

2 September 2024

The Secretary
Government Administration Committee B
House of Assembly
Parliament House
Hobart TAS 7000

Lodged via email: assemblygab@parliament.tas.gov.au

Dear Secretary

Re: Inquiry into the assessment and treatment of ADHD and support services

Thank you for the opportunity to provide input into your inquiry into the assessment and treatment of ADHD and support services. headspace welcomes this inquiry and considers that it will be helpful to better meet the needs of young people with ADHD across Tasmania.

In our submission, we have included views of members of the headspace Youth National Reference Group, and the headspace National Family Reference Group, as well as GPs and clinicians from across the headspace network.

About headspace

headspace is the National Youth Mental Health Foundation, providing early intervention mental health services to 12 to 25 year olds. headspace has 162 services across Australia in metropolitan, regional and remote areas (including four in Tasmania), and offers online and phone support services and digital resources through eheadspace. headspace provides multidisciplinary care for mental health, physical health, alcohol and other drug use, and work and study needs. More information about headspace programs is provided in Attachment 1.

About ADHD and young people

As a neurodevelopmental condition characterised by differences in brain and cognitive development, ADHD symptoms are often lifelong and have a lasting impact on the people who are diagnosed, as well as their families. A 2021 study found “people with ADHD are at increased risk of low-quality life, substance use disorders, accidental injuries, educational underachievement, unemployment, gambling, teenage pregnancy, difficulties socialising, delinquency, suicide and premature death”.¹

Studies have also found that treatment and support can reduce these risks.² Given the impact of having ADHD, this makes early diagnosis and ongoing support essential for children and young people.

Despite this evidence, the diagnosis and treatment of ADHD is one area where stigma and debate about over-diagnosis persists.³ These debates do not recognise the importance of an individual’s

¹ Faraone, S. V. et al (2021). “The World Federation of ADHD International Consensus Statement: 208 evidence-based conclusions about the disorder”. *Neuroscience & Biobehavioral Reviews*. 128, 789–818.
<https://doi.org/10.1016/j.neubiorev..01.022>

² Ibid.

³ Commonwealth of Australia, 2023, Assessment and support services for people with ADHD, Community Affairs Reference Committee, November.

environmental context, the need to hear young people and their experiences, and the benefits of earlier intervention.⁴

The number of young people accessing headspace services who have been diagnosed with ADHD has increased by 56 per cent between 2021-22 and 2023-24.

In 2023-24, 2,586 young people accessing headspace services had a diagnosis of ADHD, recorded as either a primary or secondary diagnosis – constituting 14% of all young people who had a diagnosis recorded.⁵

Adequate and appropriate supports for these increasing numbers of young people are critical, given the risks to their life outcomes identified above.

At headspace, our goal is to ensure young people can access the right supports, when they need them and how they want them. Feedback indicates that headspace services can find it challenging to support young people presenting with ADHD symptoms or have a confirmed diagnosis of ADHD. Our responses below provide insight into these challenges and offer potential solutions, structured around a selection of the Terms of Reference for which we can offer our expertise and experience.

Adequacy of access to ADHD diagnosis

The headspace network and service users regularly report challenges in accessing ADHD assessment due to: limited specialists to conduct assessments, and high out-of-pocket fees where available.

Young people experience prolonged wait times to access the limited number of specialists who can provide ADHD assessments. GPs across the headspace network have highlighted the limited services in public settings. In some cases, there is no guarantee a young person will be seen for an assessment, even with a referral. headspace clinicians report that government funded mental health services are reluctant to assess ADHD. The severe shortage of psychiatrists (particularly child and adolescent psychiatrists) and other mental health clinicians across Tasmania adds to this pressure.

High out-of-pocket fees for assessments are also prohibitive to young people accessing an initial appointment with a clinician.

“I was very surprised that neither Medicare nor our Private Health insurance covered any part of the assessment costs. I think the costs necessarily limits access for individuals and families. I was informed that my son could go on a waitlist at one of the universities to get the assessment done cheaper, but there would be a considerable time delay. We chose the private option.”

headspace National Family Reference Group member

There is potential for headspace centres to help with this challenge. **headspace Telepsychiatry** provides bulk-billed consultations to young people accessing headspace centres in regional, rural and remote Australia, where centres do not have access to onsite or local psychiatrists.

