



The National Centre of Excellence
in Youth Mental Health

Innovation driving reform

Annual Report 2017





Orygen, The National Centre
of Excellence in Youth Mental Health
Annual Report 2017

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of Excellence in Youth Mental Health 2017

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About Orygen

Mission

To reduce the impact of mental ill-health on young people, their families and society.

Vision

Young people enjoy optimal mental health as they grow into adulthood.

Orygen, the National Centre of Excellence in Youth Mental Health, is the world's leading research and knowledge translation organisation focusing on mental ill-health in young people.

At Orygen, our leadership and staff work to deliver transformative research, policy development, innovative clinical services, and evidence-based training and education to ensure there is continuous improvement in the treatments and care provided to young people experiencing mental ill-health.


Our work has created a new, more positive approach to the prevention and treatment of mental disorders, and prompted new models of care for young people with emerging disorders. This work has led to a worldwide shift in services and treatment. There is now a primary focus on young people getting well and staying well, and health care models that include partnership with young people and families.

Orygen recognises that young people come from diverse backgrounds and communities. We are committed to working in partnership with people of all backgrounds and with all communities to develop strategies that are responsive and inclusive.

Orygen acknowledges and recognises Aboriginal and Torres Strait Islander people as the traditional owners and custodians of the land we share. We are committed to working with Aboriginal and Torres Strait Islander people in our endeavours to improve the mental health and wellbeing of young Australians.

Year at a glance





“ What I enjoyed
the most from my time
at Orygen was that
it makes young people
feel valued and heard

Zoe, Orygen intern

Chairman's report

Mr Peter Smedley Chairman

It is with great pleasure that I reflect upon another successful year at Orygen. There have been numerous significant achievements as we continue to drive and deliver innovation in youth mental health.

This year we took another step closer to embarking on a new chapter for Orygen with the commencement of the build of new purpose-built facilities for Orygen's hub in Parkville. The new facilities will enable us to further expand our work to improve services and treatments for young people. The main building will be ready for occupancy in October 2018, with landscaping and other facilities to be completed in early 2019. I extend my sincere thanks to the Victorian Government, The Colonial Foundation, The University of Melbourne, the Australian Government and The Ian Potter Foundation for their generous support of the redevelopment.

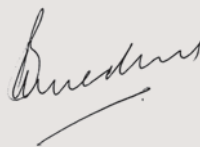
Once complete, the new facility will be shared not only with young people, staff and students, but will enable us to host additional local and international visitors to encourage further knowledge transfer between likeminded organisations and individuals.

Collaboration is a major component of Orygen's work and its success. This is evident in our research and our application of the latest evidence to inform our policy, clinical and training work. This year we have undertaken a major project with South Australia Health to successfully deliver

a statewide clinical training and improvement initiative to its newly developed youth mental health services workforce.

Another innovative project that is currently underway is *Chatsafe*, which was funded by the Australian Government under the National Leadership in Suicide Prevention program. The project is working directly with young people on harnessing the benefits that social media can offer in relation to suicide prevention. This is particularly pleasing, as the project aligns with recommendations outlined in Orygen's policy report *Raising the bar on youth suicide prevention* that was released in late 2016.

All of the progress that has been made in the past year would not be possible without the dedication and commitment of Orygen staff, executives, my fellow board members and, of course, young people and family members. Young people remain at the forefront of all of Orygen's work. Their daily involvement with our programs reinforces our resolve to help young people enjoy optimal mental health as they grow into adulthood.




“
Young people remain at the forefront of all of Orygen's work

Executive Director's report

Professor Patrick McGorry AO Executive Director

It is often said that young people are our future, and an investment in their mental health is an investment into the future of Australia and all societies. We think this should be more than a soundbite. Orygen is working to ensure that the major threat to the fulfilment of the potential of young people – mental ill-health – is faced seriously and overcome; through innovative research and strong and dynamic youth and family models of care guided by the latest evidence.

Over 2016-17, Orygen has made tremendous advances in all aspects of our mission and in the future of mental health care for young people. We received three National Health and Medical Research Council Project Grants, for a total of \$4,125,978, as well as achieving many other funding successes.

A key element underpinning our success in 2016-17 has been engaging young people across all aspects of our work. I am particularly grateful to our inaugural Youth Advisory Council and Youth Research Council members and would like to thank them for their contributions, dedication and commitment to Orygen's work. We look forward to welcoming the next generation of council members later in 2017 and hope to see continuous youth engagement and participation integrated with all of our work.

We should all be proud of the fact that Orygen and its staff were once again recognised with awards at a national and international level; including my dear friend and colleague, Professor Helen Herrman, who was named an Officer of the Order of Australia in the Queen's Birthday Honours.

