Professor Brenda Happell. TheMHS Award – Outstanding Contribution

1 Service information additional to that covered in Part A

In 2015, Professor Happell moved to the University of Canberra and ACT Health as Professor of Nursing and Executive Director of Synergy, Nursing and Midwifery Research Centre. In June 2018 she retired from full time work and in August 2018 commenced a part time role at the University of Newcastle as Professor of Nursing.

Professor Happell’s professional involvement includes serving as a member of the:

- Queensland Mental Health and Drug Advisory Council (inaugural member) (2013-2016)
- Board Director of the Australian College of Mental Health Nurses (2008-2012, and 2014 – current)
- Chair Professional Issues Subcommittee (ACMHN) (2016-2019)
- ACT Mental Health Nursing Council (inaugural member) (2016-current)
- Director, Mansfield Hospital Board (2018-current)
- Equally Well Champion (2017 – current)

Professor Happell has been actively involved in organising conferences including:

- Chair Scientific Committee, European Conference on Mental Health (2016-current)
- Co-host Service User Academia Symposia (2012 – current), convened symposia at Central Queensland University in 2013 and University of Canberra in 2016
- Member, organising committee, TheMHS, Melbourne 1999
- Scientific committee member of conferences including the Australian College of Mental Health Nurses
- Regular reviewer of abstracts for multiple conferences

Professor Happell has been actively involved in reviewing grant applications including:

- NHMRC – Assistant Chair, 2016
- Australian Research Council
- Queensland Health

Professor Happell has also been engaged as a consultant to:

- The World Health Organisation
- Commonwealth Department of Health and Ageing
- Queensland Health
- Gold Coast Primary Health Care Network
- Department of Health and Human Services
- Southern Health Area Mental Health Service (Victoria)

Professor Happell’s membership of other key committees and working groups is also presented under Criteria 2.1 and 2.2.
2 Criteria

2.1 Evidence of a significant contribution to the field of mental health on a local, state or national level.

Professor Happell has made an outstanding contribution to mental health at local, state, national and international levels in the areas of consumer participation, physical health and mental illness, nurse education and academic achievements. I will present evidence under these four headings for criteria 2.1

Consumer participation

Professor Happell is recognised as a national and international leader in facilitating and promoting consumer participation roles in academia as an ally to the consumer movement. Her contributions (some presented in more detail under Criteria 2.2) include:

- Development of consumer academic roles at the University of Melbourne, Central Queensland University and the University of Canberra
- Research and published literature pertaining to consumer participation in the education of health professionals. Research findings highlight the positive impact of consumers in the education of health professionals, and have led to significant changes in nursing education
- Leading the implementation and evaluation of the consumer academic position at the University of Melbourne and Central Queensland University
- Role as a Chief Investigator in an international collaboration with the University of Iceland, Turku University Finland, University College Cork, Ireland, Dublin City University, Ireland, University of Applied Sciences Utrecht, the Netherlands, and Inland Norway University of Applied Sciences, Norway. The COMMUNE (Co-produced Mental Health Nursing Education) project contributed to the evidence-base for consumer involvement in nursing education. The first known of its kind in the world involved the development a mental health nursing unit of study, co-produced by Mental Health Consumers (Experts by Experience) and Nurse Academics, subsequently taught by Experts by Experience. Professor Happell worked collaboratively with Ms Julia Bocking, consumer researcher and Expert by Experience, to complete the Australian component. Professor Happell was invited to join the consortium due to her recognition as the leading nurse academic in this area of research and innovation.
- Leading the comprehensive mixed methods evaluation of the program in collaboration with Ms Bocking. The evaluation included: pre and post administration of questionnaires measuring student attitudes to mental illness, mental health nursing and consumer participation; focus groups with nursing students and individual interviews with Experts by Experience. Evaluation findings suggest Expert by Experience led teaching positively impacted both nursing students and Experts by Experience. Students became more understanding and less discriminatory towards people diagnosed with mental illnesses and felt more positive towards a career in the mental health field (Happell et al., 2018). Experts by Experience felt empowered and better prepared for future teaching activities. Professor Happell also provided an important mentorship role to team members from the European universities
who previously had little or no experience in working collaboratively with Experts by Experience. The dissemination plan, already underway includes presentations at national and international conferences and articles in professional and academic journals. Further information regarding publications can be found in Professor Happell’s brief CV below.

