



Response to the Victorian Government's Youth Policy Discussion Paper

Date

6 November 2015

About you

Organisation name

Orygen, the National Centre of Excellence in Youth Mental Health (Orygen)

Organisation purpose

Orygen is the world's leading research and knowledge translation organisation focusing on mental ill-health in young people. Orygen has widely documented and cited the:

- high rates of mental ill-health among young people (50% will have an experience in the transition to adulthood);
- high onset of mental ill-health in young people (75% before age 25 years);
- personal, social and economic impact of mental ill-health experienced into adulthood; and
- growing demand for, and pressures on, youth mental health support and services.

The organisation has a translational research capacity spanning discovery, novel treatments, clinical, health services, health economics and practice improvement research. This capacity is further enhanced by the organisation's role in:

- running clinical services (four headspace centres);
- developing and delivering professional development for the youth mental health workforce;
- supporting youth participation and engagement; and
- providing policy advice relating to young people's mental health.

Members of Orygen's Youth Advisory Council and Orygen's Youth Research Council were involved in the development of the following response to the Youth Policy Discussion Paper.

Draft Vision

What do you think of the draft vision?

Overall, Orygen supports the vision to remove barriers and increase opportunities for young people. We welcome the focus on those young people who are disadvantaged or who have additional barriers to engagement, such as young people in out-of-home care and those experiencing mental ill-health.

However, the draft vision currently applies a deficit lens to young people in that they ‘realise their potential’ rather than recognising they are members of the community already capable of leading contributing and fulfilling lives if supported to do so.

We would recommend the vision focus on ensuring that the diverse and unique needs and experiences of young people (aged 12-25 years) are considered and responded to through Victorian Government policy, investment and service provision.

Draft Objectives

What do you think of the draft objectives?

Orygen supports the objectives with the following points for consideration:

- We would suggest that the benefits of education and employment participation for young people are more than just about securing an economic future. As such we would like to see social and individual mental health benefits identified in the second objective.
- Orygen is supportive of the third objective, emphasising the importance of prevention and early intervention for young people. To strengthen this objective, the need for government services and structural supports required to deliver a prevention and early intervention response should also be encapsulated. We would suggest: *‘Young people are provided with accessible and appropriate services which can respond early to issues and facilitate effective and positive outcomes’*.
- There is a need for the Victorian Government to improve services and supports for young people who have moved beyond being at ‘risk’ and are currently experiencing poor outcomes including serious mental ill-health and those in contact with state services such as child protection and the justice system. This is currently not captured in the objectives.
- While the purpose of objective five appears to address discrimination and inequities in opportunities for some groups of young people, the concept of a ‘fair-go’ is relatively soft, colloquial and open to interpretation. We would suggest stronger language of non-discrimination, equity and principles of human rights for young people.

What is important to young people?

What do you think should be done to improve the mental health of young people?

Orygen believes providing a response for young people at risk of, or experiencing, mental ill-health should be included in all relevant government policies, including the new youth policy. In particular, there is a strong case for action and investment into early intervention/prevention which can rapidly yield downstream savings.

For young people in Victoria already experiencing mental ill-health the system response is eroding. This is evident through the:

- increased service demand reported by headspace centres from young people with more complex presentations unable to access state services¹; and
- number of young people aged 18 years and over whom, once Child and Adolescent Mental Health Services (CAMHS) have withdrawn, find themselves ‘not unwell enough’ to access care through adult mental health services.

It is hoped that the upcoming Victorian 10-year Mental Health Strategy will address these issues and commit funding and infrastructure to deliver the mental health care young people need in Victoria. However, framing a mental health response for 12-25 year olds through the new youth policy would also provide a whole-of-government platform for change.

