THE UNIVERSITY OF SYDNEY
Matilda Centre

PREMISE NEXT GENERATION

Towards a new National Cultural Policy

Submission by The Matilda Centre for Research in Mental Health and Substance Use, The University of Sydney and PREMISE Next Generation NHMRC Centre of Research Excellence in Prevention of Mental Illness and Substance Use, The University of Sydney

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About the Matilda Centre

Founded in 2018, the Matilda Centre for Research in Mental Health and Substance Use is a multidisciplinary research centre committed to improving the health and wellbeing of people affected by substance use and mental disorders.

Led by Distinguished Professor **Maree Teesson** AC, the Matilda Centre is built upon 30+ years of collaborative world-leading research into mental health and substance use prevention, treatment, epidemiology and research capacity building.

We generate innovative and workable solutions to address substance use, mental disorders, and their co-occurrence, which are currently leading global causes of burden and disease.

We work closely with research collaborators, clinicians, educators, policy experts and people with lived experience to share skills, synergise data and harness new technologies to develop and trial innovative programs to prevent and treat substance use and mental disorders.

We are committed to leading research to build the evidence base for a thriving and empowered population across the lifespan. We do this by acting as a focal point and link between researchers, policy leaders, clinicians, youth and people with lived experience to create a healthier tomorrow for everyone.

The Matilda Centre hosts the PREMISE Next Generation Centre of Research Excellence (CRE) in Prevention of Mental Illness and Substance Use. Funded in 2024 by the Australian National Health and Medical Research Council the CRE brings together 7 world-leading translational research centres in youth mental health and substance use, together with Australia's largest group of health economists dedicated to mental health to meet significant new challenges in the prevention of mental health and substance use disorders.

Acknowledgement

We recognise and pay respect to the Elders and communities – past and present – of the lands that the University of Sydney's campuses stand on. For thousands of years, they have shared and exchanged knowledges across innumerable generations for the benefit of all.

We acknowledge the journeys of people with lived and living experience of mental health and substance use issues. We recognize the complexity of their experiences, and the need to listen and embed living/lived experience voices in research and practice.

Lived/living experience engagement is central to the Matilda Centre. Through advisory networks including the Youth Advisory Board (YAB) and the Lived Experience in Research Network (LEARN), people with lived and living experience are actively involved in the planning, design, and evaluation of our research and related activities.

The YAB comprises a culturally, linguistically and gender diverse group of young people aged 16-25, with representatives from metropolitan, rural, regional and remote areas of Australia. They bring expertise and an interest in mental health and substance use via their own lived experience, that of their families or communities.
The LEARN is a community of people aged 18 years and over with lived and living experience of mental health and/or substance use conditions. LEARN members are passionate about using their knowledge and expertise to inform and shape research and related activities.

Projects also establish specific Expert Advisory Groups (EAGs) as needed, providing oversight and incorporating expertise from stakeholders such as health workers, educators, Aboriginal Elders and researchers. By fostering respectful, inclusive, and collaborative partnerships, we support people with lived and living experience to contribute meaningfully. These partnerships ensure that our research is responsive to the diverse needs, preferences, and values of the people we serve.

Executive Summary

Australia's National Cultural Policy, *Revive*, is due to end in 2027. At the heart of this policy is the goal to ensure there is a place for every story, and a story for every place. The Matilda Centre welcomes the development of a new National Cultural Policy, building on the success of *Revive,* to shape the future direction of the creative and cultural sector and position arts, culture and heritages as central to Australia's future.

A strong and growing body of research indicates that participation in arts-based methods or programs (e.g., drawing, painting, storytelling, crafting, drama, photovoice) delivers measurable social and health benefits [1-4]. It is vital that the new National Cultural Policy continues to highlight the importance of arts in supporting improved health and wellbeing outcomes, particularly among young Australians. The National Cultural Policy also represents an opportunity to respond to calls from The World Health Organisation and other bodies for innovative research to fill critical knowledge gaps, validate the promising evidence and encourage arts engagement at individual and national levels.

Our submission highlights the important role that arts and culture can play in improving mental health and wellbeing, responding to trauma and encouraging social inclusion, while also reducing stigma associated with mental health and co-occurring conditions. We provide evidence on arts and culture-based methods with a focus on childhood development, trauma informed responses, First Nations peoples, and stigmatised communities.

