



WHITE PAPER



Toward a mentally healthy generation

Flattening the curve in the 2020 mental illness pandemic

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October 2020



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Executive Summary

There is a growing pandemic in Australian communities that will result in a much higher death toll than caused by the Coronavirus.

Over the next 5 years it is predicted that almost 20,000 more Australians will choose to take their own lives. 750 of them will be aged between 5-17.

The cost to the economy for mental ill-health pre-Covid is more than \$43 billion per year; with an additional \$130 billion associated with diminished health and reduced life expectancy of those living with mental ill health.

Mental illness is escalating out of control and affecting children as young as 5, and teachers and school communities are overwhelmed.

Mental illness is the problem and education is the solution, YET there are no universal, evidence based, pre-planned programs being made freely available to educators that will give them a common language approach of HOW to teach mental wellbeing, starting in early childhood.

This white paper explores the current situation around mental health support and prevention education in Primary Schools across Australia and highlights the gap in prevention education. It also identifies a potential low-cost way forward to support teachers to easily and freely access curriculum mapped pre-planned lessons that give them a common language and the confidence to teach children long term skills for mental wellbeing.

With an investment of \$1.55 per primary school student, they can learn what mental wellbeing looks like, sounds like, and feels like, and how to safely ask for more support in an inclusive learning environment, with resources supporting teachers and reaching home to families.

Short term impact, long term gains.



The GROWING Mental Health CRISIS in Australia

BEFORE THE COVID-19 OUTBREAK

BEFORE the outbreak of Covid-19, the state of mental health in Australia was already at crisis point:

8 Australians die every day from suicide, and suicide is the leading cause of death for Australians between the ages of 15 and 44, with 3,046 registered deaths of people who died due to intentional self-harm¹

Half of all mental health conditions start by age 14²

According to the Mental Health of Children and Adolescents report on the second Australian child and Adolescent Survey of Mental Health and Wellbeing:

1 in 7 or 13.9% of young people aged 4-17 years experiences a mental health condition in any given year and 6.9% in the same age group suffer from anxiety, and

7.7% of adolescents 11-17 years met the diagnostic criteria for major depressive disorder³

In 2018 there were 100 recorded child suicide deaths and suicide remained the leading cause of death among Australian children (5-17 years)⁴

9.8% of Australian children entering Primary School are considered socially vulnerable and 8.4% emotionally vulnerable⁵

To exacerbate existing problems, in the last couple of years, very few parts of the Australian continent have avoided being at the mercy of at least one extreme weather event, be it bushfire, drought or floods.⁶

SINCE THE OUTBREAK

Since the Covid-19 pandemic erupted across the globe, the economic and personal costs have been unprecedented, and mental health issues have skyrocketed.

Calls to Lifeline have increased 24% since March 2020, with the service now receiving 3000 calls a day or a call every 30 seconds⁷

By April 2020 Kids Helpline was receiving 40% more calls than the same time last year; a call every 69 seconds⁸

At September 2020, Kids Helpline has encountered 3000 more contacts each week during the coronavirus pandemic, with a 32% increase in duty of care interventions between January 1st and July 31st, driven by suicide attempts (26 percent), child abuse (33 percent) and mental health escalation (60 percent)⁹.

Sadly, children as young as 5 are now reported as calling Kids Helpline for crisis support¹⁰.



The mental health crisis within education

Teachers, school principals and parents have been experiencing growing concerns about the escalating mental health problems of primary school aged children for some time.

The Federal Government's 2015 survey of the mental health of children and adolescents found that anxiety disorders are as prevalent in primary school children as they are in adolescents, affecting 6.9% of children¹¹,

- » The Murdoch Children's Research Institute research reported that anxiety diagnoses in children and adolescents made by pediatricians **nearly doubled** in the five years from 2008 to 2015¹²
- » The OECD Teaching and Learning International survey (TALIS) 2018 showed that 58% of Australian teachers reported feeling 'quite a bit' or 'a lot' of stress in their jobs, significantly higher than the average across the 48 participating countries, and levels were higher amongst teachers at publicly managed schools than privately managed, and even higher in schools with a high concentration of disadvantaged students.

