



Commissioner for Children and Young People
Western Australia



Caring for the future growing up today

Speaking out about mental health

The views of Western Australian children and young people

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Alternative formats

On request, large print or alternative format copies of this report can be obtained from the office of the Commissioner for Children and Young People WA.

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“Healthy minds have the ability
to do...anything!” boy 11

Commissioner's message



In December 2007, I was appointed the first Western Australian Commissioner for Children and Young People. The *Commissioner for Children and Young People Act 2006* sets out my role, including my responsibility to promote and monitor the wellbeing of children and young people in Western Australia and to promote the participation of children and young people in the making of decisions that affect their lives. In carrying out my functions, I must also give special consideration to the needs of Aboriginal and Torres Strait

Islander children and young people and to those who are vulnerable or disadvantaged in some way.

Throughout 2010 and 2011, my office undertook an Inquiry into the mental health and wellbeing of children and young people in Western Australia (the Inquiry). The purpose of the Inquiry was to report on the mental health and wellbeing of children and young people, and to make recommendations about how to strengthen mental health and wellbeing from before birth through to young adulthood. The Inquiry considered the whole spectrum of children and young people's mental health needs, including promotion, prevention and intervention services from the very early years of a child's life.

My office worked hard to ensure that children and young people had the opportunity to share their views about mental health. A number of different consultative mechanisms enabled me to hear from a diverse range of more than 700 children and young people

aged between seven and 23 years, including Aboriginal children and young people, children and young people living in culturally and linguistically diverse and rural and remote communities, young carers, children and young people in care, young people with diverse sexuality and gender¹ and young people in juvenile detention centres.

This publication summarises the views of these children and young people. It also draws on my *Speaking out about wellbeing* research, which was commissioned in 2009.

All the information gathered through these processes will inform my future work in advocating for better mental health outcomes for children and young people.

I would like to thank the children and young people, as well as the staff of the many organisations and agencies who participated in the Inquiry, for their honesty and expertise and their willingness to contribute to improving the mental health and wellbeing of children and young people in Western Australia.

A handwritten signature in black ink that reads "Michelle Scott". The signature is written in a cursive, flowing style.

Michelle Scott
Commissioner for Children and Young People
May 2011

Acknowledgements

The Commissioner for Children and Young People thanks the many organisations, agencies and individuals who shared their stories, insights and expertise as part of the Inquiry into the mental health and wellbeing of children and young people in Western Australia.

- Commissioner for Children and Young People's Advisory Groups:
 - Student Representative Council – Beckenham Primary School
 - Indigenous Youth Council – Geraldton Streetwork Aboriginal Corporation WA
- Funded consultations:
 - Department of Education – Regional Secondary School
 - Carers WA
 - CREATE Foundation
 - Halo Leadership Development Agency
 - Metropolitan Migrant Resource Centre
 - Regional Development Australia (Wheatbelt)
 - WA AIDS Council's Freedom Centre
- Commissioner for a Day Challenge entrants
- Children and young people who shared their views through other submissions to the Inquiry



Introduction

Speaking out about mental health – The views of Western Australian children and young people is one of three reports published by the Commissioner for Children and Young People (the Commissioner) as a result of the [Inquiry into the mental health and wellbeing of children and young people in Western Australia](#). It is the second publication in the *Speaking out* series, which captures and promotes the views of children and young people on particular topics.

The Commissioner developed various strategies to ensure children and young people's views about mental health were heard. Submission packs were provided specifically for children and young people so they could make their own submissions. Small grants

were provided to specific organisations to undertake consultations with children and young people. The majority of these organisations were approached because they work with vulnerable groups that could participate and share their views.

More than 700 children shared their views

In addition, organisations were encouraged to include the voices and views of children and young people in their submissions to the Inquiry. Some of the questions children and young people were asked included:

- What things affect your mental health?
- What are ways that you keep yourself healthy?
- What mental health problems do children and young people have?
- Who would you speak to or where would you go if you thought you needed help for a mental health issue?
- Do you know what mental health services there are in your area?
- How can the mental health of children and young people be made better?

- How can adults do better to help young people to keep well and support them when they have mental health problems?

Through these processes, more than 700 children and young people aged between seven and 23 years shared their views with the Commissioner about what mental health means to them.

The Commissioner heard from Aboriginal children and young people, children and young people living in culturally and linguistically diverse and rural and remote communities, young carers, children and young people in care, young people with diverse sex, sexuality and/or gender and young people in juvenile detention centres.



Speaking out about mental health also summarises the views of children and young people gathered from the Commissioner for a Day Challenge 2010, and draws on the Commissioner's wellbeing research which was commissioned in 2009 and asked children and young people across Western Australia their views on what is important to their wellbeing.

The Commissioner's wellbeing research provided a rich insight into the wellbeing of children and young people. The research found the majority of young people are faring well, but it did highlight some areas of concern. In particular, these concerns were around family conflict, bullying, the negative impacts of drug and alcohol use, stress and peer pressure.

The wellbeing research also suggested that children and young people needed eight things to live a full life – a loving and supportive family, good friends, fun and activity, a safe environment, a good education, the basics, acknowledgement and freedom and independence.