Centres in regional and rural areas of Tasmania can access headspace Telepsychiatry, providing young people with a psychiatrist who can conduct ADHD assessment and prepare management plans, before transitioning ongoing support to a local GP, who can only provide prescriptions for medication after assessment and recommendations from a psychiatrist. headspace Telepsychiatry can also provide secondary consultations to GPs in headspace centres on ADHD treatment options.

Under existing funding arrangements, headspace Telepsychiatry has a small, ongoing capacity to provide ADHD assessment and treatment services. While this is resource intensive for centre clinicians (who support the young person by gathering and preparing information pre-assessment), this model is an effective and efficient way to access a diagnosis. With additional funding, and subject

⁴ McGorry, P.D, Mei, C., Dala, N., et al, 2024, The Lancet Psychiatry Commission on youth mental health, The Lancet Psychiatry Commissions, vol 11, September.

⁵ 25% of all young people had a diagnosis recorded.

to ability to recruit the requisite staff amidst shortages, there would be potential to increase capacity and for headspace services across Tasmania to provide this as a regular service for young people.

There is also an opportunity to expand the headspace centre workforce to better support young people with ADHD, with additional, dedicated funding from government. Investing in extra training positions for the clinical workforce, in particular for GP or psychiatry registrars, would allow headspace centres to provide a stronger focus on ADHD and other developmental disorders. Access to psychiatrists (potentially via headspace Telepsychiatry) would give more young people greater access to a holistic model of care that incorporates both medication and non-pharmacological interventions, with the support of the GP and headspace team.

headspace National is currently funded by the Commonwealth Government to deliver the GP Registrar Pilot Program in headspace centres. Under this program, headspace National places GP registrars in headspace centres to undertake a 6 or 12 month supervised placement and provide services to young people as part of a multidisciplinary team. The GP registrar receives supervision and support from trained GPs, and advanced skills training in specialist youth mental health service delivery. This does depend on access to both registrars and GP supervisors, but provides a model for funding additional GP Registrar positions in centres, which could focus on the delivery of support for young people with ADHD.

Accessing support once diagnosed

Access to adequate and ongoing supports – including mental health care – is essential for young people diagnosed with ADHD. However, as with accessing assessment, appropriate and adequate support can be both hard to find and costly to access.

With low availability of GPs who will bulk bill and who will prescribe ADHD medications, young people across Tasmania can find it very time and resource intensive to access treatment. The high cost of medication can also be prohibitive for young people. Without measures in place to reduce and limit out-of-pocket costs, particularly once a young person turns 18, access to support can become unattainable for young people and impact significantly on their executive functioning and wellbeing.

“Access to medication was stressful, as I had to access my GP every time I needed a new script and he was frequently booked out. At these times I had to ration out my medication, only taking it at times I felt like I really needed it.”

headspace Youth National Reference Group member

As noted above, there are opportunities for government to invest in additional supports within headspace centres, particularly through additional training positions. This would enable centres to provide holistic, multidisciplinary care for young people with ADHD with low or no out of pocket expenses, and create capacity across the system.

Availability, training and attitudes of treating practitioners

Suitably qualified professionals can improve awareness and understanding of the practical strategies that can help support young people with ADHD. But given acute workforce shortages nationally, young people in Tasmania can find it difficult to find allied health professionals with the specific skills in coaching and supporting young people with ADHD.

“After diagnosis, I mostly relied on internet resources to understand and work through the supports required.”

headspace Youth National Reference Group member

Clinical leads across the headspace network report contrasting views and practices among specialists, with some focussing on medication, and others on non-pharmacological supports. Being aware of, trained in and then adhering to evidence-based practice guidelines is essential for clinicians working with young people.

