It’s not black & white
You aren’t either healthy or sick, mental health is more complex than that.

Mental Health:
Perspectives of Young People aged 12–25 in the ACT

[May 2015] youthcoalition.net
The Youth Coalition of the ACT acknowledges the Ngunnawal people as the traditional owners and continuing custodians of the lands of the ACT and we pay our respects to the Elders, families and ancestors.

We acknowledge that the effect of forced removal of Indigenous children from their families as well as past racist policies and actions continues today.

We acknowledge that the Indigenous people hold distinctive rights as the original people of modern day Australia including the right to a distinct status and culture, self-determination and land. The Youth Coalition of the ACT celebrates Indigenous cultures and the invaluable contribution they make to our community.

Mental Health: Perspectives of Young People aged 12 – 25 in the ACT
© Youth Coalition of the ACT
May 2015

Prepared by Youth Coalition staff member Rebecca Cuzzillo.

Focus group consultations facilitated by Youth Coalition staff members Sarah Jewell, Emma Robertson and Hannah Watts. Thank you to all the young people who participated in the Youth Coalition focus group consultations on mental health between October 2014 and February 2015. Special mention to Sophie Hope, Jarron Dodds and Dylan Appelqvist from the headspace Canberra Youth Reference Group who provided advice and assistance in analysing the consultation findings.

The Youth Coalition received a Mental Health Week grant from the Mental Health Community Coalition ACT and the ACT Mental Health Week Committee to facilitate the focus group consultations.

The Youth Coalition would also like to acknowledge the ongoing support and input of the ACT Peaks Network, in particular our partnership work with Families ACT, Alcohol, Tobacco and Other Drug Association ACT, Mental Health Community Coalition ACT, ACT Shelter, The Women’s Centre for Health Matters, and the ACT Council of Social Services.

The Youth Coalition receives funding for peak activity (policy development, sector development, advocacy & representation) from the ACT Government Community Services Directorate.

Director: Emma Robertson
Deputy Director: Sarah Jewell

Youth Coalition of the ACT
PO Box 5232, Lyneham, ACT, 2602
Phone (02) 6247 3540
info@youthcoalition.net
www.youthcoalition.net
# Table of Contents

**Introduction** 3  
About the Youth Coalition of the ACT 3  
About this report 3  

**Background** 4  
Mental health and young people in the ACT 4  
Aims 4  

**Methodology** 5  
Consultation Design 5  
Consultation Implementation 5  
Consultation Analysis 5  

**Key findings** 6  
Mixed understanding of mental health and mental illness 6  
Stigma 7  
Help seeking 8  
Mental health as a significant issue of concern for young people 10  

**Implications for Policy and Practice** 12  
Mental health education is embedded in schools from a young age 12  
School staff are trained and have resources to identify and respond to mental health issues  
Mental health supports are timely and responsive to young people’s needs 13  

**Appendix A: Focus Group Questions** 14
Introduction

About the Youth Coalition of the ACT

The Youth Coalition is the peak youth affairs body in the ACT. The Youth Coalition is a membership-based organisation responsible for representing and promoting the interests and wellbeing of young people aged 12 to 25 years and those who work with them.

The Youth Coalition is represented on many ACT Government advisory structures and provides advice to the ACT Government on youth issues, along with providing information to youth services about policy and program matters.

A key role of the Youth Coalition is the development and analysis of ACT social policy and program decisions for young people and youth services. The Youth Coalition facilitates the development of strong linkages and promotes collaboration between the community, government and private sectors to achieve better outcomes for young people in the ACT.