Some similar themes emerged from children and young people's views submitted to the mental health Inquiry.

Broadly, children and young people's views about maintaining positive mental health were around feeling healthy, positive, loved, acknowledged and informed. Many were able to clearly articulate the inter-relatedness of physical and mental health. They also thought that education had an important part to play in breaking down negative stereotypes about mental health, as well as in promoting help-seeking behaviours.

They kept positive and happy by participating in sports and having hobbies, as well as spending time with friends, family and pets. Many children and young people also spoke about a connection to the natural environment and how this provided a source of comfort and happiness. This was particularly relevant for Aboriginal children and young people.



Children and young people also had some concerns about their mental health and in some cases were dealing with significant hardship and distress. Some young people felt depressed. Others felt the negative impacts of peer pressure and the stresses of keeping up with school work and jobs, or faced significant disadvantage as a result of family conflict. Some children and young people care for parents with a physical or mental illness or a drug or alcohol problem and lack adequate support for themselves and their families. Others knew they needed help, but either didn't know where to go, couldn't access any services, or were too embarrassed to ask.

The experiences that children and young people have with their families, friends, at school and in the community contribute greatly to their mental health. Positive experiences in the early stages of life equip children and young people to deal with challenges that may arise later. Negative experiences may undermine a child or young person's capacity to cope with challenges, which may lead to the onset of more significant mental health problems.

In a great deal of mental health literature, factors that help or hinder mental health are described as 'risk factors' and 'protective factors'. Protective and risk factors are explained in more detail in the Summary section of this report.

Summary

Positive mental health and wellbeing are important for people of all ages. It is widely accepted that mental health is more than the absence of mental illness. Mental health for children and young people can be defined in the following way:

Mental health for children and young people has a strong inter-relationship with normal growth and development. Mental health for children and young people means the capacity to enjoy and benefit from a satisfying family life and relationships and educational opportunities, and to contribute to society in a number of age-appropriate ways. It also includes freedom from problems with emotions, behaviours or social relationships that are sufficiently marked or prolonged to lead to suffering or risk to optimal development in the child, or to distress or disturbance in the family.²

The factors influencing mental health are broad and varied. The Western Australian Aboriginal Child Health Survey found the three major facilitators of optimal social and emotional wellbeing in children and young people are:

- intellectual flexibility coupled with an outgoing, easy temperament
- good language development
- emotional support, especially in the face of challenge.

In addition, the survey identified four constraints on optimal social and emotional wellbeing in children and young people:

- stress that accumulates and overwhelms
- chaos
- social exclusion
- social inequality.³

In a great deal of mental health literature, these and other facilitators and constraints are described as ‘risk factors’ and ‘protective factors’.

- Risk factors are associated with an increased probability of onset, greater severity and longer duration of major health problems.
- Protective factors refer to conditions that improve people’s resistance to risk factors and the development of mental illness.⁴

Risk and protective factors can be individual, family or community related, social, environmental or economic. High quality mental health promotion and prevention activities target these risk and protective factors as they are proven to have a connection to the onset of mental illness.⁵

Protective factors

Enhancing protective factors is important for developing and maintaining good mental health in children and young people. Some of these factors include supportive and caring parents, consistent parenting style, good social skills, adequate nutrition, positive school climate, opportunities for success and recognition at school, good physical health, strong cultural identity and economic security.⁶



Risk factors

There is a range of risk factors associated with poor mental health in children and young people that can potentially influence the development of mental illnesses.⁷ Some of these factors include poor health in infancy, low parental involvement in a child's activities, family violence and disharmony, parental substance misuse, bullying, school failure, problematic school transitions, physical, sexual and emotional abuse, poverty/economic insecurity and a lack of support services.⁸

During the Inquiry consultations, children and young people shared ideas about what contributed to good mental health and feeling well and, conversely, to poor mental health and feeling unwell.

They described positive contributors to mental health, which were very similar to protective factors. Some of these contributors included feeling healthy both physically and emotionally, feeling positive about life, feeling loved and cared for, feeling acknowledged, feeling connected and feeling informed about mental health issues broadly.

Children and young people also spoke about some of the negative contributors to mental health problems. They spoke about feeling alone or isolated if they were not

connected to support networks, community facilities or appropriate services, feeling uninformed and therefore unable to seek help when they needed to, or feeling unloved due to family conflict. They also spoke more specifically about feeling down or sad, feeling pressured, feeling different and feeling bored, which were very similar to risk factors.

There were some factors that impacted significantly on children and young people seeking the help they needed. Broadly, these related to stigma, cost and lack of access to services. Some young people were also worried about confidentiality when speaking with adults about their problems, particularly in the school environment and in regional and remote areas.

The consideration of children and young people's feelings is important in gaining a deeper understanding of children and young people's views about mental health – including how risk factors can be mitigated and protective factors strengthened.



“The best thing for your mind and body is to exercise.” girl 11

Feeling healthy

Children and young people spoke about how they kept physically healthy by eating the right foods, getting enough sleep and exercise, and staying away from drugs and alcohol. They said that doing these things had a positive effect on their mental health. They showed a good understanding of the linkages between mental health and physical health.

