

1-1-2023

The voice of lived experience guiding impactful change in Edith Cowan University's whole-of-institution approach to mental health

Susan Edgar
Edith Cowan University

Fiona Navin
Edith Cowan University

Follow this and additional works at: <https://ro.ecu.edu.au/ecuworks2022-2026>



Part of the [Mental and Social Health Commons](#)

[10.30688/janzssa.2023-1-02](https://doi.org/10.30688/janzssa.2023-1-02)

Edgar, S., & Navin, F. (2023). The voice of lived experience guiding impactful change in Edith Cowan University's whole-of-institution approach to mental health. *JANZSSA-Journal of the Australian and New Zealand Student Services Association*, 31(1), 29-33. <https://doi.org/10.30688/janzssa.2023-1-02>

This Journal Article is posted at Research Online.
<https://ro.ecu.edu.au/ecuworks2022-2026/2433>

The Voice of Lived Experience Guiding Impactful Change in Edith Cowan University's Whole-of-Institution Approach to Mental Health

Susan Edgar

Fiona Navin

Edith Cowan University

Abstract

This case study presents the background to the establishment of Edith Cowan University (ECU) 's Student and Staff Mental Health Strategy 2021-2024 as well as the early stages of its implementation. The value of lived experience storytelling is explored, including its role in recovery programs in the mental health sector and early examples of its use in higher education health promotion initiatives. ECU's experience adopting the Lived Experience Project is presented, including examples of how student voices have been incorporated within a range of strategic initiatives during the Foundation Phase of the University's Mental Health Strategy. Future uses are also considered to promote ongoing reduction of stigma and normalising of help seeking for students experiencing mental health issues in a higher education setting.

Keywords

Peer storytelling, Lived experience, Mental health, Tertiary student

Australian tertiary education sector and student mental health

The Australian tertiary education sector has seen an increasing focus on student mental health and wellbeing in the last six years. The release of the National Tertiary Student Wellbeing Survey results (National Union of Students, 2016) signalled a starting point for change. The National Union of Students collaborated with Headspace to survey students across 40 Australian universities and 30 TAFEs. Of the 3,303 participants, 65% of younger students (those aged between 16 and 25) and 53% of students over 26 years of age reported either high or very high levels of psychological distress on the K10 scale—much higher than an age-matched sample. Whilst recognising that studies of this nature are open to self-selection bias, this research was pivotal in drawing attention to the poor mental health of some tertiary students. The study also highlighted the lack of routine national data collection on the mental health of tertiary students. In the following year, Orygen, the National Centre of Excellence in Youth Mental Health released the *Under the Radar* report (2017) and put out a call to action that “the mental health and wellbeing of university students is included within the core business of higher education delivery” (University Student Mental Health is Everyone's Responsibility section). The report identified the many causative factors of mental ill-health and posited that students may leave university settings with poorer mental health than when they entered. Stressors, including the juggling of work and study, housing and financial concerns, employability worries, and diminished sleep were some of the factors identified that impacted student mental health. In June 2018, the Higher Education Standards Panel presented its final report (Australian Government Department of Education and Training, 2017) looking at student retention, completion, and success. The report endorsed all recommendations, notably Recommendation 8 that “every institution should have an institution-wide mental health strategy and implementation plan”. This was further reinforced in the Productivity Commission inquiry report, *Mental Health* (2020) with Action 6.3 noting that “This strategy would be a requirement for registration and be assessed by TEQSA as part of registration” (p. 65). Although this requirement has not been employed to date, the Federal Government went on to fund Orygen to develop the *Australian University Mental Health Framework* (2020). The Framework provides guidance for the introduction of a settings-based approach to mental health within universities, supporting students and staff. The Framework also highlights the importance of a strengths-based approach that is iterative, aligned, builds on existing practice, and targets multiple factors simultaneously.

Edith Cowan University Mental Health Strategy implementation

Edith Cowan University (ECU) developed the *Student and Staff Mental Health Strategy 2021-2024* in alignment with Orygen’s Framework (2020) and associated principles. Developed in 2020 in consultation with staff and students, the Strategy contains 59 key actions across six key objectives, fulfilling the criteria of targeting multiple factors simultaneously (Edith Cowan University, 2020). It includes actions across a “stepped care model”, from whole-of-population preventative actions through to crisis support, with outcomes from the Foundation Phase designed to guide subsequent Phase actions. Although not unique in the sector, it is uncommon for strategies to have an equal focus on students and staff, with ECU recognising the need for a whole-of-institution approach to mental health and wellbeing. The role of Strategy Program Coordinator (PC) was introduced in May 2021 with a Mental Health Steering Committee subsequently established to provide high-level support for Strategy implementation. This included developing and actioning a Foundation Phase Action Plan within the first 12–18 months. Key actions during this period included a review of best practice initiatives across the sector, creation of a Community of Practice for staff trained in Mental Health First Aid (MHFA), and increased engagement with students with lived experience, including the creation of a Student Reference Group. Strategy actions have been implemented with a focus on sustainable change, based on the student and staff experience. Both the student and staff voice are key to the implementation of actions and stakeholder engagement is an essential aspect of the PC’s role, ensuring that ECU is “doing with” as opposed to “doing to”.

