

Address to the Press Club

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1. Opening

Members of the Press Club, my fellow Australians, I thank you for this opportunity to speak today.

2. Context

What is Australia's most precious natural resource?

Is it iron ore? Is it coal? Is it gold?

Our most precious natural resource is our health. Sadly in our country today a major part of our health is sorely neglected – our mental health. If we're mentally healthy we live longer, achieve more, have a better family life, more friends, and contribute to a safer and more productive Australia. **Mental health means national wealth.**

Australians increasingly understand that mental ill-health lies behind a young woman's concerns about her body image, behind bullying and youth violence, and behind binge drinking and drug abuse. Mental ill health weakens workplaces, burdens working families and drives the senseless loss of life from suicide.

Growing awareness about the widespread impact of mental-ill health on our lives means it's high time that we meet this challenge head on. One of the most exciting things about living in Australia in the 21st Century is that our ability to protect our mental health and even to recover it when it has been lost has never been greater.

There is overwhelming support for national action to break the silence, end the neglect and welcome all Australians with mental-ill health into our hearts and our health care system.

Australia is at the tipping point - our need for a new approach to mental health is now matched by our desire and capacity to deliver it.

We owe it to ourselves and our children.

3. Subject

So, today I am going to talk about how Australia can adopt a 21st Century approach to mental health and the huge benefits of doing

so.

4. Agenda

In this address, I will take you through three steps:

Describing what a 21st century approach to mental health means in practice

Outlining the benefits we can expect from adopting a 21st Century approach to mental health

Identifying what we can all do to make a 21st Century approach to mental health a reality for Australians

5. Body

Problems A 21st Century Approach Must Solve

A 21st Century approach to mental health is about solving the problems of needless disability and loss of life. Our current system, supports and services are woefully inadequate. We need a new approach **today**, because...

Today, almost 1,000 Australians with mental ill-health will present in distress to emergency departments and be turned away without receiving care.

Today, 6 Australians will die by suicide. Many more will attempt suicide or self-harm.

Today, over 1,000 years of healthy life will be lost to mental ill-health. This costs us up to \$30bn every year. 3 times the mineral resources rent tax.

Today, Australians are up to 3 times less likely to receive quality care for mental ill-health than for physical ill-health. This is healthcare apartheid.

Today, thousands of Australians with severe mental illness are in our jails because there are no other options and they have not received the mental health care they needed, when they needed it.

Today, mental ill-health services are given the impossible task of addressing 13% of Australia's health burden with just 6% of the health budget.

Tonight, in the middle of Australia's winter, thousands of Australians, mostly young Australians, with mental illnesses will sleep outside because we don't have an adequate number or range of accommodation services to give them shelter.

These are not just numbers, they represent the pain and anguish of real people and real families. I've heard directly from hundreds of

these Australians this year – it's a heart-rending Australian story, which could one day be your own, and which must change.

So we know that a 21st Century approach to mental health must fix these problems and provide real benefits to all Australians.

What A 21st Century Approach To Mental Health Will Do

A 21st century approach to mental health means that Australians understand what it means to be mentally healthy and are able to recognise, as they do with heart disease and cancer, the earliest signs of mental ill health. Currently, many people do not recognise when their mental health is failing and do not seek help.

A 21st century approach to mental health means that the response from family, friends, workmates and health professionals is supportive and skilful. Everyone is equipped with the knowledge and skills to respond in a helpful way, the same as when someone sprains their ankle, has an asthma attack, faints or develops chest pain. Today, we're uncertain about how to respond to distress and disturbance and naturally turn away. Tomorrow, with the right information we could really help.

A 21st century approach to mental health means that Australians feel comfortable to share their experience of mental ill health with those close to them and to ask for help if they need it. Phrases like "nutter", "schizo" and "psycho" will become as unacceptable as racist and sexist language is now. This is the antidote to the poison of stigma.

