YOUTH ROUNDTABLE: WESTERN AUSTRALIA
what we heard, and what we learned
Introduction

The **Youth Roundtable: Western Australia** was an initiative of the WA Youth Mental Health Project Development Steering Group (‘the Steering Group’) and the Child and Adolescent Mental Health Service (CAMHS), which was jointly sponsored by the National Mental Health Commission (‘the Commission’) and the WA Mental Health Commission (‘WA MHC’).

The proposal to hold the **Youth Roundtable: Western Australia** was generated following a commitment made by the Commission Chair, Professor Allan Fels, at a series of earlier consultation forums held in Sydney on 26 and 27 April 2012 which focused on four areas:

- Aboriginal and Torres Strait Islander Mental Health and Social and Emotional Wellbeing;
- The Mental Health Frontline and First Responders;
- Mental Health Reform and the Big Picture; and
- The Whole of Life.

An issue raised at the Sydney consultation, was that there was a need for the Commission to hear more from young people about what they want in the National Report Card on Mental Health and Suicide Prevention (‘the Report Card’).

The Commission took the feedback on board and we are working hard to deliver meaningful opportunities for young people to engage with us and make sure their experiences and voices are reflected in our work.

In addition, as part of our commitment to partner with stakeholders in the sector and ensure that consultation activities are widespread across Australia, the Commission sponsored this event by providing joint funding along with the WA Mental Health Commission to the WA Youth Mental Health Project Development Steering Group.

The Steering Group facilitated the Roundtable with 20 young people on 1 June 2012, at the City of Cockburn Youth Centre. The WA Youth Mental Health Project Development Steering Group has supplied a comprehensive report back to the Commission on the detailed discussions from the day.

This **Youth Roundtable: Western Australia Summary Report** provides a brief snapshot of the themes raised by young people at the Roundtable that are relevant to the Commission’s mandate, including the Report Card. The Commission’s primary objective was to hear from young people about the issues that are important to them and capture their unedited language to inform our work.
Key Messages and Next Steps

What the Commission heard

- Young people have particular needs which are not being understood including: rights; privacy; and access barriers such as: hours of operation; mobility; and cost.
- Young people want information, services, support and education to help reduce stigma amongst their peers.
- If the Commission wants young people to be included in the Report Card, the Commission needs to ensure it speaks their language.

What the Commission has done since the Roundtable

- The Commission has partnered with Batyr and the Young and Well Centre for Cooperative Research (YAW CRC) to learn more about what young people want. Specifically they have:
  - conducted a national youth survey from 5 July-20 July, that was promoted through a range of youth targeted media and received over 500 completed responses; and
  - conducted a series of youth focus groups which gave young people the opportunity to express their thoughts on current mental health and wellbeing issues that affect them and ways things could be improved; and
- Batyr and YAW CRC will produce a report back to the Commission which will outline how the Report Card can be relevant, representative and meaningful to young people, reflecting their needs, concerns, beliefs and perceptions in relation to mental health and suicide prevention.
- We are also looking at how to engage with young people through social media.
Messages about mental health

The Roundtable captured the recurring theme that young people feel it is important for the Commission to promote positive messages to encourage help seeking, decrease stigma and discrimination associated with having a mental illness and that recovery is possible. The messages they identified are:

- “My illness is invisible but I’m not”
- “You can’t see that I’ve got a mental health issue but that doesn’t mean that I’m OK”
- “It’s not your fault, it’s common”
- “Feeling better, doing better”
- “Bullying is like discrimination and it is not acceptable”
- “There is nothing wrong with seeking out support”
- “Recovery is possible; it is hard and requires effort”
- “Let people know they can continue in their life”
- “Mental health is just as important as physical health”

Throughout the day young people made recommendations about the priorities they feel need to be addressed or require action.
The Roundtable was fortunate to have input from a diverse range of bright inspiring young people. The diversity meant that they were able to provide feedback on a wide range of key areas that they felt required service improvement and implementation. They raised a range of specific issues including: Aboriginal and Torres Strait Islander specific issues; Culturally and Linguistically Diverse (CALD) issues; families; regional and rural areas; diverse sexuality and gender; and eating disorders; justice and substance issues; children in care.

