

Odyssey Victoria

2 Kool 4 Skool. The Brace report card.

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How did it all start?

Young people would book appointments at the office; and no one would show up.

Appointment would be made for the young person at their school and the young person would not show up.

One of the schools put a call out requesting assistance from Youth and welfare services.

We arrived for a meeting and there was a student on the roof of the school throwing rocks at the principal and telling him to F off.

The teachers were making toasties for the students on their break, because the students had not eaten anything. Or because they had the munchies.

What BRACE does.

The activities of BRACE complement existing school mental health and wellbeing support, adding AOD specialist expertise to manage complex student needs and behaviours.

Outreach support during periods of absence from school such as during suspensions and school holidays is a unique aspect of BRACE, that supports at-risk students to remain engaged with their school and education.

Where was BRACE?

BRACE was implemented across 7 schools (8 campuses) in northwest metropolitan Melbourne and approximately 1,493 students participated in one or more components of BRACE.

What do Teachers think?

“I've been in this space for a really long time, and I just have never seen anything work as well as this does [for alcohol and drug issues], both for the young people, for their social networks and for ... changing things in families that have been in the addiction cycle for generations...shifting outside of that is remarkable.” (Senior School Leadership)

Counselling & Outreach

At-risk youth engaging in AOD use are identified in consultation with school health, wellbeing, and teaching staff. Referrals are made by school staff, parents/carers in addition to self-referral.

Report Card

Counselling and outreach (275 students participated in 762 counselling sessions)

Young people referred for counselling were on average 15.6 years old, there was an even gender split (including those who identified as nonbinary), and majority of students were in Year 10.

Although most were Australian born, there was representation from 45 different cultural backgrounds including Aboriginal and/or Torres Straits Islander peoples.

Counselling and outreach report card continued

The primary reason for referral was the young person's problematic AOD use (84%), mainly cannabis, vaping, and smoking cigarettes. However, a small proportion (9%) were referred due to concerns about their parent's AOD use.

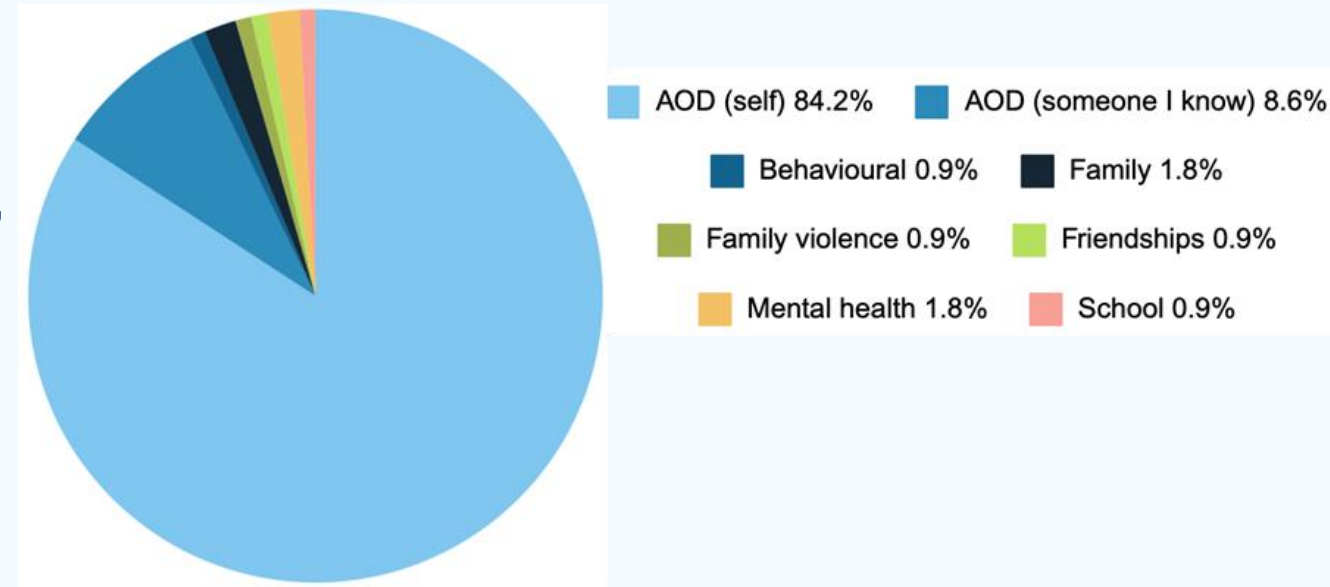


Figure 1. Primary reason for student referrals to counselling

Primary topics addressed in counselling

The most frequent topics addressed in counselling sessions were "Drugs", "Family", "Vaping", "School" and "mental health" highlighting the broad scope of the BRACE program's reach in addressing key aspects of student life and well-being.