About this report

This report outlines the perspectives that young people aged 12 – 25 in the ACT shared as part of the Youth Coalition’s series of consultations with young people on mental health and wellbeing, held between October 2014 and February 2015. It outlines the key findings from the consultations and implications for policy and practice.
Background

Mental health and young people in the ACT

Mental health issues are likely to be significant in many young people’s lives with 25% experiencing a mental ill health in any given year.\(^1\) There are approximately 78,000 young people in the ACT meaning almost 20,000 young Canberrans are likely to experience mental health issues at some point in any given year.\(^2\)

Young people, youth workers, and services in the ACT consistently report that mental health is one of the top issues for young people in the ACT. In the 2012 Rate Canberra survey conducted by the Youth Coalition, “mental health and wellbeing” is one of the top five issues most selected as important to respondents. “Stress”, “body image” and “feeling sad or anxious” also rated in the top 5 current issues and concerns for young people aged 12 – 25 in the ACT.\(^3\)

These findings are reflected in Mission Australia’s 2014 national survey of 15 to 19 year olds, which reported that ‘coping with stress’ (63.1%), ‘body image’ (37.5%), ‘depression’ (26.8%) and ‘suicide’ (16.0%) are four of the top five issues that young people in the ACT are ‘extremely concerned’ or ‘very concerned’ about.\(^4\)

Using focus group consultations to engage young people in a conversation about mental health, the Youth Coalition further explored the theme of why young people regularly identify mental health as a top issue of concern.

Aims

The aims of the focus group consultations were:

- To understand better why young people aged 12 – 25 in the ACT regularly rate mental health high on list of concerns; and,
- To delve deeper into what is behind the concern, and what young people want or think is needed to address mental health in the ACT community.

The focus group consultations sought further information about what aspects of mental health are important to young people, what young people know about seeking help in the ACT, and how young people wish to access support and information around mental health.

---

\(^3\) Youth Coalition of the ACT, 2012, Rate Canberra 2012: Findings from the Survey of Young People aged 12-25 in the ACT, Canberra.

Mental Health: Perspectives of Young People aged 12 – 25 in the ACT, Youth Coalition of the ACT, May 2015
Methodology

The Youth Coalition received a grant from the Mental Health Community Coalition (MHCC) ACT to contribute to the three focus group consultations with young people as part of Mental Health Week 2014 (5-11 October).

Consultation Design

In order to ensure the focus groups were targeted, relevant and appropriate, the Youth Coalition met with staff at headspace Canberra to discuss the focus group consultations and design a list of questions to guide discussion with participants (see Appendix A).

Consultation Implementation

Beginning in Mental Health Week 2014, the Youth Coalition held three focus group consultations with young people aged 12 – 25 in the ACT in three different settings. Consultations were conducted with a Year 11 class, the residents at a supported youth accommodation service and a group of young people at the Youth Coalition offices. A total of 36 young people participated in the consultations, with an even split between males and females.

The Youth Coalition provided an introduction to participants outlining what we already know about young people and mental health in the ACT, the aims of the focus group consultations and that the Youth Coalition will use the findings to inform the organisation’s policy, representation and advocacy work.

The Youth Coalition also provided participants with the opportunity to share their views confidentially outside of the focus group session.

Consultation Analysis

The Youth Coalition engaged three members of the headspace Canberra Youth Reference Group, Sophie Hope, Jarron Dodds and Dylan Appelqvist. They provided advice throughout the consultation process and assistance with the analysis of the consultation findings. Sophie, Jarron and Dylan also assisted in the organisation and facilitation of one of the focus group sessions and were involved in developing the “Key findings” section of this report (pp. 7-8).
Key findings

Mixed understanding of mental health and mental illness

Most of the young people in the focus group consultations were familiar with the term mental health, but there was some confusion and misinformation about the relationship between mental health and mental illness.

As is the case with the broader community, the term “mental health” is often associated with poor mental health and being unwell. In the focus groups, some of the young people saw mental health and mental illness as synonymous.

‘I usually think of depression when I think of mental health.’

‘It sounds like it could be a bad thing.’

‘I think someone is “cuckoo” when I hear mental health.’

The Youth Coalition understands mental health and mental illness as a twin continuum (see diagram below). In this model, a person with diagnosed mental illness could be seen to have good or optimal mental health if they are effectively managing their illness. Similarly, a person can experience poor mental health without having a mental illness. This understanding provides a clear and simple articulation of the way mental health and mental illness are related but still separate.

Twin continuum model adapted from Canadian Population Health Initiative®

---


Mental Health: Perspectives of Young People aged 12 – 25 in the ACT,
Youth Coalition of the ACT, May 2015
While some participants were unclear, a number of the young people did have a good understanding of mental health, including the distinction between mental health and mental illness. They highlighted the complexities surrounding mental health and acknowledged that there is a general lack of knowledge of mental health broadly in the community.