“If you eat healthy, you will not have to experience what you feel when you eat bad food. Flavours are added so that while you are eating, you will feel very happy. But when you are finished, you will feel really down.” girl 10

“You need a good sleep to rest your whole body for the next day.” girl 10

“Stay away from drugs and alcohol.” girl 14

“Although food doesn’t sound like it relates to being mentally healthy, it plays a big role because what you eat determines your attitude and your behaviour.” girl 11

“Stay away from drugs and excess alcohol, so as not to kill brain cells, there’s no getting these cells back.” girl 11

“It’s...good to ride, walk, run, jog up a pretty steep hill. Then your pulse would be working fantastically.” girl 9

“I would encourage people to eat the right foods and to play sports and have enough sleep.” girl 10

“Eating healthy foods (two fruits and five veg a day) which makes you also feel better and happier.” boy 12

“It is very important to drink lots of water in order to wash out the rubbish in your body.” girl 11

“I keep fit and active. This means I’m getting exercise having fun and staying away from sad and lonely thoughts.” girl 12

“Sleep is a huge factor in staying mentally healthy as without it your mind can’t focus properly.” girl 12

“Eating healthy food is good because you get plenty of energy to keep fit.” boy 12

“Getting enough sleep helps me...because if I don’t get enough sleep I get angry and won’t listen to anyone.” boy 12

“To stay fit I try to walk both my dogs everyday plus go for bike rides on the weekend.” girl 11

“[Having] enough sleep is the basic foundation for a wonderful new day.” boy 17

“Take care what you eat like when you get up; make a good healthy lunch.” boy 14



“Go out and do something you love doing.” girl 11

Feeling positive

Feeling positive was a key contributor to mental health. Children and young people had different strategies for staying positive. For most it meant spending time doing things they enjoyed, such as sports or other hobbies, or having fun with friends, family and pets.

“I don’t know about you, but whenever I’m bored, I find it a great way to make myself happy and having fun by doing my hobbies.” girl 9

“One way to keep yourself happy is to relax and enjoy your hobbies.” girl 11

“Try to do a sport to take your mind off what’s going on, it works for me.” girl 11

“I keep myself mentally active and healthy [by going] for a relaxing and refreshing walk down the beach. It lets my mind go at ease.” girl 12

“Whenever I am sad or upset there’s almost nothing better than letting loose and singing one of my favourite songs.” girl 12

“Celebrate the small things in life, because each small thing can build up to be a huge thing, that’ll make you consider that today is the best day of your life.” girl 16

“When you’re celebrating ...occasions you’re celebrating life, and life is a wonderful thing.” girl 11

“Be proud of who you are.” boy 12

“My mind really unwinds when I see, hear and feel nature all around me.” boy 11

“What’s the point in being alive if you don’t enjoy it?...be positive towards life.” girl 10

“I keep mentally healthy...by being with animals. I have two dogs and when I get emotionally tired after having a hard time at school or getting stressed about something at home, going outside and seeing two happy dogs excited to see you, just makes you feel bright again and thinking of what’s good in life.” girl 12

Positive self-talk was a strategy that some children and young people used to stay mentally healthy.

“Feel good about yourself, it doesn’t matter what you look like because everyone is different.” boy 10

“Thinking about the happy and positive parts of life (block out the worries and black clouds).” boy 12

“Just smile.” girl 10

Some children and young people spoke about setting achievable goals for themselves so they could experience a sense of accomplishment.

“Create goals, so when you achieve them you feel happy.” boy 10

“Continue looking towards the future and keep to your goals. I think goals can be little or big, but you have to keep trying to achieve them.” girl 13

“If you be loving to others they’ll be nice to you which will make happiness.” boy 10

Feeling loved

Feeling loved and cared for was a major contributing factor to good mental health. In most instances, it was the care and support of family that children and young people turned to first when they were having problems. Having a stable home life and good friends was very important to children and young people.

“Friends and family plays an important role in staying mentally healthy. They support encourage and are someone to talk to and most of all they are people who love and care for you. So that’s why you keep your friends and family close.” girl 10

“Friends and family encourage us to do the right thing. They also help you with all your problems big or small. They are people you can talk to about your feelings or problems.” girl 10

“Spending time with family and friends is very important because it keeps you happy (especially friends). It is important to keep your friends and family close!” girl 11

“I think that children of all ages should be cared for more than anything. In our life kids are our first priority.” undisclosed

“Spending time with your friends will encourage you to be more happy and not shy.” girl 11

“A cuddle with family always helps as in my opinion you just need someone who is caring and supporting and you won’t have any problems.” girl 12

“Be loving to others.” boy 10

“A stable living environment would stop mental health issues from happening.” girl 15

“My mum knows me better than anyone and I can tell her anything.” young person

“My main support comes from my family. They support me with decisions I make.” female 18

Family conflict had a devastating impact on the mental health of children and young people.