Worryingly, Australia had the largest difference in stress levels between teachers working in schools with high concentration of disadvantaged students (more than 30% of students from economically disadvantaged homes) compared to those working in schools with low concentration of disadvantaged students (less than 30%)¹³.

According to a study (conducted by Bond University in mid-2019) about teacher stress and coping strategies, nearly 62% of teachers met the criteria for moderate to severe anxiety; depression and physical concerns were reported; and 17% met criteria for probable alcohol dependence¹⁴.



Now since the start of the Covid-19 pandemic, teachers have been put under additional stress, having to prepare virtually overnight for remote teaching, and dealing with the increased mental challenges of their students, while also coping with their own response as loved ones are under increased personal and economic stress. Teachers have now **'sounded the alarm'** about their students' deteriorating mental health and are **'pleading for help'**. In a recent poll of 5346 teachers, principals and school counsellors, 98% said students were increasingly suffering from mental ill-health, and **93% would like to better understand student mental health**¹⁵.

With the current 'chronic' lack of school counsellors, one public school principal was quoted as saying:

"A parent worried their child is suffering anxiety or depression will often ask for time with the School counsellor, and I'll tell them it would be quicker to see their GP. That's sad because the kids are little and the best person for them to talk to is someone familiar in the familiar school environment."

Despite these unprecedented levels of student and teacher stress, teachers are required to foster the wellbeing of their students. The Australian Curriculum requires teachers to address the key Learning Areas like Literacy and Numeracy, as well as teach students Personal and Social Capabilities.

And wellbeing coordinators are often teachers who have to juggle heading up a wellbeing team along with their normal workload of classes and subjects, and are charged with the responsibility to lead wellbeing in a school culture having received little to no training on how to deliver on that accountability¹⁶.

"I think mental health is something that we tiptoe around"¹⁷



The Government response to the crisis

The Mental Health Commission's *Contributing Lives Thriving Communities – Review of Mental Health Programmes and Services in 2015* aimed to **reduce suicides and suicide attempts by 50 percent within 10 years**, and the Government's response promised a 'fundamental shift' in balance, vowing to stop 'tinkering around the edges', focusing on person centred care, more locally driven approaches and effective intervention across the 'lifespan' of mental illness with a distinct focus on effective early intervention and prevention.¹⁸

According to the Commonwealth Government's Productivity Commission's Draft report (2019), the cost of mental ill-health and suicide to the Australian economy is conservatively in the order of **\$43 to \$51 billion per year**, plus approximately \$130 billion associated with diminished health and reduced life expectancy of those living with mental ill health.

The Report found that

“the mental health system isn't working”,

and recommended a national de-stigmatisation strategy to ease isolation and normalize mental health conditions.¹⁹

Despite these commitments, in **August 2019**, in the face of rising suicide and mental illness rates in adults and children, the Federal Health Minister unveiled a new long term children's mental health strategy, aimed at encouraging primary school students (and secondary students) to seek help and speak up. This moved the focus to a 'Towards Zero' suicide target.²⁰

Now in October 2020 as part of the Budget 2020-2021, the Australian Government is providing **'unprecedented support' to ensure the mental health and wellbeing of all Australians is protected during and after the pandemic.**

Commitments in relation to **suicide prevention** when it comes to **young people** include:

- » Additional postvention funding for families and carers who have been bereaved by suicide
- » More crisis support through Kids Helpline
- » Funding to extend support of the Headspace National Youth Mental Health Foundation to deliver suicide prevention training and education sessions in Schools and
- » Enhanced youth support and peer support delivered by ReachOut, the Raise Foundation and the Headspace Schools Suicide Prevention Activities program.²¹

All these initiatives are worthy of investment and support although they are all focused on students **12 years and over** who are **already at high school**, or they are preventing **illness that has already presented itself** from worsening, or on supporting those whose illness is already at crisis point or worse.



