

MASO6651

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KEY INFLUENCES ON THE DESIGN AND IMPLEMENTATION OF MINDMATTERS

Australian Principals Association Professional

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The MindMatters initiative is the Australian national training and development implementation for the Australian Government health promotion package for teachers of secondary school age students. The original resource kit was developed by a consortium from the University of Sydney, the Youth Research Centre with the University of Melbourne, Deakin University, and the Australian Council of Health, Physical Education, and Recreation. The developers consortium trialed the materials with schools and a small review of the trial focusing on the materials and their suitability was undertaken by the Hunter Institute of Mental Health.

This short paper discusses the nature of the implementation of a major national health promotion package and some of the key issues that have emerged for the implementation. The paper is the first, introductory paper and is followed by a second paper considering the issues for the evaluation of the initiative, with the third and last paper providing an in depth consideration of the MindMatters evaluation results.

The implementation stage of MindMatters has been managed by the Australian Principals Association Professional Development Council since 2000. The move from the organizations who had developed the program to a different organization for implementation could have proved difficult. Members of the original development team though have provided help for the implementation with their expertise and experience in a range of ways. The MindMatters training and development team is a specific designated training and development team for the MindMatters project within APAPDC. MindMatters has been able to take advantage of the APAPDC state branches and key contacts with the major principal organizations. The ability to move through both formal federal, state systems and sector processes and through the less formal professional associations has been important for implementation success.

The implementation has involved the delivery of external training and development nationally by MindMatters state and national project officers. The back ground of the officers has been quite varied with education backgrounds tended to be more common although health is also often represented. The ability to use the “language” of education has been important as is the ability to train in social and emotional health and wellbeing. Each of the state and territories has a designated project officer – with the two more populous states – NSW and Victoria – eventually having two officers. The project officers are physically located within education systems or sectors where possible. The project uses national materials, regular team presentations and national team meetings up to three times per year to ensure a similar message

and delivery is available in every state. Running a national rollout in differing educational contexts means that any strategy needs to have a well developed quality mechanism – it is critical for reporting and for evaluation. Team induction and ongoing development is essential in long term national projects.

The MindMatters website is hosted by Curriculum Corporation in Melbourne and has been a key mechanism in advertising training sessions as well as taking registrations on line. Through the course of the project the website has developed to also provide curriculum links, links to other key projects, school case studies and classroom tips. The 2005 introduction of the Staff Matters section for staff health and well being has begun a trend for a more interactive website.

The style of the implementation has had a close relationship to the nature of the MindMatters resource. The resource focuses on health promotion and it advocates a participatory, interactive and student centred approach for the classroom. The resource links social and emotional health and well being, active pedagogy and academic success. The resource also provides strategies for a whole school approach. The resource kit is a multi- focus resource rather than a program. It contains series of lessons and lesson examples for teachers in the curriculum booklets. The kit originally consisted of a volume on School Matters(the whole school approach), Educating for Life (a policy document on suicide prevention) and five curriculum booklets on Resilience(two booklets), Bullying and Harassment, Loss and Grief and Understanding Mental Illness. A new booklet called Community Matters directed at discussing those groups with less access to services has been added in 2003. The resource consists of eight booklets, a video and a set of information pamphlets for the final kit. A further DVD and handbook were added in 2005. The DVD provides more classroom situations, a greater representation of diversity – in particular the Aboriginal and Torres Strait Islander community – and examples of schools working with the community as part of the whole school approach.

The kit was distributed with schools responding with orders using the order forms or the website after two national pamphlet mail outs. Schools were entitled to one free kit. The website has provided PDF's of the materials for schools and also news of the training locations from the beginning of the project. Community Matters was mailed directly to schools in 2003 – the brand recognition proved to be high enough to sustain this. The general advice from state committees was that mailing kits directly to schools without training initially would mean the kit would not be used. A final distribution of kits to all schools who had not requested the kit occurred in 2003 with a letter to the school principal. Schools did purchase extra kits but most relied on the single free kit. Extra kits continue to be requested at the rate of 50 -100 per month.

Training was provided free but schools had to pay for the time for staff attending. Schools were encouraged to have a core group (including leadership) attend the standard two day session. Many schools sent relays of pairs of teachers to enable them to handle the cost of teacher time. The majority of attendees were teachers although parents, counselors, community members, GP's as well as school leadership also attended.