A 21st century approach to mental health provides stigma free comprehensive community mental health care closely linked to primary care. This includes assertive mobile teams available 24 hours a day just like all our other emergency services. This will stem the flow of Australians with mental ill health into emergency departments. The current system has collapsed under the strain and keeps all but the most desperate at bay. Only one third of the 4-5 m Australians in need of mental health care actually receive it and then it's too little too late. Often very late.

A 21st century approach to mental health means that people with mental ill health receive high quality physical health care, so that their life expectancy comes to equal to that of the rest of the population. Currently, Australians with serious mental ill-health have worse access to quality physical health care and typically die 20 years earlier from cardiovascular disease, cancer and suicide.

A 21st century approach to mental health cares for Australian

children and tackles the key drivers of later mental ill health, such as social disadvantage, child abuse, bullying, and poorly treated mental illness and addictions in the parents. Currently, there is serious neglect of preventive opportunities and the key drivers of mental ill health in childhood.

A 21st century approach to mental health makes available to young Australians a stigma free system of care which provides youth-friendly, integrated and multidisciplinary expertise. It creatively uses new technologies. Currently, our system is weakest where it needs to be strongest. The peak period for onset of mental ill-health is between 12 – 25 yet this age group has the worst access to care.

A 21st Century approach to mental health delivers equity and equal access and quality for mental and physical ill health.

A 21st century approach to mental health sets targets for reducing the suicide toll and delivers a national suicide prevention strategy on the same scale as the campaign to reduce the road toll. Currently, there are well over 2,000, mostly preventable, deaths from suicide each year, an avoidable tragedy every 4 hours. Suicide is the biggest killer of adults up to the age of 40. This is a public health scandal 40% greater in magnitude than the road toll. Hidden from public view. Let's bring it out in the open.

A 21st century approach to mental health ensures that all Australians with persistent serious mental illness are able to live in a safe and secure environment, namely their own home. Let's correct this great failure of deinstitutionalisation.

A 21st century approach to mental health features strong investment in research especially research into novel treatments. Currently only 3.5% of the national health research budget goes to mental health research. This is another serious side effect of stigma and prejudice. Although we do have effective treatments, just like in heart disease and diabetes we always need to strive for safer and even more effective treatments, not only drug therapies, but novel psychological interventions and social care.

The 21st Century Approach In Practice.

A 21st Century approach to mental health may sound a world away from where we are now – but a growing number of Australians have already experience what a 21st Century approach means in practice. As one example of a 21st Century approach that is already available – to some Australians - I am going to pick the exciting youth mental health model which is emerging around Australia.

This model is built around two closely linked components – headspace for young people with mild to moderate mental ill-health and EPPIC for young people with serious mental illnesses. The Government, the Coalition and the Greens have all endorsed this model as the template for our future – the crucial difference between the parties is how quickly this model is made available to the general population.

The best way to grasp the 21st century nature of the approach represented by headspace and EPPIC is to think of that other 21st century advance the iPhone.

The breakthrough behind this modern icon is that it simply brings together in a single platform so many of the key tools we need to function in the modern world. It is engaging, efficient and hence popular. Everyone wants one.

Headspace and EPPIC are based on the same simple idea – the one stop shop where the main applications that young people need to protect or recover their mental health can be found. There's a range of applications available: youth friendly doctors, allied health professionals, drug and alcohol clinicians, educational/vocational expertise and other back up programs such as community awareness and outreach.

Every community wants and needs one of these too.

headspace is an enhanced form of primary care based in the heart of the community and gift wrapped in a youth friendly environment. Real expertise without stigma or strings attached.

There are many young people with more complex or severe forms of mental ill health who need access to additional applications such as hospital or residential care, 24 hour home based interventions, access to specialist psychiatrists or specialised clinics. Hence the need for an integrated back up system for headspace. This backup is EPPIC, which provides more specialised care aimed at maximising recovery from serious mental illnesses, especially psychotic disorders, during the challenging early years of illness when great therapeutic tenacity and sophisticated scaffolding is essential.

