

# **Comprehensive and Integrated Child & Adolescent Mental Health Services**

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Parliamentary Health Committee  
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# Epidemiology

- 70% of all mental disorders appear during adolescence
- 20% of children and adolescents experience mental disorders

Typical age ranges for presentation of selected disorders

Disorder	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Attachment	X	X	X															
Pervasive developmental disorders	X	X	X	X	X	X												
*Disruptive behaviour			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Mood/anxiety disorder						X	X	X	X	X	X	X	X	X	X	X	X	X
Substance abuse												X	X	X	X	X	X	X
Adult type psychosis															X	X	X	X

Including conduct disorder and oppositional defiant disorder: conduct disorder or sub-threshold conduct problems in childhood and adolescence which are not treated contribute disproportionately to all criminal activity

# Why develop effective interventions for children and adolescents?

- Specific mental disorders occur at certain stages of development
  - screening programmes and interventions for such disorders can be targeted to the stage at which they appear
- There is a high degree of continuity between child and adolescent disorders and those in adulthood
  - Early intervention could prevent or reduce the likelihood of long-term impairment
- Burden of mental health disorders on individual and family
  - Reduce the costs to health systems and communities contributing to sustainability

# Services offered by the CAMHS

- Highlight: 1300 children & adolescents currently registered with CGC: Age ranges between 1 year 10mths and 16 yrs.
- These children and adolescents are:
  - services users of CAMHS
  - pupils within the Education Division utilising psychosocial and school health services
  - may be users of Social Services (Appogg/Support etc)
  - may be users of the Justice Services
- Demands on services other than Health is extensive yet hidden



# Education Sector

- Need to recognise the role of education sector and its interface with children and adolescents.
- The place of schools within the service delivery framework must be specifically addressed.
- There is a need for a joined-up planning of services in mental health and education and to develop the necessary collaboration in this field



**Schools** provide the most natural setting for children and adolescents and are well placed to address Promotion, Prevention and Early Detection/ Intervention. They provide a non-stigmatising environment for the provision of treatment and care





# Schools



SCHOOL PROGRAMS

- Schools
  - make a significant contribution to the positive promotion of mental health through PSD, Anti-bullying programmes, Safe Schools, and Anti Substance Programmes as well as Healthy Relationship Programmes
  - Also provide:
    - » counselling services
    - » specialised teams addressing developmental issues such as autism, ADHD as well as Social, Emotional, Behavioural Problems
    - » Social Work interventions to address absenteeism which is seen as a pre cursor to other problems
    - » Home Tuition for students who are experiencing mental health issues such as school phobia.

# Current Scenario

- No Child and Adolescent Mental Health National Policy in place
- No formalised integrated Strategies in place addressing promotion, prevention, early intervention, secondary and tertiary interventions
- Health, Education, Social Services and Justice work in silos

**Danger:** system of care fragmented and expensive and not as effective and accessible



# Need for a Vision for CAMHS

## Assumptions:

- Adopt an integrated array of statutory, voluntary and community services - health, social services, education, youth justice and the voluntary sector
- Adopt a definition of Child Mental Health as both personal and social and providing the necessary foundation for both personal and social development.
- Recognition of social aspects of mental health delineates the need for a “public health” approach as well as individually-oriented therapeutic evidence based approaches to mental health provision

# Strategies

- Quality Principles
- Horizontally across all major Stakeholders
  - Health
  - Education
  - Social Services
  - Youth Justice
  - NGOs
- Redesigning of Services to meet needs according to the developmental process of children and adolescents and according to the complexity of needs

