

The logo consists of the letters 'MQ' in a bold, black, sans-serif font. The letters are set against a yellow background that has a horizontal brushstroke texture.

Transforming
mental health
through research

2016

The MQ manifesto for young people's mental health

Executive summary

It's time to tackle mental illness where it begins.

At MQ, we want to create a world where mental illnesses are understood, treated effectively and one day made preventable. As we strive to achieve this vision, we are launching *Brighter Futures*, a research programme, and *We Swear*, our awareness-raising initiative.

We want to tackle mental illness where it begins – and 75% of mental illnesses start before the age of 18, with consequences that are often lifelong.¹ So we are investing in a world-leading programme of research: bringing together scientists, clinicians, people with experience of mental health conditions and partner organisations. To address three of the most pressing challenges in young people's mental health:

Understanding how mental illness develops

Learning how to identify which young people are most at risk

Developing effective interventions for young people and ensuring they are delivered in practice.

75%

of mental illness starts before the age of 18¹

Research of this scale and ambition requires a truly multidisciplinary approach, with combined expertise from across the biological, psychological and social sciences, alongside the wider fields of education and social care. Together, we will make sure that research into young people's mental health is prioritised, funded and implemented – so treatment and prevention can rapidly move forward.

Our research approach is threefold:

- **We'll bring together innovative scientists and researchers in a major research consortium focused on the early signs of mental illness**
- **We'll invest in a wide range of projects to build the evidence base for improving support for young people**
- **We'll create a UK-led global network for young people's mental health research**

As well as collaborating with the wide range of individuals, organisations and agencies involved in funding, designing and delivering health research and health services, we also want to engage the general public in this critical issue. So we will launch a major awareness-raising and fundraising campaign to support our research programme.

On health issues from haemophilia to HIV, science has already shown that – with long-term commitment, sustained funding and coordinated action – we can achieve breakthroughs in healthcare that were once unimaginable.

Now is the time to focus on mental health, and on transforming the future of mental illness through research. Together with individuals and organisations who share our vision, we can deliver insights and understanding that enable future generations to always expect and experience better mental health.

1. Kim-Cohen, J., Caspi, A., Moffitt, T.T., Harrington, H.L., Milne, B.J., Poulton, R. (2003). Prior Juvenile Diagnoses in Adults With Mental Disorder Developmental Follow-Back of a Prospective-Longitudinal Cohort. *Arch Gen Psychiatry*. 60(7):709-717. doi:10.1001/archpsyc.60.7.709.

2. McManus, S., Meltzer, H., Brugha, T., Bebbington, P., & Jenkins, R. (2009). Adult psychiatric morbidity in England, 2007 Results of a household survey. London, UK.

3. Centre for Mental Health. (2009). The economic and social costs of mental health problems in 2009/10, 1-4. London, UK.

4. Green, H., McGinnity, A., Meltzer, H., et al. (2005). Mental health of children and young people in Great Britain 2004. London: Palgrave.

5. Children's Commissioner. (2016). Lightning Review: Access to Child and Adolescent Mental Health Services, May 2016. London, UK

6. Colton CW, Manderscheid RW. *Prev Chronic Dis* [serial online] 2006 Apr [date cited]. Available from: URL:http://www.cdc.gov/pccd/issues/2006/apr/05_0180.htm

The case for action

The impacts of mental illness



1 in 4 people will experience a **mental illness** each year



Overall, mental illness costs the economy between **£70 and £100 billion** each year, and is responsible for the **loss of 70 million working days**



Those with a severe mental illness **die between** 16 and 25 years earlier than the general population

One in four people will experience a mental illness at some point each year in the UK², and mental illness costs the UK economy between £70 billion and £100 billion annually.³ But treatments and interventions are currently nowhere near adequate:

- **Our methods of diagnosis are imprecise, so getting an accurate diagnosis can take many years**
- **Treatments and interventions aren't accessible enough, equivalent waiting lists for mental health care would be inexcusable for other health conditions**
- **Treatments and interventions aren't effective enough. When they are**

delivered, they don't work on everyone, and a trial and error approach is often needed to find the right course

For young people the situation is stark:

In an average school class of 30 young people, typically three will have a diagnosable mental illness – and the true prevalence of mental illness is estimated to be significantly higher.⁴

Yet three in four children and young people with clinically significant symptoms of mental illness are not in touch with mental health services.⁵ In fact, it can take a decade for many young people to receive help after first showing

symptoms. With greater investment in research, we can develop new ways to respond to their specific needs and enable health professionals to recognise and respond to young people's specific needs more effectively.