“Unhappy means to me that people are not getting enough care in their life from their parents or family members...if children are sad they think we don’t love them and that can cause harm to the child and when I felt that my dad and my mother didn’t want me I felt very sad and lonely but also if I had thought that they hated me so much I would have hurt myself quite a lot.” undisclosed

“When I was about four Pop died and my dad started drinking a lot and started flogging my mum in front of me and my brothers and sisters.” boy 17

For some Aboriginal children and young people, feuding between extended family members was particularly damaging.

“I don’t even know why I can’t talk to my cousin.” undisclosed



“Talk more to kids. Ask them about their day. Listen.” young person

Feeling acknowledged

Many children and young people reported that sometimes they do not feel acknowledged, valued and listened to, whether it was at school, in the community, or when seeking help. They expressed a great desire to have their opinions heard and to be treated with respect. Many reported that when they receive encouragement and praise they feel happier and emotionally stronger.

A common theme that arose throughout the Inquiry consultations was that more ‘workshops like this’ would be helpful, to allow children and young people to express their opinions and share ideas in a safe, non-judgemental environment.

“Some people think that because we’re kids or younger that we don’t understand the feeling of stress but every kid or teenager understands the feeling. The people who treat us like we’re too little to understand should stop it and maybe that might stop most of the complications with people and teenagers or kids.” undisclosed

“Respect teenagers like adults, listen to their opinions.” young person

“I think that what we need to do is not judge people’s maturity by their age. I know that I was completely mentally aware by the time I was 10 and I was still treated as a child. It really made me feel inadequate as a human being.”
boy 16

“Oh, this is a little kid. What’s he going to know...he doesn’t know anything.”
boy 12



“I get talked to a lot but not included.” young person

“The doctors should listen more, they just make notes and don’t tell me anything.” young person

“I think some places see young people with mental health issues as being a ‘phase’ and therefore do not treat it as a serious matter.” girl 17

Some young people with multiple or complex issues felt that their individual needs were not acknowledged or considered and that services were not equipped to help them.

“Many psychs refuse to see someone if they have even the slightest sign of something they don’t specialise in. I couldn’t be seen for depression by a psych because I was also displaying symptoms of EDNOS [Eating Disorder Not Otherwise Specified].” boy 17

“Telling someone who has an eating disorder that they have not yet lost enough weight to be seen by an ED clinic is BAAAAAAD!” female 18

“Telling someone on suicide watch that if they self harm they cannot receive any mental health support.” young person

“Being teased by the nurses because of my nature and the circumstances of being sent there did not improve my mental health.” female 20

“Keep in touch. Talk to friends and relatives, join sporting clubs, feel free to talk to someone. You are never alone.” girl 9

Feeling connected

Feeling connected was important to children and young people. To them, this meant connections to friends and family, school, the community and appropriate services, if and when they needed them.

“Because we don’t have the opportunity to mix and socialise with lots of people, we actually need events for young people more.” young person

“I put my hand up for all sorts of things at school – looking after the younger students, cooking at camp, being in the school play. If you help out with community projects, you keep yourself active out of school time.” girl 13

For Aboriginal children and young people, strong connections to family and culture were very important.

“I go home, go out bush, spend time with the family.” young person

“Get back home to be with family, to be able to do cultural things, and probably go out bush hunting and doing all them things.” undisclosed

Being able to share experiences and having someone to talk to about problems were very important for children and young people. This could be with a friend or family member, a counsellor or youth worker or another adult they trusted. The experience was particularly powerful when the person had experienced a similar issue themselves.

“Sharing experiences. Learning I’m not alone.” male 18

“Talk to people about any problems have, there will always be somebody to be lonely.” girl 11

“I would encourage all children young people to share their stories, share their experiences of a mental health issue they have encountered life...it’s like creating a community possibly online or somewhere you can go to.” girl 16

“Getting stuff off my chest just makes me feel amazing, especially when they know what I’m talking about or they can relate a little through their own experiences or how they dealt [sic] with it from an outsider looking [in].” girl 17

“I would go to someone else who has the same problem...my friends understood most because they’re younger. They’re easier to talk to. It helps to share your problems with other kids who are going through the same problems.” girl 15

Children and young people also spoke about feeling alone and the impact this had on their mental health. Trying to deal with challenges and hardships without support can be particularly damaging for children and young people.

“I was always alone. It was hard to make new friends all the time. To keep friends I ditched school so I could hang out.” young person



Feeling connected

"You can get it [mental health problems] if you're lonely." male 23

"It was hard for me living with depression and not getting the regular support I needed because I didn't know where to go or where to turn." girl age undisclosed

"Feeling alone and isolated can be a major contributor to ill-health in teens, especially queer teens. Proper education helps us feel less alone." young person

"Where contact wasn't made for a number of weeks I felt left out and forgotten." young person

*"[I feel] deserted – can't hack this; feel like killing myself."*⁹ young person

Some children and young people weren't able to access the services they needed - due to long wait lists, financial restrictions, poor referral processes, or an absence of an appropriate service altogether.

"There should be more places where you can go and not worry about making an appointment or waiting to be booked in. It is wrong that people in need of help should have to wait for someone to help them." girl 14

"[I] can't afford it." undisclosed

"[We need] more DSG friendly counsellors, doctors and helplines." young person

"[We need] more complimentary [sic] therapy/less emphasis on the medical model." young person



“I believe young people aren’t educated enough about positive coping methods.” girl 16

Feeling informed

The importance of feeling informed about mental health issues was a message that children and young people articulated throughout the Inquiry consultations.