The training and development implementation has had to cater for the range of topics within the kit, allow exploration and interpretation of the booklets for a specific school and take into account the differing state education and health contexts. The training and development is the key method of demonstrating the pedagogy of the kit and providing the information on mental health and social and emotional health and well being. The sessions are provided widely across each state originally in a planned and timely strategy to maximize attendance. The original National Coordinator made the decision with the backing of the National Reference Group that the training would be similar to the initial training undertaken by the developers – in particular the work of Helen Cahill from Melbourne. A set of national materials for all officers was created based on the kit. The training was determined to be for two days to allow sufficient time to look at practice, to develop a sense of the training group and allow time to make links between schools. The sessions make use of the resource to encourage familiarity with the materials and increase levels of uptake in the school. The social and emotional learning exercises with a small amount of change work well with adults. The effect is to develop confidence in processes that discussed resilience, help seeking, stigma, coping and problem solving amongst others. In fact much of the training has much in common with the concept of emotional intelligence – both the personal and social aspects. The training has had high levels of approval immediately after the event and also when measured some time after the training by the external evaluator. The decision to have a two day training has proved successful – it provides enough time to look at the key topics and processes and yet is still practical enough for schools to arrange attendance. Our formal external evaluation indicated the one day trainings do not have the same level of success even if they are part of a series of days.

Schools at present are able to arrange a state project officer to deliver internal school training and work with the school on planning. Because of numbers and the tendency for school training days to be on the same dates, this is a limited service. A second level of training is currently being developed that will be available to a larger number of schools using the external provision model. An individual school consultancy model is more time consuming and more expensive in relation to travel and costs. A consultancy model would require a greater level of state based staffing.

Some key partnerships have been present on the external training days – each of the states have had a different educational history, different legal requirements and curriculum structures. In each state MindMatters has had a

partnership with state education and health personnel. They have provided delivery of sections of the introduction and the session on Introducing Mental Illness. These contributions either used agreed materials or in the case of UMI session, the MindMatters session materials. Local community members from the Aboriginal and Torres Strait Islander community or members of units for aboriginal education in state systems were also contacted and presented sections on culture and diversity where possible. These partnerships made the materials relevant for the context of the community, the state and the school.

A key component of the project is linking with key state and federal initiatives to reduce confusion for schools and enhance the level of coordination and cooperation with other major influential authorities and groups. The Australian federal system means that this project has had to deal with differing agendas from state and federal health and education. The project is essentially a federal health funded project operating in the education sector. Federal education agendas have been linked within the project as much as possible but the contact has been only through occasional membership of the advisory committees. The coordination with other major movements in education and health is provided by the advice and information on directions by a system of committees – the MindMatters National Reference Group has APAPDC, school principal membership, members drawn from key initiatives, professional organizations, tertiary institutions, the Australian Government representatives and the managers of the MindMatters training and development implementation. Other key committees with a range of members providing more specialist advice include a national MindMatters Education Committee, an Evaluation Committee, an Aboriginal and Torres Strait Islander Committee and in the future a national MindMatters Mental Health Committee. All of these committees provide links directly to state education and health systems and sectors, key state and national initiatives, professional associations and tertiary institutions. In addition every state project officer also has a state based committee where still further advice and information is gathered using state based expertise. The advice from various state committees has determined the timing, the marketing and the success of the training and development in that state. All committees have had an impact on the new developments within MindMatters. The investment in a comprehensive system of communication and consultation is important for the level of acceptance of the resource.

The MindMatters implementation has been undertaken within the context of a series of contracts between the federal Department of Health and Aging and the Australian Principals Associations Professional Development Council. The long term commitment of the Department of Health and Aging to health promotion over six and a half years and its willingness to listen to advice from the schools sector in the implementation are the major success factors for the MindMatters implementation. At times the departmental personnel have had to provide research and evidence for internal and external questions about the long term aims of a health promotion project in relation to outcomes for young

people. The release of the evaluations and the massive uptake by schools have made that clarification easier although there is still a continuous discussion on the best methodology for evaluation as well as the value of health promotion. Despite the overall success of the dissemination there have also been pressures to have early results from the evaluation on how schools operated internally with the materials. This has meant that new demonstration projects and further short term, focused evaluations have been initiated and these have provided some of the required answers. The department has remained steady in its commitment because of their growing understanding that schools need a period of three years or more to consider and negotiate with the materials, to provide staffing release time and to work towards the best arrangement for the school. Schools are at different stages and many are convinced by the existence of continuous support in itself as a reason for looking seriously at health promotion. This is as true for large urban schools as it is for small rural or remote community controlled schools. The systems and sectors to which the schools belong also require long term relationships. The nature of the resource has also had an effect - the kit is a resource and not a program – and this has meant that schools have interpreted how health promotion may be best implemented within their own school context. Some of this has not been fully anticipated until a level of experience with a range of schools was gained by the project. Schools have been slower to adopt a whole school approach because of the complexity but if offered a choice they will prefer to operate in this way even if it takes time.

The contracts between the Department of Health and Aging and APAPDC have varied in time from six months to the longest contract period of two years. This series of contracts has had a clear effect on the nature of the dissemination at particular stages – at times decisions have been made to obviously fulfill immediate needs for the current contract as well as attempting to still serve longer term and longer range implementation requirements. So between 2004-6 the project attempted to both provide some examples of in depth work with schools through using project officers as school consultants on intensive work with schools (while awaiting the evaluations) while still providing external workshops for schools with secondary enrolments. Short contracts also affect staffing – short contracts do not retain or attract staff. This in term means more effort has to be placed in providing for recruitment, induction, quality management and personal support for the project officers who provide the actual training for schools. MindMatters has had two senior managers who have remained with the project from its initiation and this has been important for stability and continuity. The APAPDC CEO has also remained with that organisation for the life of the project and her support, understanding and negotiation has also been critical.