Who is supporting true prevention in Primary School education?

In 2017 the NSW Ministry of Health through the Mental Health Children and Young People (MH-CYP) introduced Got It – Getting on Track In Time, designed to deliver specialist mental health early intervention services for children in kindergarten to year 2 (K-2) who display behavioural concerns and emerging problems.²² Concerned schools can apply to be part of the Got It program and professionals can only work with 6 Schools at any one time.

The NSW Education Department provides the **Wellbeing Framework for Schools**, flexible funding to support schools with wellbeing, and links access to chaplaincy/counsellor support and the **Positive Behaviour for Learning Framework**.²³

The aim of the NSW reform implemented in 2012 was to give more authority for schools to make local decisions about how to best meet the needs of their students, although this has been labelled a ‘catastrophic policy failure’ by the NSW Teachers Federation, who claim it’s higher purpose was to reduce schools funding allocation.²⁴

In 2017, the Australian Government announced that Beyond Blue was successful in receiving the **\$52.7 million Mental Health in Education grant**. The **Be You** program was to integrate the existing Commonwealth Government mental health initiatives being delivered in education settings, including KidsMatter Early Childhood and Primary, Mindmatters and Headspace School Support, aiming to be a ‘**game changer**’ that would create ‘resilient early childhood and school communities’ via a ‘contemporary program’ that reflects the world in which they operate.²⁵

As at August 2020, 69% of schools, 23% of early learning services and 118,000 individual educators have registered with the Be You initiative, with solid teacher participation in online professional development. The initiative assists schools to consult with their broader learning community through surveys and then school based Be You Action teams can use the Be You Reflection Tool to identify the key areas of focus to assist them in ‘**coming up with a social and emotional wellbeing plan**’.²⁶

Schools then **develop their own wellbeing plan and program**. Be You offers a Programs Directory on their website of vetted evidence based social and emotional programs that the schools might choose to investigate and/or **purchase**, but schools are not provided with any recommendations for the **HOW**.

These Frameworks assist primary school stakeholders to identify growing problems and seek support.

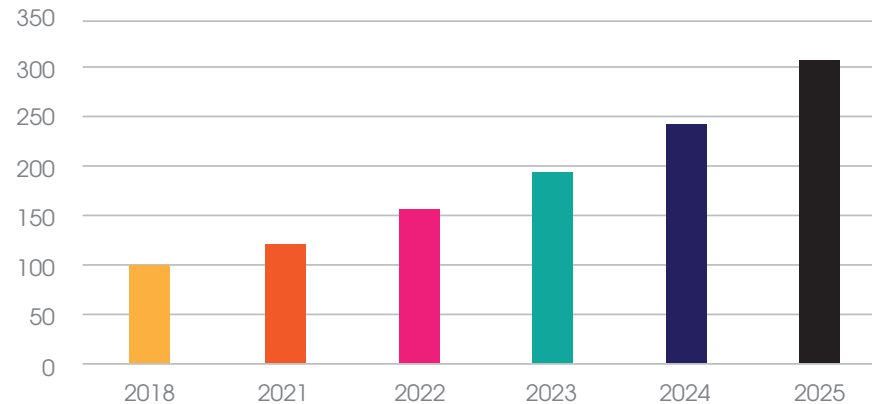
They do NOT teach students HOW to be socially and emotionally well, WHAT to speak up about if you are not well, and HOW to speak up, and feel SAFE to speak up.



WHERE IS THIS MENTAL HEALTH CRISIS HEADED?