‘It’s not black and white – you aren’t either healthy or sick, mental health is more complex than that.’

‘We all have mental health – it’s just about how good it is.’

‘There is a lack of knowledge about supporting people with mental ill health.’

‘There are still people who haven’t been exposed to mental health at all and they often don’t have any understanding or empathy.’

In general, the participants’ understanding of mental health was informed by a mix of education and lived experience. They identified that messaging about mental health can come from school, friends and family, the media, social media, and music, and acknowledged that, as a community, mental health is being increasingly talked about. The young people saw this as a positive move towards a greater understanding and acknowledgement of mental health and wellbeing.

When discussing mental health, some of the young people identified that it could be useful to draw a parallel to physical health. From an early age young people are exposed to education about physical fitness and health, including information about diet and exercise. The participants identified that similar messaging about mental health and wellbeing resonated with them. Like physical health, mental health is something that affects everyone in the community and is an area of wellness that we can take positive steps to influence.

**Stigma**

During the consultations, the young people identified that there is still significant stigma surrounding mental health and mental illness. They acknowledged that it is often an overwhelming and uncomfortable subject for young people.

‘Stigma definitely still exists.’

‘Mental health isn’t bad, the stigma around it is.’

‘Friends judge you sometimes.’

‘It’s not something we talk about with friends. We’re not comfortable talking about it.’

Young people identified that while friends can be helpful to talk to about mental health, they sometimes fear disclosing to friends in case they are treated differently or seen as weak or attention seeking. Young people also identified that the stigma associated with mental health may make it difficult to disclose in the workplace.

Mental Health: Perspectives of Young People aged 12 – 25 in the ACT,
Youth Coalition of the ACT, May 2015
‘If you admit to having mental health issues, there’s a perception that people will sweep it under the carpet or think that you are seeking attention.’

‘When someone says mental health about someone, I might treat them a bit differently. Not bad, but different.’

‘There can be a fear of being judged or different or losing friends or people thinking you are sick or dangerous.’

‘People in the workplace might find it difficult to share at work because they think they might lose their job or their colleague’s will think they are incompetent.’

Participants identified that more awareness and a better understanding of mental health would help address stigma amongst young people and the community more broadly. They acknowledged that mental health is being discussed more in the media and community than ever before, recognising that talking about mental health as a community helps to build a better understanding of mental health and wellbeing across the board, and therefore reduce stigma.

Mental health education in schools, including information about supporting others with mental health issues, is also a key way to reduce stigma amongst young people. Participants emphasised that it is never too early to be educated about mental health and wellbeing, suggesting that discussions about mental health can occur at any age as long as it is targeted to the age and maturity of the individual. Peer support and peer education were also seen as positive steps to reducing stigma.

Help seeking

The extent to which the young people felt they had the knowledge and skills necessary to support their own or others’ mental health and wellbeing varied.

When asked about help seeking for themselves and their friends, some participants identified that they did not know where they would go if they wanted help for themselves or their friends. Most had some ideas about the kind of support they would prefer and discussed a range of options, including face-to-face, phone and online support with trained professionals, as well as informal peer and familial support.

Preferences varied across different support types – for example, some participants identified that online support was too removed, while others found the concept of face-to-face support intimidating.

‘I don’t trust people online, when I can only read their writing. When you’re actually talking face-to-face you can hear voice and expression.’

‘The anonymity of online support can be good and it can be easier to talk to someone you don’t know at all over the phone, but not face-to-face because that can be intimidating.’

‘It take ages to type and replies can be really generic and annoying. It’s better to talk over the phone or face-to-face.’
‘It’s easier to talk to someone who you know, rather than a stranger. Usually professional help comes after speaking to friends.’

From the discussion it was clear that the mental health system needs multiple modes of delivery that allow young people to access information and support in a way that resonates with different types of people. The young people’s responses also highlighted that even if they did not want to access online support services, the internet is often the first place they go for information about mental health and what supports are available.

‘I think online can be a good first point of contact if someone is unsure where to go.’

‘I wouldn’t do online chat, but would use online information to find out where to go.’

