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Title: Towards Early Intervention for Youth Mental Health in Primary Care: A Qualitative Study in Two Deprived Urban Areas

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Introduction: Early intervention in youth mental health is increasingly viewed as easier, cheaper and more effective than traditional approaches to care [1]. With psychological morbidity reported in 21-27% of young adults in Ireland [2], and recent data indicating Ireland has the fourth highest rate of youth suicide in the EU[3], the need for early intervention is pressing. GPs, as the healthcare professional most often consulted by young people, have a central role in early detection of youth mental health and addiction disorders [4]. However, international data suggests many young people have concerns bringing these issues to their GP [5-7], and GPs themselves experience difficulty identifying and treating mental health issues [8, 9]. Thus, while primary care is an ideal environment in which to address youth mental health, little information exists on the role of primary care in Ireland in addressing youth mental health. The aim of this study is to gain an understanding of the experience of youth mental health and addiction treatment in two deprived urban areas (Limerick, Dublin South Inner City) to inform future early intervention practice development.

Methods: Semi-structured interviews were conducted with 37 healthcare professionals, usually in a quiet room at their place of work. Interviews were recorded and transcribed for analysis. Inductive thematic analysis was carried out using QSR NVivo 9. A number of codes were generated from the data, collaborated on by the research team, and arranged into themes relating to the research question.

Results: Two major themes, 'Context' and 'Intervention' were created from the data. 'Context' suggests youth mental health issues (especially service development and treatment) are considerably influenced by wider societal context and local factors (e.g. family). 'Intervention' suggests many barriers and enablers to helping to young people, be that at the identification, treatment or engagement stages of intervention.

Conclusions: Many factors influence how a young person develops, seeks help for, and

engages with treatment for mental and substance use disorders. This knowledge will be useful in developing interventions in primary care that are context specific for Dublin South Inner City and Limerick City and perhaps other deprived urban areas. Further data from service users will complement these findings and ensure interventions developed are appropriate and acceptable to service users and providers alike.