**Increasing Resilience in Young People**

**Harwood Conversations held with 100 high school students across**

**four public high schools in 2018**

**Themed on Mental Health and Wellbeing**

*The Stronger Families Alliance conducted eight conversations with 100 high school students from four schools using the Harwood methodology in 2018. We wanted to find out what young people thought about their mental health, and what they required both from each other and from adults in order to attain and maintain their own wellbeing. After gathering the information, we followed the recommended Harwood guidelines of analysing themes that emerged across multiple conversations, and looked at what resonated time and again to gain a better understanding of “public knowledge”. By using this approach, we were able to distil what young people aspired to in terms of mental health and wellbeing, as well as some of the obstacles that prevented them from attaining a state of flourishing. We also outlined some of the actions that young people told us would make a difference.*

*Each group contained between seven and 15 participants aged between 12-17 years (Years 7-11). There was a good spread of ages and as many males as females. There were a few young people who identified as gender fluid.*

**Aspiration: When young people think about their mental health they want to have a clear mind to be able to make good decisions, they want to feel good about themselves, be peaceful and in control and have positive plans for their future.**

**Major Issues - They face four major issues in achieving these aspirations:**

* **Achieving positive and meaningful communication with their parents and other significant adults.**
* **Achieving positive and meaningful communication, and social interaction, with each other (their peers).**
* **Stress created by their own and others’ expectations, particularly, but not exclusively, related to exams and assessments.**
* **Knowing how to deal with major mental health issues (when these issues are encountered either by themselves or their friends).**

1. **Achieving positive and meaningful communication with their parents and other significant adults.**

Trust and having positive, open communication with parents and other significant adults is a very important theme for young people. They want their parents to take the time to listen to them and not trivialise their issues by saying “you will be alright”. Commuting parents in the lower mountains can be stressed and busy. Upper mountains parents have other pressures, but young people stressed their need to be listened to and supported. A number reported having a very close and trusting relationship with their parents, while others felt not listened to.

Young people need openness and trust in order to effectively engage with adults. Adults don’t have to have the answers but they do need to listen and be empathetic. There was acknowledgement when this did occur eg a senior staff member at one school was praised for her listening skills and ability to be fully present. At the same time, young people were wary of burdening their parents. *“Kids are worried about saying things to their parents as they don’t want their family to worry.”*

Schools are trying to do the right thing but are not imparting “coping skills” or providing opportunities for listening to what young people are saying they need. Young people “*should be taught how to cope*”. They also need to know when to ask for help, to recognise “*when something is wrong…and not be afraid to reach out*.” They had the awareness that ignoring problems can lead to acting out (being rebellious) and drug and alcohol abuse. There was still a stigma around mental health, such that *“people hide their issues, don’t talk about it with their friends which makes it boil up inside them.”*

Mental health and wellbeing classes tend to be delivered “lecture style” and provide information to young people but are not teaching coping skills, or how to help friends experiencing distress. *“It’s a topic no one wants to touch and when something happens, no-one knows how to handle the situation, people don’t know how to respond.”* Young people need to be taught explicit coping skills in order to deal with a wide array of mental health issues, not just anxiety and depression. They are very good at distinguishing the difference between depression and sadness, and are wary of medicalising normal human emotions, which they feel sometimes happens. More than anything, they need adults to help them build a “toolbox” of useful strategies that can be applied in a variety of settings. *“Things like Healthy Harold for mental wellbeing. That’s how the education for younger kids should be done. You need to have the correct coping skills and build on them as you get older.”*

Further, teachers need to have the requisite skills and feel comfortable about teaching mental health subjects. It was generally felt that such subjects were best left up to experts, who had both the content knowledge and ability to answer difficult questions with ease. This would be of particular service to young people who identified battling clinical mental health issues, and who sometimes felt their concerns were inadvertently belittled or trivialised by teachers or other young people. *“ There’s a lot of casual jokes around mental health which further stigmatises things….Joking helps the person making the joke to cope but doesn’t help the person with the issue.”*

Young people need to know who the school counsellors and other helping people in their school are and where they can be found. Some were unaware their school had a counsellor, others felt they had to go outside of the school because of perceived confidentiality issues.

They also need to know what the school processes are for dealing with systemic issues such as bullying, and what the school can realistically do to deal with bullying. There was a pervasive view that bullying wasn’t going away: this was less of an issue than the perception that the school wasn’t doing as much as it could. There is a social justice issue at play for some students who reported that sometimes it was the victim of bullying who was punished for retaliating rather than the perpetrator. *“You retaliate and get into more trouble than the person who started it.”*

A number of young people spoke about the need for safe spaces, supervised by adults, where they could meet in groups to discuss whatever was on their mind. These groups were seen as a way of building connection, confidence and meaning. *“I trust you because you’re asking questions. In a hall you’re getting spoken to, it’s not a discussion, you’re getting told. There’s no space for meaningful discussion or ask for information you want to know.”*

1. **Achieving positive and meaningful communication, and social interaction, with each other (their peers).**