The job stability of personnel within the Department of Health and Aging has affected the project. A change in the last year has contributed to the delay in contracts and has meant a continuous series of meetings with the three new groups of personnel within an interim period – the project had had a long term continuous relationship with previous officers

which has aided mutual understanding and clear development directions. This consistency has directly benefited the evaluation and the transitions between contracts. It has also meant MindMatters was able to be clear about department requirements and directions and in turn to communicate information on schools sectors and systems. The period of consistent personnel meant that more managerial energy was available for the project. This in turn has contributed to the longevity of the project funding.

The nature of contracts with governments is that they may be short term and affected by larger political concerns. This political background is often not taken into account when dissemination is planned. Dissemination rarely occurs in ideal contractual conditions. At times the implementation has involved a rethinking of directions and suggestions for new operating models that suit the shorter term contractual commitment. The MindMatters implementation has always had to take into account the nature of the budget for new developments and the level of its provision of training. The project has had to recently undergo a holding pattern under an interim contract with the department for six months – and this has affected the ability to take advantage of certain situations and connections in education during that time. Despite all the help extended by the department, delays have also affected the stability of the project personnel and at times state project officer's own feelings of well being.

At times these real life practical problems can have a crucial influence that may work either for or against a project and the difference may be in their timing or simply serendipity. MindMatters has in the past developed new materials at key times during the project that have served to refresh the project. Recently it has become apparent that it is time to undertake a major redevelopment of the original kit in accordance with the evaluations and other research. The kit is now over 8 years old in some of its research and references. The video piece has dated more rapidly than the written materials. The website has been useful in ensuring the kit is updated by current state connections and the ongoing nature of the training has also enabled new educational references to be made on a national scale. But it is also apparent that some schools in most states have been ready for a further level of training for some six to twelve months. The project has had a development model and training outlines based on MindMatters evaluation ready but these has not been able to be rolled out while decisions have been pending. The delay in the release of the MindMatters evaluations related predominately to consideration of the COAG agenda and the changeover of personnel in the department. The delay has had a small impact on overseas interest in the project. The most significant upshot of the series of delays has now been the coincidence of a resource development and the release of a new training model for schools to occur in 2007-8 hopefully complimenting the COAG agenda initiatives. This is likely to be to the advantage of the MindMatters project creating some useful synergies within a wider agenda.

The chance to have several stakeholder organisations with related projects working collaboratively can effectively increase the outcomes for all the projects individually as well as collectively. Working with partners in an initiative brings another area of management and compromise. At times within the MindMatters project there have also been contracts with other development partners – for example the Australian Guidance and Counsellors Association – for working together in a demonstration or MindMatters “suite” initiative. At other times there have had matching provisions in separate contracts – eg with the Australian Council of State School organizations and the Australian Parents Council - again for related projects(in this case in relation to parent involvement.) These relationships mean that differing organizations with a potentially differing ethos have to work together to provide a range of developments to address a range of needs. The partnerships have been valuable in deepening the understanding of students with high needs in the area of mental health and in developing the whole school approach more fully by authentically involving key groups like parents and students. Time needs to be allowed for the discussions and clear agreements on roles need to be in place to make the partnerships more effective. The overall concept of potentially increasing the level of successful outcomes of a key project by having a range of related projects addressing the needs of the key groups involved in schooling remains a sound one.

The MindMatters initiative personnel have also been engaged in managing and brokering the evaluations of MindMatters. This has been with the advice of the MindMatters Evaluation Committee which has also benefited from continuity of much of the membership. The brokerage of the evaluations has meant that the project has had to engage in the debates about outcomes, strategies, contexts, early indicators and the nature of the intervention. This has made the project more savvy about what it intends to undertake, how it intends to do this and how it will know. The involvement in the discussion about the external evaluation has been critical in developing the knowledge of health promotion and dissemination in the MindMatters team. The evaluations have also partnered with schools and provided formative advice to the project. The Evaluation Committee’s use of four MindMatters evaluations has initiated conversations and debate between the external evaluators themselves. This culminated in a national 2006 Evaluation Seminar as part of the MindMatters project contribution to a larger agenda on the nature of health promotion in schools and its evaluation.

The MindMatters evaluations are available directly or through links on the MindMatters website from December 2006 – www.curriculum.edu.au/mindmatters. Current project statistics indicate that 79,000 participants from schools with secondary enrolments have attended MindMatters sessions representing some 87% of all schools with secondary enrolments. Further figures on sectors and systems are available on the MindMatters website. The ACER evaluation of MindMatters indicated that 19% of schools use MindMatters as the major organiser and a further 52% use the resource in some way within the school.