The impact of developing a mental health condition when young can be devastating and last a lifetime, with a huge impact on educational attainment, employment and social development. Potential long-term consequences include: poverty, debt, homelessness, unemployment, discrimination and social isolation. And, on average, people who live with severe mental illness die between 16 and 25 years earlier than the general population.⁶

How research can *transform* young people's mental health

Although promising areas of discovery and practice are emerging, there remain major gaps in our basic understanding of mental health. There is so much more that research needs to do if we are to improve support for young people and create a world where mental illness becomes preventable.

For example:

- We need to learn more about how **environmental factors** – such as family relationships, poverty and childhood trauma – influence young people's psychological development and mental health
- We need greater knowledge of how the brain and emotional wellbeing are affected by the huge **hormonal changes** that take place during adolescence
- We need to support urgent research into mental health treatments designed and **developed specifically for young people**
- We need to understand how **genetic factors** can result in mental health conditions
- We need to develop greater knowledge of how the **brain functions** and how the cells and systems of the brain are altered by mental illness
- We need to develop a robust evidence base to ensure that **public health interventions** to support mental health, such as health support in schools, are effective
- We need to collect, share and understand **comprehensive data** on young people's use of mental health services

The facts on *young* people's mental health

Mental illness can start early:

75% of mental illness starts by the age of 18.
50% before the age of 14.

In an average class of 30 schoolchildren,
three will have a diagnosable mental illness.

A third of 16-24 years olds experience a mental health condition.⁷

Three quarters of children and young people with a clinically significant mental illness are not in touch with appropriate mental health services.

Suicide is the leading cause of death in young men and women.⁸

It can take **ten years** on average to get help after the **first symptoms develop.**

7. McManus, S., Meltzer, H., Brugha, T., Bebbington, P., & Jenkins, R. (2009). Adult psychiatric morbidity in England, 2007 Results of a household survey. London, UK.

8. Office for National Statistics. (2013). Leading Causes of Death in England and Wales 2012. Retrieved from <http://www.ons.gov.uk/ons/rel/vsob1/mortality-statistics--deaths-registered-in-england-and-wales--series-dr/2012/info-causes-of-death.html>. Date accessed 27.03.2015

How the UK can lead the way for mental health research

The UK has a proud history of pioneering research that has transformed our approach to tackling illness, and it remains a global leader – particularly in the field of mental health.

We have world-class research support and infrastructure in our universities and research institutes, and the NHS brings together millions of patients in a unified healthcare system that incorporates medical, psychological and social care.

With long-term funding, commitment and coordinated action, we know that research can transform healthcare:

- **Diseases like haemophilia and diabetes – once catastrophic, especially to young people – are now manageable long-term conditions**

- **HIV is no longer a death sentence**

- **Cancer survival rates have been transformed**

But public donations and government funding for mental health research lag far behind support for many physical conditions, and fail to reflect the urgent need for progress in mental health:

- **Mental illnesses affect 23% of the population in the UK, but mental health research receives less than 6% of UK health research spend⁹**

- **Less than 30% of mental health research is focused on young people - despite the consequences of mental illness potentially lasting a lifetime¹⁰**

As a result, research leadership, research capacity and research priorities are simply not focused on changing the trajectory of mental illness in young people. This has to change.

9. UK Clinical Research Collaboration. (2014). UK Health Research Analysis 2014. London, UK

10. MQ data on file

11. England-specific prevalence rates are applied to UK population statistics to derive the number of persons affected – data on file at MQ

12. Including the HRCS categories 'blood' and 'stroke'

13. Cost of mental illness to the economy refers to England

Research spend per persons affected and cost to the economy

| | Research Spend amount awarded (millions) ⁹ | Number of persons affected (all ages) ¹¹ | Cost to the economy (millions) |
|--------------------------------------|---|---|--------------------------------|
| Dementia | £90 | 815,827 | £26,300 |
| Cancer | £402 | 2,254,000 | £12,853 |
| Cardiovascular Disease ¹² | £180 | 7,000,000 | £15,200 |
| Mental Health | £112 | 14,555,573 | £51,600 ¹³ |

Research spend across different conditions in context

| | Research spend per person affected | Research spend per £1M cost to the economy |
|------------------------|------------------------------------|--|
| Dementia | £110 | £3,427 |
| Cancer | £178 | £31,291 |
| Cardiovascular Disease | £26 | £11,901 |
| Mental Health | £8 | £2,176 |

Momentum is *growing* for better mental health

While research investment is yet to reflect this, support for a transformation in mental health care is increasing.