In line with the 5 pillars, the new National Cultural Policy should include

- Sustained investment in arts and culture-based programs, particularly for children, young people and communities disproportionately impacted by trauma, substance use, and violence.
- Significant investment to build the evidence-base and raise the profile of the use of arts and culture in supporting and improving mental health and wellbeing.
- Specific support and investment for artists with living/lived experience of mental health (including those with co-occurring conditions such as substance use disorders) to share their journeys with the wider Australian community to reduce the stigma and discrimination associated with mental health conditions.
- Sustained investment for partnerships between artists, schools, community and/or cultural organisations, researchers and people with living/lived experience is essential to ensure that art-based programs are culturally responsive, ethically delivered and rigorously evaluated.

Our submission demonstrates the potential for the new National Cultural Policy to support efforts to reduce mental health and substance use-related harms in Australia.

Background

Mental health and substance use disorders are common health conditions both globally and in Australia. The 2020-21 Australian National Study of Mental Health and Wellbeing (NSMHWB) found that 43% of Australians had experienced a mental disorder in their lifetime, with 20% experiencing a substance use disorder [5]. Mental and substance use disorders were responsible for an estimated 15% of the total burden of disease in Australia in 2024 [6]. Among young people, substance use and mental disorders are the leading global causes of burden of disease, with mental ill health accounting for over 45% of the burden of disease among 10–24-year-olds [7-9]. The peak of this disability occurs in those aged 15-24 years old, with up to 75% of onsets occurring by age 25 [9, 10]. Indeed, 3 in 4 people with a substance use or mental disorder will develop it before leaving school. Critically, substance use disorders, depression, suicide, anxiety, and psychosis frequently co-occur, share common risk factors, and interact with one another [11]. Effective prevention and early intervention can significantly reduce this disease burden by halting, delaying, and interrupting the onset and progression of disorders [12-18]. Thus, it is essential that research and policy efforts focus on innovative solutions.

Arts-based methods (e.g., drawing, painting, storytelling, crafting, photovoice) have been shown to promote wellbeing, increase people's sense of agency and autonomy, improve connectedness, and facilitate social inclusion [19]. Importantly, arts-based methods have cross-cultural applicability, empowering people across different identities to explore complex issues and experiences in a psychologically safe manner [20]. A strong and growing body of research indicates that participation in arts-based activities delivers measurable social and health benefits. Art therapies and artistic interventions have been shown to reduce stress and anxiety symptoms and enhance social and psychological recovery from mental ill-health. Evidence shows that engagement in the arts can help people to feel increased self-empowerment, agency and self-efficacy [21]. Importantly, arts-based approaches offer distinct advantages in their accessibility and inclusivity. Unlike many clinical or educational interventions, arts practices are not reliant on verbal communication, making them broadly accessible and increasing their acceptability amongst culturally and linguistically diverse communities [22].

The arts also play a critical role in health communication and education. Art-based methods of enquiry and discussion have shown positive health communication and education outcomes, particularly in relation to highly stigmatised topics like mental illness [23, 24]. Stigma is known to cause isolation and inhibit help-seeking behaviours due to increased difficulty in recognising and addressing problems for fear of peer pressure and negative perception [24]. Participants in arts-based community action projects have reported renewed feelings empowerment and positivity about perceptions of mental health when addressing and exploring them in a creative context [23]. Furthermore, **the arts have been shown to improve communication and education relating to mental health by the generation of culturally relevant, memorable and actionable content** [25].

Beyond mental health alone, arts engagement is increasingly recognised as a valuable tool for addressing significant broader public health challenges like climate change, natural disasters, mass violence or crises [26, 27]. For example, emerging evidence highlights that participation in the arts can lead to better capacity for emotional processing, understanding of climate change and its effects, as well as effective health promotion activities and community resilience [28].