Further opportunities to improve the mental health and wellbeing of Victorian young people include:

- Empowering young people and providing opportunities for them to participate in:
 - mental health policy, program and service design (including new and emerging technologies); and/or
 - decision-making about their own clinical care.
- Ensuring continuity of care and ‘step-down’ pathways in communities for young people experiencing mental ill-health.
- Providing holistic mental health care for young people (including sleep, good nutrition and exercise) and ensure opportunities exist to deliver this through multidisciplinary services and settings.
- Focusing on supporting families of young people experiencing mental ill-health, including investment in parent education.
- Providing mental health literacy education for:
 - Young people: so they can recognise signs of illness and know where to access help.
 - Schools: to build competency and strengthen connections between schools and community mental health services (the SAFEMinds project in Victoria shows promise).
 - Other professionals in justice and community services: to recognise symptoms of mental ill-health in young people and provide appropriate referral and diversionary (justice) responses.
- Ensuring services respond to diversity (including cultural, gender and sexual) and address barriers to accessing services e.g. through cultural awareness training for mental health professionals.
- Focusing on recovery and preventing relapse. This includes skill development for self-care (potentially online) and facilitating education and work pathways for young people experiencing mental ill-health.
- Improving state-wide data collection and monitoring of young people’s mental health.
- Building effective datasets and disseminating evidence of effective youth mental health care between researchers, evaluators, program designers and policy makers. This requires long-term funding commitments, investment in knowledge translation and robust evaluations of programs and services.

¹ Rickwood, D. et al (2015) The services provided to young people through the headspace centres across Australia.

In responding to mental health through the youth policy, Orygen recommends the Government avail itself of the world's leading research, youth engagement and early intervention services for young people experiencing mental ill-health, all located in Victoria. This includes the work here at Orygen, as well as the Young and Well Cooperative Research Centre and headspace National Office.

What do you think should be done to tackle alcohol and drug issues for young people?

A young person's physical and psychosocial development can be adversely affected by the use of alcohol and other drugs. There is also an immediate risk of injury or death from high or risky levels of use.

Levels of use vary. For example:

- While the rates of smoking have been declining overall, above average use is evident among groups facing challenges, including young people with a mental illness.
- The rate of alcohol and other drug use is also higher among young people with a mental illness and in young people living in outer regional areas.²

Younger people are unlikely to seek help for alcohol and other drug use and treatment rates are nearly three times as high for 20-29 years olds compared with people aged 20 years and under.³ The average delay between the onset of an alcohol disorder among young people and seeking help is 18 years.⁴ Barriers to accessing help include concerns about confidentiality, stigma associated with use and personal embarrassment.

A range of responses are needed to address alcohol and other drug use and delayed help-seeking by young people. Awareness and prevention programs delivered through schools have been shown to be effective and include programs that address both alcohol and other drug use and mental ill-health (which often co-occur). These programs can be delivered online increasing the scope for delivery across the state.

The design of health services also needs to be modified to be more accessible to, and appropriate for, young people. Some examples include:

- Evidence for utilising eHealth and new technologies in providing effective treatment and overcoming barriers to service access for young people.⁵
- Screening for problematic alcohol and other drug use provided wherever young people come into contact with health services. The Victorian Government's *New directions for alcohol and drug treatment services: A roadmap* identified the need to better integrate, wherever possible, youth alcohol and other drug use treatment systems with mental health services.
- Building the skills of the health and mental health workforce to respond to dual diagnosis of drug and alcohol misuse and mental ill-health (i.e. evidence-based comorbid responses and multidisciplinary approaches).

2 Australian Institute of Health and Welfare (2015) Drug use, people aged 14-25 years, 2010 and 2013. Canberra: AIHW.

3 Australian Institute of Health and Welfare (2014) Alcohol and other drug treatment services in Australia 2012-13. Drug treatment series. Canberra: AIHW.

4 Chapman, C. et al (2015) Delay to first treatment contact for alcohol use disorder. *Drug and Alcohol Dependence*, 147, 116-21.

5 Kay-Lambkin, F. et al (2009) Computer-based psychological treatment for comorbid depression and problematic alcohol and/or cannabis use: a randomized controlled trial of clinical efficacy. *Addiction*, 104, 378-388.

- Integrating alcohol and other drug use services with other services for young people to increase the likelihood of detection and delivery of early interventions. These interventions need to be designed with young people and based on evidence for what works.