The past year has seen Orygen continue to lead thinking and policy discussions with the release of policy papers on suicide prevention, the mental health of Australian university students, mental health care for young men, eating disorders, and alcohol and other drug use by young people with a mental illness; as well as multiple submissions to the Australian Government. We look forward to progressing the conversation with Australian and global partners as we seek to realise our recommendations for improving outcomes for young people with mental ill-health. This depends on the expertise and talent within Orygen, which was enhanced greatly in 2017, and the forging of key collaborations and partnerships with aligned organisations and experts.

On the clinical side, we continue to provide the best possible care to young people and families despite the fact that our resources mean that three out of four young people are not able to access our specialist services. We are addressing this structural problem in two ways.



“
A huge amount of energy is being devoted to unifying our specialist and enhanced primary care systems of care into a seamless model, in which the needs of patients and families are paramount

First, through unrelenting and strategic advocacy for more investment in mental health at both federal and especially state government level, where it is now freely acknowledged there has been serious underinvestment for two decades. I expect this to bear fruit in 2018 and there will be synergy with our new facility at Parkville. Second, a huge amount of energy is being devoted to unifying our specialist and enhanced primary care systems of care into a seamless model, in which the needs of patients and families are paramount. This is a blend of horizontal and vertical integration from triage-free primary care to the pointy end of specialist care.

Integrated care of this kind is where all healthcare should be heading. Once again we are reinventing ourselves to create the future and demonstrate optimal care to a wide audience. The other dimension to this unification process is seamless integration of clinical research within our care system. We have made great progress on this, but some barriers remain. The shared commitment and unity of the current executives of Orygen Youth Health and Orygen have been key to the progress we have made.

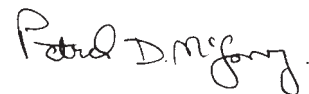
It is hard to overestimate the catalytic effect that the new Orygen facility, which is now under construction, will have on progress in youth mental health reform at the local, state, national and


international levels. This project has been generously supported especially by The Victorian Government, but also by The Colonial Foundation, The University of Melbourne, The Ian Potter Foundation and the Australian Government. Our Orygen leadership, especially Kerryn Pennell and John Moran, have displayed great skill and commitment in shepherding this project through and it is well on track for opening in late 2018.

It is a hugely exciting time to be working in youth mental health and early intervention. We are on the cusp of major change thanks to our advocacy, transformative research, policy development, innovative clinical services, and evidence-based workforce training and education. Our executive group has been greatly strengthened by the arrival of Dan Kneipp who, with his new team, is doing a sterling job in fundraising; Mario Alvarez-Jimenez, who will work to embed new technologies at the heart of our new 'supermodel' of care; and Craig Hodges, who is spearheading our national translational programs in youth mental health.

All of this progress would not be possible without our dedicated board, executive and staff. I want to pay special tribute to our wonderful chairman, Peter Smedley. Peter has been a highly skilled and devoted leader and supporter of our mission for so many years, has built the

foundations of our success, and navigated and shepherded us through some serious crises and challenges. It is no exaggeration to say that Peter's contributions have saved the lives and futures of countless young people around the world and set the scene for a generation of further gains. I want to sincerely thank all the staff, supporters, young people and families for their contributions and dedication. Orygen is the world leader and global partner in innovation in youth mental health, and I look forward to working with our extended family as we continue to improve outcomes for young people and families everywhere. There are still so many more opportunities ahead, and we cannot wait to embrace them!





“ Organisations that claim to be about improving the lives of young people can't do that if they are only ever doing things 'to' young people. You have to ... enable young people to gain friends, knowledge and experiences that empower them. That's what Orygen has done for me

**Jo Farmer, Youth Research Council
Member 2015-2017**

Awards and recognition

The success of Orygen and its staff in driving and delivering innovation in youth mental health was recognised with a number of awards this year.

Professor Helen Herrman, Head of Vulnerable and Disengaged Youth Research, and a leading advocate globally for mental health, was named an Officer of the Order of Australia in the 2017 Queen's Birthday Honours. Professor Herrman is also Professor of Psychiatry at the Centre for Youth Mental Health at The University of Melbourne, and was elected president of the World Psychiatric Association in October 2017. She was recognised by the Australian Government for her distinguished and outstanding lifetime contribution to psychiatry, public health, and community mental health service reform. Professor Herrman's endeavours have led to major advances in scholarship, academic development and clinical practice locally, nationally and internationally.