(Professor Ian Hickie, Co-Director of Sydney's Brain and Mind Centre)

Recorded suicide deaths 5-17 years could rise by 25% per year



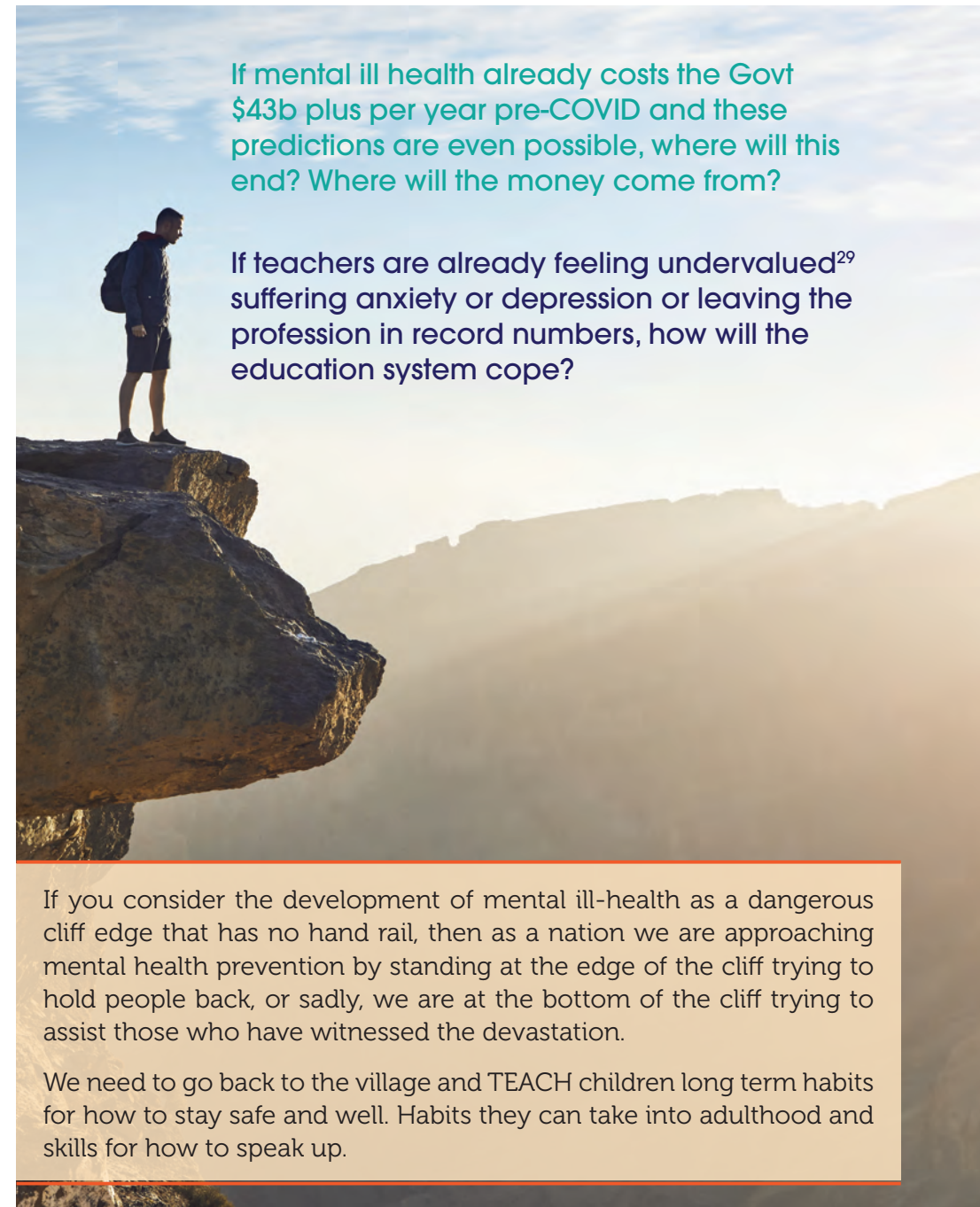
While the full impact of the Covid-19 pandemic will take years to fully realise, it is clear that the direction forward for mental ill-health is catastrophic.

According to modelling by the University of Sydney's Brain and Mind Centre, Australia is forecast to see an increase in suicide deaths of 'at least' 13.7% by 2025, and 'investing in education programs' along with doubling the capacity of mental health services could help.²⁷

Professor Ian Hickie, Co-Director of the Centre and leading mental health advocate is predicting 25% increase in suicide deaths each year, and the ripple effect could be far more overwhelming.