Despite a promising pool of evidence supporting engagement in arts and culture as a driver of health, wellbeing and recovery, the literature continues to affirm the presence of structural and funding barriers inhibiting its integration into policy and practice [25]. Reasons for this include a general lack of understanding and accepted value amongst funding bodies, resulting in fragmented and restricted funding arrangements and a lack of consistent recognition of the arts' contribution to health outcomes. **Without sustained investment, cross-sector collaboration and recognition, the full benefits of arts-based approaches cannot be realised [28].**

Global health authorities including the World Health Organisation [29] continue to call for deeper integration and implementation of the arts into public health and wellbeing sectors, recognizing their multifaceted potential to deliver economic, social and health value for communities [29]. Aligning Australia's National Cultural Policy with these calls presents a clear opportunity to strengthen and enhance health and social outcomes across Australia and into the future.

Multifaceted benefits of the arts and culture for promoting wellbeing and mental health across the lifespan

Across the Matilda Centre, there are several innovative research projects being undertaken to explore the role of arts and/or culture in supporting mental health and wellbeing across diverse groups including children, young people, those exposed to trauma, and First Nations communities.

Arts in early education to improve mental health and wellbeing

Around one in seven children aged 4 -11 [30] experience a diagnosable mental health condition, and rates of emotional and behavioural difficulties have risen sharply over the past decade. Schools and early learning settings are now on the frontline of prevention, but the tools available to them remain narrow and often clinical. The

arts offer a different starting point. A growing body of international evidence shows that participation in creative activities supports children's emotional regulation, social skills, and sense of self [31-33].

Pretend play is an embodied practice and a creative process, a prelude to the performing arts, such as drama and dance. Early pretend play ability in early childhood has been linked to later child mental health [34]. **123Play** is a pretend play-based program developed in Australia for children aged 3 - 5 attending early learning centres. It uses guided pretend play, movement, and creative exploration to build self-regulated agency and reduce emotional and behavioural difficulties during a critical developmental window. Our recent pilot study showed that the program is feasible and acceptable to educators and children, with promising signals on children's wellbeing, self-regulated agency, emotional and behavioural difficulties.

The most promising programs should rely on classroom educators, early childhood teachers, and community arts practitioners, not on visiting specialists. Sustaining this work requires investment in professional learning, understanding educators' perspectives, ongoing mentoring, and partnerships between cultural institutions and education providers [34]. Research is needed to understand how to build and retain this hybrid workforce, particularly in regional and outer-metropolitan areas.

Role of drama in trauma treatment

Trauma is a major public health issue with psychological, social and economic consequences [35]. It is associated with increased risk of mental health difficulties, service use, comorbidity and intergenerational disadvantage [36, 37]. While evidence-based psychological therapies remain essential, trauma recovery is not solely a clinical process. It also involves rebuilding safety, identity, connection, agency and participation in community life. Drama is relevant to this broader recovery landscape because it offers a participatory, embodied and relational form of arts engagement that can be delivered across clinical, community and education settings.

Drama-based approaches are increasingly being used with trauma-exposed populations across clinical, community and education settings [38, 39]. Existing research suggests these approaches may have a role within broader trauma-informed mental health responses, particularly where conventional clinical services may be inaccessible, unacceptable or insufficient. A recent systematic review identified 26 studies of drama-based interventions for trauma-exposed populations [40]. Across these studies, some findings suggested improvements in post-traumatic stress symptoms, anxiety, depression, psychological distress and broader wellbeing.

For policy, the implication is not that drama should be treated as a proven standalone trauma treatment. Rather, drama-based approaches should be recognised as a promising but under-researched area within arts, health and trauma recovery. Their potential contribution lies in offering flexible, participatory and culturally adaptable

forms of engagement that may complement existing mental health services, particularly in community, school and other youth and educational settings.

A national cultural policy should therefore advocate for sustained investment in trauma-informed arts programs, particularly for young people and communities affected by violence, displacement, disaster, substance use and social exclusion. This includes supporting partnerships between artists, cultural organisations, schools, community services and mental health researchers, so that drama-based programs are accessible, culturally responsive, ethically delivered and appropriately evaluated.

The importance of culture for promoting wellbeing and mental health

Aboriginal and Torres Strait Islander peoples have sustained the world's oldest continuing cultures through deep connections to kinship, Country, and community. This strength and resilience endures despite the ongoing impacts of colonisation, discrimination, and intergenerational trauma, which have contributed to persistent health inequities, including disproportionate mental ill-health and substance-use related harm. These inequities are reinforced by structural barriers, including the lack of culturally responsive health supports. As highlighted in the National Aboriginal and Torres Strait Islander Health Plan [41] and Closing the Gap [42], health promotion initiatives must be strengths-based, culturally grounded, and supportive of the holistic approaches that sustain Aboriginal social and emotional wellbeing [43].