Figure 2. Cloud map of most commonly discussed topics in counselling

Of the 222 students who accessed counselling and outreach support, 122 young people (55%) accessed multiple counselling sessions. detoxification.

Furthermore, 9 young people (4%) were referred to external services for further specialised support such as child protection support and drug

Results of the feedback survey

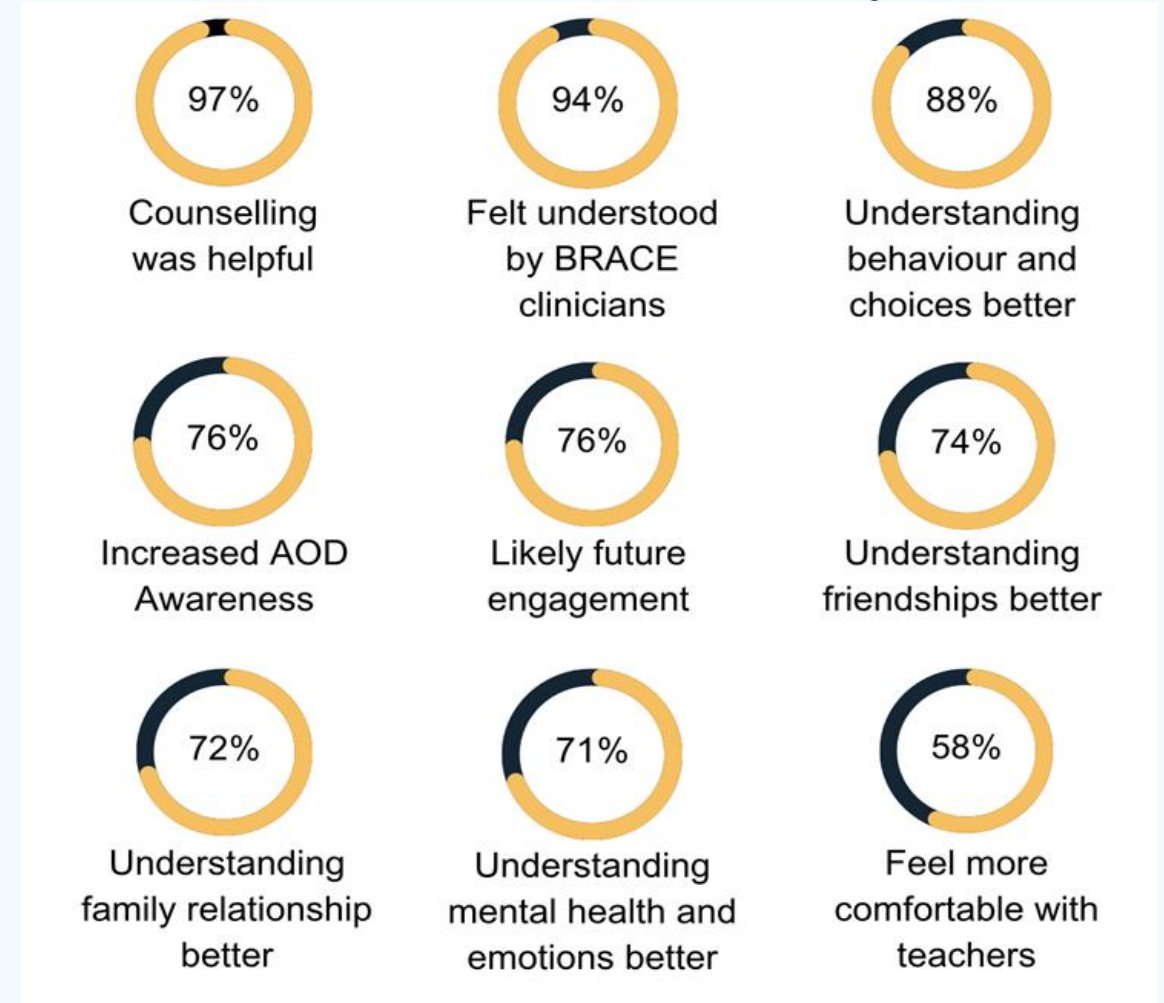


Figure 3. Proportion of students who agreed or strongly agreed with experiencing positive counselling outcomes

Therapeutic Camps

The therapeutic camps provide a safe and fun environment for engaging in prosocial and life-affirming activities. Set in rural/regional environments, the camps offer unique experiences within the natural environment. Young people are involved in planning the camp program, setting common goals, and fostering personal responsibility through actions and reflection.