Internationally, Professor Andrew Chanen, Head of Personality Disorder Research, was acknowledged for his professional achievements in the field of personality disorders with the 2017 'Distinguished Achievement in the Field of Severe Personality Disorders' Award from the Borderline Personality Disorder Resource Centre at New York Presbyterian Hospital. Professor Chanen was honoured for advancing the understanding, prevention of, and early intervention for, borderline personality disorders in young people.

Orygen was also awarded the 2016 TheMHS Medal for Mental Health, in recognition of the organisation's world-leading influence in youth mental health and as an international leader in the development and delivery of early intervention treatments for young people with mental illnesses. TheMHS is a network for improving mental health services in Australia and New Zealand.



Professor Helen Herrman



Professor Andrew Chanen

Forging vital partnerships with Primary Health Networks

Primary Health Networks (PHNs) across the country have been given responsibility for commissioning primary care mental health services for young people with severe mental illness, including clinical care coordination for young people with severe and complex mental illness.

To support this, the Australian Government has appointed Orygen to provide Australia's 31 PHNs with expert leadership and support in commissioning and supporting youth mental health initiatives.

Orygen has hosted several national workshops to build this partnership, bringing together staff from PHNs across the country. The workshops have provided PHN staff with an overview of the support Orygen can provide, and included a consultation process to ascertain the immediate needs to facilitate optimal models of care for young people experiencing a severe mental illness.

Following the consultation process Orygen has provided tailored advice to PHNs that are commissioning and implementing early intervention services for young people in their region who have, or are at risk of, complex mental ill-health. These include the three PHN lead sites in the Australian Capital Territory, South East Melbourne and Tasmania that are developing and testing regional models of care for youth with, or at risk of, severe mental illness.

Many of Orygen's evidence-based service and model development resources, guidelines, evidence bulletins and toolkits have been used to support the PHNs, as well as service planning and implementation consultancy relating to service structure configuration, model fidelity, clinical processes and governance, clinical frameworks for implementing guidelines, partnership development and workforce capacity development.



Youth Mental Health Research Network established to improve services and treatments

In September 2016 Orygen invited a range of leading youth mental health researchers to an inaugural meeting in London, UK, to explore and agree upon the establishment of an International Youth Mental Health Research Network (IYMHRN).

It was agreed that the IYMHRN would aim to generate a global roadmap for research that addresses current challenges, responds to neglected areas, and maximises the potential for major impact and growth in youth mental health research.

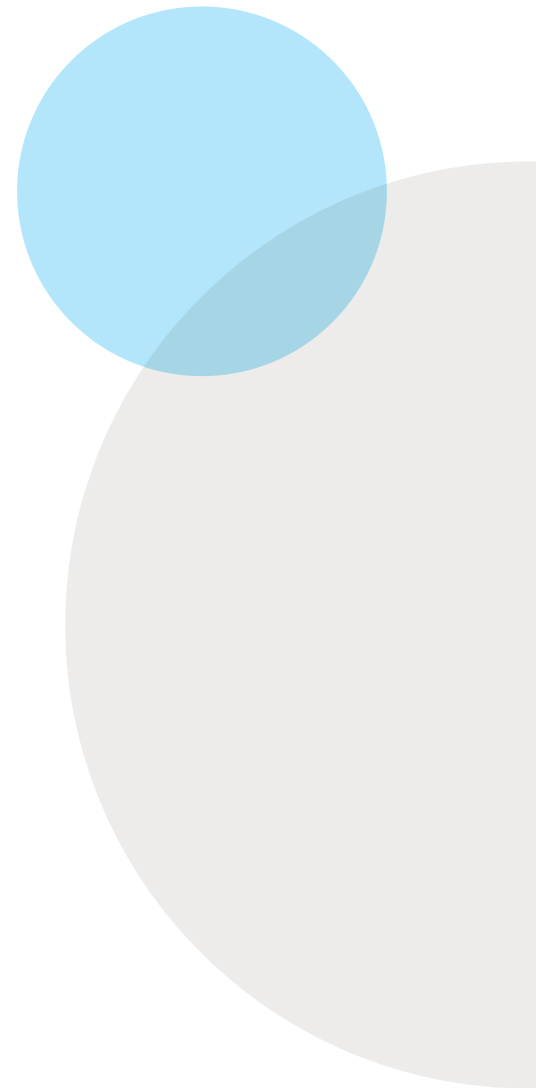
The IYMHRN will bring together leading researchers working in youth mental health to:

- collaboratively establish a set of international research priorities in youth mental health;
- provide a forum to generate and exchange research findings in youth mental health;
- establish an evidence-based case for increased funding investment in youth mental health research and service delivery; and
- build and develop a field of researchers in youth mental health and foster the careers of emerging researchers through mentoring, research collaborations and international exchange.

Innovative approaches are necessary in youth mental health research if we are to continue to improve services and treatments, given the risks and lasting impact of mental-ill health for young people.