"It will be a massively bigger death toll than COVID"

The conservative 13.7% increase in suicide deaths over the next 5 years would see **19,878** more Australians take their own lives, devastating families everywhere and sending a ripple effect through all generations, and if we apply Professor Hickie's estimated 25% increased suicide rate per year to the 2018 statistics for young people aged 5-17, even if you don't count the stats for 2019 or 2020, then we could see another **750 more young people** take their own lives.



The Way Forward:

SHORT TERM IMPACT, LONG TERM GAIN

The research documenting the positive short and long term impacts of **Social and Emotional learning (SEL)** is compelling.

SEL interventions that address CASEL's five core competencies:

- » increase students' academic performance
- » improve classroom behaviour
- » increase students' ability to manage stress and depression
- » can have a positive impact up to 18 years later on academics, conduct problems, emotional distress and drug use
- » can help reduce poverty and improve economic mobility, and
- » improve lifetime outcome
- » There are statistically significant associations between SEL skills in kindergarten and key outcomes for young adults years later, including decreasing the likelihood of living in public housing, receiving public assistance, having any involvement with police before adulthood and ever spending time in a detention facility. And the average Return on Investment is 11 to 1, meaning **for every dollar invested there is an \$11 return.**³⁰

If teachers and early learning educators can be provided with a selection of evidence based pre-planned and curriculum mapped learning experiences that:

- » give them the **HOW** to teach children what mental wellbeing **LOOKS** like, **FEELS** like and **SOUNDS** like, and
- » they are provided with resources to reach home to families,
- » **AND** they have access to professional development support,

then teachers can **CONFIDENTLY** teach children long term skills for mental wellbeing with intentional teaching that fits into their classroom allocation time every week and they know they are:

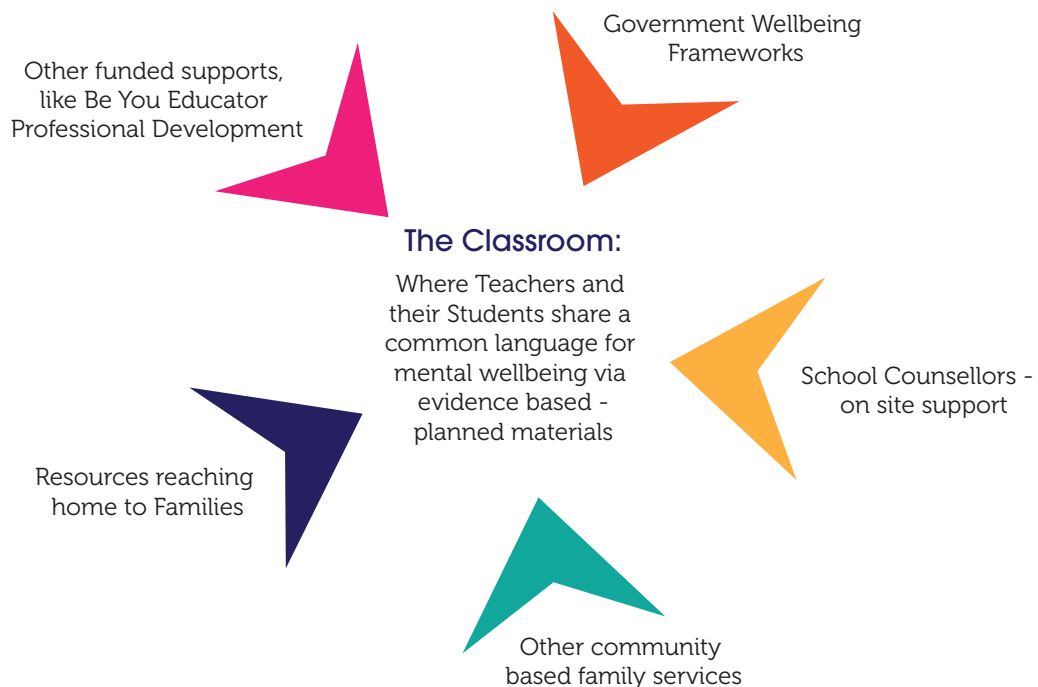
- » meeting their teaching requirements
- » supporting student wellbeing
- » supporting positive behaviour
- » supporting their own wellbeing and
- » supporting family relationships.