They wanted more education at school and in the community to teach them about mental health issues and to help them if they had a problem.

“If they brought in a subject that was taught every day and was mandatory in all schools, based on building self-esteem, how to redirect thoughts in a positive way...this could work, and would change the life of millions.”

young person

“[We should] help young people in self-discovery, that it’s ok to share stories with school mates, not keep it a secret that we go through stuff. Empower [young people] that it’s ok to talk about it – have school curriculum on topics like self-care, challenges of teens even at primary school. Help us to empathise and have compassion for each other rather than compare one’s situation to another and judge.” boy 17

“Education about mental health problems is key. It’s important to make young people realise that there’s no shame in seeking out a psychologist or counsellor to deal with their problems and that’s a far better idea than self-medicating with drugs or alcohol.” male 18

“Just one class in health or something that covers the subject of how to deal with it – why not to hurt yourself or let others control you at your weak points would help us a lot in school.” young person

Some children and young people spoke about the importance of education and care being available early on, to prevent problems arising over time.

“More preventative mental health care [is needed]. A lot of times schools and work places are not willing to start helping children with their mental health issues until it is actually a big serious problem.” girl 17

Education was also considered to be a powerful way of encouraging children and young people to embrace difference and break down prejudices and stereotypes. This was raised particularly by young people with diverse sexualities and genders.

“More awareness, more teaching to the general public to lessen the bias against having a mental health issue, and receiving treatment for having mental health issues.” girl 17

“EDUCATION!! We need rounded, non-biased sex, gender and health education in high schools. Defeating ignorance will combat bullying, a major contributor to ill mental health in queer youth.” young person

“[We need] more education about mental health in schools. Safer ways of promoting having fun... education regarding diverse sexuality and gender is ignored completely in some schools. I was never taught about it properly in school.” boy 17

Some children and young people wanted to get help for a mental health problem but they didn’t know where to start looking.

“There needs to be more information available. I wouldn’t know where to go if I thought I was becoming mentally ill.” boy 15

Feeling informed

“People need to know about counselling and how to get help, I’m lucky I have this [counselling] but others might not know how to get the support.”

young person

“I wouldn’t know what a symptom of being mentally ill was.” girl 15

“The reason why I didn’t go and get help? Embarrassment and not enough awareness on what I had.” young person

Others knew they needed help, but out of fear, shame or embarrassment they did not access the help they needed. The stigma associated with mental health problems had a major impact on help-seeking behaviour.

“I don’t want to go to an office, someone might see me.” young person



"Bullying feeds depression." girl 17

Feeling sad

Children and young people experienced feelings that they described as depression, sadness or feeling down. Bullying was identified as a major source of these feelings.

"It is not right if you have a problem and decide to tease or take it out on someone else, or just because it's fun, half the time it hurts and destroys people's lives, they may end up killing themselves and destroying the other people's lives that try to help." young person

"People need to understand that bullying affects you 'cos you believe what everyone is saying about you and you start acting like what they say." boy 14

"There were 10 gay kids who committed suicide in the last year [2009] due to bullying." girl 15

"Bullying from peers helped cause my depression and my bad behaviour." girl 15

"I feel sad when my friends don't play with me and say mean words about me." girl 7

"When children feel sad they hurt on the inside and feel crushed. Sadness is the worst mental health a child can have." young person

Family conflict and feelings of being different were identified as other contributors.

"I think the biggest problem is caused at home and has a big impact on how children behave...I mean things such as family separation, violence...which causes depression and anger through us teenagers." girl 14

"I don't have depression because I'm gay – but it doesn't help." young person

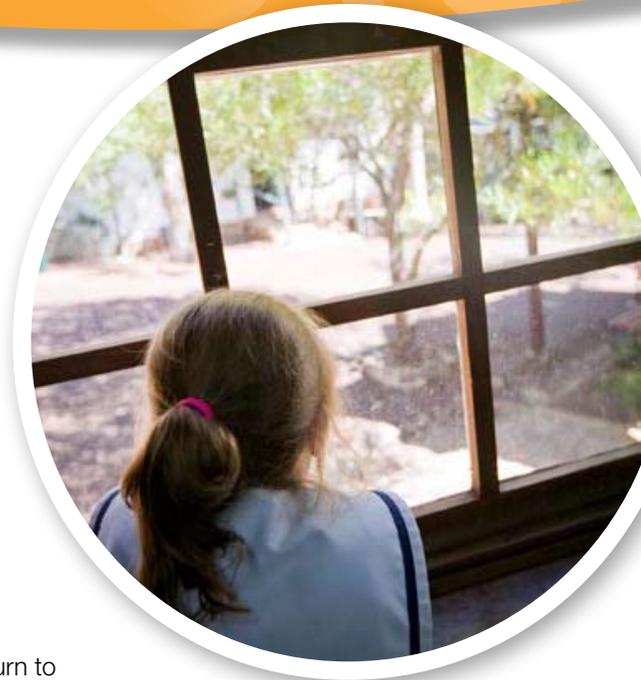
"I usually get quite depressed when I get confused about my gender identity, especially when me and mum argue about it since she doesn't agree." girl 17

"A lot of young people have depression and anxiety. Most have depression or have been [depressed] at some time. One boy at my school has insomnia. I feel sorry for him, he comes to school really sad." girl 15

Some children and young people may turn to drugs or alcohol to self-medicate when trying to deal with mental health problems. Experimentation with drugs and alcohol can also lead to more sustained and prolonged use, which can trigger a range of mental health problems and disorders. Self-harm was also identified by a small number of young people as a coping strategy.