EPPIC has been so successful in reducing the disability, mortality and costs of potentially serious illnesses, like schizophrenia, that it has been developed in hundreds of locations across the developed world. Yet ironically, in Australia, where EPPIC was invented it is available to only a fraction of the young people who need it. Headspace can't function properly without this back system, and it

is therefore very welcome news that all major political parties and the National Health and Hospitals Reform Commission have recently endorsed a national rollout of EPPIC alongside headspace.

Just as the wonder of the iPhone was made possible by some innovative engineering, so too the 21st Century model of youth mental health represented by headspace and EPPIC is based on the very latest in smart design and cutting edge understanding of young people and their mental health.

So what are these distinctive innovations?

Well let's start with the youth focus,. Traditionally mental health services have been divided between services for under 18s and over 18s. This makes no sense - we know that the emerging adult phase of 12 to 25 is distinct from early childhood or older adulthood. So headspace and EPPIC focus on this age range, with a youth friendly culture that can engage young people, and offer flexible and agile responses.

Early intervention is a key principle, which means as soon as problems emerge they are recognised and responded to. Early Intervention is an established principle in general medicine, but in mental health it is only now breaking into the mainstream.

New technologies especially internet-based information and therapies are a feature and headspace and EPPIC seek to work in collaborative and complimentary partnership with other innovative youth mental health services like Reach Out and young beyondblue.

The approach of headspace and EPPIC is holistic and multidisciplinary with a range of health and other professionals involved, including GPs, psychologists and other allied health professionals, drug and alcohol counsellors and vocational and educational programs.

Families are welcomed and supported as a key resource in a young person's recovery.

Youth participation is a hallmark – headspace and EPPIC are services that innovate new ways of being accountable to young clients and incorporating their ideas in further service improvements.

Finally, headspace and EPPIC are optimistic with a recovery focus. There is real faith in the resilience of young people while ensuring they still receive the most expert help. The aim is to provide some of the extra scaffolding and specific interventions that so many young people need to lead healthy and fulfilled lives.

There is still only one EPPIC, now broadened to cover severe mood and borderline personality disorders as Orygen.

So what does all this redesign mean for a young person who needs help?

Let's look at the story of Jack, a 19 year old student who has become more withdrawn and flat in recent weeks. He is worried himself but it is his friends who press him to open up and he shares his experiences of deepening depression with them. After getting online and gleaning some key information from websites like reachout! beyondblue and headspace, Jack talks with his mother and sister and he makes an appointment at the local headspace. He feels at home when he turns up for his first visit and is encouraged by the friendly welcome from the young reception staff and the youth access team who he meets on arrival, the décor and the general "vibe" of the place. It really is the "vibe"!

He sees a GP who seems to know how to put him at ease even though he doesn't really feel like talking much. He also sees a young psychologist at the same visit and is offered a series of counselling sessions. It is agreed he doesn't need medication at this stage. He also gets some advice on use of drugs and alcohol and an appointment is made for him see the vocational expert who plans to help him hang in there with his studies with which he has been struggling in recent months.

Despite all these efforts Jack finds himself sliding further into a deeper depression and, after about 8 weeks in, consideration is then given to whether he might benefit from a trial of some antidepressants. Because he has also developed some warning signs of psychosis he is assessed at headspace by a psychiatrist linked to the integrated youth specialist mental health service. He recommends trying antidepressants, some omega 3 fatty acids, and specialised cognitive behaviour therapy in an evidence-based effort to turn things around.

This course of action begins to work and within a couple of weeks Jack has turned the corner and is on the road back. He and family and friends know this is still a risky period and he is monitored carefully, with back up from the home treatment team, for any suicidal risk which can occur sometimes, paradoxically as young people are on the improve. He doesn't end up needing hospital care but if that had been necessary it would have been easily arranged within the headspace linked specialist youth mental health system.