Report Card

Therapeutic camps (138 students across 4 therapeutic camps)

Camps play a critical role in strengthening the relationships between clinicians, staff, and students, and facilitate ongoing program engagement post-camp.

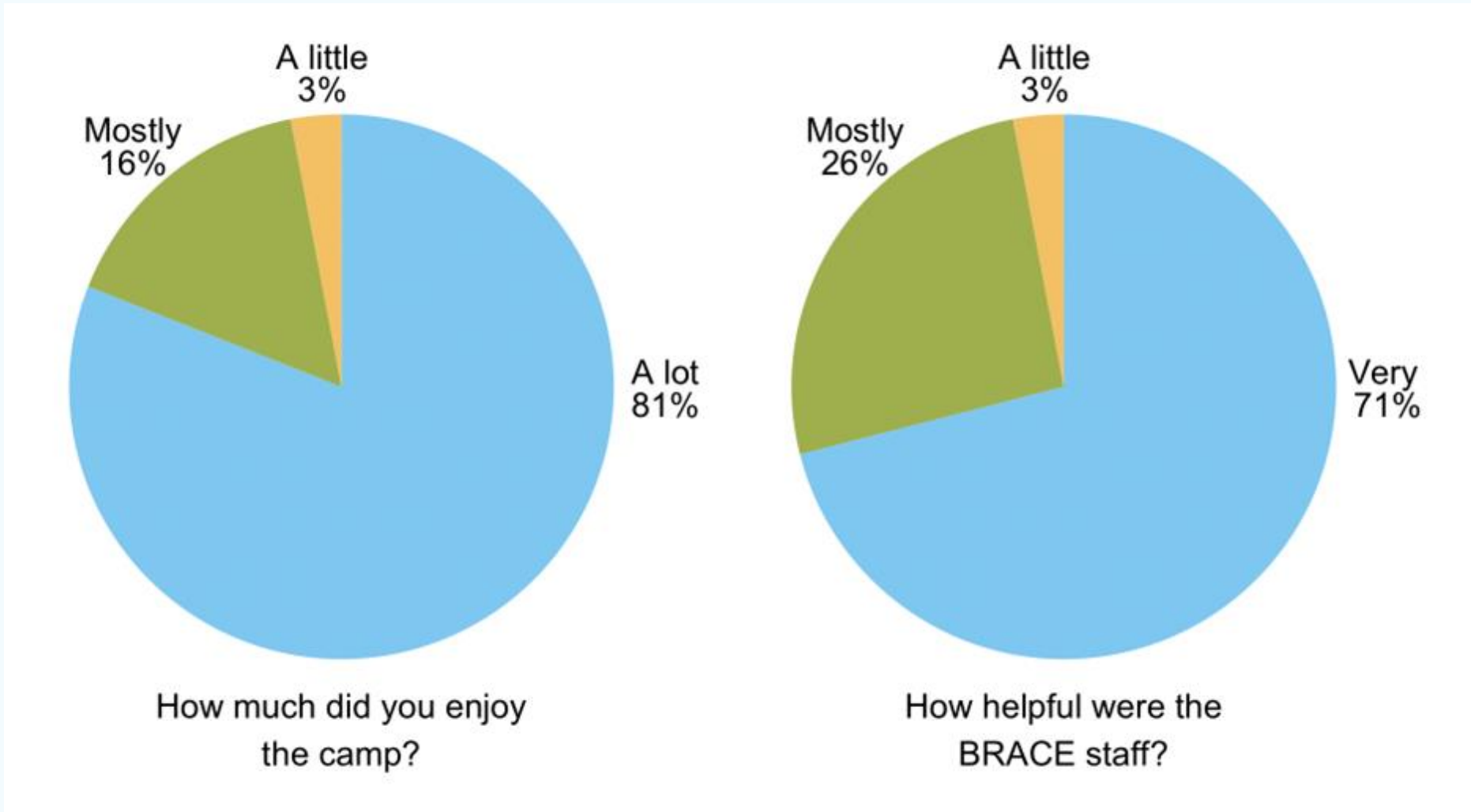


Figure 4. Student feedback on camp enjoyment and staff helpfulness (n=31)



Prosocial Group Activities

Prosocial group activities include drumming groups, art workshops and fitness classes and provide students with unique experiences that promote health, education, and creativity.