The young people also outlined that mental health services need to understand young people, be responsive to their needs, and be young person-friendly. The Youth Coalition understands ‘youth-friendly’ practice to include listening to young people, providing appropriate information and advice without judgement in an accessible and understandable format.

Participants also emphasised the need for help to be accessible when young people seek it. They identified that long wait lists can act as a barrier to getting help and seeking help in the future.

‘If someone is talking about needing help or looking for information, it’s because they want to do something about it now.’

‘The longer they wait, the longer they have to back out or not come back again.’

‘Wait a week, or even a day or two, and the mindset that you were in when you tried to access help might no longer be there.’

‘At that moment when you decide to talk, something triggered it. So you need to talk to someone then.’

Participants suggested there were key groups in the community they believe need to develop skills and knowledge to help support young people to be mentally healthy. In particular, the young people identified teachers, employers and doctors. They also highlighted the importance of improving the ability of all young people to respond to the mental health needs of their peers.

‘Teachers are really important. I went to a school that made an effort to ensure there was at least one teacher that each student felt comfortable talking to.’

‘It could be part of management training in all workplaces, at least to help identify signs of mental illness and promote wellbeing and good mental health.’

‘Doctors might know services to refer to, but they are uncomfortable talking about mental health themselves.’
‘Young people especially need more education. Not enough young people know how to respond to people with mental ill health.’

When asked about who needs to know about mental health, there was strong feedback from the young people that everyone needs to care about mental health as it is a community-wide issue that affects everyone.

**Mental health as a significant issue of concern for young people**

The focus group consultations confirmed that mental health is a significant issue of concern for young people. Participants identified that as young people they face certain pressures that means mental health is a top priority for them and their peers. They reported that expectations associated with school and extracurricular activities, such as sporting teams, can be a significant source of stress for many young people.

‘As you get older, new expectations and responsibilities are put on you.’

‘At school there is a big focus on getting good grades, more assignments and the time needed to spend on study at home. Sometimes it gets to the point where you worry about whether or not it’s all worth the stress.’

‘There’s no such thing as school-life balance, there is work-life balance, but not when it comes to school.’

Some of the participants, however, warned that stereotypes of young people, particularly labels like “moody teenager”, can be problematic when it comes to mental health. Stereotypes can make it difficult for young people and those around them to recognise the difference between “normal” highs and lows, and when they might be needing help. They highlighted the need for a better understanding of how to identify and address mental health issues, as well as an increased awareness about ways to promote good mental health and wellbeing.

‘It might be good to invest some more money into “how to look after yourself and your friends” programs, like prevention and awareness about healthy strategies for living, rather than prioritising the crisis pointy end of things.’

Overall, the young people saw the increased profile of mental health in the media and the community as a positive step towards reducing stigma and encouraging people to seek help when they need it. Interestingly, while they agreed that mental health is an issue that affects everyone in the community, one participant did raise the question of how the increased exposure and awareness of the issue might be impacting the way mental health is perceived by young people.

‘The media talks about mental health a lot and maybe that causes paranoia.’
The discussions revealed the reasons why young people continually identify mental health as high on their list of concerns are varied and complex. Like the broader community, some young people have a good understanding of mental health, while others are less clear. The young people identified that mental health is a community-wide concern, but the lack of understanding and stigma of mental health among young people and the community more broadly, can make it difficult for young people to know when to seek help and where to find it.
Implications for Policy and Practice

The Youth Coalition’s focus group consultations revealed that young people’s relationship to mental health as an issue is varied and complex. On the whole, young people view mental health as a community-wide concern and articulate that a whole-of-community response is needed to address the issue effectively.

The Youth Coalition found that despite increased discussion of mental health in the media and the community more broadly, understandings of mental health and mental illness among young people varies widely and the stigma surrounding these issues remains significant. This lack of understanding combined with stigma can significantly impact on the ability of young people to support their own or others’ mental health and wellbeing.

1. Mental health education is embedded in schools from a young age

Education emerged as a strong theme in the consultations. Young people identified that while mental health is often included as part of the curriculum in high school, there is limited discussion at younger year levels. They suggested that mental health education from a young age may help to build a more comprehensive understanding of mental health and mental illness, reduce stigma and promote peer support amongst young people.

