

TABLE OF CONTENTS

Introduction	3
Connection is at the heart of what we do	
Key Findings	
Key Finding #1	
Key Finding #2	
Key Finding #3	
Conclusion	<u>S</u>
Key Takeaways	10



INTRODUCTION

Connection is essential to human functioning. Being strongly connected to family, friends, and a supportive community is a protective factor against anxiety, depression, and other mental illnesses [1]. The absence of connection and belonging is associated with a range of serious physical health problems, including heart attack, obesity, and lower levels of overall functioning in people as they age [2]. At no time in recent history has connection been under greater attack than it has over the past three years. Lockdowns, home-schooling, physical distancing, and other pandemic health measures arguably have caused a disproportionate interruption to life opportunities at the heart of connectedness for young people. Young Australians are at particular risk from disrupted connection since social engagement is critical to the healthy development and future functioning of children and adolescents [3]. Australian children and teenagers living in families affected by mental illness face even greater challenges to connection, community participation, and peer belonging [4]. With recent ABS figures revealing a notable increase in mental ill health in Australian young people connectedness and connection-building ought to stand at the heart of every mental health support offered to our youth. Unfortunately, mental health services traditionally struggle to connect with young people, particularly those who need help most [5]. A recent meta-analysis of previous research identified the absence of peer connection and belonging within traditional mental health services as a key reason young people are reluctant to engage [6].

Amidst the challenges facing Australia's at-risk young people and services who seek to help, Kookaburra Kids shines a light on how these difficulties can be overcome. Mental Health Month in 2022 feels like the right time to highlight and share research findings from over a decade's experience. These findings reveal it is possible to deliver mental health interventions to young people in ways that work on and with connection to promote positive outcomes.



CONNECTION IS AT THE **HEART** OF WHAT WE DO

In the past decade, Kookaburra Kids has delivered mental health early interventions to thousands of Australian young people who face an increased risk of adversity due to familial mental illness. These interventions have included knowledge and skills-building in the areas of mental health literacy, helpseeking, and basic active coping strategies as indicated by the contemporary evidence-base. Kookaburra Kids differs in its approach by embedding these "clinical" interventions within age-appropriate, peer connected programs delivered in leisure, recreational and creative settings. By engaging with young people in socially and developmentally meaningful contexts, there is a greater chance the mental health aspect of programs connect with participants and have an impact. Another point of difference within Kookaburra Kids' programs is the capacity for young people to re-connect with peers and with the program on multiple occasions throughout the year, and year after year from age eight until adulthood. The suite of programs offered by Kookaburra Kids has grown since inception, acknowledging the changing connection needs of Australian young people. Kookaburra Kids can participate in regular online "Connect" programs, short and long Activity Days, and annual two-day camps on a flexible basis that best meets their individual needs and circumstances. These programs are free of cost to the participating young people and their families, ensuring socioeconomic factors are not a barrier to connection and participation for any eligible Australian young person. Connection is central to every aspect of Kookaburra Kids' approach to mental health early intervention. The following pages outline key findings that have emerged from Kookaburra Kids research, spelling out the significance of connection.

KEY FINDINGS

Over the past five years, Kookaburra Kids has focused on measuring the impact of its programs. Research activities have included pre and post program data collection using questionnaires validated in similar research, phone-based follow-up interviews six months after programs to tease-out the longer-term impacts on young people and families, external validation of program impacts by experienced research organisations, and publication of methods and key findings within peer-reviewed academic journals. Three key findings about connection that have emerged from Kookaburra Kids' recent research activities are as follows:

Key Finding #1:

Connection is a key ingredient of change, not just a positive side effect

Prominent health models identify connection and belonging as central to mental healthiness and wellbeing (e.g., Joiner's Interpersonal-Psychological Model) [7]. Despite this, most mental health interventions do not position connection as a key ingredient of programs offered to young people. For instance, mental health professionals may work with a young person on helpful social thinking patterns with the aim of fostering future connectedness, measuring improvements to social connection as a positive outcome of programs.

In contrast, **interviews with over fifty (50) program stakeholders** including participating young people, parents/carers of Kookaburra Kids, program referrers, staff and volunteers **resoundingly identify "connection" as the program element that has greatest impact**. Amidst a range of salient features including "learning new skills", "building mental health literacy", and "fostering help seeking intentions", connectedness to other participants and to the team at Kookaburra Kids emerged as the most critical factor in positive changes for young people:

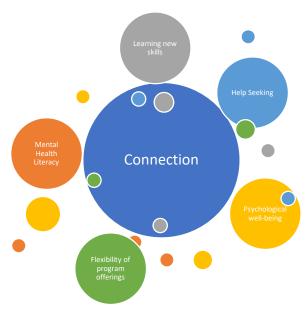


Figure 1: Connection is a key ingredient of impactful programs to young people

Interview feedback from one participant:

"I think it is important to really connect with people who have kind of experienced the same sort of things because you don't realise, and maybe you don't even really feel alone in a sense, but when you finally do connect with people who you really, really relate with you kind of have a moment, this feels really good to know that other people are thinking the same things as me and I'm not alone or crazy or whatever"

Key Finding #2:

Young people do engage (and re-engage) in mental health supports when they feel connected

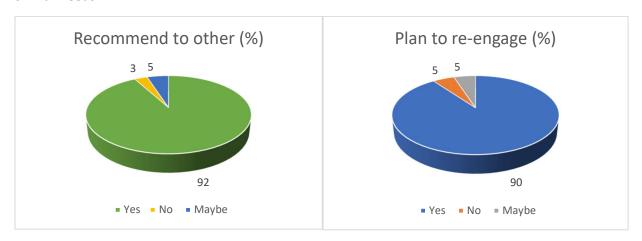
Low levels of service engagement and reluctance to access mental health supports is an enduring and troubling problem. A large body of research suggests young people experience specific barriers to engagement with mental health supports that include limited peer connectivity, lack of belonging, and poor fit or relevance between the service provided and individual needs. Traditional mental health services face even greater struggles engaging with young males who are continually under-represented in participation numbers [8].

In contrast to these findings, research with Kookaburra Kids suggests active, peer-connected program approaches to mental health can and do promote higher levels of engagement for males with participation rates reaching 53% of service users:



Figure 2: Kookaburra Kids research findings suggest males are engaging with programs at higher-than-expected levels

Across the past five years, data has been collected in survey form from over five hundred (500) participating young people ranging in ages eight to eighteen years. While youth engagement in traditional mental health services is an area of concern, findings from Kookaburra Kids' research shows almost all participants intend to re-engage in service, and would recommend the programs to a young person with similar needs:

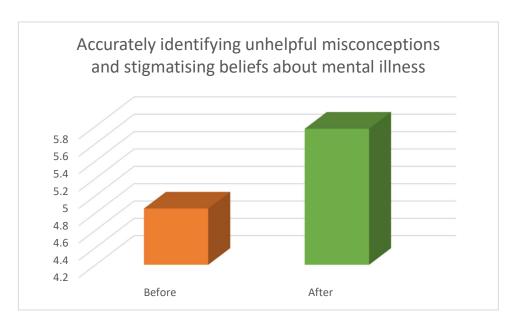


Figures 3 & 4: Kookaburra Kids acknowledging high intentions to re-engage and recommend to other young people in need

Key Finding #3:

Connected mental health experiences for young people can spread connectedness within families

Stigmatising beliefs and misconceptions about mental ill-health can lead to isolation and disconnection for affected individuals within their own families and communities, further compounding the adverse impact to life and health outcomes. The stigma associated with mental ill-health and specific illnesses is an ongoing focus strategically and operationally for the mental health field, though remains one of the biggest barriers to effective support [4,5]. Pre and post program survey findings from over five hundred (500) Kookaburra Kids suggests the right kind of service can and does make a difference to stigma and unhelpful misconceptions about mental illness. Young people are significantly more able to correctly identify beliefs such as "I'm the only person at school who has a parent with a mental illness" and "A parent's mental illness is caused by their children's behaviour" after participating in facilitated, peerconnected "chat group" programs. The before and after program findings are depicted in Figure 5 below.



<u>Figure 5: Post-program changes in the capacity of Kookaburra Kids to identify stigmatising</u> beliefs and mental health misconceptions that can lead to disconnected family relationships

If left unchecked, research suggests unhelpful beliefs and misconceptions such as these can have a profound negative impact on the functioning of families and the young people who hold them in the short and long term [9]. By providing evidence-based, peer connected programs that provide connected educational and learning experiences addressing unhelpful misconceptions and mental health stigmas, Kookaburra Kids programs change the landscape of understanding within families.

Interviews with young people and parent or carers that occur at least six months after programs have provided information that suggests positive changes to family connectedness move beyond knowledge and understanding and are maintained for some time. Families are noting changes in communication including increased openness and working together on issues like well-being and mental health, which are critical to all aspects of family functioning (current and future). These emergent findings are presented in Figure 6 below:

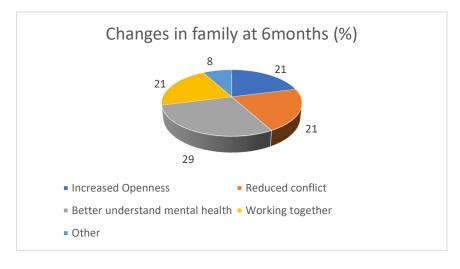


Figure 6: Changes in key aspects of connection reported by Kookaburra Kids and their parents / carers at 6 month follow up



CONCLUSION

Connection is critical to human functioning and is acknowledged by health services as both a side effect and desirable outcome of poor mental health within most intervention models. Kookaburra Kids programs offer a novel and impactful approach to mental health promotion by centering connection at the heart of programs. The cumulative research findings presented herein suggest there is more to a mental health intervention than the content, skill, or outcome it is targeting. Connectedness in the way programs are offered appears to be a critical factor in young people connecting with the support, and bringing about measurable changes in key aspects of connection for the program participants.