Evidence reviews led by our team [44] and others [45, 46] demonstrate that programs that effectively promote wellbeing and prevent substance use among Aboriginal and Torres Strait Islander peoples are those that embed cultural identity, community knowledge and priorities, and are co-developed in genuine partnership with communities. This evidence highlights the importance of cultural empowerment, with a connection to culture consistently associated with resilience and reduced substance use risk. For instance, a systematic review of literature on factors related to drug and alcohol use among Aboriginal and Torres Strait Islander people found that cultural engagement was protective against alcohol, cannabis and crystal meth use [47]. This finding also underscores the unique contexts shaping the experiences of Aboriginal and Torres Strait Islander young people and reinforces that art-based and storytelling approaches and connecting with and cultural knowledge holders such as Elders and role models - central to Aboriginal ways of teaching, learning and healing, are recognised as effective ways for strengthening identity, connection and wellbeing.

Recognising the importance of cultural identity and knowledge in promoting wellbeing and preventing harm from substance use, the ***Positive Choices Aboriginal and Torres Strait Islander portal*** was developed to provide an accessible collection of evidence-based prevention resources for Aboriginal and Torres Strait Islander youth, their parents and educators. Designed in consultation with community members, the portal provides factsheets, videos and other educational resources that are culturally

based or have been adapted for Aboriginal and Torres Strait Islander communities. Similarly, the ***WellMob* website** provides a collection of resources to promote social and emotional wellbeing among Aboriginal and Torres Strait Islander peoples.

The *Strong & Deadly Futures* program is one of the resources (included in the *Positive Choices* portal) that addresses the need to incorporate cultural components in wellbeing programs for Aboriginal and Torres Strait Islander peoples. The program was developed as a culturally inclusive, curriculum-aligned alcohol and drug prevention program for secondary schools. *Strong & Deadly Futures* embeds Aboriginal and Torres Strait Islander perspectives, cultural strengths, and evidence-based prevention strategies through 6 cartoon stories and class activities. Development was informed by extensive consultations with 42 stakeholders, who identified the need for an engaging, story-driven program that embedded cultural components needed for effective wellbeing promotion among Torres Strait Islander youth. The program was co-developed with 77 young people (53% Aboriginal), followed by pilot testing with 235 students [48] and refinement with Aboriginal creative agencies Gilimbaa, Garuwa and Cause/Affect. Broader feedback from 163 youth, 77 community members and 29 educators across 22 communities shaped the program's content and delivery [49].

Figure x: Scenes from the i) Inland, ii) Kimberly, iii) Coastal, iv) Far North QLD variants of the program.

Between 2022 and 2025, Strong & Deadly Futures was evaluated through an NHMRC-funded randomised controlled trial [50] in 22 schools across WA, QLD and NSW, involving 1,297 students (30% Aboriginal and/or Torres Strait Islander). Oversight was provided by an Aboriginal Reference Group with representation from participating communities. Preliminary findings in the whole sample showed reductions in risky alcohol use and cannabis use, and increases in knowledge about substance-related harms compared to usual health education [10]. The program is now

being extended to co-design and pilot a vaping-specific module, funded by the Department of Health, Disability and Ageing (2025-2026).

"I enjoy the fact that I learn about my culture and what I can be in the future." – Year 9 student

Role of sharing stories in reducing stigma associated with methamphetamine

Stigma is rooted in social inequality and remains one of the of the most pervasive barriers to social inclusion for those who experience mental health and related concerns (e.g., substance use) [51]. This issue is particularly pressing for young people (16-25 years old), who are experiencing increasing rates of isolation, psychological distress, and mental ill health, with 35% of Australian young people experiencing a past-year psychological disorder in 2020-22 (an 85% increase from 2007) [5]. Among these, 20% to 30% will also experience co-occurring issues (e.g., drug use, suicidality, self-harm) for whom the effects of stigma are compounded. People with intersecting identities (e.g., gender, race, sexual identity, disability) experience additional layers of stigma and disadvantage (e.g., further isolation, relationships and employment difficulties) [52]. This amplifies the marginalisation experienced by young people in these communities. Current existing stigma reduction activities designed for young people have limited short-term effects, and overlook intersecting issues young people commonly face [53]. Therefore, it is essential that innovative, feasible, and accessible ways to reduce stigma are identified, evaluated and implemented to promote social inclusion, help-seeking and wellbeing for all Australian young people.