Common themes highlighted the need for service improvement, understanding, respect, training, and culturally appropriate responses. For example, calls for culturally appropriate support for Aboriginal and Torres Strait Islander youths (not separate services), along with efforts to remove stereotypes and understand culture. Similarly, CALD youth highlighted that culture can affect help seeking and lead to ideas such as “shame” and “weakness”, and that having clinicians from different cultures could encourage acceptance.

They raised issues about regional and rural areas such as towns not having services, or if they did have services they are crisis driven rather than preventative. Diverse Sexuality and Gender (DSG) discussions highlighted an inability to access services if you are transgender and underage and often DSG youth have a range of issues that need to be catered to and approached without bias.

In the words of the attendees of the Youth Roundtable: Western Australia, the themes and messages which arose throughout the day are provided below to give a sense of the complexity of discussions and the issues covered.

**Information and awareness about mental health**

- Information needs to be distributed where young people can access it.
- More dissemination of positive, hopeful, factual messages and information is required.
- Both young people with a lived experience and high profile ambassadors need to deliver mental health information targeted at young people and promote recovery.
- Online and viral promotion is essential in getting through to young people.
- Young people want to hear true stories from young people themselves on both work and personal perspectives.
- Young people would like innovative approaches to be used, such as theatre performances, artwork and music to teach about mental health.
- Young people often fight against themselves to hide and conform to what society accepts. There needs to be acceptance and support for them to be able to acknowledge when they need help or support from others.
Mental health for young people in schools

- School chaplains, school psychologists, counsellors and psychiatrists need to have the appropriate skills to understand and help youth.
- Youth mental health needs to be included as part of curricula.
- The Report Card should be distributed to schools and with external presenters who can talk about it and answer questions.
- A mentally healthy environment should be promoted at school.
- There needs to be flexible study options to allow for a day off for mental health related needs.
- Schools should be able to provide information about services available to their students.

Families are important and greater support is required

- Young people want community driven approaches to youth mental health, particularly in rural areas.
- Families and carers need information on where to access support for themselves.
- Local communities know best, let them design information, service delivery and develop their own relevant messages.
- Families need help with talking to a support person about what the young person is going through.
- Whole of family support and inclusion is important.
- More representation is required for children in care.
- Living in multiple homes is difficult and should be included in the Report Card.
• The Report Card could highlight needs and encourage good services.
• Young carers should be acknowledged.
• When relocating, particularly between states there should be a transfer of information between services.
• Improved knowledge of what happens when transitioning in and out of care.

Access to youth specific services

• There is a demand for services to be available after school hours.
• Front line services need to be properly equipped and non-patronizing towards youth.
• Waiting lists and costs are barriers.
• Youth want respectful communication in treatment settings, including hospitals. (These settings are too ‘process’ driven).

Coordination and treatment

• Young people do not want to keep repeating their story over and over again, they want to know what to expect when they go to a youth service.
• They want to know their rights, and be involved in decision making.
• It is important to have on-going support with a counsellor who you “fit with”.
• Young people want information sharing between agencies and support in transitioning between services in a manner which ensures they give informed consent and know the information sharing.
• Face to face contact with counsellors who are directly involved and are empowering young people in their own care. Counsellors and young people to have clear sets of rights and responsibilities to each other.
• Young people want to have flexibility in their care.

Insufficient services to meet need

• It can be hard to learn the system.
• Some young people cope with their mental health on their own because they don’t know where to go or even if there is any where to go.
• There needs to be greater outreach towards culturally diverse youth.
• There is a gap between CAMHS and adult mental health programs.
• There is greater demand for services afterhours, on the phone and on-line counseling.

Conclusion

The Commission would like to thank and acknowledge the 20 participants of the Youth Roundtable: Western Australia. The day was a valuable chance for us to hear from young people what is important to them.

The Commission was encouraged to note that the themes of positive messages, access to services, better coordination of treatment and greater support for families were consistent with the themes heard through our general and broader consultation process.

The Commission will continue to consult with young people through a range of other processes to inform the first and future Report Cards.