- Professor Happell has supervised to completion six PhD students with a specific focus on consumer participation, and who actively engaged with consumers as a key component of their research.

Professor Happell’s commitment to, and achievements in, promoting consumer involvement resulted in:

- Appointed as an Inaugural member of the Queensland Mental Health and Drug Advisory Council in 2013
- Invited member of the Advisory Committee for the ACT Consumer and Carer Mental Health Research Unit (ACACIA), Australian National University 2015 – 2017.
- Receiving the inaugural award Victorian Mental Illness Awareness Council (VMIAC) Lifetime Ally Award in 2018.

*Physical Health of People Diagnosed with mental illness*

Professor Happell has researched this topic since 2009. Her research agenda is driven from a human rights perspective, reflecting the right of people with mental illness to receive at least the same standard of attention to their physical health needs as the broader population. Her comprehensive research program includes:

- A qualitative study of nurses working in mental health in Central Queensland: exploring their perspectives as representatives of the largest professional group in the mental health workforce, and to consider potential solutions. The data showed nurses identified the importance of physical health care and identified significant barriers to regularly attending to physical health needs as part of their role. A specialist nursing position to promote and coordinate physical health care was raised as a potential solution (see Criteria 2.2)

- A comprehensive survey of members of the Australian College of Mental Health Nurses (n=643). Survey findings reinforced focus group findings and supported the finding that nurses value the importance of physical health care and identify significant barriers to its provision.

- A pilot study to investigate the potential of a Physical Health Nurse Consultant conducted at Central Queensland Mental Health Services. The findings suggested physical health nurse consultant working closely with consumers could facilitate and improve physical health outcomes in terms of physical activity, weight, fruit and vegetable intake and rates of smoking. The small sample size precluded any significant outcomes. However, results were sufficiently encouraging to warrant further research into this initiative.

- Focus groups with consumers and carers to further refine the Physical Health Nurse Consultant role and to reflect best practice in consumer and carer participation. Participants were asked to describe their experiences of physical health issues and receiving physical health care through health services for themselves or the person they care for:
  - Consumer focus groups demonstrated barriers to obtaining adequate physical health care and some experiences demonstrated
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discrimination, stigma and neglect. Consumers were generally supportive of the Physical Health Nurse Consultant role provided it reflected a public health, rather than a medical model approach to service delivery.

- Focus groups with carers demonstrated their frustration in obtaining quality physical health care for the people they care for. They described the health system as fragmented and mental health and physical health services were not well coordinated. As a result, they became care coordinators and did not believe they had the skills and expertise to undertake this role effectively. The Physical Health Nurse Consultant role was seen to have considerable merit in coordinating care, by professionals with the skill and expertise required.

- These research findings were significant in addressing the lack of consumer and carer voice in the physical health literature and acknowledging their role as important stakeholders and discovering solutions to this enduring problem. Furthermore these findings directly informed the development of the Physical Health Nurse Consultant. A trial of this role received NHMRC funding in 2017 and is currently being implemented at Canberra Hospital and Health services. For further information see criteria 2.2

**Mental Health Nurse Education**

Throughout her career, Professor Happell has been a strong advocate for mental health nursing education, particularly at the undergraduate level where attitudes to this important area of practice are often negative and can be positively influenced. Her contributions in this field include:

- Inaugural academic member of the Department of Psychiatric Nursing at Deakin University (formerly Victoria College). As part of a small team, she implemented, taught into, and coordinated components of the undergraduate Bachelor of Nursing (Psychiatric) program

