

YOUR Student Culture ... What are yours?







PRESSURE POINTS
WHAT AUSTRALIANS SAID...
ARE THESE COMMON FOR
YOURS?
CHECK YOUR ASSUMPTIONS ?

PROTECTIVE FACTORS
WHAT AUSTRALIANS SAID...
ARE THESE THE SAME FOR
YOU?

FIT FOR PURPOSE?

FIT FOR OUR TIMES?

THINGS YOU CAN DO

NOW!

STUDENT STORIES

"Universities need to have inclusive and safe spaces for people to escape to"

"I applied for 26 universities – clinical psychological masters program (all over Australia) and got knocked back for all of them ... apparently I'm not good enough even with 10+years of clinical rural experience, working with the most vulnerable groups, , spoke at multiple conferences, published a peer review paper, having supervised 2 psych registrars passing their national psych exams – I have 5 students now .. My own professional peers refuse to let me study! Many of my psych students that have graduated do not feel their mental health are even taken into consideration."

'Reverse Mentors' – check your assumptions

What are they socialized to do, socialized to know?

40 Tribes – Bwgcolman Country – PALM ISLAND / 40 Nations

• Where am I today and how is it important to you !?





Ways of learning / ways of help-seeking

Example: Men and Clinicians – it's a health equity issue ...!
 ClinPSY Dr Zac Seidler (Movember Funded)

https://www.sbs.com.au/news/the-feed/high-therapy-dropout-rates-reveal-failure-to-connect-with-men-study-shows

Situational Mindfulness

- allowing the action of study include these tips

Assignment Mindfulness

- simple measures – global outcomes

Professions taking the lead

Disaster – 'an authorizing window'

Floods – Earthquakes Tumaini– **Covid**

Policy

PDF LINK: PILLAR SIX Pages 21-23

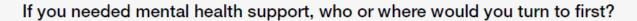
http://www3.weforum.org/docs/WEF Da vos Lab Youth Recovery Plan 2021.pdf

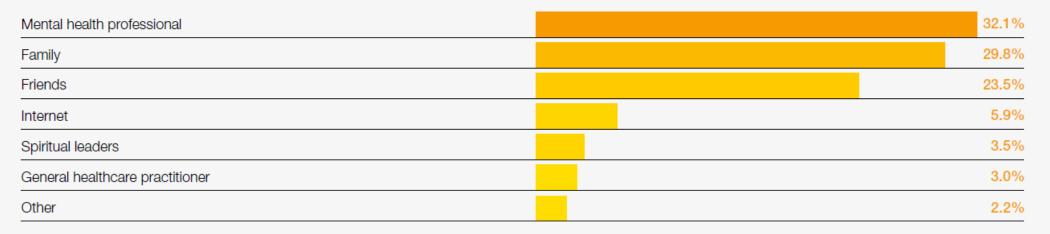


World Economic FORUM - Youth Recovery Plan - August 2021

https://www.weforum.org/reports/youth-recovery-plan

| Yes | 98.39 |
|---|--|
| No | 1.79 |
| What prevented you from reaching out to a mental health professional at a time when | vou needed help? (Select all that apply) |
| | |
| The feeling that this is something I could deal with on my own | 24.69 |
| Financial barriers (cost) associated with mental health services | 22.89 |
| Lack of awareness about mental health services available to me | 13.69 |
| Fear of being judged by others for seeking help | 10.39 |
| Lack of awareness about mental health problems and disorders | 10.39 |
| Disruption in services due to COVID | 8.29 |
| Lack of access to remote services (e-counselling, video conferencing) | 6.49 |
| | |





Source: Davos Lab Survey results

Davos Lab: Youth Recovery Plan 21

EXTRA READING:

https://unitedgmh.org/listening-young-peoples-mental-health-stories-guide-recovery-now-and-future

Supported by the National Mental Health Commission of Australia, batyr partnered with researchers at ConNetica to conduct a thematic analysis on young people's stories to learn what commonly contributed to experiences of mental ill-health and recovery.

- Some of the factors contributing to mental ill-health identified were:
- Perfectionism
- High expectations on young people from parents, society or at times themselves
- Trauma

Factors contributing to recovery included:

- Self-acceptance
- High quality therapeutic relationships
- Receiving unconditional love. Having an anchor person who held onto hope when it was difficult to do so themselves was significant.

thematic analysis



Table 3 below illustrates these 4 themes and associated key elements.

Table 3 - Being Herd - Themes & Associated Elements of Young People's Lived Experience of Mental ill-health & Recover

| | Table 5 - Being Herd - Memes & Associated Elements of Touring Feople's Lived Experience of Membal III-Health & Recovery | | | | |
|----------|--|--|---|--|--|
| nes | Personal and Contextual Journeys (non-linear) | | | | |
| Themes | Precipitating Factors | Additional Variables | Transition to Recovery | Recovery & Wellbeing | |
| Benefits | High expectations - general societal, family and self-striving Family history of mental illness Family communication difficulties Perfectionism - free of failure Childhood anxiety - not addressed Poor coping skills Low self-esteem Self-stigma | Experiences of trauma in general and included family violence and sexual assault (high frequency, varied impact) Bullying, discrimination, exclusion and/or isolation (high frequency, varied impact) Family separation (moderate frequency, major impact) Migrant family background (low frequency, major impact) Relationship breakdown (low frequency, major impact) Sexual Identity (low frequency, major impact) Difficult transitions (moderate frequency, moderate impact) Alcohol and other drug use/abuse/bingeing (low frequency, major impact) | 'Anchor person' who holds fast with unconditional love and/or support Persistent reaching out for professional help. Multiple attempts to find the 'right' support Finding a 'good fit' therapist/ professional for long enough (often a few) Reconnecting with others Taking time out for self, and/or slowing up Developing a range of self-care practices Stopping or reducing alcohol and other drug consumption/use Supportive school/university/ workplace policies Changes in career, study, friendship groups | Acceptance of self Anchor person Quality therapeutic relationship - effective professional care Social connections - plenty of social scaffolding Unconditional love/support of parent-s/sibling-s/friend-s Common variable - effective medication Common variable - forming an intimate relationship | |

Worth a look at ...





Roses in the Ocean

stemming the tide of suicide



Date Claimers

- 10th September International Suicide Prevention Day Hope through Action 2021 Theme
- 8.00pm YOUR TIME light a Candle for hope and remembrance and HASHTAG #AMHHEC2021

