Australian Government Productivity Commission
batyr Submission

Stigma is an isolating barrier that prevents young people from reaching out for support if they need it (SANE, 2013). Australian Institute of Health and Welfare data shows only about 22% of young people experiencing a mental health issue seek help (2011). This tells us that over the years, a large proportion of the Australian population has been suffering in silence.

According to leading stigma reduction researcher Patrick Corrigan, one of the greatest ways to achieve behavioural change when it comes to stigma reduction is through the sharing of lived experiences coupled with education in a peer to peer way (Corrigan, 2011). batyr was started in 2011 structured off this evidence based model to see real change in Australian communities. batyr is a ‘for purpose’ preventative mental health organisation, created and driven by young people, for young people. batyr aims to smash the stigma surrounding mental ill health and empower young people to reach out for support if it is something they need.

batyr has trained over 600 young people to learn how to share their stories of hope and resilience in the community and have reached close to 180,000 people with these stories through our structured school, university and community programs. In 2017, Macquarie University conducted a randomised control trial investigating the efficacy of batyr’s school programs and found they reduced stigma in young people and increased intentions to seek help which was sustained at 3 months (Hudson, 2017). These programs all involved the sharing of lived experiences by young people.

A call out was made to the young people we work with to gain input for this important submission. According to their voices, research findings in Australia and our experiences in the mental health space, the following areas to invest in are being strongly recommended to see necessary change:

1. Prevention and education to reduce stigma
2. The power of sharing lived experience to create change
3. Community building to increase social inclusion and reduce isolation of young people

1. Preventative education to reduce stigma

Mission Australia’s 2018 Youth Survey indicated that mental health was rated as the top issue in Australia by young people (Carlisle et al, 2018). A theme that has come through the 600+ stories we have heard by young people at batyr is that stigma has played a direct role in preventing many young people from not opening up about their experiences with mental ill health until they have reached crisis point. Many young people have shared about being subjected to stigmatised attitudes by other people, in addition to experiencing self-stigma. This contributes to mental ill health exacerbate over time, which often results in requiring more acute support.
Feeling stigmatised can have detrimental impacts including avoiding reaching out for support early, which not only impacts quality of life and places lives in danger, but creates strains on various health services including GP’s, hospitals and emergency services. Experiencing acute mental illness can have a significant impact on not only the individual’s personal life, such as family and relationship breakdown, but also has flow on effects such as requiring time off work or study. Research from the Black Dog Institute and Mission Australia adds that unemployment is linked with mental ill health in young people, which can affect a young person’s functioning and development in their short term and also their future (2016).

The financial strain in accessing mental health services and/or medication when they finally do access it ultimately compounds the mental ill health an individual may be experiencing. One of our participants who shared their thoughts for this submission reported that as a young adult, they are unable to rely on their parents’ financial support to help them access mental health services. This means that for three months of the year, they are out of pocket $2100 until they reach the threshold due to their psychiatrist’s fees. The financial strain during that time period is significant and contributes to their mental ill health and quality of life. In regards to the mental health care plan, it’s been reported by several young people we work with that the first few sessions are typically for a mental health professional and an individual to determine if they are a suitable match and to identify the best approach. Therefore, by the time therapeutic effects are beginning to be seen, the sessions covered by Medicare are done.

**Recommendations**

Investing in preventative education for young people is paramount for several aspects of a person’s life and for the country as a whole. Raising a generation of young people who develop the skills and resilience to manage their mental health early on in life is investing in their future as individuals and in the broader community. A ripple effect occurs where the individual experiences an all around higher quality of life. Beginning this in schools allows for an environment where young people are present, are already learning and are surrounded by structure. They have people who can empower them to make the most of support already around them. Additionally, education around how an individual can look out for their friends, take charge of their mental health through self-care and are educated on what services are in their local community they can access as a young person can positively contribute to reducing the above strains as well. This type of education can help ensure young people are taking charge of their mental health early on in life and are accessing support before they reach crisis point, which can reduce the financial burden on the health system.

In terms of the financial stressors on young people who actually are accessing help, reviewing the amount of sessions covered by the Mental Health Care Plan, in particular for more complex mental illnesses, can support people in getting the help they need before things progress due to being unable to afford services. Looking at a repayment option that involves a payment schedule would also be valuable.

Preventative education also contributes to building resilience and confidence in adolescence and can help equip young people for employment. Data from WayAhead Mental Health Association
NSW indicates that young people who are unemployed are vulnerable due to high unemployment rates that exacerbate mental health issues (2017). According to Angela Smith, Group Account Director of the Roy Morgan Research, “failure to find a job can have serious implications on [a young person’s] self-esteem and general mental health.”

The need to support young people with a lived experience who are not in education, employment or training has been recognised as a priority issue by the NSW government that needs to be addressed through their Youth Employment Innovation Challenge. In 2018, 60 participants who completed batyr’s Being Herd speaker training workshop were asked what the top 3 employability skills they gained from the workshop were. Communication, self-management and teamwork were described. The top 3 personal strengths they gained from the workshop were empathy, honesty and adaptability. 80% of participants said that the workshop encouraged them to be more open with their mental health in the workplace. Furthermore, surveyed participants indicated their confidence in themselves was improved by over 90%. Developing important skills in not seeing lived experiences as a barrier from gaining employment, but viewing them as a strength has important impacts on a young person’s life and can prevent longer periods of unemployment. Investing in educating young people on preventative skills can also help decrease sick days for those who are working.