- Leading development and implementation of the mental health units in the comprehensive Bachelor of Nursing program, following the cessation of specialist undergraduate nursing programs. Using problem based learning methods, students, who are often resistant to the mental health nursing program, became actively engaged in the learning materials. Professor Happell conducted an evaluation of this innovative teaching approach in collaboration with honours student Ms Louise Rushworth. The findings showed a significant change in attitude to mental health nursing amongst students who undertook the problem based mental health subject compared to students studying acute care nursing at the same time. Mental health nursing increased in popularity in the intervention group from a ranking of seven (of nine) career choices to number three, compared to no significant change in the control group.

- Leading a quantitative research project to measure nursing students’ attitudes to mental illness and mental health nursing, before and after completing the consumer-taught subject: *Recovery for Mental Health Practice*. Results suggested students completing the subject demonstrated more positive and less stigmatised attitudes to people with mental illness and an increased interest in mental health nursing as a career, compared to the traditional nurse-taught subject.
• As lead investigator for the Australian site of the COMMUNE project (described above), she facilitated implementation of the consumer academic position. The evaluations once again demonstrated positive attitudinal change. Student responses in focus groups described the importance of this approach for mental health nursing specialist practice, and for developing mental health skills required by nurses in all health care settings (Happell et al., in press).

Academic achievements

Professor Happell has an academic career spanning 29 years. She has worked for universities in Victoria, Queensland, The ACT and New South Wales. Professor Happell is the author of 458 peer reviewed publications, three books and nine book chapters. She is an Editor for the 4th Edition of leading Australian text: Mental Health in Australia: Collaborative Community Practice. Professor Happell's h-index is 39 (compared to an average of 15 for nursing professors reported in 2018) and she has received 6571 citations of her work. An editorial published in 2011 demonstrated Professor Happell's position as a leading nurse academic, with the highest number of publications of Australian nursing professors, second highest for h-index and third highest for citations (Hunt et al., 2011). An editorial published in 2018 reports Professor Happell to be the leader in publications for education-focused citations and second in citations for other research (Cooper et al., 2018). According to SciVal data base, she is the world leader in publication in the areas of mental health nursing, consumer participation, nurse education and ranked second for mental health.

Professor Happell was Editor-In-Chief for the International Journal of Mental Health Nursing (2004-2014) which developed from an unranked journal to the highest ranking mental health nursing journal and 5th highest nursing journal (of 106) under her leadership. She is Associate Editor, Issues in Mental Health Nursing; Editorial Board member of Perspectives in Psychiatric Care, Psychosis, Nurse, and Nurse Educator. She also serves as reviewer for approximately 20 international journals in the fields of psychiatry, general medicine, mental health, education and policy, including The Lancet, British Journal of Psychiatry and BMC Psychiatry.

Professor Happell has successfully obtained $14 million in competitive research funding, with most projects focusing on achieving improved health outcomes for people diagnosed with mental illness or the education of health professionals.

Professor Happell presents her findings regularly at national and international conferences including TheMHS, European Conference on Mental Health, Australian College of Mental Health Nurses, and Service User Academia. She has been engaged as a keynote or invited speaker 16 times in the past five years.

Throughout her career Professor Happell has provided strong mentorship to early career academics and higher degree students. This has led to very positive research outcomes and career development. She has supported staff to engage in research and scholarly activity and to disseminate their work through conference presentations and refereed publications (examples are included in her CV).

Professor Happell has been an active contributor and motivator for approximately 120 publications in refereed journals with early career academics and higher degree students. She has mentored academic staff to develop funding applications, and has contributed to and led successful external and internal grant applications in a
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mentornship role. For example, Dr Brett Scholz, Research Fellow supervised by Professor Happell 2015-2018 won the Early Career Award at TheMHS in 2018. Professor Happell has a strong track record in the supervision of higher degree students. She has supervised 15 PhD students and three Masters by Research students to successful completion.

