

**mieact**

A safe space for  
mental health education



# **Mental Illness Education ACT**

## **2024 - 2025**

### **Budget Submission**



## ABOUT MIEACT

Mental Illness Education ACT (MIEACT) is a not-for-profit organisation working to reduce stigma and to increase mental health literacy in the Canberra community. In any one year, 21.5 per cent of Australians aged 16-85 will experience a mental illness.<sup>1</sup>

Young people have the highest prevalence of mental illness than any other age group in Australia, with recent data showing that 38.8% of people aged 16-24 had a 12-month disorder.<sup>2</sup> The Black Dog Institute note that a common myth is that mental ill-health starts in adolescence, whereas 1 in 7 children aged 4-11 live with a mental health disorder<sup>3</sup>.

As the primary local mental health and well-being education provider in the ACT, MIEACT provides mental health education for primary and secondary schools, workplaces and community groups across Canberra and the surrounding region. For more than two decades, MIEACT has delivered evidence-informed programs. Through partnering with people with lived experience of mental illness, we share stories that increase mental health literacy, promote early intervention, reduce stigma, and emphasise recovery across the community.

### Submission by:

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<sup>1</sup> National Study of Mental Health and Wellbeing. Accessed online on 24 January 2024 via: <<https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/latest-release>>

<sup>2</sup> Ibid.

<sup>3</sup> Children's Mental Health and Wellbeing. Accessed online on 14 February 2024 <[https://www.blackdoginstitute.org.au/wp-content/uploads/2021/08/20210525\\_Childrens-mental-health-and-wellbeing.pdf](https://www.blackdoginstitute.org.au/wp-content/uploads/2021/08/20210525_Childrens-mental-health-and-wellbeing.pdf)>

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## SUMMARY OF RECOMMENDATIONS

<p><i>Invest in an evidence-informed, safe, and consistent approach when engaging people with a lived experience.</i></p>	<p><b>That the Government invest in a framework and training for government departments and agencies that supports the safe and effective engagement of lived experience in policy and program development and all contexts where lived experience is drawn on to learn, understand and achieve meaningful change.</b></p>	<p>Page 4</p>
<p><i>Invest in a Canberra developed Primary School mental health literacy program to support child mental health.</i></p>	<p><b>That the Government invest in Thriving Minds, an early years mental health literacy program designed for Year 3 students that uses evidence informed strategies to help students to identify emotions, practice self-care and learn about help seeking.</b></p>	<p>Page 6</p>
<p><i>Continue to invest in YAM, a proven evidence-based early intervention suicide prevention program for teenagers.</i></p>	<p><b>That the Government continue to fund the delivery of the Youth Aware of Mental Health program in the ACT to support suicide prevention, sustain a decline in depression severity, and increase help seeking intentions.</b></p>	<p>Page 8</p>

## INTRODUCTION

MIEACT welcomes the opportunity to provide this pre-budget submission for the 2024-25 ACT Budget. MIEACT’s Budget Submission aligns closely with the ACT Mental Health and Suicide Prevention Action Plan and ACT Wellbeing Framework through activities and programs that would contribute significantly to outcome goals in the Framework’s ‘Health’ domain and specifically with regards to children and young people. Further, the submission seeks to meaningfully support the efforts being made by the ACT Government to elevate and amplify the voices of people with lived experience in policy and program co-design, and more broadly to ensure positive engagement of government services with lived experience community members. More generally, the submission responds to recommendations of various recent Australian inquiries including the Productivity Commission’s Inquiry into Mental Health and National Mental Health Commission recommendations regarding Lived Experience Workforces<sup>4</sup>.

As the ACT Government would be aware, nearly one in two Australian adults will experience mental ill-health across their lifetime, and over 3,000 Australians end their lives every year. In the ACT, the mortality rate by suicide per 100,000 population is 13.9 people, whereas the national average is 12 per 100,000<sup>5</sup>. The estimated cost of mental illness alone on Australia’s economy is \$200-220 billion each year with a proportionate cost experienced at the Territory level.<sup>6</sup> Investing in preventive health programs, especially for children and youth, and harnessing the power and expertise of people with Lived Experience are efficacious methods for reducing the financial, personal and community burden of mental illness.

