Early intervention in youth mental health: Development of guidelines for general practice

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INTRODUCTION
In Ireland, the incidence of psychological morbidity has been reported in 27-36% of young adults1. In particular, youth mental health and addiction issues are a core component of the problems facing those living in urban areas of social deprivation in Ireland, in particular South Inner City Dublin and Limerick City.

Early intervention in youth mental health and addiction issues is increasingly viewed as easier, cheaper and importantly more effective than traditional psychiatric treatment2.

Primary care is ideally placed - as a gatekeeper to care, and an ongoing support for those in the mental health system - for administering early intervention. However, young people attending primary care are more likely to present with physical symptoms despite having mental health problems, resulting in barriers to their recognition and referral3.

This project, based in urban deprived areas in Limerick and Dublin, aims to develop an intervention which addresses barriers to ‘early intervention’ for mental and substance use disorders that is evidence based, feasible and acceptable to young people and health professionals and takes into account the context in which these young persons are living.

METHOD
This research used a modified Delphi study to initiate guideline development.

Expert Panel
The expert panel was created utilizing contacts in the project steering group to recruit persons considered to be experts in the treatment of youth mental health and addiction problems over a variety a different healthcare settings in Limerick City and Dublin South Inner City. All 29 persons nominated were then chosen at random to comprise the final expert panel of 18 members.

RESULTS
In all, 22 items for inclusion in the guidelines were evaluated by the panel. There was however, very little differentiation in terms of ratings between the items, with most people agreeing or strongly agreeing to include items in the document. The panel members also evaluated 17 items recommended for implementation. Similarly there was little differentiation in terms of the ratings, with most people agreeing or strongly agreeing on each item to implement for the implementation of the guidelines.

After the second meeting it was concluded that all items should still be included in the guidelines but that they would be better suited grouped under useful headings.

Assessment and Identification
• How to best identify mental and substance use disorders in young people
• Mental health assessment and substance use explored as part of holistic assessment
• Which problems affect young people at different stages of development.
• Knowing what is an age appropriate social role, and positive mental health behaviour in young person
• How to best tackle consent issues
• Discussing bullying
• Discussing sexuality

Prevention / Health Promotion / Access
• Preventative health – promoting mental health with young person, prosocial activities
• Preventative health - information provision for parents and guardians, Youth friendly practices (confidentiality, interpersonal/communication skills, increasing contact, understanding context for substance use, parental consent obtained in advance)
• Non-medicalisation at the point of entry, getting a better understanding of the life of the young person

Treatment
• Treatment Strategies

CONCLUSIONS
There are a large number of items which are important to consider when attempting to identify and treat youth mental health and addiction issues. Because of this, all encompassing guidelines would be ineffective in practice. It may be of greater use to tailor interventions for the various headings identified here, which can be used as needed by GPs when improving primary care services, dealing with specific patients, or lobbying for funding to provide best practice.

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