Professor Happell’s research and translation work has been recognised by a Queensland Mental Health Week Mental Health Achievement Award (2013), Vice Chancellor’s Award for Outstanding Research (2012) and Vice Chancellor’s Award for Excellence in Higher Degree Supervision.

2.2 Evidence of innovation and/or recognised best practise

Professor Happell’s achievements are highly innovative. Her work in consumer participation, physical health and mental illness and mental health nursing education has contributed directly to changes in education, practice and policy and to the development of best practice guidelines. I will present an overview of these innovations under the headings of consumer participation in mental health, physical health of people diagnosed with mental illness and mental health nursing education.

Consumer participation in mental health

Professor Happell is regarded as a leading ally to the consumer movement in Australia and internationally. She advocates at all opportunity for genuine inclusion of mental health consumers in the education of health professionals. The following examples provide evidence of her commitment and leadership:

- Leading the implementation of the world’s first known consumer-academic position at the University of Melbourne. The role involved teaching postgraduate mental health nursing students from a consumer perspective, and providing consumer perspective to the research and professional development activities of the Centre for Psychiatric Nursing. Ms Cath Roper has held this position since her appointment in 2001. The autonomy of and support for this role, created an environment for Ms Roper to develop and expand it considerably. Ms Roper develops and co-delivers training across specialist mental health service setting, and co-ordinates, teaches, assesses a core consumer perspective subject in the Postgraduate Diploma in Nursing, Mental Health. Ms Roper has co-chaired government committees, worked as a consumer surveyor with the Australian Council on Healthcare Standards, been engaged for policy development, and built up strong, collegial relationships with local, national and international service user academics and leaders. Ms Roper won the Gold Achievement Award at TheMHS in 2003 and the inaugural Lifetime Achievement Award, Victorian Mental Illness Awareness Council in 2016 in recognition of her outstanding achievements in consumer participation. Happell and Roper co-wrote a foundational manuscript describing key components of a successful consumer academic position (Happell and Roper, 2009). They are currently collaborating on a research project investigating the attitudes of non-consumer mental health researchers to working with consumer researchers.

- Developed and implemented a consumer academic position at Central Queensland University. Dr Louise Byrne was initially employed with grant funds to develop and implement an elective subject Recovery for Mental
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Health Practice for undergraduate nursing students. Professor Happell led a research team to evaluate this initiative. The findings were extremely positive with students overwhelmingly advocating the subject become core for all nursing students (Byrne et al., 2013). As a result of this position evaluation the subject became core for the revised Bachelor of Nursing program and a more advanced subject was developed for the Post-Graduate Diploma in Mental Health Nursing. Central Queensland University won the Organisational Award at the 2013 Queensland Mental Health Week Achievement Awards for this innovation. The educational program led by Professor Happell was acknowledged as leading the way in Australia and internationally in consumer involvement in mental health nursing education and research.

- These two positions led the way for the introduction of academic positions for consumers in Australia, New Zealand (Schneebeli et al., 2010) and the United Kingdom (Simons et al., 2007) all being to some degree modelled on the initial position. The research program led by Professor Happell has demonstrated that consumer participation in mental health nursing education can positively influence student attitudes and beliefs. Researcher frequently request the questionnaires developed by Professor Happell and her team to undertake further research.

- Professor Happell secured a co-funded industry scholarship in collaboration with Queensland Health for Dr Byrne to undertake her PhD studies and was primary supervisor for the work. Dr Bryne’s thesis entitled: A grounded theory of lived experience mental health practitioners within the wider workforce, has contributed to an enhanced understanding of consumer roles in Australia and Internationally. Dr Byrne was appointed as the inaugural RMIT Fulbright Postdoctoral Scholarship in 2017 in acknowledgment of her scholarship and leadership role in consumer participation.

- As part of the COMMUNE project (see 2.1), the team is currently finalising a Best Practice Handbook describing the process of developing and implementing the unit of study as a guide to universities seeking to implement a similar initiative. The handbook will include teaching ideas and resources developed through the project. It will be made freely available to the mental health community.