When discussing mental health and education, some of the young people drew a comparison to what young people are taught about physical health. They identified that from an early age young people are exposed to messages about physical fitness and health, including information about diet and exercise. Participants suggested that similar messaging about mental health and wellbeing could be an effective way to promote positive practices among young people of all ages.

Stigma is well established as a barrier to help seeking among young people. Programs in schools have demonstrated outcomes for reducing stigma and improving the mental health of young people. In the ACT, Mental Illness Education ACT (MIEACT) provides a school education program for Years 9-12 that aims to educate young people about mental illness through a presentation from a person with lived experience. An evaluation of MIEACT’s program shows that it is effective in reducing stigma, increasing knowledge of mental illness and increasing help seeking among participants.

2. School staff are trained and have resources to identify and respond to mental health issues

For young people still at school, the school setting is vital as it provides an opportunistic setting to identify and respond to emerging mental health issues. Fundamentally, schools must have processes in place whereby young people with mental ill health are identified and appropriate interventions provided.

---

9 Debra Rickwood, 2005, Supporting young people at school with high mental health needs.

Mental Health: Perspectives of Young People aged 12 – 25 in the ACT,
Youth Coalition of the ACT, May 2015
In the consultations, the young people specifically identified teachers as a key group that play an important role in supporting their mental health. School staff require ongoing professional development to identify, understand and refer issues that may arise. This includes provision of information about local services that are available for referrals. Teachers need to be trained with the appropriate knowledge and skills to understand bullying and mental health issues. They also require extra support to deal with crisis situations in the classroom and in the playground.

The Youth Coalition also highlights the important role that youth workers play in supporting the mental health of young people. As first-to-know agencies regarding many aspects of young people’s lives, schools need to have embedded mental health supports including health professionals, youth workers, social workers, and psychologists must be embedded within schools to deliver integrated, efficient and effective mental health support to students.

As well as school staff, young people also identified employers and doctors as key groups that need to be educated and skilled in responding to the mental health needs of young people.

3. Mental health supports are timely and responsive to young people’s needs

Encouraging appropriate and effective early help-seeking behaviour for mental health issues has been recognised as a key component of prevention and early intervention. Yet, a major challenge is the well-established barriers that young people can face when seeking professional help. Barriers can include cost, limited transport options, stigma, discrimination, confidentiality concerns and long waiting times.

In the consultations, young people identified that long wait lists in particular can act as a barrier to getting help and seeking help in the future. They suggested that help for mental health issues must be accessible at the time they seek it otherwise they may not reach out again.

From the discussions it was also clear that the mental health system needs multiple modes of delivery to allow young people to access information and support in a way that caters to their individual needs. They discussed online, phone and face-to-face services and there was no clear preference for one type of support over the other. Some preferred the anonymity of online and phone supports, while others wanted to speak to someone in person.

Young people also emphasised the need for mental health services to understand them, be responsive to their needs and be young-person friendly. The Youth Coalition understands ‘youth-friendly’ practice to include listening to young people, providing appropriate information and advice without judgement in an accessible and understandable format.

---


Mental Health: Perspectives of Young People aged 12 – 25 in the ACT,
Youth Coalition of the ACT, May 2015
Appendix A: Focus Group Questions

1. Mental Health – what does that mean to you? What is it? How do you know that, where did you learn about it / who did you learn about it from?

2. Stigma – does it still exist? Is it okay to talk about mental health?

3. What works to reduce stigma amongst young people?

4. Why do you think young people rate mental health as a top concern for them? What are the main concerns you and your peers / friends have about mental health?

5. What did you get taught about help seeking? What would you recommend to a friend who told you they had been feeling really anxious and started to have panic attacks? What do you think of online support?

6. Are young people in tune with their own mental health? What are the barriers to accessing help?

7. If you were seeking help, what do you think is a reasonable amount of time to have to wait until you could see someone?

8. Has anyone been in a situation where you were worried about a friend or family member? Did you feel like you know enough to be able to offer help? What do young people need to know about?

9. Do you think there are other people in the community who should know more or have the capacity to respond?