

Early Intervention and Youth Mental Health: Youth Mental Health Reform: The Best Buy in Healthcare

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Early Intervention and youth mental health reform and investment are an increasing focus for transformational change in mental health care worldwide. Mental health professionals should consider grasping the leadership opportunities that beckon and form a new pathway for a still tenuous subspeciality to become stronger and more sustainable within psychiatry and health care.

Mental and substance use disorders are among the leading health and social issues facing society, and now represent the greatest threat from non-communicable diseases (NCD) to prosperity, predicted by the World Economic Forum to reduce global GDP by over \$16 trillion by 2030. This is not only due to their prevalence but critically to their timing in the life cycle. They are by far the key health issue for young people in the teenage years and early twenties, and if they persist, they constrain, distress and disable for decades. Epidemiological data indicate that 75% of people suffering from an adult-type psychiatric disorder have an age of onset by 24 years of age, with the onset for most of these disorders – notably psychotic, mood, personality, eating and substance use disorders– mainly falling into a relatively discrete time band from the early teens up until the mid 20s, reaching a peak in the early twenties. While we have been preoccupied with health spending at the other end of the lifespan, young people who are on the threshold of the peak productive years of life, have the greatest capacity to benefit from stepwise evidence-based treatments and better health care delivery. A substantial proportion of young people are being neglected and consigned to the “NEET” scrapheap with disastrous human and economic consequences.

In recent years, a worldwide focus on the early stages of schizophrenia and other psychotic disorders has improved the prospects for understanding these complex illnesses and improving their short term and longer term outcomes. This reform paradigm has also illustrated how a clinical staging model may assist in interpreting and utilising biological data and refining diagnosis and treatment selection. There are crucial lessons for research and treatment, particularly in the fields of mood and substance use disorders. Furthermore, the critical developmental needs of adolescents and emerging adults are poorly met by existing conceptual approaches and service models. The paediatric-adult structure of general health care, adopted with little reflection by psychiatry, turns out to be a poor fit for mental health care since the age pattern of morbidity of the latter is the inverse of the former. Youth culture demands that young people are offered a different style and content of service provision in order to engage with and benefit from interventions. In Australia a new system of enhanced primary care, headspace, has been developed for 12 – 25 year olds spanning the divide between traditional child services and adult services. This is now operating in 110 communities in Australia and provides

services for over 100,000 young people. Access has been greatly improved especially for some traditionally hard to engage subgroups. Outcomes include reduced distress, better functional outcomes and reduced self harm. Similar programs are in place in Ireland, Canada, Israel, France, the UK , the Netherlands and Denmark, and are under development in the USA.

The need for international structural reform and an innovative research agenda represents one of our greatest opportunities and challenges in the field of psychiatry and a huge opportunity for child and adolescent psychiatry which has an opportunity to “come out of its shell” and enter the vanguard of mental health reform. This focus is gaining momentum in an increasing number of countries and has the potential to spread across the world as a dynamic health reform front.

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Professor McGorry has published over 400 papers and book chapters and has edited five books. He is a Fellow of the Academy of the Social Sciences in Australia and has been the recipient of numerous awards, including the NAMI Scientific Research Award in 2013, Australian of the Year in 2010, Victorian Australian of the Year in 2009, the Castilla Del Pino Award in recognition of his significant contribution to the field of psychiatry in Spanish-speaking countries in 2009, the Australian Government Centenary Medal in 2003, and the Founders’ Medal of the Australian Society for Psychiatric Research in 2001.