A coordinated research agenda will more rapidly advance our understanding of the cause and development of mental ill-health, and support interventions and service models that ultimately transform the lives of young people and their families and enhance communities.

Following the meeting, a steering committee was established. It was agreed that a full day symposium will be hosted adjacent to the International Association for Youth Mental Health conference in Dublin in late 2017, and that an invitation would be extended to a wider group of global research leaders.



Global research collaboration to predict who is at risk of suicide

Researchers from Orygen have joined an international team to work on a major research project aimed at building a new evidence-based way of understanding and predicting which young people are at highest risk of attempting suicide.

The Help Overcome and Predict the Emergence of Suicide (HOPES) project aims to predict those at risk of suicide by analysing brain scans and data on suicidal behaviour of young people across the world to identify why some people develop suicidal thoughts and behaviours and others do not.

Dr Lianne Schmaal and Associate Professor Mario Alvarez-Jimenez from Orygen are working with an international team of scientists from the UK and US to develop the project, funded through the London based mental health research charity, MQ.

The global collaboration aims to address some of the critical gaps in knowledge of suicide and suicidal thoughts and behaviours. The study, the largest undertaken to date on adolescent suicidal behaviours and thoughts, will combine data from approximately 4000 young people worldwide.

Suicide is the leading cause of death of Australians aged 15-44 and the second leading cause of death worldwide among 15-29 year olds.



Dr Lianne Schmaal



Associate Professor
Mario Alvarez-Jimenez

Building capacity in South Australia's youth mental health services workforce

Workforce development is a key area of focus for Orygen in achieving our mission to reduce the impact of mental ill-health on young people, their families and society.

Over the past year we have worked with South Australia Health and the Local Health Networks to successfully deliver a statewide clinical training and improvement initiative to its newly developed youth mental health services workforce.

More than 130 participants were enrolled in the training, many of whom were clinicians who had not had extensive experience working with young people in a youth mental health service model of care. The training focused on a youth-centred, responsive, connected, and developmentally appropriate mental health service that engages effectively and appropriately with young people, their family, friends and other supports.

Since the training has been implemented, many services and clinicians have reflected on and amended their practice to include shared decision-making principles; youth engagement and participation structures; group programs and trauma-informed care in acute settings. The skills and confidence of the clinicians in the training improved, and they reported feeling more united as services for young people across their Local Health Networks.





Keeping it real: reimagining mental health care for all young men

Orygen released a major report in June 2017 revealing that the mental health needs of young Australian men are not being met.

The report highlights that although young males are almost three times as likely to die by suicide as young Australian females, they are less likely to be accessing services, or receiving appropriate treatment for their mental ill-health.

Titled *Keeping it Real: reimagining mental health care for all young men*, the report finds that comparatively low rates of engagement and higher rates of suicide and alcohol and other drug use among young men show that new approaches are required.

The report points to a number of significant barriers young men face when engaging with mental health services. These include:

- social expectations around masculinity;
- the broad range of ways in which the symptoms of mental ill-health manifest in young men, including through externalising behaviours such as anger, alcohol and drug use, and risk-taking, rather than feelings of worthlessness or hopelessness, which means their symptoms may be missed; and
- cultural identity and personal context.

The report recommended that mental health services be reimagined for young men so that they:

- recognise the symptoms young men have and the role of masculinity;
- are relevant and acceptable to young men and 'reach in' to their lives; and
- are co-designed with young men themselves.

Following the release of the report, a special forum on young men's mental health was held to bring together many of Australia's leading service providers and organisations, relevant government agencies, peak and not-for-profit bodies, administrators and researchers to discuss how the recommendations made in the *Keeping it Real* report can be implemented to find pathways forward in improving the mental health of Australia's young men.



Neurobiology in Youth Mental Health Partnership

Orygen is coordinating the Neurobiology in Youth Mental Health Partnership, a new national collaboration that will help harmonise the collection and storage of neurobiological research data and promote the sharing of this data between members of the partnership nationally, and other researchers around the world.

Thirty research organisations across Australia are involved in the partnership, which aims to create a better understanding of the neurobiology of mental illnesses and promote the translation of this knowledge into the clinical practice of youth mental health.

The data repository holds the most commonly used assessments, questionnaires and forms used in psychiatry research. To ensure the rigour of the data set, the data collection approaches for all new neurobiology studies, and studies currently underway, have been standardised to allow for easy data pooling.

Supporting young people with mental ill-health in finding employment

Young people with mental ill-health can experience severe disadvantage when accessing educational opportunities and employment. However, research has shown that if getting back to work, school or tertiary education as soon as possible is achieved as a part of care and treatment, it can have positive impacts on a young person's participation in work, family and relationships in the longer term."