<sup>4</sup> Australian Government National Mental Health Commission website: *Lived Experience*, viewed 25 Jan 2024, accessed via: <<https://www.mentalhealthcommission.gov.au/lived-experience>>

<sup>5</sup> Deaths - intentional self harm/suicide 2011-2021, viewed 25 Jan 2024, accessed via: <<https://www.health.act.gov.au/about-our-health-system/data-and-publications/healthstats/statistics-and-indicators/deaths-4>>

<sup>6</sup> Australian Government Department of Health and Aged Care website: *Mental health and suicide prevention*, viewed 25 Jan 2024, accessed via: <<https://health.gov.au/topics/mental-health-and-suicide-prevention>>

## DONOHARM: ENSURING SAFE LIVED EXPERIENCE ENGAGEMENT

**RECOMMENDATION:** Invest in a framework and training for government departments and agencies that supports the safe and effective engagement of lived experience in policy and program co-design and all contexts where lived experience is drawn on to learn, understand and achieve meaningful change.

The expertise of people with lived experience of mental illness is a powerful tool to promote mental health understandings and to reduce the stigma associated with mental illness.<sup>7</sup> Furthermore, harnessing the voices of lived experience is key to improving the systems, policies, programs and services experienced by consumers and carers. Additionally, engaging with lived experience is critical to creating fair and thriving work settings. However, guidance on people sharing their lived experience safely, and likewise for organisations to engage effectively with people and their stories and descriptions of lived experience, is scarce. What is needed is consistent, uniform, evidence-informed and safe approaches to engaging lived experience expertise.

### The DoNOHarm framework and training – sharing lived experience safely

For decades, MIEACT has supported its lived experience educators to share their individual stories of living with mental illness to schools and the community. MIEACT's 'DoNOHarm Framework' and associated training outlines the principles of sharing and hearing stories and descriptions of illness and adversity safely. The Framework is a best practice approach<sup>8</sup> to communication about mental illness and supports people in the community to share lived experience in a safe and impactful way, drawing on the authenticity and power of a person's stories and expertise while not overwhelming the teller or the audience with words or imagery that can be distressing. The framework and training are also an effective duty of care mechanism for organisations that engage with people with lived experience and serves to heighten the effectiveness of lived experience insights.

A validation review of MIEACT's DoNoHarm Framework by the University of Canberra in 2021 showed strong evidence for the principles and practices underpinning DoNOHarm. It was seen to be effective in protecting the safety of both the lived experience sharer and their audience,<sup>9</sup> with the study ultimately finding that MIEACT's DoNOHarm approach is backed by a sound evidence base.<sup>10</sup> In the years since this study was completed the uses and users of DoNOHarm has rapidly expanded and diversified.

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<sup>7</sup> Rickwood, D., Thomas, K., Brown, P., Prowse, H. International Journal of Mental Health Promotion 2021: *Mental illness education through stories of lived experience: validation review of the donoharm framework* accessed 25 Jan 2024 via: <https://researchprofiles.canberra.edu.au/en/publications/mental-illness-education-through-stories-of-lived-experience-vali>>

<sup>8</sup> Rickwood, D., Thomas, K., Brown, P., Prowse, H. International Journal of Mental Health Promotion 2021: *Mental illness education through stories of lived experience: validation review of the donoharm framework* accessed 25 Jan 2024 via: <https://researchprofiles.canberra.edu.au/en/publications/mental-illness-education-through-stories-of-lived-experience-vali>>

<sup>9</sup> Rickwood, D., Thomas, K., Brown, P., Prowse, H. International Journal of Mental Health Promotion 2021: *Mental illness education through stories of lived experience: validation review of the donoharm framework* accessed 25 Jan 2024 via: <https://researchprofiles.canberra.edu.au/en/publications/mental-illness-education-through-stories-of-lived-experience-vali>>

<sup>10</sup> Ibid.

In 2023, agencies spanning the Commonwealth Department of Health and Aged Care, Commonwealth Department of Education and organisations including Woden Community Services, St Vincent de Paul, Stride Mental Health and Ronald McDonald House Charities have undertaken DoNOHarm training to implement the framework's principles and practices. These and other organisations have embraced DoNOHarm to support groups that include:

- People who share their lived experience in a wide range of settings and for diverse purposes including in the Peer Workforce, advocacy, informing policy and program development and through co-design contributions
- Frontline workers and others who engage with people with lived experience as volunteers or through care and service provision
- Leaders who manage and support direct reports, empowering them to 'create a safe space' (building trust and connection) for their team to bring their whole selves to work and to authentically engage and collaborate.