Report Card

Prosocial group activities (238 students participated in a range of prosocial structured group activities and many more informally);

They offer students an opportunity to participate in groups, enhancing their social skills, and provide a non-threatening environment in which students can discuss AOD use and related issues with an AOD clinician.



Report Card

Drumming workshop

Focus: Learning basic rhythm patterns with various percussion instruments.

Sessions: Six, one-hour sessions.

Attendance: Varied per session, ranging from 10 to 15 student, open to all students



Report Card

Hit Fit boxing program

Focus: Fitness and boxing program.

Session: 3 sessions on Friday afternoons on a weekly basis.

Attendance: Varied per session, ranging from 11 to 14 students chosen by welfare team.

AOD Education

The interactive AOD education program is integrated into the existing school curriculum under health and wellbeing units and is delivered to entire classes alongside their teachers.

It covers an AOD component primarily focusing on alcohol, vaping, cannabis, and synthetic drugs as well as mental health education, harm reduction strategies such as self-care, safe partying practices, and accessing AOD information. The curriculum is updated annually and includes up to date information about vaping, synthetic drugs and the impacts of COVID-19 on mental health.



Report Card

Drug education occurred at four schools and no school delivered all the modules. The party safe module was the most frequently delivered component (842 students participated in AOD education).

One staff member emphasised the importance of having the BRACE worker on site to implement it.

“The preventative work on education about AOD was very useful, ... having a BRACE worker made it really easy to implement because they were there, and they participated in developing that and running it which was really good.” -

School

Wellbeing Staff 07

There was also a sense that the students were positively engaged with the AOD education.

“The kids were happy to go and then they were happy to go again. They found it beneficial and made a connection ... seem to have been educated and have walked away with better understanding.” -

Wellbeing Staff 03



- Professional development for school and wellbeing staff focusing on support for at-risk students who are using AOD. Experts present on topics such as AOD risk behaviours and family violence related to addiction and offer strategies to help staff have conversations with students who are using AOD.

Staff Training and PD

A professional development session focusing on AOD use, mental health, and trauma was attended by a diverse group of 21 teachers/wellbeing staff, the majority of which were female across 11 schools.

Feedback from this session was overwhelmingly positive. An impressive 96% of the participants reported *somewhat* or *very* positive feedback on the delivery and relevance of the material provided.

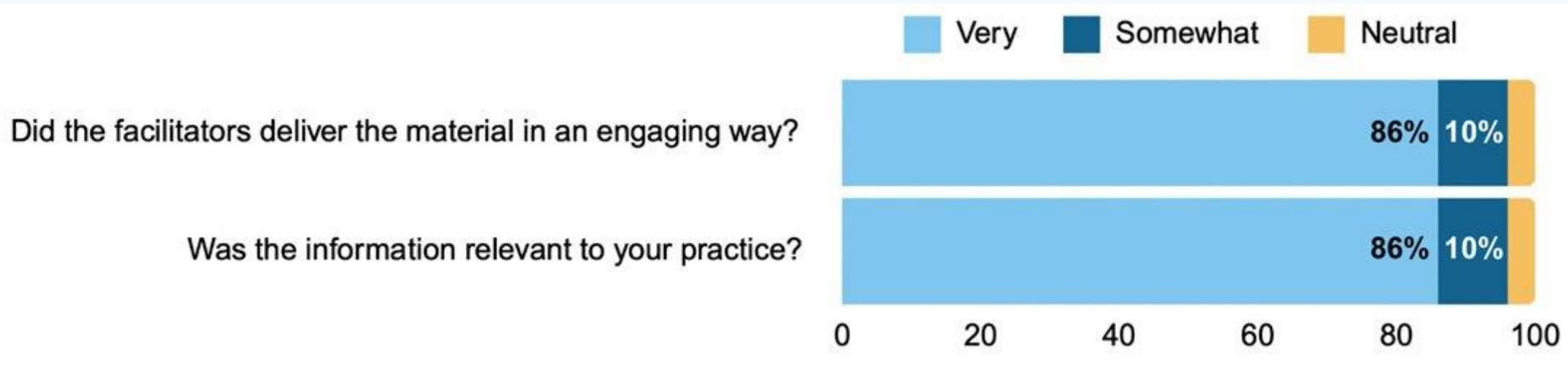


Figure 5. Satisfaction with the delivery and relevance of content

An improvement in staff confidence to address AOD, mental health and trauma in students was reported by 95% of attendees