2. The power of sharing lived experience to create change

Input from students and speakers we work with who describe what it is often like living with mental ill health is that they feel alone and that no one can relate to what they’re experiencing. Many young people have shared they view their feelings as not being valid or that their symptoms are not “bad enough” to reach out. When navigating the mental health system, we hear a lot of young people discuss feeling demotivated by having to try multiple professionals before finding the right fit, and therefore they think they are alone in that and there is no hope. With services largely designed and implemented by adults for young people, it can also be difficult for young people to access useful types of support, and it can also be challenging to relate to an adult’s experience with mental ill health. What’s more is it can be hard to find a way to have a voice or give feedback to help the services that exist be more youth friendly and accessible based on individual needs, in particular to reflect diversity in people and in regions. Often a smaller number of big research bodies and service providers receive significant funding. This is great to expand their important work, however opportunities and resourcing for grassroots organisations to try and test new initiatives can make a big difference.

Recommendations

Investing in bringing young people to the forefront of government decisions and in having platforms to share their lived experiences safely to help other young people is an important recommendation. Corrigan states that in order to see positive change in attitudes and behaviours associated with stigma for young people, it is important they are hearing from people similar to them to increase impact since they will be seen as more relatable, and therefore more credible (2011). After each of batyr’s programs, feedback forms are distributed to gain input from the students. Over 6 years batyr surveyed 128,423 young people. Of those young people 90%
indicated it is important to hear from other young people sharing real stories of mental health. Sharing lived experiences in a safe and effective way can help young people feel not so alone, and through hearing of real experiences navigating the health system, it educates people on what support is available and how to find the right fit and persevere. Stories of hope and resilience can model to others that it is possible to get through tough times and find ways to manage one’s wellbeing and that people care. Through hearing these stories in our structured programs, we have seen that 70% of young people who have seen a batyr preventative education program have reported being more likely to reach out for support if they need it. In comparison to 22% of Australians accessing help when needed, this change is hopeful for the potential that storytelling has to reduce stigma and help young people reach out.

Additionally, investing in the power of storytelling by young people for young people contributes to improvements in wellbeing for those sharing their stories. Common feedback from those trained to safely share their stories through batyr is that many experience a reduction in self-stigma, they feel their experience with a mental illness does not define them and won’t hold them back anymore, they believe they aren’t alone, they feel they can begin to share their experiences more openly with friends and family, and they gain a sense of empowerment to help even just one other person with their story. Gaining input from young people through their stories on what navigating the health system was for them can also help shape government decisions and how services look in Australia. This can be game changing for the country, and can result in a model that is reaching more young people early on.

3. Community building to increase social inclusion and reduce isolation of young people

A common piece of feedback we have received by the young people we work with is a feeling of isolation, which directly impacts a person’s wellbeing. A key area that has been highlighted is the isolation that exists in certain communities, particularly regional and rural areas in Australia. Information from ReachOut informs that social isolation, stigma, and barriers to accessing services all contribute to feelings of disconnect and even greater mental ill health (2017). Through our work in regional NSW, we’ve heard from various community members that there is a culture in their regions where people are told to “toughen up.” At the end of 2018 during a batyr program in Gunnedah, NSW, two males drove from hours away to attend. They shared their experiences that they were raised to never talk about their feelings and decided it was important they learned to help the younger generations in their communities not feel so isolated considering the suicide rates in their areas.

Recommendations

Investing in building communities for young people to feel connected to others will have countless positive impacts in all regions. There are a large amount of volunteer run organisations, in particular in regional and rural areas (volunteer emergency services, SES, Rotary, Lions Club, church and religious groups, sport clubs, CWA etc.) that have dual purposes of helping others, while contributing to a sense of belonging to those who serve in them. In regional Australia, a lot of these groups form the bedrock of the communities they belong to. Investing in educating
these groups on mental health and wellbeing can help re-engineer existing communities to have a more positive view on mental health. This can increase the capacity for social inclusion and remove the barriers that prevent people from connecting in meaningful ways. Funding into programming that can help engage, educate and empower community groups can begin shifting the conversations happening around mental health, help people feel more comfortable to connect, and can create better informed role models and cultures for community groups that afford so many Australians a more meaningful life. Through this investment, local community members can continue driving their own change to see long-term, sustainable change.

Additionally, through education, we can foster opportunity for communities (whether it be school, universities, workplaces or towns) to use the same language and increase awareness to look out for themselves and each other. An example of a community working hard to change the language around mental health in their community is Cobar, NSW. Community members reached out to batyr to run programming at the local high school and for the community. 545 many people were reached to start having positive conversations on mental health. Local services, schools, businesses, mines and sport clubs all got together to drive change. Local business owners even began wearing batyr’s fluoro sport socks to work as a visual representation to show the young people in the community that they were happy to talk about mental health and were there to connect with. Through connection and more open conversations happening on mental health, young people can be supported earlier on, which also places less reliance on acute care in these regions which is already under resourced and hard to geographically access for many.

Conclusion

Investing in preventative education, the safe sharing of lived experience and reshaping the culture of mental health in community groups can all reduce stigma, increase help-seeking and foster connection that is imperative for all people. Through these investments, we can expect to see:

- improved quality of life through life-long skill development when it comes to managing wellbeing
- more young people engaged in employment
- reduced reliance on acute services
- increased connection of people who are looking out for each other
- empowered young people who are brought to the centre of these conversations to create sustainable change and obtain the greatest return on these investments.
References


ReachOut (2017). What you need to know about youth mental health in regional Australia.

SANE Australia 2013. A life without stigma: A SANE Report. SANE Australia