"Mental health issues start when kids turn to drugs and alcohol sometimes as a result of parents having mental health issues." male 19

"[The] affect [sic] of drugs on mental health [is] the same as self-harm." girl 15



“Know that we understand the feeling of stress and need help to deal with this.” boy 14

Feeling pressured

Feeling pressured was a major issue for children and young people. For some it came from the pressures of juggling school work and family commitments. Others felt the stress of change or an unstable home situation.

“All my spare time has been shut down to study and my parents have reinforced that [and] that’s no good because I’m not with my mates and, so yeah a lot of it is just stress, very stressful.” boy 16

“Teachers want us to succeed but the work is too much for us to worry about. We have four different subjects that they expect us to get top grades in everything.” young person

“The curriculum in schools places so much importance on gaining entry to uni so there is a huge pressure to study hard and have high grades. There needs to be an alternative for students who aren’t academically minded.” girl 16



The majority of children and young people said they could cope with these everyday pressures, and some had practical solutions for keeping stress at bay.

“If you’re stressed or mad do something fun or calming like go out to the park, get some fresh air or even have a picnic, maybe listen to some calm music.” girl 10

“Sometimes when I have lots of things to do...I get very stressed. To stop this, my mum tries to help

me make a list of everything I need to do and when. This helps me prioritise things and break them down into easier chunks.” girl 11

“It releases stress by being able to talk. It gives me someone to ask advice. When you’re stressed you can’t think, and when you can release that stress you can make better decisions.” boy 14

When sharing their experiences about the pressures of day to day life, children and young people sought understanding from adults that their feelings were real and justified.

“Please understand that we do know what stress feels like!” boy 13

Peer pressure was cited consistently as a cause of stress, particularly among high school students. It was also a major factor in engaging in risk-taking behaviour such as drug or alcohol use and criminal activity.

“Stress and depression, because there is more pressure to be perfect this [sic] days and look like a modle [sic].” young person

“Sex and drugs is hugely pressured on young people.” young person

“Drug and alcohol use was always around. Peer pressure leads to drug use.” female 19

“Just don’t try drugs if u [sic] don’t want to; it’s your choice don’t make anyone force you to do it.” young person

“Not feeling ‘normal’ was a major factor for my depression.” girl 16

Feeling different

Children and young people spoke about feeling different for a number of reasons. For some it was for cultural reasons. For others it was because of diverse sexuality and gender (DSG)¹⁰, or simply because of ‘not fitting in’. Racial discrimination at school was an issue identified by Aboriginal children and young people.

“A large part of why I used to be so depressed is that I couldn’t accept that I was different. I was bullied for wanting to be a boy and didn’t understand why I couldn’t have a girlfriend.” girl 16

“DSG youths are already confused and the discrimination does not help our mental state!” young person

“Being in high school is tough but being GLBTI¹¹ in high school makes things so much worse.” girl 17

“I was bullied at high school for looking, talking, walking and acting like a gay male. Obviously this didn’t encourage me to come out.” young person

“It’s sad and sickening to see mental health amongst young people, in particular young people of diverse sexuality and gender, in such a sorry state.” boy 17

“In the future schools need to teach children how to accept their peers as they are. Teenagers kill themselves everyday because their peers break them by not accepting their differences.” young person



“[We need] youth centres - more for the young fellas to do.”
young person

Feeling bored

Some children and young people spoke about feeling bored, mainly due to a lack of access to community facilities. This was particularly relevant for children and young people living in regional and remote areas. Boredom may lead to various risk-taking behaviours such as criminal activity, experimenting with drugs or alcohol, or not participating in schooling, all of which can have negative mental health outcomes.

Young people consistently said they would like more community facilities at which they could ‘hang out’ and participate in recreational activities.

“[We need] places that kids can go to and have fun, because [xxx] is really boring and nothing for kids to do.” young person

“Drugs boredom and peer pressure, they kind of go together.” male 19

“It’s either you have to be younger than this or older than this. There’s a gap in between when there’s nothing to really interest you. I think they should have more things for different age groups.” boy 15

“I suggest more sporting grounds or youth centres where kids can make friends and get involved in fun activities, and even get counselling if they need it.” girl 15

“Try to get more youth centres – football or baseball – one in every suburb – keep kids out of trouble.” young person



“Going home is really important because you need to release some things, you need to go out bush, you need to get back to your culture.” young person

Aboriginal children and young people

Almost half the Western Australian Aboriginal population is aged younger than 18 years¹² and Aboriginal children and young people represent 5.7 per cent of all children and young people in Western Australia.¹³ Despite the numerous challenges that some Aboriginal children and young people face, their strong connections to culture, family, the land and spirituality contribute greatly to experiencing positive mental health.

