

Gap creates risk for young people with mental health problems

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Many young people with mental health problems are at risk of falling through a huge gap in provision when they move from adolescent to adult care services, according to new research from the University of Warwick.

A team led by Professor Swaran Singh at Warwick Medical School looked at the transition from child [mental health](#) services to adult [mental health services](#) and found for the vast majority of users the move was “poorly planned, poorly executed and poorly experienced”.

In a study published in *The British Journal of Psychiatry*, the research team looked at 154 service users who were crossing the boundary from child to adult mental health services. They followed the sample group for one year to examine their experiences.

Of the cohort of 154, only 58% made the transition to adult mental health services. The researchers found that individuals with a history of severe mental illness, being on medication or having been admitted to hospital were more like to make a transition than those with neurodevelopmental disorders, emotional/neurotic disorders and emerging personality disorder. The research team also found that a fifth of all actual referrals that crossed the boundary to adult mental health services in this study were discharged without being seen.

Professor Singh said: “Despite adolescence being a risk period for the emergence of serious mental disorders, substance misuse, other risk-

taking behaviours and poor engagement with health services, mental health provision is often patchy during this period. By following a paediatric-adult split, mental health services introduce discontinuities in care provision where the system should be most robust. Often for the vast majority the transition from child to adult mental health services is poorly planned, poorly executed and poorly experienced.”

The team found that information transfer between child and adult mental health services was hampered by a lack of understanding of each other’s services, inconsistent documentation, different systems used for transfer of electronic information and transfer of referrals to lengthy waiting lists during which time dialogue between mental health professionals on each side was reduced.

Professor Singh added: “Where possible case notes should follow the young person and detailed referral letters, including risk assessments, should be sent to adult mental health services to facilitate planning. We need to ensure that the vital need for improving youth mental health is not ignored for fear of dismantling long-standing and yet unhelpful service barriers. “

More information: The paper, *‘Process, outcome and experience of transition from child to adult mental healthcare: multiperspective study’* is published in the *British Journal of Psychiatry* (2010) 197, 307-312.

Provided by University of Warwick

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