The mental health and wellbeing of children and young people

Policy brief, November 2013

Prevention and early intervention for mental health problems and disorders in children and young people

The Commissioner for Children and Young Western Australia undertook an Inquiry into the mental health and wellbeing of children and young people (the Inquiry) after hearing consistently from communities across the State about concerns for the mental health of children and young people, from infants to young adults.

The Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia was tabled in Parliament in May 2011.

The Inquiry considered the mental health and wellbeing of children and young people across three continuums:

- **Age** – minus 9 months to 25 years
- **Wellbeing** – from mental health to mental illness
- **Intervention** – from the promotion of mental health and wellbeing through to the prevention of mental health problems and disorders and early intervention and treatment for mental illness.

This policy brief focuses on preventing mental health problems and disorders and intervening early to prevent their progression and reduce their impact.

**Prevention**

Strategies to maintain positive mental health through pre-emptively addressing factors which may lead to mental health problems or illnesses. These strategies can be aimed at increasing protective factors, decreasing risk factors or both, as long as the ultimate goal is to maintain or enhance mental health and wellbeing.

**Early Intervention**

Responding early in life, early in the course of a mental health disorder or illness, and early in an episode of illness, to reduce the risk of escalation, have positive impact in the pattern of illness and minimise the harmful impact on individuals, their families and the wider community.

Protective factors such as supportive and caring parents, consistent parenting style, good social skills, adequate nutrition, positive school climate, opportunities for success and recognition at school, good physical health, strong cultural identity and economic security improve resistance to risk factors and the development of mental illness.

Risk factors such as poor health in infancy, low parental involvement in a child’s activities, family violence and disharmony, parental substance misuse, bullying, school failure, problematic school transitions, physical, sexual and emotional abuse, poverty/economic insecurity and a lack of support services are associated with increased probability of onset, greater severity and longer duration of mental health problems.
What do children and young people say?

More than 700 children and young people aged between seven and 23 years contributed their views on mental health to the Inquiry.

They described how feeling healthy both physically and emotionally, positive about life, loved and cared for, acknowledged, connected and informed about mental health issues contributes positively to mental health.7

Children and young people wanted more education at school and in the community to teach them about mental health issues and to help them if they had a problem.

“If they brought in a subject that was taught every day and was mandatory in all schools, based on building self-esteem, how to redirect thoughts in a positive way… this could work, and would change the lives of millions.” young person8

Children and young people described how feeling alone or isolated if they were not connected to support networks, community facilities or appropriate services; feeling uninformed and therefore unable to seek help when they needed to; or feeling unloved due to family conflict contributed to mental health problems. They also spoke about feeling down or sad, pressured, different and bored.9

“Bullying from peers helped cause my depression and my bad behaviour.” 15 year-old girl10

“I think the biggest problem is caused at home and has a big impact on how children behave… I mean things such as family separation, violence… which causes depression and anger through us teenagers.” 14 year-old girl11

“Know that we understand the feeling of stress and need help to deal with this.” 14 year-old boy12

“Feeling alone and isolated can be a major contributor to ill-health in teens, especially queer teens. Proper education helps us feel less alone.” young person13

Children and young people said that stigma, cost and lack of access to services impacted on them seeking the help they needed. Some young people were also worried about confidentiality when speaking with adults about their problems, particularly in the school environment and in regional and remote areas.14

“I think some places see young people with mental health issues as being a ‘phase’ and therefore do not treat it as a serious matter.” 17 year-old girl15

They also spoke about the importance of education and care being available early on, to prevent problems arising over time.

“More preventative mental health care [is needed]. A lot of times schools and workplaces are not willing to start helping children with their mental health issues until it is actually a big serious problem.” 17 year-old girl16

“Telling someone who has an eating disorder that they have not yet lost enough weight to be seen by an ED clinic is BAAAAAAAD! 18 year-old girl17
What were the Inquiry findings?

Key findings relating to prevention and early intervention for mental health problems and disorders in children and young people include:

- Children and young people identified as having mental health problems experience adverse effects on their quality of life, wellbeing and capacity to engage in school, community, sports and cultural activities.\(^{18}\)

- Poor mental health in childhood and adolescence can set a negative trajectory for ongoing mental health problems in adulthood. Up to one-half of serious mental health and substance use disorders commence by the age of 14 and three-quarters before the age of 25 years.\(^{19}\)

- It is estimated that between one-quarter to one-half of adult mental illness may be preventable through appropriate intervention in childhood and adolescence. Interventions early in life are more effective at addressing risk factors and reducing symptoms and the adverse impact on development.\(^{20}\) Up to 30 per cent of adult mental illness is related to adverse experiences in early childhood.\(^{21}\)