With this in mind, Orygen successfully applied to become part of the Jobs Victoria Employment Network (JVEN). JVEN is a Victorian Government initiative to assist disadvantaged

Victorian jobseekers gain employment. JVEN services are delivered by service providers who work closely with employers to identify job opportunities and prepare jobseekers for those roles.

Through JVEN, Orygen has received \$1,546,000 in funding over four years to deliver fully integrated Individual Placement and Support (IPS) vocational programs at the Orygen-led headspace centres at Glenroy and Sunshine in Victoria's west. This has included employing two dedicated IPS vocational specialists, who provide IPS vocational support to young people, and two youth peer workers, who provide support to young people enrolled in the program.



Clinical innovation headspace Enhanced Care Model

In 2017, recognising the need to support clinical care of young people presenting with more severe and complex health issues, Orygen received funding from the North-West Melbourne Primary Health Network to pilot a new role in each of the four Orygen-led headspace centres.

The funding saw four enhanced care coordinators recruited across Orygen's headspace sites in Craigieburn, Glenroy, Sunshine and Werribee. These roles were developed to address gaps in mental health care and better identify those young people at risk of suicide.

The headspace enhanced care coordinators are the interface between the headspace access/intake teams, medical staff and private clinicians, as well as the liaison point between primary, secondary and tertiary services to support the 'stepping up' of care when it is required.

Providing this flexible and responsive service to young people supports their engagement with mental health services and may involve:

- addressing poor functioning or psychological barriers to treatment;
- outreach to support initial engagement or assessment;
- supplementing existing care provided by allied health providers;
- providing timely support to clients presenting in crisis to emergency departments;
- assisting families and carers in supporting an ambivalent young person to seek help; and
- coordination, consultation, and the training/coaching of staff and external agencies.

In their first four months the enhanced care coordinators supported 276 young people and their families who otherwise would have not engaged with mental health services, would have dropped out of care or had poorer outcomes.

Research priorities

To achieve Orygen's vision of young people enjoying optimal mental health as they grow into adulthood, we undertake research across the following areas:

- Functional recovery
- E mental health
- Clinical translational neuroscience
- Suicide prevention
- Vulnerable and disengaged youth
- Novel therapies and innovation in health services
- Emerging and transdiagnostic mental disorders
- Mood disorders
- Borderline personality disorder
- First episode psychosis
- Ultra-high risk for psychosis
- Neurobiology and Neuroprotection in Emerging Mental Disorders

Functional recovery

Improving educational, employment, physical health and accommodation outcomes for young people with mental illness is important in realising their hopes of living a full and meaningful life.

To achieve this we are investigating:

- how young people with mental illness return to, and succeed in, study or work;
- how to identify young people with mental illness who are at risk of homelessness and act to prevent this; and
- if it is possible to protect the physical health of young people with a mental illness and, if so, how?

E mental health

Among young people with mental illness, long-term social and functional deficits are the most resistant to treatment, and the most costly; however improvements in these areas are the most valued by patients. Using online platforms and mobile applications we design, evaluate and deliver new treatments that aim to:

- extend the benefits of specialised early intervention services into the longer term;
- improve quality of life, social functioning and recovery; and
- provide in real-time, tailored, context-sensitive and effective support to young people.

Clinical translational neuroscience

Understanding the biology of mental illness in young people will help us to develop new treatments, and target the treatments we already have to those young people they are most likely to help.

Using brain imaging (structure, function, and chemistry), studies of cognitive ability (memory, attention, etc), genetics, and other measures derived from blood samples we are seeking to discover:

- whether neurobiological measures (brain imaging, cognitive testing etc) help to predict clinical outcomes;
- whether these measures predict outcomes reliably and usefully; and
- what role altered adolescent brain development plays in the onset of mental illness.

Suicide prevention

Around one-quarter of deaths by people between the ages of 15 and 25 are attributed to suicide. Although much is known about the epidemiology of suicide-related behaviour, less is known about the efficacy of interventions designed to reduce risk.

To inform the development of evidence-based policy and clinical practice we are investigating:

- what types of interventions are effective at reducing suicide risk among young people; and
- whether it is safe and acceptable to engage at-risk young people via the internet and social media.

Vulnerable and disengaged youth

Young people in out-of-home care typically have experienced serious disadvantage and trauma early in life. Many have multiple and complex needs, with poor mental health and poor social functioning while in care and when they leave care. We are developing and trialling a program to improve the mental health of these young people, and specifically asking:

- will the young people involved in the program have improved mental health, greater resilience and less stress than those in comparison groups?
- will services operate more collaboratively and effectively?
- will the program be more cost-effective than the treatment currently used to improve the mental health of young people in out-of-home care?