This is a snapshot of the immediate future, a future that is now in place some parts of Australia and within easy reach of the whole society. It doesn't depend on new advances just political will and funding. It contrasts starkly with the many tales of misery and tragedy I've heard this year.

There are many other tasks facing us of course in mental health reform. As well as stemming the tide through early intervention, we must ensure that those who have already been swept away are rescued. I met such a person a few weeks ago, a hugely impressive man of 42 years who was working in a vocational recovery program in Melbourne in paid employment. He was handsome, personable, tall and athletic. He told me that 6 months earlier he had been 50kg heavier, sleeping 20 hours per day on large doses of medication and living with his elderly mother. A change of medication, a fitness program, someone who cared enough to connect him with the vocational recovery program known as the Madcap Café, and his own resilience changed his life. This man had been ill with schizophrenia since 19 and spent two decades on the scrapheap and at times homeless. There are two lessons in this story of Awakening. There is hope for everyone affected by mental illness – we should never give up. Secondly how different would his life have been if he had had early intervention and quality care from the outset?

WHAT CAN WE DO?

Actions for All Australians

We can challenge and defeat stigma whenever we encounter it. It's vital that every Australian who has been touched by mental illness share these experiences in an open and unashamed way – that's the first step. In fact we can all talk openly about both mental health and mental illness with family members, friends and colleagues.

We can do a mental health first aid course to increase our skills and confidence about responding to the mental health needs of the people around us..

We can donate money – I call on philanthropists big and small to support mental health research, innovation and advocacy.

We can organise and go on marches, like the huge one last Australia Day organised by a bereaved Mum who had lost her son through suicide.

And if you or your family have already been let down by our mental

health system, take action and let people know why you want a 21st Century mental health system– headspace, EPPIC and innovative models for all ages accessible in your community. Write to the papers, ring talkback radio, arrange to meet your local MP, form a local action group, grill the local candidates on their mental health policies, and even consider running for election yourself. Whatever you decide to do, take the first step today – perhaps by joining the 100,000 Australians who have already committed to action for mental health at www.getup.org.au

Actions for all of us who work in mental health

All of us working in mental health services have a critical role to play. The most useful thing we can do is to be open to innovation and change.

We must also remain united. We have unprecedented unity in the field with > 60 organisations signing the recent protest letter to the former PM after COAG.

People mostly choose a career in mental health because it is an opportunity to express compassion – to help people going through tough times to pick up the pieces and reclaim their lives. For many people in our field, working in a crisis-ridden system built on the wartime principal of triage is a bruising experience. It often means the quality of care provided is not as it should be. We need regeneration and renewal.

So as the Australian community and Australian Governments mobilise behind a new vision of mental health – it is an opportunity for all of us who work in mental health to deliver the quality care we desperately want to provide. We should seize this opportunity and work with Governments and the community to create a world class, 21st century model of mental health care that becomes the envy of the world. To build the next generation of workforce, we need to recruit from the gifted and the talented and to compete for them aggressively. I encourage Australians to actively consider a career in mental health – train to become a social worker, psychologist, occupational therapist, nurse or doctor. I'd say to medical students and young doctors – consider a career in psychiatry and you will help create the future. You won't burn out at 50. Psychiatry is the best focus for altruism and a fulfilling life in the medical profession by a country mile!

Actions for political leaders

Our political leaders are not immune from the threat of mental ill health. A substantial minority of politicians, just like the rest of us,

have experienced mental ill health. Through the courage of people like Geoff Gallop, Andrew Robb and John Brogden we have role models as well as champions for progress. They all found it hard to get the expert help they needed until pretty late in the game. Many other politicians have been supportive but mental health needs champions at the very top.

There are three immediate steps that our political leaders can take to kick start a process of national transformation on mental health.

1. Commit to ending the second class service the apartheid in the health system for Australians with mental-ill health.

All Governments should make their core policy goal in mental health ensuring that Australians have the same access to quality care for mental health as for physical health by 2020.