- Professor Happell was engaged by the Commonwealth Department of Health and Ageing to complete a consultancy to analyse seclusion data for 11 mental health services across Australia in 2008-09, and was lead author on a commissioned report and several publications. This data was used by services to review practices from 2010 with some services reporting a significant reduction in the use of seclusion. Revised seclusion standards were embedded in Australian mental health policy in 2011.

Physical Health of People Diagnosed with Mental Illness

- Professor Happell is a leading researcher nationally and internationally in the area of physical health of people diagnosed with mental illness. She is lead investigator on an NHMRC grant entitled: Improving the cardiometabolic health of people with psychosis: The Physical Health Nurse Consultant service. The project involves collaboration across five universities and the Australian
Institute for Health and Welfare, and includes a multidisciplinary with expertise including: mental health nursing, psychiatry, psychology, consumer perspective, health economics and statistics. The innovative Physical Health Nurse Consultant position was developed by a multidisciplinary research team, in close collaboration with industry, and is directly informed by research undertaken with consumers, carers and nurses in mental health (see 2.1). This position is being trialled in the ACT, Canberra Hospital and Health Services. A Randomised Controlled Trial is comparing the Physical Health Nurse Consultant to treatment as usual. A comprehensive evaluation will compare the two groups using clinical outcomes, access to and acceptability of treatment, quality of life, burden of disease and cost effectiveness. A key feature of this specialist role is its consumer-focused orientation and the use of supported decision making to identify key goals and strategies that reflect each consumer’s lifestyle and preferences. If evaluation is positive, this strategy could provide a model for the improvement of physical health care within mental health services and address a major health inequity.

- Due to her research into the physical health of people with mental illness, Professor Happell was invited by the National Mental Health Commission to participate in development of a National Consensus Statement on the Physical Health of Mental Health Consumers.
- A pilot of a specialist mental health nursing position (see criteria 2.1) to improve health and primary care access in community mental health consumers under my leadership led the Central Queensland Mental Health Service and Ramsay Health Archerview Inpatient Mental Health Unit to revise their clinical practices for routine metabolic monitoring. This has led to earlier detection of metabolic syndrome risk factors in mental health consumers in Central Queensland.

Mental health nursing education

Professor Happell's contribution to mental health nursing education is outlined in detail under criteria 2.1. This section will outline how two specific initiatives led to significant change in the educational programs:

- At the University of Melbourne Professor Happell provided support and mentorship to Ms Cath Roper to implement consumer perspective education to postgraduate mental health nursing students. Evaluations and research accompanying this innovative practice showed a significant attitudinal change among students following this experience (Happell et al., 2003). These positive evaluations were used to make a case for a full compulsory and discrete subject on consumer perspectives which continues to be part of the postgraduate diploma in mental health nursing at the University of Melbourne to this day.
- At Central Queensland University Professor Happell successfully obtained Commonwealth government funding to enhance the mental health content of the undergraduate program and to introduce a major stream in mental health nursing. A significant feature of both programs was the inclusion of consumer perspective. Dr Louise Byrne, consumer academic developed and taught the subject: Recovery for mental health practice. Evaluation of this subject led by Professor Happell demonstrated sufficient positive outcomes to convince senior staff of the School of Nursing to include the subject as core for all undergraduate nursing students in the revised Bachelor of Nursing Program.
Professor Brenda Happell has contributed to improved mental health nursing through her active membership of key committees and working groups including:

- Victorian Nursing Council: Subcommittee for review of Mental Health/Psychiatric Nursing Component of the Undergraduate Nursing Program, 2001-2002
- Victorian Nursing Council: Subcommittee for review of Post Graduate Mental Health Nursing Education – 2004
- Australian College of Mental Health Nurses: National Framework for Postgraduate Mental Health Nursing Education, Steering Group.

