to identify and assess health information, products and services designed to address the health needs of young people. Students examine strategies to improve access to health information, products and services, including the internet and forms of media. This may include investigating a range of supports available for young people such as community based, web based and social media supports where appropriate.

QUESTION

6. Is data collected regarding the number of students seeking Drug and Alcohol support or counselling?

ANSWER

Data is not collected centrally by the Department of Education and Communities regarding the number of students seeking drug and alcohol support or counselling within community agencies, private practices / clinics, or the school counselling service.

A wide range of support services and agencies offer counselling for those using drugs and alcohol and may also offer developmental programs that have an education and preventative focus.

The school counselling service is just one service. Many young people and their families seek support and/or counselling from a wide range of service providers including, for example, the Child and Adolescent Mental Health Services, local hospital alcohol and drug services, Alcohol Drug Information Services, Odyssey House, Northside Clinic, Ramsay Mental Health, and the Drug & Alcohol Specialist Advisory Service.

QUESTION

7. Can you provide a list of programs that operate within schools that address mental health issues and or life skills and personal development eg. Expect Respect, Love Bites?

ANSWER

Schools work with their communities to identify localised issues and plan and implement teaching and learning programs to support student learning and support needs. Some schools may choose to use an external provider to supplement their school based teaching and learning programs where appropriate. Principals make decisions on the resources and programs used to support the curriculum based on student needs and the local context.

Drug and alcohol counselling is a complex issue that is addressed in a developmental manner through both programs delivered either individually or in groups as an education strategy, or through intervention when supportive treatment focused counselling is required for an individual.

There is a strong focus on developing sound life skills for example, communication, decision-making and interpersonal skills and in supporting the establishment of good mental health through self-awareness, self-esteem and healthy habits including an understanding of the dangers of drugs and alcohol.

No single resource or service will comprehensively address the full range of personal issues of a young person or enable total development of a sound self. In the role schools have they utilise a wide range of provisions that are available in local communities and chose from many resources and programs that aim to support and direct the development of their students.

Schools make decisions about resources that will supplement their teaching and learning materials from the early years through to young people in their senior secondary years of schooling.

A list of programs and resources used across the state and a brief related summary follows and is indicative of commonly used programs. It is not exhaustive in nature.

Getting on Track In Time or 'GOT It' is an early intervention program targeting children in school from Kindergarten to Year 2 who exhibit disruptive behaviours. Working with children, parents and carers, and primary school staff, the program aims to prevent severe behavioural disturbance and conduct-related disorders in young children, as well as a range of mental health and behavioural disorders in later life.

Get Lost Mr Scary is a cognitive behavioural program that helps young children usually aged 5 to 7 years, develop skills to cope with fears and worries. This experiential program comes from a play perspective.

KidsMatter aims to improve the mental health and wellbeing of children, reduce mental health problems amongst children, and achieve greater support for children experiencing mental health difficulties, and their families. It includes KidsMatter Early Childhood, designed for implementation in preschools and long day care; and KidsMatter Primary, designed for implementation in Australian primary schools. KidsMatter adopts a whole school community approach to understand and work with students with mental health problems. KidsMatter has also developed a number of resources that are very useful for staff supporting students with mental health problems.

The **Cool Kids** program is a structured, skills-based program that teaches children and their parents how to better manage the child's anxiety. It involves the participation of both children and their parents, and focuses on teaching clear and practical skills.

The main Cool Kids program is designed to target children aged 7 to 17 years. There are also variations of Cool Kids for specific groups and particular delivery including: an outreach version delivered over the internet, CD, or telephone for children who cannot come for face to face treatment, a version for delivery through schools, a version for teenagers with a mix of anxiety and depression, and a version for children with additional high functioning autism or Asperger's Disorder.

MindMatters – is a Commonwealth funded mental health promotion resource for secondary schools across Australia. It supports a comprehensive, whole school approach to the development of mental health through enhancing the resilience and connectedness of students and provision of a framework for reviewing and mapping a school's welfare processes and planning. It provides specific curriculum units on coping, communication, stress management grief, loss, bullying and harassment and understanding mental illness which are able to be incorporated across all key learning areas. MindMatters is delivered in NSW through a series of professional development programs for secondary school staff.

Mental Health First Aid - The Mental Health First Aid Course is a 12 hour course that provides skills and knowledge designed to help a person better manage a potential or developing mental health problem in him/herself or in a family member, a friend or work colleague. Like other first aid courses it does not train people to diagnose or treat health problems. The course provides information about depression, anxiety disorders, psychosis and substance use disorder. There are a number of departmental school counsellors trained to deliver this program.