What else do you think should be done to improve the lives of young people in Victoria?

Young people in out-of-home care: Orygen welcomes the focus on young people in out-of-home care as a group facing particular challenges. They are a group of young people who are at high risk of experiencing mental ill-health and are over-represented in self-harm and suicidal behaviour statistics.⁶

There is an opportunity for the Victorian Government to support piloting a new model to develop the capacity of services and carers to provide effective mental health support to young people living in out-of-home care.

Such a pilot study can develop work currently ongoing in the North West of Melbourne in order to:

- improve accessibility, consistency and quality of mental health support provided to young people and carers in out of home care settings;
- develop sustainable solutions for the provision of supports to this high needs population; and
- improve the health and life outcomes for young people living in out-of-home care.

This pilot was also proposed in Orygen's response to the Victorian 10-year Mental Health Strategy Discussion Paper.

Young people in contact with the justice system: Orygen welcomes the acknowledgement that addressing mental health can have an impact on wider societal issues, particularly that of young people's interactions with the justice system. Mental illness is significantly over-represented in the youth population of both the adult and juvenile prison systems, with one study finding 88% of young people in custody in NSW experienced some form of psychiatric disorder.⁷

Evidence suggests that a holistic approach to a young person's psychosocial needs can help prevent escalation of offending behaviours. This includes consideration of:

- their physical and mental health;
- family and social supports;
- housing needs; and
- substance use.

This benefits the young person and the community, while also bringing potential economic benefits of a diversionary approach.⁸

⁶ Vinnerljung, B et al (2006) Suicide attempts and severe psychiatric morbidity among former child welfare clients: a national cohort study. *Journal of Child Psychology and Psychiatry*, 47, 723-733.

⁷ Richards, K. (2011) What makes juvenile offenders different from adult offenders? *Trends and Issues in Crime and Criminal Justice* no. 409. Accessed from <http://www.aic.gov.au/publications/current%20series/tandi/401-420/tandi409.html>

⁸ Shaw, R. (2015) Youth, Policing and the Criminal Justice System. Paper presented at the International Association of Youth Mental Health Conference, Montreal, 9 October 2015.

Any other comments?

Orygen would like to provide three further comments on the discussion paper and the process to date.

1. Results from the consultation with young people. As the discussion paper was introduced following consultation with over 1000 young people, Orygen was anticipating a greater level of detail and analysis on the results of this survey.

There are already a number of published surveys in Australia presenting the voice and experiences of young people on issues important to them (e.g. the Mission Australia Survey, Australian Child and Adolescent Survey of Mental Health and Wellbeing, Longitudinal Surveys of Australian Youth). We were interested in the additional, Victorian specific, detail derived from this youth policy consultation.

2. Broad focus of the youth policy. Overall, the discussion paper applied a broad-brush approach to all areas of government policy and programs that impact young people. Due to this, it was difficult to determine what the proposed focus of the new youth policy will be and to provide constructive feedback. It was also difficult to respond to such broad themes, such as youth mental health, within the 500 word limit.

This is the third youth policy developed by the Victorian Government in under ten years. Orygen would suggest that the government was already in a position to develop and present a comprehensive and detailed policy document for discussion drawing on:

- elements from previous policy statements (following a consultation with key stakeholders around what is worth progressing from these documents);
- previous policy advice provided by peak organisations and advocacy groups in Victoria;
- the 1000 plus young people who participated in the consultation; and
- published youth sector research and the evidence base of what works.

It is hoped that this will be the next step.

3. Evaluation and monitoring. Orygen commends the Victorian Government on its commitment to monitor and evaluate the new youth policy. The development of an implementation plan, outcome measures, performance indicators and an evaluation framework will set this policy apart from the previous one and provide community stakeholders and young people with assurance that the government takes seriously its responsibility and accountability to young people.

Ideally an implementation plan and evaluation framework would be released simultaneously with the youth policy (rather than work commenced on its development after the policy is launched). Building in an evaluation framework from the beginning will ensure the policy includes measurable and tangible outputs and outcomes.

Further information regarding this submission:

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