



Medical Research Future Fund

Million Minds Mental
Health Research Mission
International Review
of the Roadmap and
Implementation Plan

17 November 2022



Introduction

Our mission

To contribute to measurable improvements in Australians' mental health and wellbeing, by concentrating research efforts into areas of critical importance and areas not already targeted through existing initiatives.

Our goal

To improve the quality of life of an additional one million people, who might not otherwise benefit from mental health research, to be part of new approaches to prevention, detection, diagnosis, treatment and recovery developed from the work of the mission.

The Medical Research Future Fund (MRFF) is a \$20 billion long-term investment supporting Australian health and medical research. The MRFF aims to transform health and medical research and innovation to improve lives, build the economy and contribute to health system sustainability.

The Million Minds Mental Health Research Mission (the mission) will provide \$125 million over 10 years from 2018–19 to improve the quality of life of an additional one million people, who might not otherwise benefit from mental health research, to be part of new approaches to prevention, detection, diagnosis, treatment and recovery.

To date, the mission has provided \$64.8 million for 18 mental health research grants through 4 grant opportunities. The priority areas of these grant opportunities were informed by the mission's first Roadmap, which was published on 7 November 2018.

Million Minds Mental Health Mission Expert Advisory Panel

The mission's second Expert Advisory Panel was appointed in April 2022. The Expert Advisory Panel's role is to provide advice on the strategic priorities for the remaining disbursements from of the mission, by revising the existing Roadmap and developing an Implementation Plan.

The Roadmap includes:

- · the mission statement and goal
- possible themes and priorities for investment

The Implementation Plan includes:

- 3 aims that outline how the mission will benefit Australians
- · priorities for investment
- activities needed to support the mission's outcomes and facilitate their implementation

Expert Advisory Panel members will consult and engage with other researchers, industry, consumer and patient groups, and participate in media and public activities to build awareness of, and facilitate interaction with, the mission and other MRFF-funded research.



Million Minds Mental Health Research Mission International Review Panel

The Million Minds Mental Health Research Mission's International Review Panel's (the panel) role was to provide expert feedback and experiential advice in the context of relevant activities occurring internationally, which can inform the strategic direction of the mission's Roadmap and Implementation Plan.

The panel members were asked to:

- a. advise on the applicability of the mission's goal to the international context; specifically, whether the goal duplicates or contributes to international research activities
- b. advise on the likely effectiveness of the research priorities (including their sequencing) to achieve the goal
- c. provide learnings from international research activities in the field
- d. identify opportunities for leveraging and complementing international research activities to achieve the goal
- e. advise on the appropriateness of the proposed measures for evaluating progress towards meeting the goal

The panel comprised 5 members representing expertise in a variety of clinical and scientific research areas:

- Professor Cathy Creswell Professor of Developmental Clinical Psychology, Experimental Psychology Medical Sciences Division, University of Oxford
- Professor Wendy Silverman Alfred A. Messer Professor, Child Study Center; Professor of Psychology and Director, Yale Child Study Center Anxiety and Mood Disorders Program, Yale University
- Professor Miranda Wolpert Director of Mental Health, Wellcome;
 Professor of Evidence Based Research and Practice, University College London

- Professor Dame Til Wykes Head of the School of Mental Health and Psychological Sciences, Institute of Psychiatry, Psychology and Neuroscience; Professor of Clinical Psychology and Rehabilitation, King's College London
- Professor Allan Young Vice Dean for Academic Psychiatry; Chair of Mood Disorders and Director of the Centre for Affective Disorders, King's College London



Consultation discussion

The panel met on Thursday 17 November 2022 to discuss the Million Minds Mental Health Research Mission's Roadmap and Implementation Plan.

All participants at the meeting were required to declare any conflicts of interest and relevant collaborations. None of the declared interests were considered material to the meeting.

Key points

- Overall, the panel supported and were enthusiastic about the Million Minds Mental Health Research Mission and its accompanying Roadmap and Implementation Plan. The panel noted and appreciated the focus on Early- and Mid-Career Researchers (EMCRs), although it noted some additional ways such researchers can be supported
- The panel expressed some concern about funding too many smaller correlation studies at the expense of funding larger implementation research. The panel considered that a key knowledge area that is missing is how to promote mental health and ensure that people have access to the services they need. If correlation studies are considered necessary, the panel suggested focusing on the Australian context and how this knowledge could advance global mental health research
- The panel suggested that interventions should include the community, and that this be made clear in the Implementation Plan
- Although large multisite programs are informative, the panel suggested ensuring that research program hypotheses remain focused
- The panel noted the difficulty of evaluating research successes, and suggested ensuring that the outcomes can be achieved within the context of the Million Minds Mental Health Research Mission

The panel was very supportive of the Million Minds Mental Health Research Mission and its accompanying Roadmap and Implementation Plan. However, some suggestions were noted, as discussed below.

Focus on implementation more broadly

The panel noted the opportunities for smaller-scale correlation studies, especially for aims 1 and 2. However, unless the aim is to provide context for underrepresented groups, the panel considered that there is already a lot of knowledge about the factors contributing to mental illness and psychological distress. The panel queried whether small correlation studies are being funded because they can be done, or because they need to be done.