Seasons for Growth is a small group loss and grief education program. The program aims to strengthen the social and emotional wellbeing of children and young people aged 6 -18 who are dealing with significant loss or change including the death of a loved one, parental divorce or separation, the experience and aftermath of natural disaster and moving house or school as well as many other life changes and losses.

Small groups of 4-7 children work with a trained adult Companion who supports the children to have a say and learn new ways to think about and respond to the changes and losses in their lives. Children learn that they are not alone in dealing with the effects of change, loss and grief, and build their understanding and communication, decision making and problem solving skills as part of a supportive peer group.

It is based on the belief that change, loss and grief are a normal and valuable part of life. The program is educational in nature and does not provide therapy.

The **BOUNCE BACK! Classroom Resiliency Program** addresses the environmental building blocks and the personal skills for fostering resilience in children and young people. The program focuses mainly on the teaching of coping skills to help children and young people respond positively to the complexity of their everyday lives. Children are taught how to 'bounce back' after experiencing sadness, difficulties, frustrations and hard times.

Adolescents Coping with Emotions is a targeted program designed to be delivered to students, usually from Years 8-10, identified within the school as being at risk of mental health problems. It deals with key coping issues for young people such as relationships with family and peers, communication including emotions, fear, anger, hatred and bullying, realistic thinking and support networks. The sessions involve 6-8 students and are facilitated by school counsellors often in collaboration with a mental health worker. The program is easily integrated into the school timetable and young people can be picked up and monitored through their schooling.

Circle Time is series of small group sessions that make it safe enough for children and teenagers to want to speak about their troubled feelings. Structured exercises are used, all of which are designed to help children to get help, empathy and understanding with what they have often been trying to deal with on their own. Through circle time and small group sessions, children often feel relieved and supported with a lasting sense that 'help helps' encouraging them to seek comfort and emotional regulation rather than continue to go it alone. Benefits include positive self-esteem, increased capacity to reflect rather than discharge or defend against feelings and to communicate through words rather than through destructive behaviour

SistaSpeak supports the dreams and aspirations of young Aboriginal and Torres Strait Islander women and girls by the quality delivery of a 'SistaSpeak' program. SistaSpeak is specifically designed for and targets young girls and women to gain valuable knowledge around their educational needs, career aspirations, personal needs and qualities.

Bro Speak program focuses on Aboriginal culture and identity and is designed to develop self-esteem, to motivate and engage students in their education by providing a variety of structured activities relating to their indigenous culture.

What's the Buzz? is a unique 16 lesson social skills enrichment program designed to explicitly teach children how to think and relate to others. It is a lively role-play and play-based program that targets everyday themes: how to greet, make and keep friends, fit in, read one's own emotions, read the feelings of others, deal with

competition and cope with worry, frustration and disappointment more constructively. The engaging method of instruction is based on an extensive body of research believed to stimulate social thinking and accomplish powerful outcomes. Recognising the most influential people in a child's life, each lesson includes extensive notes offering parents and teachers handy ideas to reinforce the themes presented.

It is for children who struggle to make friends, to fit in socially and to smoothly navigate their social and emotional world.

The Resourceful Adolescent Program was developed to build resilience and promote positive mental health in teenagers. The program specifically aims to prevent teenage depression and related difficulties. It aims to increase the psychological resilience or resourcefulness of young people and draws on research of successful treatments for adolescent depression and the known psychosocial risk and protective factors at the individual, family and school level.

Sensibility is a strengths based resilience program designed for those working with young Australians aged 12-18. It consists of a suite of modules developed to enhance and maintain emotional and psychological resilience in young secondary school aged Australians. The program is based on cognitive-behavioural principles; the evidence based approach which says that our thoughts play a critical role in influencing feelings and consequent behaviour.

Young people who possess sound social and emotional skills are generally better able to cope with the stressors of daily life. They also tend to have better relationships with parents, teachers and peers, and perform better academically. Very importantly, having these skills makes it less likely that a young person will experience significant mental health problems in the future.

The program is made up of seven modules including a DVD which accompanies the Essential Skills module and a CD with downloadable curriculum materials and resources.

LOVE BITES was developed to educate young people about respectful relationships and reduce the incidence of relationship violence in the community. LOVE BITES recognises relationship violence (physical, sexual, psychological, verbal, financial, cultural and spiritual, social abuse) as a gendered crime. Analysing gender inequities are central to discussions in LOVE BITES workshops. Social norms, gender roles and the role of bystanders to violence are also discussed.