“Family things are important as they give you good memories, role models, a safe home and support.” girl 15

“I play sport, trying to keep in as much contact with my family as I can.”
young person

Mentors and other trustworthy adults, such as youth workers and teachers, also helped Aboriginal children and young people feel supported and cared for.

“You need support from everything you can get, to feel strong and not be afraid.” young person

When asked what would make them happy, Aboriginal children and young people consistently identified the importance of getting a good education, a good job and having enough money to take care of and share with their families. Being able to give back to their community was also important.

“Money to take care of my family.” young person

“Make your kids go to school so they can have a strong mind and a strong culture.” girl 9

“Just get a good job and get my life on track and not be in here [detention].” young person

“Have an apprenticeship.”
young person

“I want to be a good dad.”
young person

“[I want to] get my own good family and do them good and give them a good life.”
young person

“Doing good in the community.”
young person

“Helping others.” young person

“[I want to] look after the people that care for me and show them that I can do the right thing.”
young person



Aboriginal children and young people

Research shows that some Aboriginal children and young people have a lower life expectancy, higher infant mortality and poorer mental health outcomes than non-Aboriginal children and young people.^{14, 15, 16}

Many of the Aboriginal children and young people involved in the Inquiry consultations were experiencing disadvantage and their responses reflected the challenges they were facing.

The most common concerns raised by Aboriginal children and young people related to family conflict, including domestic violence and feuding, substance abuse, involvement with the justice system and coping with suicide and loss. Many also reported that transient living arrangements had caused significant disruption to their lives, particularly at school.

“I had to grow up on my own – dad – don’t know where he was – moved around house to house; don’t know where mum is.” young person

“My family have all gone down the wrong path – I want to go a different way to them.” young person

“When I go home it’s good to be home, but it’s not that good to stay for a long time.” young person

“Bad people takin’ them down the wrong track – because they’ve gone down the wrong way.” undisclosed

“A lot of young kids think drugs are good.” young person

“Drugs, alcohol, burglaries, robberies because of the drugs.” young person

“It is ridiculous, nannas are fighting with nannas and aunties with aunties.” undisclosed

“[I] can’t go out – family fights – get mobbed or flogged.” young person

“Half of my family have passed away and we had to go, last week, my mum had to go to a funeral for her aunty and before that, a week ago, we had to go to a funeral for my aunty.” young person

Experiencing hardship and disadvantage early in life resulted in a significant amount of shame for many Aboriginal children and young people.

“Not readin’ and writin’ – shame one of the main things.” young person

“Shame factor to do with that – to read.” young person



“I would like a counsellor that could come over whenever I need it.” girl 10

Young carers

A young carer is defined by Carers Australia as being a family carer under the age of 26 years. In Western Australia, there are at least 40,000 carers in that age group, of which half are under the age of 18 years.¹⁷

Young carers generally rate their mental health and wellbeing lower than the rest of their peers, however they also make it clear that not all effects of caring are negative. Individual family circumstances, as well as the level of support received, contribute significantly to a child or young person’s caring experience.¹⁸

The Inquiry heard the views of children and young people caring for parents with a mental or physical illness, as well as Aboriginal young people who performed a caring role in their families.

While their views about mental health and wellbeing were not dissimilar to their peers’, young carers felt the effects of isolation and lack of support more acutely.

Young carers of parents with a mental illness spoke broadly about the need for respite, counselling, mentoring, financial assistance and advocacy. Some also spoke about the positive and negative contributions that school made to their lives, depending on the level of support and understanding that teachers provided.

“It would be epic to have someone you could leave the house with and do fun stuff with, like kick a football or go to the movies or something.” undisclosed

“[I would like] a break on the holidays or a weekend away where we can stay at a place and talk to people who you can relate to, and bond with other people who have gone through the same sort of thing.” girl 14

“[I would like] a carer or worker that comes to the home every two days for a

few hours to help the person with the family member with mental illness. They could help around the house.” girl 14

“It feels really good to talk to someone about what’s going on at home, somewhere I can be myself.” boy 13

“More money for the family – a pay out for the family member to help with the money issues every week and medication should be free for the person with the mental illness so it is available to them if they can’t afford it. Could posed [sic] a threat to people for example if dad was off the meds he would be off his chops.” girl 14

“School calms me down and gives me a break from the stress at home. If I feel stressed my teacher will talk to me and will let me spend time alone if I need it.” undisclosed

“Schools are not helpful...the school doesn’t understand what goes on at home. They expect me to do assignments but sometimes I have to take care of my newborn sister or the other kids or try to stop dad from hurting himself or running away.” young person



“Children living in remote communities sometimes only have access to health services once a month.” female 18

Children and young people living in regional and remote communities

Twenty-eight per cent of Western Australian children and young people live in regional and remote communities.¹⁹ Of these, 14 per cent or 21,000 are Aboriginal.²⁰ While mental health and wellbeing issues tend to be similar for children and young people regardless of geographical location, living in a rural or remote location has particular challenges. Many regional and remote communities have inadequate age-appropriate services and limited infrastructure such as transport and recreational facilities.