Children simply **MUST** learn long term skills for social and emotional wellbeing, **BEFORE** they reach the age of 12 and are entering high school.

When these mental wellbeing conversations are happening in the learning environment with **ALL** students, then children can more easily be connected to the additional support that is available.

They can learn **WHAT** to speak up about, **WHEN** to speak up and with their peers by their side they feel **SAFE** to speak up, and then they can be connected with their school counsellor/chaplain who can then reach out to further support services.



Conclusion and Recommendation

WHAT WE KNOW

- » Mental illness in young people was at all time high proportions for young people BEFORE the outbreak of Covid-19
- » Mental illness is sky-rocketing since the outbreak, and suicide rates are set to increase anywhere from 13.7% to 25% each year for the next 5 years
- » Teachers are exhausted and more stressed than ever
- » Past and present Government support for mental wellbeing within the primary school and early childhood sectors is based on supporting educators and wellbeing teams to gain additional support once they notice a problem
- » Social and emotional learning supports children's long-term academic, social, emotional and life outcomes

WHAT COULD HELP RIGHT NOW

Right now we could offer all Australian schools and early learning services and their educators FREE online access to an extensive range of evidence based, pre-prepared lesson plans.

Lessons that are

- mapped to the National curriculum Learning Areas and General Capabilities,
- that support the BE YOU and Positive Behaviour Frameworks and
- that support families at the same time.

We can also give teachers the language to facilitate wellbeing conversations in the class room that help to then link them to further support.

The question must be asked,
WHY is this not being supported NOW?



A Solution: The Positive Living Skills Initiative

The national and scalable Positive Living Skills initiative is founded on lived experience of anxiety and depression. Over the last 6 years, the PLS founders have worked with psychologists and educators to develop an extensive suite of pre-planned resources that give educators the tools and language to teach mental wellbeing in the early learning environment and primary schools.