The challenges of social media and bullying dominated conversations in the context of how young people communicate with each other. *“When you’re texting there is no personality to it, you’re disconnected.”*

Bullying was cited as a pervasive activity, with many young people wanting to better understand the psychology of bullying. They also wanted to better understand the limits of what schools could realistically do. Many felt that schools weren’t doing as much as they could. *“Teachers should be asking why, they can figure why the situation is happening. It’s all confidential. We don’t get an insight into why, what process they go through.”*

Social media had advantages and disadvantages. It was seen as being here to stay and has many benefits but there are issues with social media that impact on mental health. These include replacing face to face communication with impersonal communication and the isolation that brings, along with addiction to games, and the many ways that social media feeds social anxiety and negative self image. Young women were more inclined to talk about body image issues, but young men also had an acute awareness of social media pressures. “ *Body image can be a big factor in mental health. Our society is driven by people wanting to fit in and it’s often unrealistic.”*

Bullying on social media was mentioned often. The pervasive nature of being connected 24/7 or risk FOMO were also cited frequently. In general, young people felt that adults weren’t equipped to help them navigate this terrain as no previous generation has had to deal with the insidious and all-encompassing aspects of social media. It was up to young people to find solutions to social media problems.

Young people who identified as LGBTQI spoke about discrimination and social isolation. *“There are issues that come with LGBT, anxiety and depression, they need to be spoken about more. We don’t know how to get help or talk about it.”*

1. **Stress created by their own and other’s expectations, particularly, but not exclusively, related to exams and assessments.**

Exam pressure was a big issue. The emphasis placed on the HSC as the “be all and end all” of lifetime success was seen as unrealistic, stressful and unnecessary. Young people said that adults were aware there was an exaggerated emphasis on the HSC but still bought into the hype. Students want to be more informed about alternative pathways available to them if they aren’t academically inclined. *“Everyone gets stressed in the HSC, and there are many other options even if you fail.”* Many spoke of the narrowing of pathways that has been taking place over time whereby everyone is expected to attend university. Some of the older students were sad about having to give up hobbies they enjoyed to concentrate on school work they didn’t enjoy. They want “success” to be defined by parents and teachers in less rigid terms and not be conflated with academic success. *“Finding a way to integrate study into other aspects of a person’s health and finding balance”* were seen as paramount.

*“A lot of people don’t know what they want, they feel low and can’t connect to anyone, they don’t have confidence, they feel lost.”* The pressure to choose subjects at a young age that determine career choices was a burden to many.

A fear of being judged sometimes arose with their peers in terms of opinions, behaviour and appearance.

Young people felt a huge responsibility for saving the planet, with climate change seen as a mess created by adults.

1. **Knowing how to deal with major health issues (when these issues are encountered either by themselves or their friends**

Young people felt there was a definite generation gap in adults’ understanding what they are experiencing and the impact of technology on wellbeing. They felt there was more social diversity than ever but this diversity was not always accepted by their peers or adults. Some young people continued to experience homophobia and racism, and this caused a great deal of mental health distress. *“LGBT, a friend was walking down the street…then started getting called slurs and having stuff thrown at them.”* Being expected to conform to gender stereotypes was also a cause of serious distress for some young people.

Young people very much want to help their peers encountering mental health difficulties but feel ill equipped to do so. They need more practical skills to help them help friends get the right type of support. *“ We need to learn how to respond, it’s mentally draining for you, too, as a friend as you are responsible for making sure they’re ok, have to be on call like 24/7, making you always on edge and have adrenaline running.”* They don’t feel that adults and parents know how to help either. Parents *“don’t know how to cope…Either they don’t take it seriously or blow it out of proportion.”* Some felt that getting support from a slightly older young person may be helpful. “*Finding someone who has experience with dealing with mental illness who’s maybe 19, not a teacher so you’re comfy and can relate to.”*

**Actions that would make a difference**

* Better awareness of practical services and available support for young people experiencing mental health concerns
* Better knowledge and explicit teaching of coping strategies to deal with mental health issues within the curriculum. Lessons can’t be one-off and need to be reinforced
* Mental health curricula and school based programs expanded to cover more topics than anxiety and depression, and emphasise the building of skills in addition to knowledge
* Creation of informal opportunities for students to meet counsellors around the school – counsellors need to be seen in the corridors and elsewhere in the school to help set up an environment of trust
* Improved informal access to counsellors at school and knowledge of who the school counsellors are
* The availability of small peer support groups in safe physical spaces to explore issues, and where young people can express themselves without judgement
* The delivery of mental health curricula by experts who can impart both information and practical skills, and who are comfortable with the subject matter
* Increased opportunities for community connection and community events for all ages
* Increased opportunities for young people to explore outdoors with their peers away from adult supervision
* Enabling young people to implement a strategy to make outdoor, nature based activities attractive to other young people
* The provision to young people with information about alternative pathways and post-school options
* Upskilling young people to have good boundaries in place regarding social media, emotional self regulation and the management of stress and pressure.
* The teaching of knowledge, information and coping skills to help young people help their friends
* Peer support programs to help people deal with mental health issues