

Researchers examine what works best to engage families in mental health treatments for children

June 5 2014, by Robert Polner

Due in part to the common difficulty of engaging families in mental health treatment, many children with mental health disorders do not receive services. The impact can be lifelong, with half of all adult mental health disorders beginning during childhood.

A new article coauthored by Michael A. Lindsey, associate professor at the Silver School of Social Work, sifts the findings of nearly 350 randomized controlled trials and studies based on the experiments—identifying the most effective engagement and retention elements for practitioners to employ.

The article, "Identifying the Common Elements of Treatment Engagement Interventions in Children's Mental Health Services," recently appeared in the journal *Clinical Child and Family Psychology Review*.

Barriers to [mental health treatment](#) may be practical in nature, such as lack of transportation or child care assistance, or perceptual—rooted in misperceptions about the importance or relevance of such treatment, prior negative experiences with treatment, or the stigma that exists with regard to mental illness and [mental health services](#), according to the article.

But while issues of engagement and retention have been described by

federally commissioned reports as pivotal to addressing the divide between high [mental health](#) need and low service use, "treatment engagement remains a poorly understood component of successful service delivery," the authors write. "This could be, in part, related to the fact that despite rich theory, information from research on engagement strategies has not been aggregated in ways that are readily translatable into improved services."

Provided by New York University

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