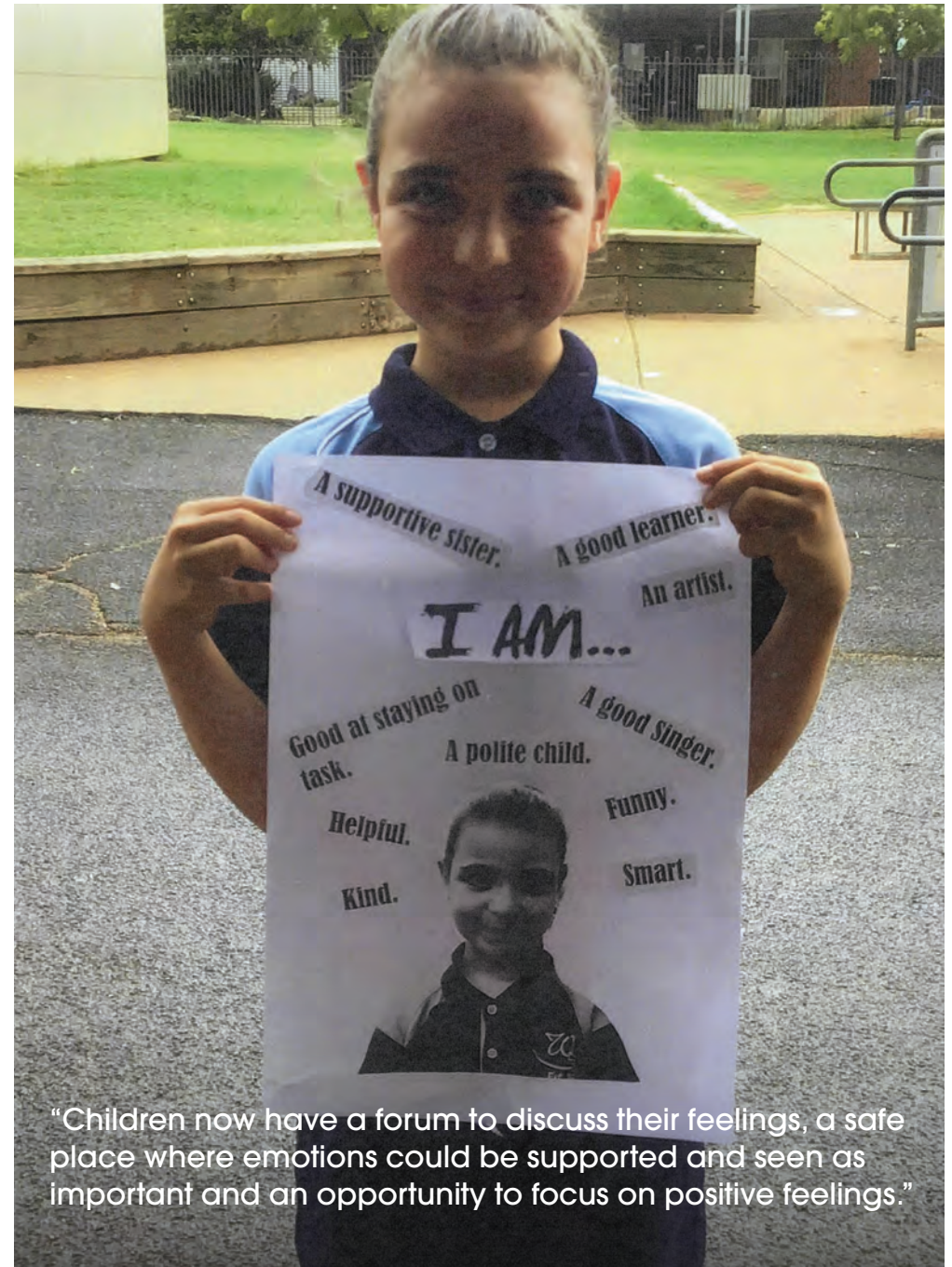
The evidence based Positive Living Skills initiative has been predominantly self-funded to date, with the exception of some small to medium grants awarded as part of the Primary Health Networks 'Empowering Communities' funding.

The most recent research study by Charles Sturt University in partnership with Macquarie University reports:

“The PLS (Positive Living Skills) program engages with children at their linguistic and cognitive levels and teaches them about personal wellbeing strategies using learning experiences that the children enjoy, practice, repeat, and ultimately remember and incorporate into many areas of their lives.”³¹

TEACHERS PARTICIPATING IN THE STUDY:

- » ‘agreed that there had been flow on effects in their personal lives’
- » ‘discussed how closely the PLS Program links with the NSW Curriculum and existing student wellbeing programs such as Positive Behaviour for Learning’
- » ‘detailed how the PLS program has filled a gap in their current PD/H curriculum’
- » noted how PLS ‘sort of slotted into that social and emotional program part of Be You’
- » noted the way PLS models positive behaviour in the School
- » noted that the positive language of the program helped support positive relationships between themselves and their students, and
- » ‘identified the accessibility, flexibility and organization of materials as instrumental with how easily they could use and deliver the program’.



“Children now have a forum to discuss their feelings, a safe place where emotions could be supported and seen as important and an opportunity to focus on positive feelings.”



Sample of feedback from participating Year 3-6 students:

HIGHLIGHTS:

- 'A highlight is something that is good about your day.'
- 'Doing something for other people.'
- 'Playing with my brothers.'
- 'Something you really liked about your day.'
- 'Something you enjoy doing in your day and you remember it.'
- 'Playing with my dogs.'

