

## Addressing mental health in Aboriginal young people in Australia



In January, 2019, seven Aboriginal children died by suicide in Australia. By March, at least 24 young Aboriginal people were reported to have taken their lives, including three children younger than 12 years.<sup>1</sup> Despite Australia's wealth, the health statistics for Aboriginal peoples are dire and alarming. High rates of suicide and a disproportionate burden of disease and injury for Aboriginal peoples is an ongoing and disturbing trend.<sup>2</sup> Mental health inequities in Australia are similar to those faced by Indigenous populations in other countries.<sup>3</sup> Globally, racism, poverty, unemployment, and disenfranchisement substantially affect the mental health and wellbeing of Indigenous young people.<sup>4</sup>

In 2008, the Australian Government introduced the Closing the Gap campaign, which aims to achieve equality between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians. A key target of the campaign is to close the gap in life expectancy within a generation. Since 2008, successive Australian governments have failed to make progress, particularly for Aboriginal young people whose high levels of psychological distress are reflected in high rates of suicide. Although Australia's non-Indigenous adolescents have some of the best health outcomes globally, Aboriginal young people have been left behind.<sup>4</sup> Despite greater recognition of the need for codesigned solutions, politicians offer no clear and definite path forward.

As mental health researchers, we remain committed to changing the situation confronting Aboriginal young people. Our research has shown that the solution lies within the community, and that a new paradigm is required if we are to change the current state of affairs. Innovative, inclusive, and sustainable approaches are required that have community members at their centre and build on the commitment of key stakeholders. Dedication, courage, perseverance, and leadership are crucial.

Studies done in Australia and Canada have shown that mainstream services can be adapted to better engage and support Aboriginal patients.<sup>5,6</sup> The Looking Forward Aboriginal Mental Health Project<sup>6</sup> and Building Bridges: Co-designing Engagement with Aboriginal Youth Project<sup>7</sup> showed that bringing together the Aboriginal

community and mental health service staff to build and sustain relationships can improve the accessibility and responsiveness of services, and mental health outcomes. As custodians of culture and leaders of their communities, Aboriginal Elders are key to culturally secure systems and must be engaged. Crucially, Aboriginal young people must also be meaningfully engaged if mental health care is to be secure, relevant, and effective.<sup>6,7</sup>

Research suggests that Aboriginal access and engagement with the mental health service considerably improved if the service was considered culturally secure by the Aboriginal community.<sup>6,7</sup> Building better relationships underpinned by trust and collaboration between the Aboriginal community and mainstream mental health services has the potential to greatly shift the narrative surrounding mental health in Aboriginal adolescents. Research has shown that timely and appropriate intervention will positively influence mental health outcomes for young people.<sup>8</sup>

The Our Journey, Our Story: Building Bridges to Improve Aboriginal Youth Mental Health and Wellbeing project was launched in 2019 to implement and measure the effect of Aboriginal Elders and young people working directly with mental health services across the state of Western Australia. Across Australian states and territories, the proportion of Aboriginal young people who reported high-to-very-high psychological distress was greatest in Western Australia (44%, or 7400 people).<sup>9</sup> Western Australia is the largest state in Australia and has a land mass of 2.5 million km<sup>2</sup>. Given the diversity of Aboriginal peoples in Western Australia, implementing the 5-year project will be a considerable challenge.

Unique to Our Journey, Our Story is the use of cultural protocols and an Aboriginal worldview to codesign and implement and measure the effect of a culturally secure intervention for youth mental health services to reduce self-injury and suicide in Aboriginal youth. Culturally secure practice is more than just being culturally aware. Service staff must have the skill sets needed to work clinically and culturally with these individuals, and must ensure culturally secure work practices and policies are used across the service.<sup>10</sup>



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This research will address the scarcity of evidence on the factors influencing the design, development, and delivery of mainstream services that most effectively improve mental health outcomes for Aboriginal young people. The research will also tackle the shortage of validated, culturally relevant evaluation tools that can be used to measure the effectiveness of mainstream services in improving the mental health and wellbeing of this population. The codesign process will be essential and strengthened by the diversity, extensive range of skills and experience, and sector-wide influence of the Elders, youth, partner organisations, and research team.

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- 1 Dias A. 24 young Indigenous people have died by suicide this year prompting a national campaign. March 26, 2019. <https://www.abc.net.au/triplej/programs/hack/indigenous-mental-health-campaign-launched/10937714> (accessed Nov 15, 2018).
- 2 Al-Yaman F. The Australian burden of disease study: impact and causes of illness and death in Aboriginal and Torres Strait Islander people, 2011. *Public Health Res Pract* 2017; **27**: e2741732.
- 3 Cunningham C. Health and wellbeing of Indigenous adolescents in Australia. *Lancet* 2018; **391**: 720–01.
- 4 Azzopardi PS, Sawyer SM, BCarline JB, et al. Health and wellbeing of Indigenous adolescents in Australia: a systematic synthesis of population data. *Lancet* 2017; **391**: 766–82.
- 5 Johnson H, Ulrich C, Cross N, Greenwood M. A journey of partnership: transforming health care service delivery with First Nations in Northern BC. *Int J Health Gov* 2016; **21**: 76–88.
- 6 Wright M, O'Connell M, Jones T, Walley R, Roarty L. Looking forward project: final report. Subiaco, WA, Australia: Telethon Kids Institute, 2015.
- 7 Wright M, Culbong T, Crisp N, Biedermann B, Lin A. "If you don't speak from the heart, the young mob aren't going to listen at all": an invitation for youth mental health services to engage in new ways of working. *Early Interv Psychiatry* 2019; **13**: 1506–12.
- 8 McGorry P, Purcell R. Youth mental health reform reform and early intervention: encouraging early signs. *Early Interv Psychiatry* 2009; **3**: 161–62.
- 9 Australian Institute for Health and Welfare. Aboriginal and Torres Strait Islander adolescent and youth health and wellbeing 2018: in brief. Canberra, ACT: Australian Institute of Health and Welfare, 2018.
- 10 Coffin J. Rising to the challenge in Aboriginal health by creating cultural security. *Aborig Isl Health Work J* 2007; **31**: 22–4.