Lived experience storytelling

Lived experience, or peer storytelling, is promoted across many of Australia’s mental health support services, including the Black Dog Institute, the Suicide Call Back Service, and Beyond Blue. The value of sharing stories with peers has been well documented (Chinman et al., 2006). Mancini (2019) highlighted the need for peers to be strategic in their storytelling approach, using “microlevel practices”, including reflection and summarisation, when assisting others. Appropriate professional development, including training in storytelling, was identified as an ongoing need for peers undertaking these roles. The value of formal training in storytelling has also been identified in the literature in the context of mental health recovery (Nurser et al., 2018). Eight participants from the Tell My Story course at a United Kingdom mental health recovery college were interviewed following the course to determine individual and overall outcomes. Five themes were identified, including the “highly emotional experience”, “feeling safe to disclose”, “renewed sense of self”, “a two-way process”, and “a novel opportunity”. The themes identified in this study align with those in the CHIME framework for personal recovery in mental health (Leamy et al., 2011). Participants also reported increased agency, similarly linked to recovery (Davidson, 2003). This sense of agency may have been strengthened as participants assumed the roles of both storyteller and listener within the training setting. Nurser et al. (2018) identified the likely value of this training in the alleviation of participants’ shame—recognised as a core component of mental health issues (Gilbert, 2009)—which further contributed to a recovery-oriented approach.

Although not introduced for mental health recovery purposes, the voice of lived experience and value of lived experience storytelling was identified as a key component of ECU’s Foundation actions, to reduce stigma in the university community and normalise mental health supports.

Implementation of the Lived Experience Project

The implementation of lived experience storytelling training in Australian universities is relatively new. The Fit for Study Lived Experience Project (LEP) commenced at The University of Western Australia (UWA) in 2015¹. The LEP was developed with initial funding from alcohol and drug

¹<https://www.student.uwa.edu.au/experience/health-wellbeing-safety/fit/mental/the-lived-experience-project>

grants and includes a facilitated workshop which teaches students how to share their mental health challenges (or any personal challenges) safely, for both themselves and their audience. Students who complete the training at UWA are invited to share their story at a variety of university events and professional development courses—including Mental Health First Aid training courses—to promote awareness of mental health issues and supports. The LEP has also been introduced at the University of New South Wales, entitled the Untold Stories Project.

In early 2022, ECU adopted the LEP, with several staff undertaking training to deliver the facilitated workshop. Two workshops have been run to date, with 14 students in total attending the one-day workshops. Consistent with Orygen’s Principle 1 from the *Australian University Mental Health Framework* (2020) that initiatives “are informed by students’ needs, perspectives and the reality of their experiences”, the LEP has been aligned with key objectives within ECU’s Mental Health Strategy. This ensures the sharing of students’ lived experience is strategic and linked to key Foundation actions. Workshop and promotional materials have been remodelled to encourage students from a range of equity groups and experiences to engage with the training, and to contextualise information provided on university supports and services.

The key learning outcomes for students undertaking the LEP workshop include identifying the key messages of their storytelling, understanding the risks and benefits of storytelling (both for themselves and their audience), and identifying both personal boundaries and personal strategies for self-care.

The value of lived experience storytelling

Students attending the LEP workshops have engaged as lived experience storytellers at a range of internal and external events for ECU, as well as being active members of the Mental Health Strategy Student Reference Group. External events have included opportunities to present alongside the PC at a suicide prevention forum targeting international student mental health. Two ECU students told their stories of specific issues impacting students studying onshore at Australian universities, including the difficulties in finding housing and employment whilst adapting to a new culture and feeling socially isolated. The audience, primarily Perth metropolitan suicide prevention coordinators, engaged actively with the two speakers, asking for further insights to support their understanding of the stressors impacting international students. Formal feedback from the metropolitan manager of the suicide prevention coordinators noted the significant value of having lived experience speakers at the event, highlighting the importance of their role in developing a shared understanding of mental health impacts in the community. In the university setting, students have been involved in campaigns targeting student supports for equity groups, including persons with a disability. Employability insights have also been sought, with several students trained in the LEP attending and providing input at an employability workshop hosted on campus by a graduate employer. For Mental Health Week in 2022, an online student panel was held via Teams as part of the MHFA Community of Practice series at ECU. An open invitation to all staff drew over 160 attendees from all three ECU campuses, including ECU’s regional campus in the South West of Western Australia. Four students who had undertaken the LEP training spoke of a range of mental health challenges impacting their studies. This included anxiety brought on by significant financial challenges; navigating university life with pre-existing mental health problems (and the triggering nature of some academic assessments); the hidden presentation, including somatic symptoms of mental ill-health; and the challenges of international students securing work, accommodation, and a sense of community. The discussions from these topics were broad ranging with many staff actively engaging in dialogue and noting the importance of subsequently feeding student insights back to their respective Schools and services. Although evaluating the “reach” and impact of events such as these is difficult, unsolicited staff feedback has demonstrated the value of broadening student lived experience engagement across the university setting.