FEELINGS/EMPATHY:

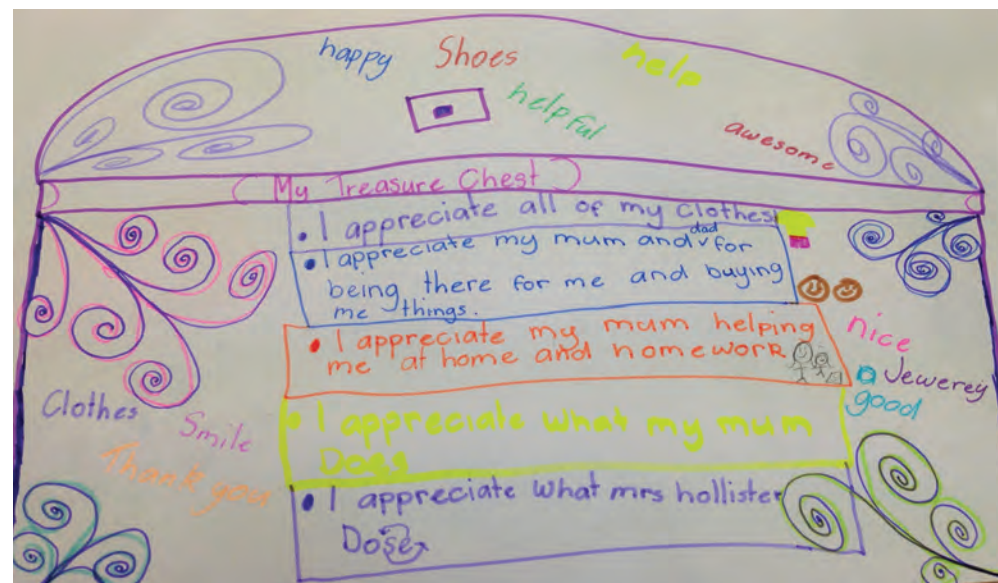
- 'So if you're angry, just take 3 deep breaths.'
- 'If you're happy and someone else isn't, go help them.'
- 'You can feel anything at any time.'
- 'Treat others how you want to be treated.'
- 'When people say something nice and you just fill up your bucket of joy and all that.'

FOCUS:

- 'Taking your mind off everything else and focusing on one thing.'
- 'Concentrating – listening to the teacher.'
- 'Like just listening to your mind and like listening to what your mind tells you.'
- 'When you concentrate you learn more about it.'

RELAXATION:

- 'Help us calm our-self down and calm our emotions. You can go somewhere and just count – take deep breaths and just calm.'
- It sometimes helps us think that if you're bullying someone – stop.'
- 'It clears your head too so you can focus better.'
- 'Turns your brain more on.'
- 'Relaxation can help you learn a bit more and work.'
- 'Calm down and look at the world.'



CHANGING CHANNELS:

- 'I change my channel pretty much every day'
- 'I don't want to get out of bed, so I decide to change my channel and get up.'
- 'Your friends cheer you up. And then you change your channel.'
- 'Like say if you were sad but you can take a deep breath in and like breathe out, and then you feel happy again and that memory is in the past now.'
- 'Practice self-control.'

FAVOURITE PARTS:

- 'Like you can let your words out but then you can also listen to other people as well.'
- 'You can share with other people and everyone listens and you get to share your ideas.'
- It helps you later on in life – that's what School's about – like the future and when you're grown up and an adult.'
- 'We can learn to change channels and stay calm.'



All children who participated in the study agreed that they would have liked to learn about PLS earlier in their schooling.

'Children explained that they would have liked to learn about PLS "like from kindergarten all the way" for a few reasons. These related to learning about self-control, learning about being more positive, understanding their feelings better, understanding others' feelings better and being more relaxed and focused.'

The proven Positive Living Skills initiative could easily be rolled out for thousands of Australian students if funding was available to support the program materials to be made freely available online for primary schools and early learning services across Australia.

Considering primary school only, there were 2,263,884 students enrolled in primary schools across Australia in 2019.³²

If an intentional social and emotional curriculum was made available to Australian primary school teachers through an easily accessible online platform, then we believe these essential skills could reach every student for around \$1.55 per student over the next 5 years, or around .31 cents per student per year.



Isn't the mental health of each Australian primary school student worth \$1.55?



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