Youth Mental Health First Aid - This 14 hour course helps participants learn how to identify the signs and symptoms of mental health problems in young people. Participants also learn where and how to get help, and what sort of help has been shown by research to be effective.

It provides strategies to help young people in mental health crisis situations and/or going through the early stages of mental health problems. The course covers the following crisis situations: suicidal behaviours, self-harm, acute stress reaction, panic attacks, and acute psychotic behaviour. The course also covers the following mental

health problems: depression, anxiety disorders, psychosis, substance use disorders, eating disorders. There are a number of departmental school counsellors trained to deliver this program.

Marijuana Matters is an early intervention program that is conducted by the school counsellor for a small group of students who are experiencing problems as a consequence of cannabis use. Personnel from the local area health service may help facilitate the group, if available.

Marijuana Matters provides an option for schools to support students who are experiencing cannabis use problems. Early intervention may help to prevent greater problems developing in the future.

Preventative cannabis education within PDHPE is provided to all students. A cannabis education resource, *Cannabis: Know the risks*, is now available in all high schools for this purpose.

The **Rock and Water Program** offers educators a new way to interact with students through physical/social teaching. Physical exercises are constantly linked with mental and social skills. The Rock and Water program leads from games, simple self defence, boundary and communication exercises to a strong notion of self-confidence. The program offers a framework of exercises and ideas about how to assist boys and girls to become aware of purpose and motivation in their life. Topics include: intuition, body language, mental strength, empathic feeling, positive feeling, positive thinking and positive visualizing. Discussion topics include bullying and antibullying techniques, sexual harassment, homophobia, life goals, desires and following an inner compass.

Emotion-based Social Skills Training is a program that aims to promote the well-being of children and adolescents with Autism Spectrum Disorders and prevent the onset of mental health concerns.

The program uses evidence-based treatment methods to promote emotional understanding, perspective taking skills, problem solving, and emotional management.

Head Strong is the creative way of thinking, talking and teaching about mood disorders. It is a curriculum resource on mood disorders, mental health and resilience for secondary school Health and Physical Education teachers, developed in partnership with the Inspire Foundation. A diverse range of activities and teacher development notes make Head *Strong* easy to understand, implement and teach in secondary schools.

The Tree of Life is an approach to working with vulnerable children and young people. It is a 'hopeful and inspiring' approach to working with children and young people who have experienced hard times. This approach enables people to speak about their lives in ways that make them stronger. It involves people drawing their own 'tree of life' in which they get to speak of their 'roots' (where they come from), their skills and knowledge, their hopes and dreams, as well as the special people in their lives. The participants then join their trees into a 'forest of life' and, in groups,

discuss some of the 'storms' that affect their lives and ways that they respond to these storms, protect themselves, and each other.

The Tree of Life enables people to speak about their lives in ways that are not retraumatising, but instead strengthens their relationships with their own history, their culture, and significant people in their lives.

School-Link – The NSW School-Link Initiative is one of a range of initiatives that was launched by the NSW Government to improve the mental health of children, adolescents and young people in NSW. The School-Link Initiative aims to:

- provide a framework and structure to support child and adolescent mental health services and schools to work collaboratively to promote mental health, prevent mental health problems and facilitate early identification, management and support of students with mental health problems
- Improve the understanding, recognition, management, support and prevention of mental health problems in young people.

The School-Link program has developed a series of professional learning programs for training of school staff on key mental health issues in school – Depression, Self Harm and Anxiety.

The LEAPS (Law Firms Encouraging and Assisting Promising Students) program is a combined workplace learning and mentoring program for students at risk of leaving school early. Once a fortnight a teacher accompanies students to the law firm where they meet their mentors and work with them one to one for an hour in the boardroom. They work through structured materials on study skills and ethics. There are approximately thirteen mentor meetings for students per year.

There are many other programs chosen for implementation according to local need and context. Many programs are constructed by school counsellors for use in particular schools taking elements of other programs.

INQUIRY INTO DRUG AND ALCOHOL TREATMENT

SUPPLEMENTARY QUESTIONS

QUESTION

8. Can you clarify how many hours of Drug and Alcohol teaching is allocated in the PDHPE in terms of what is a minimum requirement and acknowledging that a teacher may determine a higher need?

ANSWER

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Teachers are best placed to deliver drug and health education to their students. Teachers know the curriculum, the needs and abilities of their students, and the way they learn. They are also aware of the peer groups and the community in which the students live.

Schools work with their communities to identify localised issues and plan and implement teaching and learning programs to reflect student learning and support needs within the context of the PDHPE key learning areas.

Schools have flexibility in how they deliver learning programs, provided that:

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