Emerging and transdiagnostic mental disorders

Identifying young people at an early stage of psychiatric disorder provides the best opportunity to prevent disorders from worsening. This may ultimately result in reducing the incidence and prevalence of psychiatric disorders, as well as providing less invasive treatments for young people.

We are working to discover:

- what criteria best identify those young people presenting with non-specific symptoms who are at risk of progressing to a range of disorders (such as psychotic disorders, severe mood disorder, mania, and personality disorders);
- what the risk and protective factors (clinical, neurocognitive, neurobiological, genetic) are for threshold-level disorders; and
- what interventions can prevent or delay progression from low risk to high risk and improve results.

Personality disorders

Borderline personality disorder (BPD) is Australia's third most costly mental disorder. It starts in adolescence and emerging adulthood but treatment typically occurs late when problems in interpersonal relationships, education and employment are entrenched. Despite frequently seeking help, people with BPD are as likely to die from suicide as those with schizophrenia.

To address this challenge we are investigating:

- how we can accurately define personality disorder characteristics in young people; and
- how we can understand the cause and development of BPD to inform prevention and early intervention.

First episode psychosis

Psychotic illnesses often begin in adolescence and early adulthood just when young people are finishing their education, entering the workforce, and establishing themselves as independent adults. These illnesses can have serious repercussions. If psychosis is detected and treated early, many problems can be prevented.

This research program is focused on understanding:

- which are the most appropriate interventions for those with early psychosis?
- in what sequence should these interventions be offered? and
- which are the most effective ways to promote full recovery for young people who have experienced a psychotic episode?

Ultra-high risk for psychosis

Some young people may be at increased risk of going on to develop schizophrenia and other psychotic disorders. This research program seeks to clarify the risk and protective factors for psychotic disorders in young people and to identify the most effective interventions for delaying or preventing the onset of psychotic disorders in high-risk young people. Specifically, we are asking:

- what factors best identify young people who are at highest risk of going on to develop schizophrenia and other psychotic disorders?
- what are the psychosocial and neurobiological mechanisms of the onset of psychotic disorders?
- what are the most effective ways to improve the outcomes for young people, including treating existing symptoms, reducing the onset of psychotic and non-psychotic disorders, and improving functional outcomes?

Neurobiology and neuroprotection in emerging mental disorders

Mental illnesses such as psychosis and depression are the chronic diseases of the young. Our research aims to improve current treatment options and to find safe and effective treatments for early intervention or preventive use. Through randomised controlled clinical trials and basic research projects we are seeking to answer:

- what biological and novel psychosocial treatments are most acceptable for early preventive treatment among young people? and
- what interventions are effective at reducing the risk of developing psychosis or severe mood disorders among young people?

Towards a stepwise approach for treating young people at ultra-high risk of psychosis

Psychosis is a mental disorder in which a person's beliefs, thoughts, feelings, senses and behaviours are altered. People with the disorder may believe or sense things that aren't real, and become confused or slow in their thinking.

About 50% of people who will develop a psychotic disorder will do so by the time they are aged in their early 20s. The earlier their symptoms are recognised and treatment commenced, the better their recovery.

To understand which treatments are likely to be most effective for young people with emerging psychosis, Orygen has received funding from the National Institute of Mental Health in the US.

The funding is supporting the STEP (Staged Treatment in Early Psychosis) study, one of Orygen's largest research projects, which is being led by Professors Barnaby Nelson, Patrick McGorry and Paul Amminger.

The study is recruiting 500 young people who are at ultra-high risk of psychosis and who will be provided with treatments within a stepped-care model; where low intensity interventions are initially delivered, graduating to more intensive interventions for young people whose illness has not improved with the earlier stages of treatment.

The young people participating in the study are being recruited from the four Orygen-led headspace centres in the Melbourne suburbs of Craigieburn, Glenroy, Sunshine and Werribee, as well as the PACE (Personal Assessment and Crisis Evaluation) clinic at Orygen Youth Health.

All study participants will receive Support and Problem Solving treatment over the initial six weeks of the trial (Step 1). Participants who benefit from this will receive either monthly maintenance treatment or quarterly monitoring, while those who do not benefit will receive further or additional treatments, including more intensive psychological treatment or medication (Steps 2 and 3).

The outcomes of the study are expected to better guide treatment for young people with emerging psychosis so it is personalised yet cost-effective.



Professor Barnaby Nelson



Professor Patrick McGorry



Professor Paul Amminger

Counting the cost of mental illness

Mental illness has its peak onset period as young people prepare to enter the labour force.