These committees and working groups all produced best practice guidelines and principles to underpin mental health nursing education which directly influenced the content and delivery of mental health nursing education on a state and national basis.

References:


3 Conclusion

The evidence presented above clearly demonstrates the outstanding contribution Professor Brenda Happell has made to mental health during her career. Her research activities, committee membership, teaching and community service have demonstrated her commitment to improving mental health outcomes for people diagnosed with mental illness. Professor Happell’s research and other academic activities have been pivotal in making significant changes to practice, policy and education. In particular, the introduction of consumer academic positions has demonstrated positive influence on attitudes of nursing students to people diagnosed with mental illness and increased interest in mental health nursing as a career. The identified attitudinal change is likely to result in a nursing workforce with the skills and knowledge required to provide support and care to people diagnosed with mental illness and experiencing mental distress in all areas of health care. Professor Happell’s research into physical health of people experiencing mental illness has led to the development of an evidence-based role Physical Health Nurse Consultant. This model presents a strategic and solution focused approach to addressing an enduring problem. Professor Happell has been a member of a number of key committees addressing mental health nursing education, physical health and mental illness and promoting consumer participation. She and teams she has led have received awards for their innovative research and practice. I have no hesitation in recommending her for this award, her contributions have been, and will continue to be exceptional.

4. References

Removed for privacy.
5 Supplementary material

ORIGINAL ARTICLE

Changing attitudes: The impact of Expert by Experience involvement in Mental Health Nursing Education: An international survey study

Brenda Happell,1 Chris Piatania-Pheng,2 Brett Schulz,3 Julia Bocking,4 Aine Horgan,4 Fiona Maunder5 Rory Doody,6 Elisabeth Hals,7 Arild Granerus,8 Mari Lahti,5,7 Jarmo Pulkkko8 Annaliina Vatula,8 Johanna Koski,8,9 Komelis Jan van der Vaart,9 Jerry Allon9 Martha Griffin,10 Siobhan Russell,11 Liam MacGabhann,11 Einar Björnsson10 and Pall Biering10

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ABSTRACT: Reform to nursing education is essential to ensure future generations of nurses are strongly positioned to value, know, and deliver strength-based, recovery-oriented mental health practice. A promising pathway to effectively drive reform is the co-production of curricula by nursing academics and people with lived experience of recovery from mental distress referred to as Experts by Experience. The Co-production in Mental Health Nursing Education (COMMUNE) project is an international collaboration for development and implementation of consumer co-produced curricula. This study evaluated the inclusion of Expert by Experience-led mental health nursing education on nursing students’ attitudes to people labelled with mental illness, mental health nursing, and consumer participation. A repeated self-report measure design was implemented in Australia, Ireland, and Finland to ascertain level of generalisability of consumer involvement within undergraduate nursing programmes. Data were collected from nursing students (n = 104) immediately before and after the education module, using three self-report instruments on attitudes (Mental Health Nurse Education survey, Consumer Participation Questionnaire, and Opening Minds scale). Data were analysed using descriptive and inferential statistics. Eighty-nine per cent of the 27 points of change reflected more favourable and accepting attitudinal change. Of these, 41% were significant at Bonferroni adjusted alpha of 0.0025. There was a statistically significant increase in preparedness for practice in the mental health field in each of the three countries. The most pronounced change is related to the social and systemic inclusion of people with a diagnostic label and recovery oriented care more broadly.

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Consumers at the centre: interprofessional solutions for meeting mental health consumers’ physical health needs

Brenda Happell, Chris Platania-Phung, Julia Bocking, Stephanie B. Ewart, Brett Scholz & Robert Stanton

Abstract

Interprofessional care and consumer-oriented services are embodied in modern healthcare policy and practice. The views, needs, and values of consumers are essential to ensuring translation of policy to practice. This is particularly pertinent for people diagnosed with mental illness who experience a higher risk of physical health problems and premature death. A qualitative, exploratory research project was conducted, involving focus groups with members of a mental health consumer group in the Australian Capital Territory. Participants were asked about their experiences and opinions in relation to physical health and care and treatment provided. Focus group transcripts were thematically analysed.