### Providing DoNOHarm training to ACT government departments and agencies

The provision of DoNOHarm training to ACT Government departments and agencies through online and face-to-face workshops would represent a strong enactment of the Government's commitment to the importance and significant value of lived experience and contribute significantly to elevating the voices of people with lived experience. Investing in DoNOHarm training would:

1. Enable lived experience people, including advocates, employees and volunteers with lived experience to communicate safely and effectively about mental health and other experiences of adversity
2. Inform psycho-social safe practices, risks assessments and risk mitigation practice in organisations that engage people with lived experience
3. Foster a more supportive environment for people with lived experience including through a shared understanding of best practice language within organisations
4. Contribute to building positive and empathetic workplace cultures through systemically changing understandings of lived experience
5. Inform policies, practices, and procedures for an organisation's Lived Experience workers to safely harness the power of their experiences for the benefit of themselves, the clientele they work with and the organisation.

## THRIVING MINDS: SUPPORTING CHILD MENTAL HEALTH LITERACY

***RECOMMENDATION: Invest in a Canberra developed child mental health literacy program to promote positive mental health across ACT Primary Schools.***

There is strong evidence that interventions targeting adolescent mental health literacy can increase help seeking and support positive youth mental health. However, there are few interventions of this type that address young children, and further, that have been validated through high-quality research. Indeed, the national mental health organisation, 'Emerging Minds', has reported that while Australia has 'emerged as a leader in campaigns that have focused on increasing mental health literacy, particularly for adult/adolescent depression and anxiety disorder' child mental health literacy has been seriously 'neglected'<sup>11</sup>.

This systemic oversight occurs in the ACT, and nationally, despite the prevalence of mental health disorders among young children (13.6%), evidence showing that as many as half of all children who have a mental illness do not receive appropriate help, the likelihood that emerging childhood problems will worsen in adolescence, and research revealing low levels of child mental health literacy. At the same time, the benefits of mental health promotion and prevention programs for children include: supporting children to be aware of, and to respond to, mental health problems and causes; lessening impediments to learning; reducing mental health disorder severity and prevalence; and, increasing quality of life experienced in childhood and subsequent life stages. As the majority of Australian children attend Primary Schools (98.6%), school-based mental health programs have the greatest potential to build child mental health literacy and to promote help seeking behaviours.

### Thriving Minds – A Year 3 mental health literacy program

The Thriving Minds program, created by MIEACT in the ACT, has been specifically created to address this gap by offering Canberra's Primary Schools an engaging program that seeks to increase mental health literacy, reduce stigma and promote help-seeking in children aged 8-9. The program consists of two classroom-based sessions where a MIEACT educator guides student discussion of story books that have themes that explore mental health problems. The stories and discussion enable children to explore different emotions associated with illnesses such as anxiety and depression and the physical feelings associated with them. The reading and discussion of storybooks is paired with activities that engage students with learning self-help interventions and interpersonal help seeking strategies. Targeting children in this age group aims to establish positive behaviours with regards to self-care and help seeking that persist over life course and influence long-term mental health trajectories.

<sup>11</sup> Tully, L, 2019, Child mental healthy literacy: What is it and why is it important? accessed 25 Jan 2024 via: <<https://emergingminds.com.au/resources/child-mental-health-literacy-what-is-it-and-why-is-it-important/>>

## A promising program that is being rigorously trialled

Thriving Minds is currently in the final year of a three-year research project, funded by a Rotary Health grant, being undertaken by the Australian National University, Centre for Mental Health Research. As part of this research, the program is being delivered to Yr 3 students from diverse socio-economic backgrounds in 20 ACT Primary Schools that have been purposefully recruited to reflect population diversity. Student outcomes are being assessed through a cluster randomised controlled trial. 'Randomised control trials' are a highly rigorous research methodology that validates programs, if proven successful, as having a strong evidence base.

## Providing Territory wide access to Thriving Minds

If found to be effective, the Thriving Minds program has the potential for large-scale delivery across the ACT, providing a low-intensity and accessible intervention to promote mental health and timely help-seeking in our children, now and into the future. Through the provision of funding enabling Thriving Minds to be delivered annually to ACT primary schools, the ACT Government would be investing in the Territory's first locally developed evidence-based Primary School mental health literacy program. Moreover, the ACT Government would be actively investing in a systemwide intervention to achieve desired ACT Wellbeing Framework outcomes and support young children to:

- Learn from a young age how to recognise behaviours associated with mental health problems
- Learn about effective self-care interventions and the value of self-care
- Understand the importance of help seeking to recovery
- Know where to seek, including trusted adults and child specific services
- Learn positive behaviours that contribute to a child thriving across life course.