Data from the World Economic Forum, the Harvard School of Public Health and others shows that mental illness, more than any other non-communicable disease, has, and for at least the next 20 years will continue to have, the greatest global economic burden; higher than those of cardiovascular disease, cancers, chronic respiratory diseases and diabetes.

It is forecast that the worldwide cost of mental ill-health between 2011 and 2030 will be USD \$16 trillion as a result of lost output.

Mental disorders already represent the largest cause of disability in Australia and account for 13.1% of the nation's burden of disease. Yet despite accounting for 13.1% of disease burden, mental ill-health receives only 7% of health funding. This lack of spending on mental health care has flow-on effects that require high levels of spending in other parts of the economy. These costs include:

- rising welfare payments due to significantly reduced workforce participation among people with mental illness;
- prison/juvenile detention costs;
- homelessness costs;
- suicide costs; and
- violence/victimisation costs.

To better inform governments and funding bodies of the costs and benefits of mental health services, and of investment in prevention and early intervention in youth mental health, Orygen has expanded its expertise in health economics and appointed Dr Matthew Hamilton to further develop our expertise in youth mental health economics.

This expertise is essential to research and policy development as the age range of 12-25 years spans critical transition points, from education to employment and independent adulthood.

Our youth mental health economics work includes conducting economic evaluations of youth mental health interventions, service models and supporting programs, in order to inform and guide innovation in youth mental health service development and system design. This includes not only embedding high-quality economic evaluations in each of the clinical trials conducted at Orygen, but developing and validating economic models and simulations that synthesise the youth mental health evidence-base and explore the potential long-term costs and benefits of prevention, early intervention and treatment in youth mental health.

With this information key decision makers and funders can make better-informed decisions regarding investment in mental health research and services, which will ultimately lead to more transformational models of care in mental health.



Matthew Hamilton

\$10.6 billion

The annual financial cost to Australia of mental illness in young people aged 12-25

Access Economics 2009

Thanking our Youth Advisory and Research Council members

At the end of the financial year Orygen farewelled its inaugural Youth Advisory Council and Youth Research Council members. We would like to take this opportunity to thank each member for their contributions to Orygen's work and acknowledge their dedication and commitment to youth participation and engagement across the organisation.

Working with young people, as well as their families and friends is critical to our work in ensuring they are engaged in developing our clinical services, research and translation. Co-design has played an important role in how young people have been integrated into our work.

The Youth Advisory Council was involved in the co-design of the Youth Engagement & Training Initiative (YETI) platform, summer intern program, and the 'Live it, Speak it' program. The Youth Research Council also focused on the co-design of the Youth Partnerships in Research Toolkit and Youth Partnerships in Research mini-conference. The Youth Advisory Council has also contributed members to Orygen's Research Review Committee.

The contributions made by both the Youth Research Council and the Youth Advisory Council have been significant and incredibly impactful. We have also seen the roll-out of a number of key processes to ensure our work can continue to be relevant and responsive to the needs of young people.

We wish our inaugural council members all the best for the future and look forward to seeing them further advocate the needs for youth mental health both through other projects with us and within their own communities.

We would also like to welcome our next generation of Youth Advisory and Research Council members.

We believe it is important to incorporate diverse voices in shaping our work and will be working closely with the councils, the 'Live it, Speak it' team and the Youth Engagement & Training Initiative network to ensure broader groups of young people have a voice, with a particular focus on young people aged under 18 and those in rural and remote areas. We look forward to seeing more innovative contributions from the next generation of council members and thank the pioneering members for paving the way.

Youth Advisory Council



TOP L - R
Max Simensen
Tina Yutong Li
Amy Hatfield
Yasmine Hooper
Luke Redfern

BOTTOM L - R
Alexander Barwick
Sarah Jane Haywood
Maddi O'Gradey Lee
Mary Brushe

Youth Research Council



TOP L - R
Jo Farmer
Candice Hooper
Tom Wood
Ella Svensson

BOTTOM L - R
Jia-Wern Toh
Rikki Crook
Christine Abdelmalek
Nicholas Fava
Alice Montague



Supporting the research and programs that improve youth mental health

Online platforms for vocational training, safe conversations around suicide, and the Orygen capital project are among some of the innovative projects that have received support from trusts, foundations and the community in 2016-17.

Fundraising is vital to ensure we are able to pursue innovative research and projects that will reduce the impact of mental ill-health on young people, their families and society.