- The first symptoms of most mental health disorders precede the full onset of the illness by several years, therefore it is important to provide timely mental health prevention and early intervention programs and services, for example for conduct and anxiety disorders this is in childhood.\(^{22}\)

- Being aware of deviations from healthy developmental trajectories, particularly in social and emotional development, is critically important for prevention and early intervention.\(^{23}\)

- There is a general lack of understanding in the community that children (particularly infants and young children) can experience significant mental health problems and disorders.\(^{24}\)

- Stigma around mental illness is a barrier to help-seeking and leads to misunderstandings in the community about mental illness. Failure to seek help at the first signs of a mental health problem can result in worsening of symptoms and later need for specialist or acute treatment.\(^{25}\)

- A broad range of agencies, programs and services have a role in mitigating risk factors and strengthening protective factors, including those in early childhood, education, welfare, juvenile justice, drug and alcohol, health, migrant and refugee, child protection, youth and local government.\(^{26}\)

- There are gaps in the range of interventions available at different stages of children’s development. The full range of interventions needs to be available for every age, from infants to children and adolescents. Providing comprehensive early intervention services and programs for all ages ensures an effective mental health system and optimum mental health for children and young people.\(^{27}^{28}\)

- In WA services for children and young people are focused on treating severe mental health problems and disorders and there are limited prevention and early intervention
services. Both country and metropolitan-based Infant, Child, Adolescent and Youth Mental Health Services (ICAYMHS) (now Child and Adolescent Mental Health Service (CAMHS)) are significantly under resourced. As a result there are long waitlists. Priority is given to urgent and severe problems and there is limited capacity to provide early intervention and treatment services for mild to moderate mental health problems. There is also a lack of systematic identification and assessment processes and lengthy delays for referrals. More focus is needed on programs and services which prevent mental health problems and intervene early when an illness is identified.29

- Some groups of children and young people experience greater exposure to the risk factors for mental illness. Targeted prevention and early intervention programs tailored to each groups’ specific needs is required in addition to universal services and programs.30

- Programs which strengthen social and emotional skills, such as social problem-solving, self-management, optimism, communication skills and coping behaviour, have been found to be effective mental health promotion and prevention interventions.31

- Schools are an important setting for prevention and early intervention services and programs including identifying behavioural and emotional problems; providing social and emotional skills programs, advice and support and referring students to additional services.32

- Prevention of youth suicide and self-harm requires a comprehensive approach with increased funding for evidence-based universal, targeted and diverse long-term strategies to address risk factors and support young people and their families.33

Key recommendations of the Inquiry are:

**Recommendation 1:** The Council of Australian Governments’ mental health reform make children and young people a priority group and include planning for mental health promotion and prevention, early intervention and treatment services and programs. (Page 54)

**Recommendation 9:** A strategic and comprehensive plan for the mental health and wellbeing of children and young people across Western Australia be developed by the Mental Health Commission. This plan provide for the implementation and funding of promotion, prevention, early intervention and treatment services and programs. (Page 63)

**Recommendation 14:** Funding to the State’s Infant, Child, Adolescent and Youth Mental Health Service34 be increased so it is able to provide comprehensive early intervention and treatment services for children and young people across Western Australia, including meeting the needs of those with mild, moderate and severe mental illnesses. (Page 67)

**Recommendation 36:** A comprehensive, specialist infant mental health service be developed that can provide early intervention and treatment services for very young children and their parents. (Page 114)

**Recommendation 6:** The Mental Health Commission build the capacity of the non-government sector so it is equipped to deliver mental health promotion, prevention, early intervention and treatment services for children and young people. (Page 60)
Recommendation 44: A community education campaign about the importance of children and young people’s mental health be led by the Mental Health Commission. (Page 142)

For further recommendations related to prevention and early intervention for mental health problems and disorders in children and young people refer to the Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia. 35

What is being done?

A number of developments relevant to the prevention and early intervention for mental health problems and disorders in children and young people have occurred since the Inquiry:

- The Council of Australian Governments (COAG) endorsed the Roadmap for National Mental Health Reform 2012-22 in December 2012. It identifies preventing mental illness and early detection and intervention as two of the six priorities, with specific strategies identified for children and young people. 36

- The Mental Health Commission has developed a 10-year strategic policy, Mental Health 2020: Making it personal and everybody’s business which identifies as a key reform direction the development of a mental health system providing the full range of support and services from mental health promotion and prevention through to early intervention, treatment and recovery, 37 with a focus on more balanced investment, including for children and young people. 38

- The Mental Health Commission’s Action Plan 2011–2012 includes initiatives related to prevention and early intervention for mental health problems in infants, children and youth, including recognising the strong relationship between early childhood experiences and future mental health and wellbeing. 39