## YOUTH AWARENESS OF MENTAL HEALTH PROGRAM (YAM)

***RECOMMENDATION: Continue to fund the Youth Aware of Mental Health program in the ACT to support suicide prevention, sustain a decline in depression severity, and increase help-seeking intentions.***

Suicide was the main cause of death for Australians aged 15 to 49 years in 2019.<sup>12</sup> Youth Aware of Mental Health (YAM) is an evidence-based program for young people aged 13–17, in which they learn about and explore the topic of mental health where students actively engage with important mental health themes through roleplay and student-led discussions.<sup>13</sup>

Since 2020, Mental Illness Education ACT (MIEACT) has been the nominated provider for the Australian Capital Territory (ACT) for YAM – a free school-based mental health program delivered to young people in a classroom setting. This program provides young people with a safe and non-judgemental space to explore mental health topics such as stress, crises, depression, knowledge of suicide warning signs, and safe and effective help-seeking strategies.

The implementation of YAM in ACT classrooms was initially funded with support from the Commonwealth Government and delivered by MIEACT to secondary schools in partnership with the ACT Health Directorate. It was subsequently wholly funded by the ACT Government however, program funding will cease June 30, 2024.

**In Australia, research examining YAM delivery to Year 9 students in New South Wales found the program led to a decline in depression severity, and help seeking intentions increased,<sup>14</sup> and observed that, “the YAM program is a promising preventive intervention for Australian schools, particularly for reducing suicidal ideation, depression, and increasing help-seeking”.<sup>15</sup>**

YAM has also been evaluated in the EU-wide Randomized Controlled Trial of more than 11,000 participants. The results found YAM effective in reducing new cases of suicide attempts and severe suicidal ideation by approximately 50 per cent of participants. New cases of depression were reduced by approximately 30 per cent in the youth participating in YAM.<sup>16</sup> Similar results have been reported in the United States.

### MIEACT’s delivery of YAM in the ACT

Underpinned by in-depth and ongoing instructor training, the YAM program is delivered in classrooms by a YAM Instructor with support from a YAM Helper, who provide young people with a safe and non-judgemental space to explore mental health topics.

Throughout the duration of MIEACT’s delivery of the YAM program (Semester 1 2020 – end of Semester 1 2024, inclusive) schools from Government, Catholic and Independent sectors have implemented the program. In total, 428 classes of students and approximately 10,000 students from these schools will have taken part in the YAM program.

<sup>12</sup> Australian Government Department of Health and Aged Care website: *Mental health and suicide prevention*, viewed 25 Jan 2024, accessed via: <<https://health.gov.au/topics/mental-health-and-suicide-prevention>>

<sup>13</sup> Youth Aware of Mental Health, *About Yam*, viewed 19 January 2023, accessed via: <<https://www.y-a-m.org/>>

<sup>14</sup> 4 International Journal of Mental Health Systems 2021: *The Youth Aware of Mental Health program in Australian Secondary Schools: 3- and 6-month outcomes*, accessed online via: <<https://ijmhs.biomedcentral.com/articles/10.1186/s13033-021-00503-w>>

<sup>15</sup> Ibid.

<sup>16</sup> Ibid.

MIEACT believes that continuation of the program is justified not only by the performance of the program to date but also by the continuing decline occurring in youth mental health across Australia including the ACT, and relatedly, youth mental health economic costs.

### Youth mental health trends

Young people have the highest prevalence of mental illness than other age groups in Australia, with 2023 ABS data from the National Study of Mental Health and Wellbeing showing 38.8% of young people 16-24 had a 12-month mental disorder. Yet, they are also least likely to seek professional help. In the period 2015 to 2022, deaths by suicide have risen among people aged 15-17 from 16.5% to 23.9%<sup>17</sup>.