We would like to particularly acknowledge the following fundraising contributions this year:

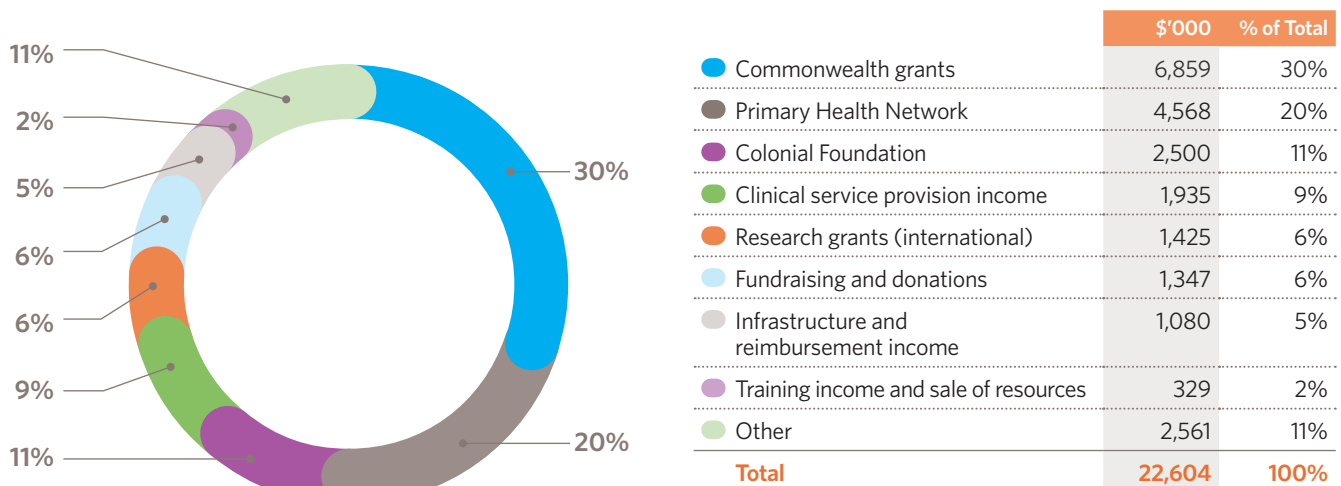
- \$3 million over six years from The Ian Potter Foundation to support the capital project;
- \$600,000 over four years from the William Buckland Foundation for an online youth suicide prevention program;
- \$586,221 from the Helen Macpherson Smith Trust over two years for the Youth Online Training and Education (YOTES) program, which provides online peer-support for young people seeking employment;
- Support from the BB & A Miller Foundation for substance use research and Aboriginal and Torres Strait Islander youth mental health research;
- \$200,000 over two years from The John T Reid Charitable Trusts to help identify young people who are at ultra-high risk of developing psychosis;
- \$200,000 over two years from the Morris Family Foundation to address the physical health needs of young people attending Orygen's clinical services;
- The James Marcon Youth Health Foundation, for raising funds for an art therapy program run at our headspace centres; and
- the Hats for Hope community fundraising event, which supports Orygen's suicide prevention research.

Financial statements

Statement of comprehensive income for year ended 30 June 2017

	2017	2016
	\$'000	\$'000
Revenue From ordinary activities	22,604	18,883
Expenditure		
Consultancy	(372)	(444)
Depreciation	(453)	(486)
Occupancy	(885)	(714)
Salaries	(12,391)	(13,676)
Medical supplies, tests and practitioner payments	(1,863)	(1,778)
Other expenditure	(2,551)	(2,636)
Surplus/(Deficit) for the period	4,089	(851)

Sources of revenue (Year ended 30 June 2017)



A full copy of the Orygen Special Purpose Statutory Financial Report for the year ended 30 June 2017, is available on the ACNC website www.acnc.gov.au

Statement of financial position for year ended 30 June 2017

	2017	2016
	\$'000	\$'000
ASSETS		
Current assets		
Cash	11,480	5,594
Term deposits	81	0
Trade and other receivables	1,804	2,063
Prepayments	140	170
Inventory	89	98
Total current assets	13,594	7,925
Non-current assets		
Property, plant and equipment	1,100	1,355
Total non-current assets	1,100	1,355
Total assets	14,694	9,280
LIABILITIES		
Current liabilities		
Trade and other payables	4,410	3,015
Provision for employee entitlements	449	326
Total current liabilities	4,859	3,341
Non-current liabilities		
Trade and other payables	381	650
Provision for employee entitlements	264	187
Total non-current liabilities	645	837
Total liabilities	5,504	4,178
Net assets	9,190	5,102
EQUITY*		
Share capital	-	-
Retained surplus/(deficit)	3,542	3,277
Unexpended funds reserve	5,648	1,825
Total equity	9,190	5,102

* Equity includes project funds received in the year ended 30 June 2017, but committed to expenditure in future financial years.

Publications

July 2016 – June 2017

Journal Articles

A

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