The value of formal training in storytelling was also apparent for the students that participated in the LEP. All students who attended one of the first two LEP workshops at ECU reported feeling more prepared and more confident to share their lived experience with peers, as noted in routine post-workshop evaluation surveys. Student speakers who participated in the Mental Health Week 2022 panel also commented on the supportive environment created for the event, allowing them to feel safe to share their lived experience. An awareness of how much of their story to share, the risks and benefits of sharing, and the skills and understanding developed through the LEP training allowed the students to speak confidently in this online setting.

In keeping with the iterative nature of the Strategy, further opportunities for sharing the voice of lived experience through a range of initiatives continue to be planned at ECU. This includes sharing students' lived experience of a range of challenges through podcasts and other channels to broaden the reach of the student voice. Additional LEP workshops in 2023 will provide further opportunities for students to train with their peers and learn the skills of storytelling to progress impactful change. Creating opportunities for sharing of stories aligned to Strategy actions will continue to be a focus, allowing the student voice to inform students' needs within ECU's whole-of-institution approach to mental health.

References

- Australian Government Department of Education and Training. (2017). *Final report - Improving retention, completion and success in higher education*. Canberra: Australian Government. <https://www.education.gov.au/higher-education-statistics/resources/higher-education-standards-panel-final-report-improving-retention-completion-and-success-higher>
- Chinman, M., Young, A.S., Hassell, J., & Davidson, L. (2006). Toward the implementation of mental health consumer provider services. *Journal of Behavioural Health Services and Research*, 33, 176. doi: 10.1007/s11414-006-9009-3
- Davidson, L. (2003). *Living outside mental illness: Qualitative studies of recovery in schizophrenia*. New York: New York University Press.
- Edith Cowan University. (2020). *ECU Student and Staff Mental Health Strategy 2021-2024*. https://www.ecu.edu.au/__data/assets/pdf_file/0009/938538/ECU-Mental-Health-Strategy.pdf
- Gilbert, P. (2009). Introducing compassion-focused therapy. *Advances in Psychiatric Treatment*, 15(3), 199–208. doi: 10.1192/apt.bp.107.005264
- Leamy, M., Bird, V., Boutillier, C., Williams, J., & Slade, M. (2011). Conceptual framework for personal recovery in mental health: Systematic review and narrative synthesis. *British Journal of Psychiatry*, 199(6), 445-452. doi: 10.1192/bjp.bp.110.083733
- Mancini, M. A. (2019). Strategic storytelling: An exploration of the professional practices of mental health peer providers. *Qualitative Health Research*, 29(9), 1266–1276. doi: 10.1177/1049732318821689
- National Union of Students. (2016). *National Tertiary Student Wellbeing Survey 2016*. headspace. <https://headspace.org.au/assets/Uploads/headspace-NUS-Publication-Digital.pdf>
- Nurser, K. P., Rushworth, I., Shakespeare, T., & Williams, D. (2018). Personal storytelling in mental health recovery. *The Mental Health Review*, 23(1), 25–36. doi: 10.1108/MHRJ-08-2017-0034
- Orygen, The National Centre of Excellence in Youth Mental Health. (2017). *Under the radar: the mental health of Australian university students*. https://www.orygen.org.au/Orygen-Institute/Policy-Reports/Under-the-radar/Orygen-Under_the_radar_report?ext=
- Orygen. (2020). *Australian University Mental Health Framework report*. <https://www.orygen.org.au/Orygen-Institute/University-Mental-Health-Framework/Framework/University-Mental-Health-Framework>
- Productivity Commission. (2020). *Mental Health*, Report no. 95. Canberra: Australian Government. <https://www.pc.gov.au/inquiries/completed/mental-health/report/mental-health-volume1.pdf>

The authors may be contacted via:

Fiona Navin — fnavin@ecu.edu.au

Please cite this paper as:

Edgar, S. & Navin, F. (2023). The voice of lived experience guiding impactful change in Edith Cowan University's whole-of-institution approach to mental health. *Journal of the Australian and New Zealand Student Services Association*, 31(1), 29–33. doi: 10.30688/janzssa.2023-1-02



This work is licensed under the Creative Commons Attribution 4.0 International License. To view a copy of this license, visit <http://creativecommons.org/licenses/by/4.0/> or send a letter to Creative Commons, PO Box 1866, Mountain View, CA 94042, USA.