Children and young people who live in regional and remote communities often don't have access to a wide range of activities and programs. They consistently said that that they would like more recreational facilities in their towns where they could socialise with other young people.

“Somewhere where they can sit back, play pool – instead of hanging ‘round on the streets.” undisclosed

“Youth centres – more for the young fellas to do.” young person

“[We need] more things for young people to do and go to in the community and opportunities.” young person

Confidentiality was identified as an impediment to seeking help. Children and young people were concerned that they would be seen accessing the service, or that gossip about them would spread through the community. These concerns were significant help-seeking barriers.

“You don't like to see a mental health worker around town because you feel embarrassed.” young person

Access to appropriate services was also identified as a significant issue.

“We need age appropriate services. To provide safe places for kids to go so they are not bored and where support is available. In [xxx] there is nowhere like this.” girl 15

“Transport is an issue. There are hardly any buses. If we have to get somewhere we [have to] walk or ride our bikes.” male 19



Conclusion

Children and young people who participated in consultations for the Inquiry shared valuable insights about what mental health meant to them. The majority of children and young people felt positive about life, with loving, supportive parents and a group of friends they could trust and with whom they had fun. Most were able to participate in sporting activities and other hobbies, which they saw as an important way of keeping fit and healthy and also a source of happiness and fulfilment.

Many children and young people could clearly articulate and understand the inter-relatedness of physical and mental wellbeing. For them, this meant getting enough sleep and exercise, eating healthy foods and staying away from drugs and alcohol.

When children and young people had problems and concerns, most confided in and got support from parents, friends and other trusted adults. When they shared their ideas and concerns with adults, they wanted to be valued and acknowledged and to have their views listened to respectfully.

Mental health problems and disorders were present in the lives of many children and young people, either personally or among their parents, siblings and friends. A number of children and young people were dealing with complex issues that had a negative impact on their mental health. Some of these included bullying and peer pressure, caring for parents with a mental illness and/or drug and alcohol problem, family conflict and breakdown, and the challenges of living in a culturally and linguistically diverse community or having diverse sexuality and gender.

When children and young people decided they needed help, their capacity to access it was often limited by a number of factors.

Some were physical factors, such as transport, cost, geographical isolation or a lack of adequate and appropriate services. For children and young people in regional and remote Western Australia, these physical barriers caused particular difficulties when they needed help. The services were simply not available or too far away for them to reach.

Other barriers for children and young people included shame or embarrassment, a lack of awareness about mental health issues, or a lack of awareness that help was needed or available.

Education was identified as an important way of being able to seek help and break down negative stereotypes about mental health issues and being different.

While the issues that impact on a child and young person's mental health tend to be broadly consistent, particular groups experienced more difficulty than others. Mental health problems and disorders were acute for Aboriginal children and young people and vulnerable or disadvantaged children and young people.

Generally, Aboriginal children and young people were more likely than non-Aboriginal children and young people to have experienced the death of a family member, abuse, neglect and family conflict.^{21, 22} Many were dealing simultaneously with complex issues



such as drug and alcohol dependence, contact with the justice system and family and domestic violence. However, despite significant challenges, Aboriginal children and young people showed resilience and determination to succeed and have a happy life. Sources of strength came from connections to the land and cultural and spiritual practices, as well as being surrounded by extended family.

Young carers spoke about the financial hardship they face, which puts considerable strain on the family unit. Many have no access to respite and are under immense pressure to complete school, provide financially for their families and fulfil the caring role. Isolation was a major issue for young carers.



The consultations with children and young people confirmed that they depend on trustworthy and reliable avenues for help to support them in difficult times.

The important role that family plays in a child's life must be supported with information and services that enhance the capacity of parents to develop positive, supportive relationships with their children.

Schools also play a central role in providing support and information to children and young people, their families and the community. However, an unsupportive school environment can cause great distress for many children and young people, particularly in terms of bullying and peer pressure. Schools should be encouraged and supported to create nurturing safe environments for all children and young people, regardless of age, gender, sexual orientation, cultural background, socio-economic status or geographical location.

The children and young people's views gathered for the Inquiry reinforced the importance of investing in promotion, prevention and early intervention strategies in order to stem the flow of demand on acute mental health services.

In developing programs and services for children and young people, their diverse needs must to be acknowledged. Creating opportunities and mechanisms for children and young people to be engaged in service design and delivery is vital.

Many of the views collected from children and young people for the Inquiry will inform the future work of the Commissioner around issues such as reducing the impact of alcohol-related harm, the importance of the built environment and the participation of children and young people in the design and delivery of services that are essential to their health and wellbeing.

The Commissioner will use the views expressed in this report to advocate for better services and support for all children and young people. The Commissioner encourages other organisations to do the same.

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Commissioner for Children and Young People
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Children and young people depicted in this publication did not take part in the wellbeing research project. They are Western Australian children and young people who have provided permission to the Commissioner to use the images.

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