Successive UK governments have made welcome commitments to supporting and investing in mental health. And over the last decade there has been a significant step-change in the way we talk about and respond to mental illness.

As a result of campaigning and targeted government action, the stigma associated with mental health is being challenged and access to some services – particularly psychological therapies – has improved.

But while action at the level of service provision will help thousands of people in the coming years, to truly **transform mental healthcare we must fund researchers** to find enduring, scalable solutions to mental healthcare needs.



The time is *now*

There has already been significant recent progress in mental health science:

1

- Advances in psychological treatments have improved support for hundreds of thousands of people with conditions including PTSD, anxiety and eating disorders.

2

- Recent developments in genomics, stem cell biology and neuroscience have identified a number of risk genes and cellular and circuit targets for psychiatric disorders. Further work in this area could enable scientists to develop more effective and more targeted treatments.

3

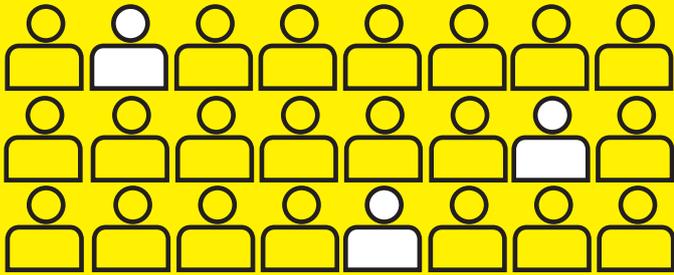
- Advances in online mental health interventions have shown that these are a realistic and effective treatment option for many people with depression and anxiety disorders.

Key opportunities exist

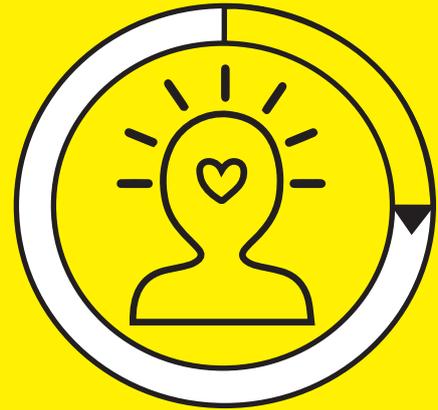
- The UK has some of the world's richest health data sets – including world-leading adolescent cohort studies. These give researchers the opportunity to explore the experience of mental illness and

identify factors that could put young people at risk.

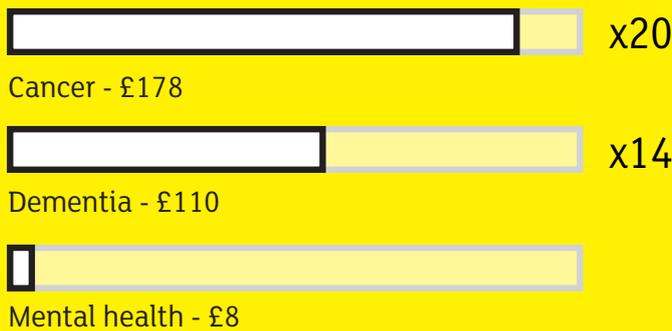
- Digital technology continues to provide unprecedented opportunities to **transform mental health diagnosis, self-management and treatment.**



3 children in **every classroom** have a diagnosable mental health condition



75% of those with a mental illness developed it **before the age of 18**



There is a significant **funding gap** in mental health research when considering investment for each person affected

Spend on research per person affected

Almost **half of young people** believe someone their age would worry that a mental illness diagnosis means **never getting better**¹⁴

More than half believe someone their age would worry that a mental illness diagnosis means getting **treated differently**¹⁴

More than half believe someone their age would worry that a mental illness diagnosis would leave them **feeling embarrassed**¹⁴



Brighter Futures

Brighter Futures will build on the progress that has already been made in mental health science. Our goal is to improve our understanding of how mental illness begins, and how interventions can be delivered earlier and more effectively to limit the life-long negative impacts of mental illness.