Three themes arose via analysis: (1) Meeting diverse physical healthcare needs, where mental health consumers connect with many types of healthcare providers, conventional and non-conventional; (2) Centre of the interprofessional team for holistic care, where there is a preference for a consumer-centred group effort in addressing health issues as the model of care, and (3) More gateways, less gatekeeping, where points of access were affected by cost, place, and gatekeepers could be enabling. People with mental illness seek enhanced collaboration between a broader range of health professionals, with potential to contribute to their overall health and well-being.
Physical health and mental illness: listening to the voice of carers

Brenda Happell1, Karen Wilson2, Chris Platania-Phung3, and Robert Stanton2

Synergy, Nursing and Midwifery Research Centre, University of Canberra and ACT Health, Australian Capital Territory, Australia and 1 Central Queensland University, School of Medical and Applied Sciences, Rockhampton, Queensland, Australia

Abstract
Background: Shortened life expectancy of people with mental illness is now widely known and the focus of research and policy activity. To date, research has primarily reflected perspectives of health professionals with limited attention to the views and opinions of those most closely affected. The voice of carers is particularly minimal, despite policy stipulating carer participation is required for mental health services.

Aim: To present views and opinions of carers regarding physical health of the people they care for.

Methods: Qualitative exploratory. Two focus groups and one individual interview were conducted with 13 people identifying as carers of a person with mental illness. Research was conducted in the Australian Capital Territory. Data analysis was based on the thematic framework of Braun and Clarke.

Results: Two main themes were interaction between physical and mental health and carers' own physical and mental health. Participants described the impact of mental illness and its treatments on physical health, including their own.

Conclusions: Carers are acknowledged as crucial for the delivery of high quality mental health services. Therefore they have an important role to play in addressing the poor physical health of people with mental illness. Hearing their views and opinions is essential.
ORIGINAL ARTICLE

Promoting recovery-oriented mental health nursing practice through consumer participation in mental health nursing education

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SYNERGY: Nursing and Midwifery Research Centre, University of Canberra and ACT Health, Woden, ACT, Australia. Independent Mental Health Authority, Melbourne, Australia, and School of Nursing and Midwifery, Curtin University, Perth, Australia.

Abstract

Background: Developing recovery-oriented services, and ensuring genuine consumer participation in all aspects of services are central components of contemporary Australian mental health policy. However, attitudes of mental health professionals present a significant barrier. Given the positive impact of education on health professionals’ attitudes, particularly when consumers are involved, further exploration of consumer involvement in education is required. Aims: To enhance understanding of the role consumers can play within mental health nursing education.

Method: A qualitative exploratory project was undertaken involving individual interviews with mental health nurses and consumers.

Results: Two main themes emerged from nurse participants: Recovery in action, consumer educators were able to demonstrate and describe their own recovery journey, and not representative, some participants believed consumer educators did not necessarily reflect views and opinions of consumers more broadly. Two main themes for consumers were: the truth about recovery, consumer educators demonstrated recovery as an achievable goal, and that a real consumer, where health professionals too often the consumer experience as unrepresentative and therefore not credible.

Conclusions: Consumer participation can contribute positively to nurse education, however, representativeness presents a major barrier, potentially enabling nurses to dismiss experiences of consumer academics and educators as exceptional rather than typical.