2. Make immediate good faith investments in proven models of care in which the government has full confidence.

When mental health was locked out of health reform at COAG it was an example of "a good Government having lost its way" . There is now a great opportunity for the new Prime Minister to restore faith by making immediate mental health investments aimed at improving services, reducing suicide and creating new knowledge. We have a new full forward with a safe pair of hands. Kick the goal Julia. The crowd will go wild!

The Government can and should invest an additional \$500m p.a. from next year in improving services by supporting the implementation of the mental health recommendations of the National Health and Hospitals Reform Commission and can and should supplement this with an additional \$140m p.a. from next year for research, innovation and additional suicide prevention measures.

3. Work collaboratively to develop a continuous 10 year reform and investment plan. All Australian Governments, working together and in partnership with the mental health sector need to finally face up to this national responsibility. They should develop a target driven, fully funded reform program that addresses the 5 key areas of leadership, funding, access, skills and standards:

Leadership– Sustained, committed leadership that is no longer afraid of setting priorities and targets for all levels of Government.

Funding– Progressively move mental health funding towards its share of the health burden. By 2020 mental health funding needs to be double as a proportion of the health budget what it is today.

We have just seen that if there is a political imperative then the money will be found. For acute hospitals, to take the mining tax off the agenda and to defuse the asylum seeker issue. Well mental health is now a political imperative. Middle Australia is anxious about this too. The Prime Minister is sensitive to Middle Australia's mood. She made it clear that the asylum seeker issue is actually driven by real pressures in the outer suburbs driven by urban sprawl, unplanned growth and a lack of services rather than by fear of what is really a handful of desperate people. The lack of services is nowhere greater than in mental health. Middle Australia doesn't have Jeff Kennett's phone number..... or mine.

Access – A plan to ensure every community has access to 21st century models of mental health care. Why should some communities have access to 21st century care like headspace and EPPIC and others not? Why should they have to wait? The 21st century is here.

Skills – Develop the skills and numbers of the mental health workforce and enhance our knowledge of what works by supporting research and innovation. Money will solve this too.

Standards – Set quality standards and establish accountability measures - including accountability to service users.

Since I was honoured as Australian of the Year in January, I have been bombarded by email, phone and letter with peoples' individual stories of tragedy, struggle and desperate pleas for help. Australians from every walk of life, from every section of the media and within the bureaucracy all political parties have encouraged me, and urged me to continue to advocate as strongly as I can for urgent and sustained action, to give a voice to people with mental ill health and help Australia find its voice. This is happening and it cannot be stopped. I will continue down this path this year and on into the future and know that the true believers of the mental health field and hundreds of thousand of Australians will be walking with me. This is not an issue that polarises Australians – it unifies us in common purpose. It is a classic example of the fair go.

6. Summary

A 21st Century approach to mental health will mean that you and your family will have access to knowledge, understanding, assessment and quality care when you confront mental ill-health.

A 21st Century approach to mental health is urgently required by millions of Australian families who are unable to access the mental health supports that they need and will deliver significant economic

and social benefits to all of us. Mental health is national wealth. Not just a bigger GDP but a bigger GHI or Gross Happiness Index too. Lives will be saved, there will be many fewer bereaved parents and a happier more productive Australia.

A 21st Century approach to mental health is achievable through a five point plan on **leadership, funding, access, skills** and **standards with the aim of ending** unequal access to quality care between mental and physical health by 2020

A 21st Century approach to mental health can be kick-started with an initial Australian Government investment of 500m p.a. in enhancing services and \$140m p.a. in new knowledge creation and suicide prevention.

A 21st Century approach to mental health starts with you – so start taking action to achieve it today.

7. Conclusion

A 21st Century approach to mental health will transform Australia. It will transform our understanding of ourselves, our family lives and the fabric of our communities. We can do it. We will do it.

So let's get started now.

THANK YOU