Art-based methods have shown some promise in addressing stigma by improving communication and education of stigmatised topics [25]. These art-based methods can assist with reduction in public stigma (negative attitudes and beliefs held by wider society) and rejection of self-stigma (internalised negative beliefs by the stigmatised individual), leading to improvement in attitudes and behaviour towards people with stigmatised conditions [24, 54].

Methamphetamine use is a global health concern, and Australia has one of the highest rates of use worldwide [55]. Research has shown it attracts a high level of stigma with 40-60% of Australians holding negative attitudes towards people who use crystal methamphetamine [56, 57]. Stigma, fear of judgement, and discrimination results in many negative consequences including poor mental and physical health, reduced help-seeking behaviours, delayed treatment utilisation, and increased risk of overdose and death. Stigma not only impacts the person who uses the drug, but also their family/friends (e.g., increased psychological distress, carer burden) and communities. Access to culturally appropriate, community-led and co-developed resources is limited

for Aboriginal and Torres Strait Islander peoples. To meet this need, the ***Cracks in the Ice Resources for Aboriginal and Torres Strait Islander peoples*** was developed to provide culturally appropriate, evidence-based information and resources via a web-based toolkit to support Aboriginal and Torres Strait Islander peoples, families, and communities affected by methamphetamine. This involved a national 2-year consultation involving 15 focus groups (166 people) and iterative development of culturally appropriate resources and strong collaboration with a National Expert Advisory Group of Aboriginal elders, people with lived experience and leading researchers in the Indigenous social and emotional wellbeing, health and research sectors

Recently in response to community needs, a partnership between *Cracks in the Ice* (cracksintheice.org.au) and *Garuwa*, a First Nations-owned and led impact-driven production company that believes in the power of storytelling, resulted in the production of series of three videos highlighting the lived experience of people impacted by methamphetamine. These videos aim to reduce the stigma and shame associated with methamphetamine use and provide hope to communities. Great care was taken during the production of the transcripts and storyboards to ensure that the stories remained true to the source/s while also aligning with current evidence-base for reducing stigma. This complex iterative process between *Cracks in the Ice* and *Garuwa* ultimately ensured that the final content honoured lived experiences in a culturally safe, ethical and evidence-based manner.

Launched in February 2025, these videos provide **three different perspectives** – a person's recovery journey from methamphetamine use-disorder, a family member, and a health worker – which convey the complex experiences and impacts for individuals (e.g., mental health impacts, feelings of isolation, burnout).

These videos are freely available nationally via the Cracks in the Ice and Garuwa websites and actively disseminated via partnerships with key stakeholders (e.g., ICTV (estimated reach 438,746 TV viewers) and 13YARN (>156,300 video views)). These videos have received national recognition including being awarded the Lived Experience Led Storytelling award by **The Mental Health Services Learning Network of Australia and New Zealand**. The award recognises storytelling productions and resources that contribute to improving media reporting, addressing stigma and elevating the voice of lived experience. A formal evaluation of the impact of these video resources on stigma and mental health is in planning.

Summary

A strong and growing body of research indicates that participation in arts-based methods or programs (e.g., drawing, painting, storytelling, crafting, drama, photovoice) delivers measurable social and health benefits. It is vital that the new National Cultural Policy continues to highlight the importance of arts and culture in supporting improved health and wellbeing outcomes, particularly among young Australians. Specifically, the new National Cultural Policy should include sustained investment in arts and culture-based programs, particularly for children, young people and those impacted by trauma, substance use, and violence; significant investment to build the evidence-base and raise the profile of the use of arts and culture in supporting and improving mental health and wellbeing; specific support and investment for artists with living/lived experience of mental health concerns (including those with co-occurring conditions such as such as drug use, suicidality, self-harm); Sustained investment for partnerships between artists, schools, community and/or cultural organisations, researchers and people with living/lived experience to ensure that art-based programs are culturally responsive, ethically delivered and rigorously evaluated.

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