Keywords

Barriers, consumer participation, mental health, mental health nursing, recovery, representation

History

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Risky business: Lived experience mental health practice, nurses as potential allies

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1School of Nursing and Midwifery, Higher Education Division, Qld University Rockhampton, Rockhampton, and 2SYNERGY: Nursing and Midwifery Research Centre, University of Canberra, and ACT Health, Canberra, Australia

ABSTRACT: Mental health policy includes a clear expectation that consumers will participate in all aspects of the design and delivery of mental health services. This edict has led to employment roles for people with lived experience of significant mental health challenges and service use. Despite the proliferation of these roles, research into factors impacting their success or otherwise is limited. This paper presents findings from a grounded theory study investigating the experiences of lived experience practitioners in the context of their employment. In-depth interviews were conducted with 13 Lived Experience Practitioners. Risk was identified as a core category, and included sub-categories: vulnerability, ‘out and proud’, fear to disclose, and selfcare. Essentially participants described the unique vulnerabilities of their mental health challenges being known, and while there were many positives about disclosing there was also apprehension about personal information being so publically known. Self-care techniques were important mediators against these identified risks. The success of lived experience roles requires support and nurses can play an important role, given the size of the nursing workforce in mental health, the close relationships nurses enjoy with consumers and the contribution they have made to the development of lived experience roles within academia.

KEY WORDS: consumer participation, lived experience, mental health, mental health nursing, peer workforce, risk.
Lived-experience participation in nurse education: Reducing stigma and enhancing popularity

Brenda Happell,1,2 Louise Byrne1,2 Chris Plaxton-Phung1,2 Scott Harris,1,2 Julie Bradshaw1,2 and Jonathan Davies1,2
Central Queensland University, Institute for Health and Social Science Research, Centre for Mental Health Nursing
Innovation, and School of Nursing and Midwifery, Rockhampton, Queensland, Australia

ABSTRACT: Mental health nursing consistently emerges as less popular than other specialties, and both service users and mental health practitioners are affected by negative attitudes. Education is fundamental to attracting students to the field of mental health nursing. The aim of this study was to determine the impact of undergraduate mental health curricula on student attitudes to people with mental illness, and career interest in mental health nursing. A traditional mental health course was compared to a course delivered by a person with lived experience of mental illness and mental health service users for its impact on student attitudes and career intentions in mental health nursing (cohort 1: n = 70; cohort 2: n = 131, respectively). In both cohorts, attitudes were measured via self-report, before and after the course, and changes were investigated through within-subject t tests. The lived-experience-led course demonstrated statistically-significant positive changes in intentions to pursue mental health nursing and a decrease in negative stereotypes, which were not observed in the traditional course. The valuable contribution of mental health nursing emerged in the traditional, but not lived-experience-led, programme. These findings support the value of an academic with lived experience of mental health challenges in promoting attraction to mental health nursing as a career option.

KEY WORDS: attitude, consumer participation, lived-experience participation, lived-experience practitioner, mental health nursing, undergraduate education.
Professor Happell receiving VMIAC Inaugural Lifetime Ally award from President Ms Vrinda Edan 2018.

Receiving Organisational Award (Central Queensland University) for Innovative Mental Health Nursing Program, Queensland Mental Health Week 2013.
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Receiving Vice Chancellor’s Award for Excellence in Higher Degree supervision from Vice Chancellor Professor Scott Bowman.

CQU professor gains major respect for mental health journal
6 Professor Brenda Happell – Brief CV 2019

Grants awarded – selected


Happell, B. (2015). Physical health of people with mental illness: Carers’ perspectives. ACT Health Mental Health Policy Unit and Carers ACT. $6,000.00

Wynaden, D., Heslop, K., Laughame, J., Happell, B. (2014). Pathways to primary care: Improving the physical health outcomes of people with severe mental illness. Western Australian Department of Health. $322,000.00


Happell, B., Hoey, W. & Scott, D. (2012). A Pilot Study of Cardiometabolic Health Nursing in a Community Mental Health Service. Australian Centre for Health Services Innovation Stimulus Grant, $73,000


Happell, B. & Byrne, L. (2011). Consumer and Health Professional Capacity Building Project. Capricornia Division of General Practice. $50,500


Publications in refereed journals - selected


**Keynote/Invited Presentations:**


Happell, B. (2015). *Sounds of silence - consumer and carer voices in promoting physical health within mental health care*. TheMHS Carers day, Canberra, Australia.