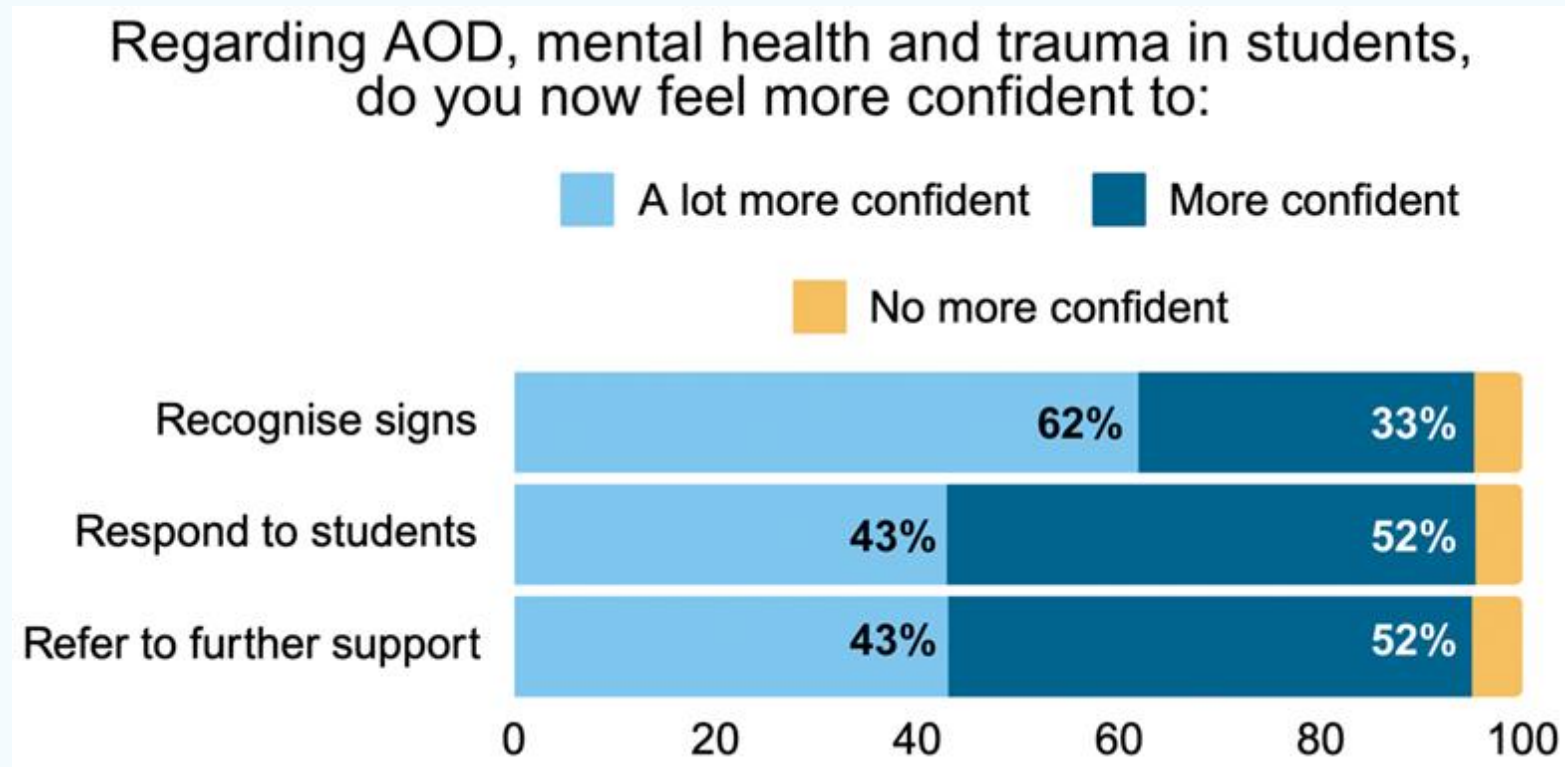


Figure 6. Changes in staff confidence with addressing student's AOD use, mental health problems and trauma following professional development training.

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<https://odyssey.org.au/resources/publications/>