The Mental Health of Children and Adolescents

REPORT ON THE SECOND AUSTRALIAN CHILD AND ADOLESCENT SURVEY OF MENTAL HEALTH AND WELLBEING
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Report on the second Australian Child and Adolescent Survey of Mental Health and Wellbeing

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FOREWORD

This report provides compelling reading for everyone interested in the health and wellbeing of Australian children and adolescents. Based on a survey conducted in the homes of over 6,300 families with children and/or adolescents aged 4 to 17 years, the report presents a comprehensive picture of the mental health of young Australians. It documents the prevalence and type of mental health problems, the impact of those problems on families and young people themselves and the role of health and education services in providing assistance. While the primary sources of information were parents and carers, the survey also engaged directly with young people 11 years and older who completed their own survey. This information provides unique insights about aspects of their emotional lives and behaviour that are generally not visible to parents and carers.

Australia has a proud tradition of undertaking mental health surveys of its population. Commencing in 1997 with the first household survey of the adult population, the National Survey of Mental Health and Wellbeing programme has produced six major surveys. Two of these covered the more common mental disorders in adults conducted in 1997 and 2007, two covered people living with less prevalent psychotic illnesses conducted in 1998 and 2010, and now with this report, two surveys have been undertaken of the mental health of children and adolescents. The first child and adolescent survey was conducted in 1998 and released in 2000. It was the first national survey of its type conducted anywhere in the world.

The report on the second child and adolescent mental health survey presents a contemporary update on the next generation of Australian adults that is both reassuring and troubling. Overall prevalence of mental disorders appears to be stable, with approximately one in seven children and young people experiencing a mental disorder in the past year. This is consistent with comparable international studies. The most positive news is that access by families and young people to assistance appears to have increased substantially. The first survey found that only one third of children and adolescents aged 6-17 years with mental disorders used services in 1998 in the previous six months. By contrast the second survey found just over two thirds were able to access services, although this was measured over a 12-month period. The vast majority (95%) used a health service. Despite differences in methodology between the two surveys, the report notes that on balance the data points to a significant increase in service use by children and adolescents with mental disorders in Australia between 1998 and 2014.

It is pleasing that the evidence from this more recent survey shows that those most in need have the best access to services. About nine out of every ten young people with a severe mental disorder accessed assistance from the service systems provided by the health and education sectors, as did about three quarters of those with problems of a moderate impact. This provides reassurance that the policies adopted by governments to lift the known low treatment rates for people with mental illness are achieving results. The Australian Government in particular has had a special focus on improving both prevention and treatment efforts for young Australians, commencing with the introduction of the National Youth Mental Health Initiative in 2005 (now known as headspace).

More troubling is the range of information presented in this report that points to the need for refocussed effort by governments and the broader community to develop systems to both prevent mental health problems and to respond early to problems when they emerge. The rates for depression, self-harm and thoughts about suicide in teenagers are particularly worrying, with approximately one in ten indicating that they have engaged in self-harming behaviour. Three quarters did so in the previous 12 months. For
teenage girls aged 16-17 years, nearly one in five were found to meet the clinical criteria for depression based on their own report. Around one quarter of teenage girls in the 16-17 year age range reported deliberately injuring themselves at some point in their lives. The rates for depression in 11-17 year olds were found to be higher when young people provided the information themselves (7.7%) than when their parents and carers did so (4.7%). This is an important signal to all parents who are faced with the challenging task of helping their children navigate the transition from childhood to adulthood.

Additionally, this survey has again highlighted the strong relationship between socioeconomic disadvantage and higher rates of mental health problems that has been found in comparable international studies. Children and adolescents in low-income families, with parents and carers with lower levels of education and with higher levels of unemployment had higher rates of mental disorders in the previous 12 months. There was also a strong relationship with where they lived as significantly higher rates of mental disorders were found in non-metropolitan areas.

Overall, the survey highlights the need for continued effort by governments and the broader community to improve the mental health of children and young people and to continue our collaborative work to achieve more effective prevention. A continued focus on suicide prevention and early intervention must be central platforms of the service systems that we build in the health, education and welfare sectors. As this report demonstrates, the health system has a key role to play but the roles of the education and welfare sectors are also critical in responding to the needs of children and young people with mental health problems.

The Australian Government is committed to maintaining a strong focus on prevention and early intervention efforts to reduce the prevalence and impact of mental health problems in our young population. The survey shows that the investment by government in youth mental health is making an impact on service access, however, it also highlights the importance of targeting available resources to focus on emerging need.

This is why the Government tasked the National Mental Health Commission to conduct a comprehensive review of mental health services in Australia. Following the release of this review and its recommendations State, Territory and Commonwealth Governments agreed to recommit to a bipartisan approach to comprehensive mental health reform.

Results from the Second Australian Child and Adolescent Survey of Mental Health and Wellbeing have produced a wealth of information that will guide the development of mental health policy and programmes for young people well into the future. Surveys of this type are highly specialist in nature, expensive and demanding on all involved. I wish to express our gratitude to all who contributed, particularly to the families who willingly gave their time to provide information about areas of their family life that are sensitive and deeply personal. I also wish to thank the team at the Telethon Kids Institute at the University of Western Australia who so ably planned and coordinated the survey, producing this publication.

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