The panel considered that if small correlation studies are conducted, they should focus on the aspects of Australian society that might be different or underrepresented in studies in other countries. This could help to advance mental health knowledge globally. Alternatively, smaller correlation studies could be embedded in larger, implementation studies, if they need to be conducted. This would also reduce the number of goals to produce a stronger focus for the mission.

Ensure research priorities have definite and tangible outcomes

The panel noted that the focus of the aims is important, but felt a number of the priorities lacked direction and outcomes. The panel encouraged a revisiting of these priorities to ensure the outcomes are clear. The Chair of the Expert Advisory Panel noted that aims 2 and 3 are intended to be informed by the outputs of aim 1.

Although extremely large, multisite projects often achieve great outcomes, the panel advised that such studies in the Implementation Plan should not be underpowered and to avoid aims that encompass 'everything' as this could create confusion. The panel suggested that large projects should have a focused hypothesis(es) to ensure they remain relevant and outcomes-based.

Explore repurposing of existing treatments

The panel queried whether there was any scope for funding into new treatments or repurposing old treatments, noting that such activity could harness the mental health Clinical Trials Networks that have been established through the mission.

The panel noted that the repurposing of existing drugs is how nearly all psychiatric drugs have been discovered. In the UK, grants schemes that are collaborative with industry have successfully led to innovative digital treatments. This collaborative model could also be used for drug research.

Ensure that interventions and outcomes include the community

The panel reported that, in the UK, consumer feedback stated that there needs to be additional funding to improve access to mental health care.

The panel considered that knowledge is missing on how to promote good mental health and wellbeing; Australia has done a great deal of underlying correlating research, but has not looked at evaluating research outputs to understand how or which people and society might benefit from certain interventions.

The panel also suggested strengthening the focus on community resilience, noting that the wording of some of the aims appears to only imply individual resilience.

Support mental health EMCRs

The panel noted that the attrition rate of young academics is very high in Australia. The panel applauded the focus on supporting EMCRs, and encouraged the MRFF to look for more ways to support them. This may include:

- supporting people, including established clinicians, to start research careers at an older-than-usual age
- · supporting researchers returning to the workforce after time off
- allowing the EMCR to co-lead the project with a senior researcher, so that the senior researcher can support them in learning how to run larger projects
- considering innovative ways to support EMCRs, such as the US National Institutes of Health Director's New Innovator Award program – an award that supports exceptionally creative early career investigators who propose innovative, high-impact projects in the biomedical, behavioural or social science
- ensuring that definitions of EMCRs recognise the diversity of the workforce (the panel heard that the current definitions of EMCRs in the MRFF context are not related to age)

Define 'wellbeing'

The panel noted the use of 'wellbeing' throughout the Roadmap and Implementation Plan, and was uncertain about its meaning. The panel heard that this term was driven by lived experience groups and First Nations peoples – as it was in part informed by the Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice. For First Nations peoples, wellbeing describes a place and sense of purpose. The panel noted that it may be helpful to define this term in the Roadmap and Implementation Plan.

Ensure Clinical Trials Networks are sustainable

The panel considered the mental health Clinical Trials Networks to be a great initiative, but noted that these types of networks must be sustained properly to remain effective. The panel advised looking at clinical trials expertise outside of mental health, particularly adaptive trials and more agile trials that have been developed for, for example, infectious disease, to help make Clinical Trials Networks sustainable.

Consider the effectiveness of the 'evaluation approach and measures' section

The panel considered the goals in this section to be laudable, but also noted that it may be challenging to measure many of these goals. The panel said that good baseline data and long-term follow-up are needed. Measuring implementation is difficult because successful implementation relies on factors that are out of the MRFF's control. The panel suggested including some impact statements to ensure that research translation and impact is at least being considered.

Another caveat is involving policy research, and the importance of this for successful implementation. Implementing evidence into policy is often not a part of research programs.

Finally, the panel noted that 'reduced stigma' is a goal that was not mentioned in any of the aims. The panel suggested ensuring the goals matched the 3 aims.

Additional advice

The panel also noted that traditional forms of advocacy in demonstrating the importance of mental health does not always translate to more research funding for the sector. The panel suggested that focusing on successes and research breakthroughs may help reverse this trend. Panel members also queried whether funding fewer but larger projects (rather than multiple smaller projects) may result in outcomes with more impact.

The panel noted that prevention is difficult to investigate (in aim 3), unless you are studying short-term tangible outcomes, such as preventing hospital admissions or loss of education. Overall wellbeing is related to prevention, and it may be hard to identify outcomes for this in the long term. A similar program grant in the UK would be the NIHR Programme Grants for Applied Research.



Recommendations

- Ensure that research outcomes help create real impact via new treatment opportunities and/or improve people's access to treatments and preventions
- If small correlation studies to improve knowledge are necessary, focus on the Australian context and how this knowledge could advance global mental health research and lead to implementation and impact
- Although large multisite programs are informative, ensure that all research program hypotheses remain focused
- · Evaluating research success can be challenging for all types of research, so ensure that the proposed goals can be achieved within the context of the Million Minds Mental Health Research Mission program
- Ensure that the focus on EMCRs remains, as this was highly supported by the panel