- In response to Professor Bryant Stokes’ Review of the admission or referral to and the discharge and transfer practices of public mental health facilities/services in Western Australia work is underway to develop a ten-year Western Australian mental health services plan. The plan aims to provide for a balance of promotion, prevention and early intervention, and treatment and recovery services. 40

- The National Aboriginal and Torres Strait Islander Suicide Prevention Strategy, released in May 2013, has a focus on early intervention and suicide prevention through preventing psychosocial and behavioural problems in childhood and adolescence. Outcomes include the capacity to identify and refer children with early or emerging risk of conduct, behavioural and developmental problems to culturally-adapted therapeutic programs. 41

- In the area of early childhood, mental health initiatives include the development of a model for integrating services to support the mental health needs of infants and young children and identifying the workforce competencies for those working with infants, young children and their families. 42

- The State government has provided new or additional funding for a number of prevention and early intervention initiatives including community child health services, school nurses,
Youth Focus counselling and support services, and 16 Child and Parent Centres located on school sites.43

- The Commonwealth government has funded significant expansion of several prevention and early intervention initiatives including KidsMatter and the headspace program.44
- The Ombudsman Western Australia is currently undertaking an own-motion investigation into ways that State Government departments and authorities can prevent or reduce suicide of young people.45

What more needs to be done?

- Development of a strategic and comprehensive mental health plan for all children and young people across WA that provides for the implementation and funding of prevention and early intervention services and programs, both universal and targeted.
- Adequate resourcing for the metropolitan and country Child and Adolescent Mental Health Service to provide comprehensive early intervention and treatment services to meet the needs of children and young people (from birth to young adulthood) with mild, moderate and severe mental illnesses, including in regional WA.

Other relevant information

Commissioner for Children and Young People Western Australia

- The following publications are available on the Commissioner for Children and Young People’s website at www.ccyp.wa.gov.au
  - Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia
  - Speaking Out About Mental Health: The views of Western Australian children and young people
  - Building Blocks – describes best practice and promising programs, including mental health prevention and early intervention programs.

Mental Health Commission, Western Australia

- Information about the Western Australian Mental Health Services Plan is available at www.mentalhealth.wa.gov.au

Council of Australian Governments

Australian Government Department of Health and Aging

- The National Aboriginal and Torres Strait Islander Suicide Prevention Strategy is available at www.health.gov.au/internet/main/publishing.nsf/content/mental-pub-atsi-suicide-prevention-strategy

Ombudsman Western Australia

- Information about the Ombudsman's own-motion investigation into ways that State government departments and authorities can prevent or reduce suicide of young people is available at www.ombudsman.wa.gov.au

Royal Australia and New Zealand College of Psychiatrists

- The Royal Australia and New Zealand College of Psychiatrists' publications on prevention and early intervention include:
  - Prevention and early intervention of mental illness in infants, children and adolescents: Planning strategies for Australia and New Zealand
  - Addendum: Prevention and early intervention of mental illness in infants, children and adolescents: Planning strategies for Australia and New Zealand
  - The cost effectiveness of prevention and early intervention of mental illness in infants, children and adolescents.

They are available at www.ranzcp.org/Home.aspx

1 The term ‘mental illness’ was used throughout the Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia to cover mental health problems and mental health disorders when both are being referred to.
2 For more detail on the three continuums refer to pp. 29–35, Commissioner for Children and Young People WA 2011, Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia, Commissioner for Children and Young People WA, Perth.
5 Commissioner for Children and Young People WA 2011, Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia, Commissioner for Children and Young People WA, Perth, p. 35. See also p. 36 for a full list of commonly identified protective factors
6 Ibid, p. 35. See also p. 37 for a full list of commonly identified risk factors
10 Ibid, p. 16.
11 Ibid, p. 16.
12 Ibid, p. 17.
15 Ibid, p. 11.
17 Ibid, p. 11.
19 Ibid, pp. 28, 134, 135.
20 Ibid, p. 29.
21 Ibid, p. 28.
24 Ibid, p. 142.
27 Ibid, p. 34–35.
28 Ibid, pp. 40–41, for an example of what this would look like.
30 Ibid, Chapter 5, pp. 72–95 discusses children and young people who are vulnerable or disadvantaged in detail. Also refer to other mental health policy briefs, for example Aboriginal children and young people, Children and young people with disability, Children and young people in care, Children and young people of parents with a mental illness available: http://www.ccyp.wa.gov.au/content.aspx?cID=752
33 Ibid, p. 155.
34 Now referred to as the country and metropolitan based Child and Adolescent Mental Health Service.
41 Department of Health and Aging 2013, National Aboriginal and Torres Strait Islander Suicide Prevention Strategy, Department of Health and Aging, Canberra.