"I've considered occupational therapy to improve in time management/ social skills but haven't been able to access it yet. I have tried to seek career counselling to improve on my job interview skills (and related skills) but the advice given is unspecific to ADHD and not helpful. The majority of the information/skills I've learned since diagnosis has been through my own research."

headspace Youth National Reference Group member

"I think the process of finding the right services is difficult for a young adult, because they are expected to follow this process on their own. When some of the worst parts of ADHD include lack of organisation and faulty executive function, most ADHD young people will feel this is rubbing salt into the wounds."

headspace Family Reference Group member

"Trauma-informed training [is needed] so professionals can understand the inherent trauma of growing up in a society that prioritises those [who are] neurotypical".

headspace Youth National Reference Group member

Workforce development solutions

Members of the headspace Youth National Reference Group and headspace National Family Reference Group, along with headspace clinicians, proposed the following activities could help better support young people with ADHD:

- resources and workshops for teachers and wellbeing teams in schools, with a focus on practical strategies to support young people and scaffold their learning to ensure they are encouraged to achieve to their full potential
- capacity building for GP specialist services and clinicians that goes beyond seminars and workshops to more robust training and development programs.

headspace would welcome the opportunity to discuss ways to improve the ADHD diagnosis and supports for young people in Tasmania in more detail with Government Administration Committee B.

Attachment 1: headspace programs and services

headspace provides early intervention mental health services to 12 to 25 year olds. headspace offers young people support across mental health, physical and sexual health, alcohol and other drugs, and work and study – providing an integrated service horizontally across these domains of care.

Our integrated services provide the holistic, multi-faceted support that is a necessary component of a responsive service system model. This includes:

- **headspace centres:** the headspace network of services are youth-friendly, integrated service hubs, where multidisciplinary teams provide holistic support across the four core streams.
- **community awareness:** guided by local youth reference groups and centre staff, Community Awareness Officers at each headspace centre work locally to build mental health literacy, reduce stigma, encourage help-seeking, identify local needs and ensure young people know they can access help at headspace.
- **digital mental health programs and resources:** headspace uses its digital platform to make a range of information and supports accessible to young people, parents and carers, professionals and educators.
- **ehespace:** our virtual service provides safe, secure support to young people and their family and friends from experienced youth mental health professionals via email, webchat or phone. There are also online group sessions led by clinicians or peers, focused on the big issues facing young people and their family and friends.
- **headspace regional telephone counselling service:** headspace offers integrated holistic teleweb support for students in eligible schools in regional Victoria (locations more than 50km from a headspace centre).
- **headspace campaigns:** campaigns focus on stigma reduction, building mental health literacy and encouraging help seeking, while ensuring young people know headspace is a safe and trusted place they can turn to in order to support their mental health.
- **headspace in schools and universities:** Through evidence-based mental health promotion, prevention, early intervention and postvention services, headspace delivers key initiatives designed to support the mental health and wellbeing of school communities. This includes:
 - **Be You** – a mental health and wellbeing initiative for learning communities. In particular, headspace can support secondary schools to prepare for, respond to and recover together where there has been a death by suicide.
 - **Mental Health Education Program** – this program provides free mental health education workshops for schools
 - **University support program** – this provides training and education opportunities to Australian universities to build their capacity and confidence to engage in conversations about mental health and wellbeing
- **programs and resources to support hard-to-reach cohorts of young people:** these include
 - **Visible project** – a community based initiative using artwork as a form of community engagement and awareness.
 - **Yarn Safe** – mental health and wellbeing resources and support for First Nations young people.
- **vocational supports:** headspace centres provide integrated mental health and vocational support to young people to help them remain engaged in work and study, including implementing Individual Placement and Support (IPS) in headspace centres. In addition, headspace provides vocational support via:
 - **headspace Work and Study Online (hWS)** is a national digital program that provides integrated mental health and vocational support via the phone, video conferencing, online

messaging and email. hWS works closely with young people across their work/study journey from identifying work/study goals to maintaining a work/study placement, typically for a period of around three months.

- **headspace Career Mentoring** connects young people aged 18 to 25 years living with mental health challenges with industry professionals to meet fortnightly over a period of six months via video conferencing and/or the phone to enhance a young person's employment and career opportunities.