Key Takeaways

- All people need connection, but mental ill health interferes with our ability to connect. Recent world events have further eroded the ability for people to connect, which has exacerbated mental health problems particularly in vulnerable Australian young people.
- Mental health services that centre connection as a key ingredient of programs to children and young people may have greater impact on a range of connection related outcomes.
- By centering connection at the heart of what we do, Kookaburra Kids program research suggests the following:
 - **Takeaway #1.** Higher connection and engagement with mental health early intervention services by children and young people living in mental health affected families, and a willingness to re-connect and recommend to others are possible.
 - **Takeaway #2**. Higher rates of connection with programs by males who are particularly reluctant service users for mental health are possible.
 - **Takeaway #3.** Improvements to key aspect of individual and family functioning soon after and six months after programs are possible, including increased knowledge about mental health, reduced belief in unhelpful misconceptions and stigmas about mental illness, and positive changes to family communication and approach to family mental health issues.

Connection is a key ingredient of Kookaburra Kids' impactful programs, not merely a desirable side effect. We hope that sharing these key findings will inspire other services delivering to Australian children and adolescents with mental health needs to see further opportunities to strengthen connection within and through their valuable work.

According to our research both males and females were more likely to seek help by using telephone support services after attending a Kookaburra Kids camo. Additionally, the shared group identity seems to be particularly helpful in young people overcoming barriers to help-seeking such as stigma. These findings highlight the potential of AKKF to use therapeutic recreation camps to improve mental health knowledge and promote health-seeking intentions in our young people [10].

References

- 1. Beyond Blue, *Connections Matter*. <u>www.beyondblue.org.au/docs/default-source/resources/408362 0318</u>. Accessed 01/09/2022
- 2. Novotny, A (2019). The risks of social isolation. *American Psychological Association, Vol 50(5),* p 32.
- 3. De laia Almeda, I., Ferraz Rego, J., Teixera, A.C.G., & Moreira, M.R. (2021). Social isolation and its impacts on child and adolescent development: A systematic review. *Pev Paul Pediatria*. https://doi.10.1590/1984-0462/2022/40/2020385
- 4. Radicke, A., Barkmann, C., Adema, B., Daubmann, A et al., (2021). Children of parents with a mental illness: Predictors of health-related quality of life and determinants of child-parent agreement. *Int J Environ Res Public Health*, *18*(2). https://doi.10.3390/ijerph18020379
- 5. Radez, J., Reardon, T., Creswell, C., Lawrence, P.J., et al., (2021). Why children and adolescents (not) seek and access professional help for their mental health problems? A systematic review of qualitative and quantitative research. *European Child & Adolescent Psychiatry, 30,* 183-211. https://doi.org/10.1007/s00787-019-01469-4
- 6. Davies, G., Deane, F.P., Williams, V., & Giles, C. (2022). Barriers, facilitators and interventions to support help-seeking amongst young people living in families affected by parental mental illness: A systematized review. *Early interv Psychiatry*, *16*(*5*), 469-480. Doi:10.1111/eip.13194.
- 7. Cornette, M.M., de Roon-Cassini, T.A., Fosco, G.M., Holloway, R.L., Clark, D.C., & Joiner, T.E. (2009). Application of an Interpersonal-Psychological model of suicidal behaviour to physicians and medical trainees. *Archives of Suicide Research*, *13*, 1-14. Doi: 10.1080/1311110802571801
- 8. Sagar-Ouriaghli, I., Godfrey, E., Bridge, L., Meade, L., & Brown, J.S.L. (2019). Improving mental health service utilization among men: A systematic review and synthesis of behaviour change techniques within interventions targeting help-seeking. *Am J Mens Health, 13(3).* Doi. 10.1177/1557988319857009.
- 9. Corrigan, P.W., Druss, B.G., Perlick, D.A. (2014). The impact of mental health stigma on seeking and participating in mental health care. *APS Association for Psychological Science*, 15(2), https://doi.org/10.1177/1529100614531398.
- 10. Davies, G., Deane, F.P., Williams, V. & Giles, C, 2021, Changes in help seeking intentions among young people living in families impacted by mental illness attending Australian Kookaburra Kids Foundation camps, Child and Family Social Work