Within the ACT, a 2019 ACT Government Public inquiry into the social and economic benefits of improving mental health in the region found: almost 50 per cent of hospitalisations due to self-harm in 2015-16 were young Canberrans aged 10-24 years<sup>18</sup>; and that younger Canberrans were the most likely cohort to experience psychological distress.<sup>19</sup>

### Youth mental health costs

According to a study undertaken by the Orygen Institute, in 2009 just over 1 million Australians aged 12-25 with a lifetime diagnosis of a mental illness experienced symptoms within the previous 12 months (478,000 males and 526,000 females).<sup>20</sup>

The same study flagged that Australia faced substantial costs arising from mental illness in young people. In 2009, the financial cost of mental illness in people aged 12-25 was \$10.6 billion. Of this:

- \$7.5 billion (70.5 per cent) was productivity lost due to lower employment, absenteeism, and premature death of young people with mental illness
- \$1.6 billion (15.5 per cent) was the deadweight loss (DWL) from transfers including welfare payments and taxation forgone
- \$1.4 billion (13.4 per cent) was direct health system expenditure
- \$65.5 million (0.6 per cent) was other indirect costs comprising informal carer costs and the bring forward of funeral costs.
- Additionally, the value of the lost wellbeing (disability and premature death) was a further \$20.5 billion. This amounts to a financial cost of \$10,544 per person with mental illness aged 12-25 per year. Including the value of lost wellbeing, the cost is estimated as \$31,014 per person per year.<sup>21</sup>

Noting these figures are from a 2009 study, current costs figures can be predicted to be substantially greater. For example, in 2023 the ABS documented how mental health issues among young people had soared by nearly 50% over the past 15 years with 40% of young people experiencing a mental health illness in the previous year. Taken together, these factors provide a strong justification for the continued funding of the YAM program delivery to ACT secondary schools.

<sup>17</sup> Australian Institute of Health and Welfare 2023, suicide and self harm monitoring, viewed 23 January 2024, accessed via: <<https://www.aihw.gov.au/suicide-self-harm-monitoring/data/populations-age-groups/intentional-self-harm-hospitalisations-among-young>>

<sup>18</sup> Ibid.

<sup>19</sup> Australian Institute of Health and Welfare 2023, Australia's Youth: Mental illness, viewed 19 January 2023, accessed via: <<https://www.aihw.gov.au/reports/children-youth/mental-illness>>

<sup>20</sup> Centre of Excellence, Orygen Youth Health Research Centre, Parkville, Victoria: The economic impact of youth mental illness and the cost effectiveness of early intervention. Viewed 19 January 2023, accessed via: <[https://www.orygen.org.au/Orygen-Institute/Policy-Reports/Economic-Impact-of-Youth-Mental-Illness/CostYMH\\_Dec2009?ext=>](https://www.orygen.org.au/Orygen-Institute/Policy-Reports/Economic-Impact-of-Youth-Mental-Illness/CostYMH_Dec2009?ext=>)>

<sup>21</sup> Ibid.

## BASIC COST BREAKDOWNS

### Investing in Providing DoNOHarm Training to ACT Government Departments and Agencies

Activity	Annual cost	Cost for 3 years
<b>10 Face-to-face DoNOHarm training sessions</b>	30,000	(+5% p.a)
<b>5 Online DoNOHarm training sessions</b>	15,000	
<b>Training materials</b>	1,000	
<b>Administration and project expenses</b>	9,540	
<b>Total</b>	<b>55,540</b>	<b>175,000</b>

### Funding the Delivery of Thriving Minds to ACT Primary Schools

Activity	Annual cost	Cost for 3 years
<b>Wages - instructors, program delivery coordinators and project coordinator</b>	<b>343,625</b>	<b>(+5% p.a)</b>
<b>Instructor recruitment and training</b>	<b>60,041</b>	
<b>Administration and project expenses</b>	<b>113,000</b>	
<b>Total</b>	<b>516,666</b>	<b>1,628,784</b>

This funding would enable MIEACT to deliver Thriving Minds sessions to approximately 4000 students in 150-160 classrooms at 30-35 ACT Primary Schools annually.

## Funding the Continuation of the YAM Program in the ACT

Activity	Annual cost	Cost for 3 years
<b>Wages - instructors, program delivery coordinators and project coordinator</b>	<b>259,493</b>	<b>(+5% p.a)</b>
<b>Instructor recruitment and training</b>	<b>44,742</b>	
<b>Administration and project expenses</b>	<b>85,315</b>	
<b>External evaluation</b>	<b>40,000</b>	
<b>Total</b>	<b>429,550</b>	<b>1,355,000</b>

This funding would enable MIEACT to deliver YAM to approximately 3000 students in 100-120 classrooms at 14-16 ACT Secondary Schools annually.



MIEACT acknowledges Aboriginal & Torres Strait Islander peoples continuing connection to Country and their ongoing contribution to our community.



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