To achieve the programme goals, we're taking forward three interlinking strands of activity:

- **We will bring together innovative scientists and researchers as part of a major new young people's mental health research consortium. Drawing on expertise in areas including basic science, psychology, social sciences and education, the group will drive research to identify the early risk factors associated with mental illness.**
- **We will build a range of partnership projects with researchers, funders and charities to instigate research and build the data and evidence-base necessary to tackle young people's mental health.**

- **We will create a UK-led global network for young people's mental health research, facilitating international collaboration and knowledge-sharing to help develop a robust infrastructure for supporting young people's mental health research.**

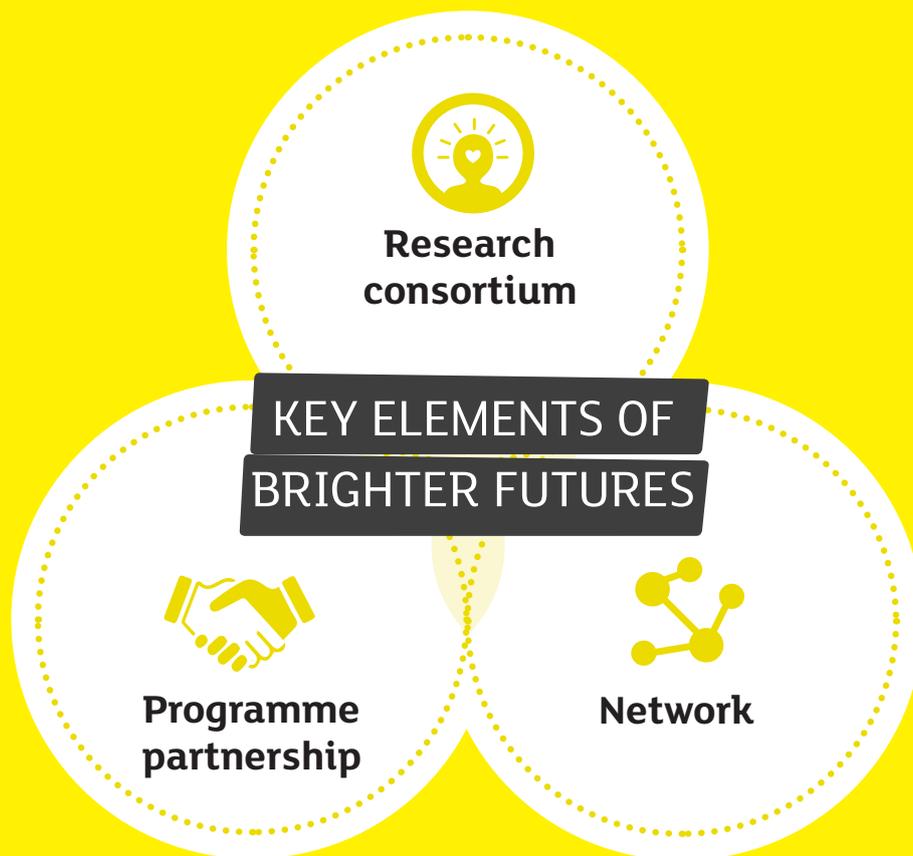
This work builds on and helps to answer the recommendations set out by a range of priority-setting projects carried out in recent years. The EU-wide ROAMER (Roadmap for Mental Health Research in Europe) project identified young people's mental health as an area that warranted greater investment.¹⁵ It was also determined as a priority by more than 3,000 people living with or affected by depression, as part of

the "Depression: Asking the Right Questions" project.¹⁶ This theme is also to be a significant component of the Department of Health ten year strategy on mental health research.

Our programme will be developed with advice and leadership from across the mental health research and advocacy communities, as well as being guided by the insights of those with experience of mental illness. The structure includes a Young People's Advisory Group, Scientific Advisory Board and Programme Advisory Committee.

15. See <http://www.roamer-mh.org>

16. See <https://www.mqmentalhealth.org/articles/depression-priority-setting-partnership>



Working *together* we can transform mental health

The great shifts in healthcare in recent generations have only happened as a result of coordinated research agendas and leadership.

Through our Brighter Futures research programme and through the concurrent awareness-raising campaign, We Swear, we want to collaborate with and mobilise everyone, from Government to the general public, to bring about the next great shift – in mental health.

The recent Government announcement of increased mental

health funding at UK biomedical research centres represents a welcome step forward in championing UK mental health research. However, to truly tackle the gap in research funding and deliver much-needed advances in young people's mental health, it will take sustained, strong political leadership, long-term commitment, and investment in mental health research.

The UK now has the opportunity to be a leader in mental health research – an opportunity we cannot afford to miss.

We know that research can transform the mental health of millions of people and move us closer to a world where mental illness is preventable. And we hope you'll be with us as this transformation becomes a reality.

Get involved at www.mqmentalhealth.org

The MQ manifesto for young people's mental health



**Transforming
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through research**

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