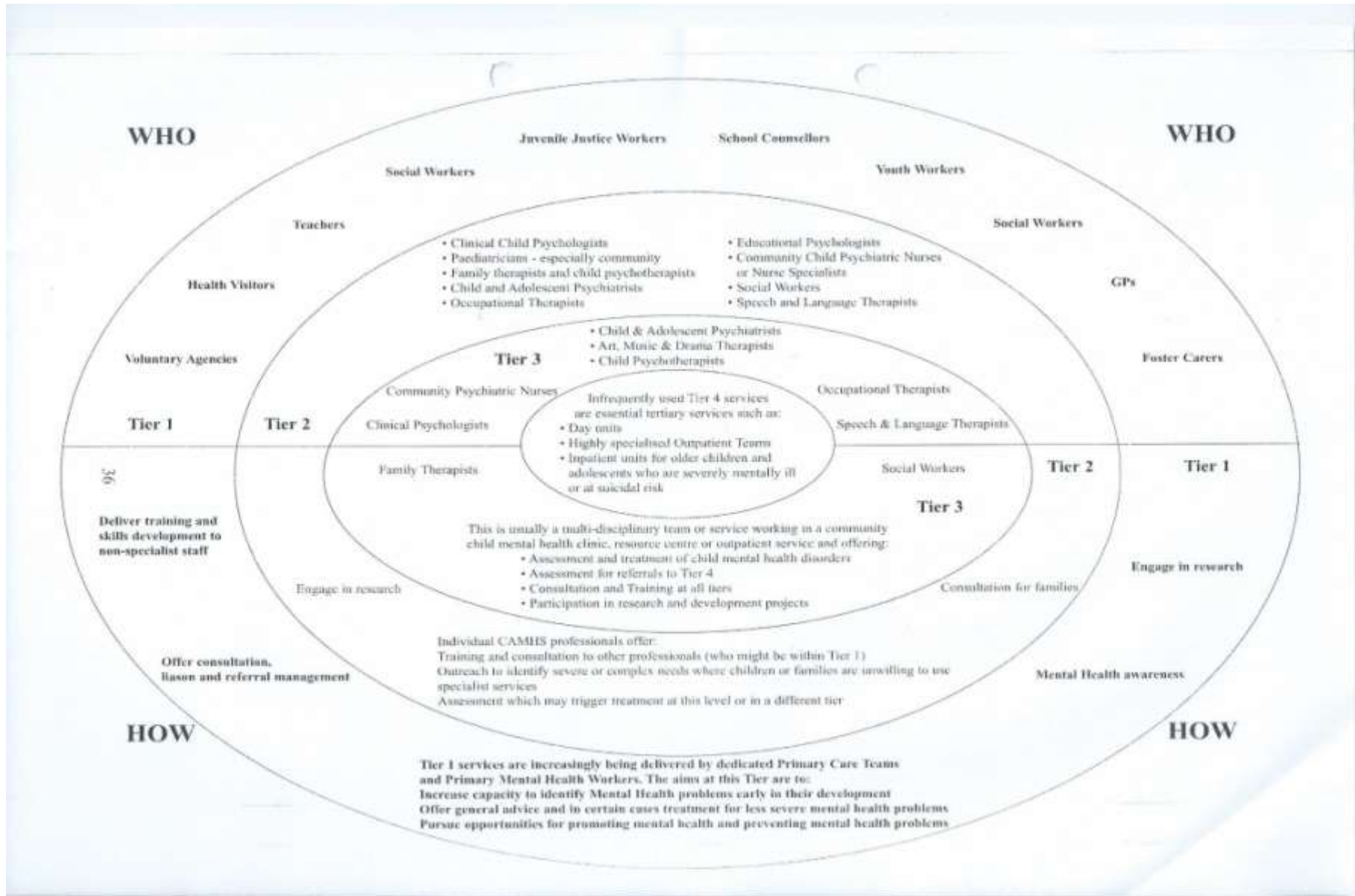
# Mapping

- A Mapping Exercise is required to identify all services/programmes being currently provided by the various service providers
- Such information would ensure that all services are known to all and also facilitate more effective collaboration and planning
- Such mapping needs to be repeated at regular intervals

# Redesigning Services -

- A co-ordinated, 4-tier approach to Services for Children and Adolescents is suggested
  - This model of service delivery is effective at bring together the diverse number of services from which children and young people might receive help – primary care, paediatrics, clinical psychology, Specialist Community Services (CGC) and specialist inpatient service (YPU). It also has the flexibility to encompass other services such as education, social services, youth justice and the voluntary sector

# 4 tier Model of Care



# Barriers to be addressed

- **Location of CAMH services:**
  - located in appropriately child friendly, non-stigmatising environments and on the same site as or as near as possible to other children's services in order to facilitate networking and joint working
- **Age range for Children and Adolescent services:**
  - Upper age limit for access to services across health, education and social services leads to difficulties accessing a comprehensive service across disciplines and can lead to inequality of services – 14 to 16 to 18 with those between 16-18 being the least well catered for.
- **Service user involvement:**
  - Consultation with children and adolescents who utilise the mental health services and their carers to identify what the real needs are as well as establish their levels of satisfaction is much needed
- **Closer collaboration between Services**
  - Closer working between the Division of Health, Social Services, Education and youth justice is required to meet the needs of youngsters with complex problems. The present Silo mentality is both inefficient and ineffective

# Workforce

- CAMH services
  - not adequately resourced to address the current needs
  - neither is the work force adequately trained to address the current complex needs that children and adolescents are presenting with
- Education , Social Services and Youth Justice are also facing the above issues.

# Recommendations

- National Child and Adolescent Mental Health Policy that is horizontal owned by all stakeholders
- Model of service delivery that is most effective at bring together the diverse number of services from which children and adolescents may receive help
- Strategies that address promotion, prevention, early detection and intervention, both horizontally and vertically, with the most appropriate agencies taking the lead for the particular strategy
- Resources need to be provided across services, particularly highly trained human resources





- Review of the current Child and Adolescent inpatient services is needed both in terms of setting as well as therapeutic interventions
- The model of service provision to be developed is one that allows for high levels of co-operation and joint planning between agencies
- Inpatient Services
  - require premises that promote healing and development in the least stigmatising setting possible.
  - Integrated services that address complex needs (including containment)
  - Comprehensive range of therapeutic approaches - systemic therapy, cognitive behavioural therapy, dialectical behavioural therapy – group and individual, psycho education, psycho-social interventions, art and drama therapy and structured recreation time
  - Highly qualified and appropriately selected mental health professionals including a ward-child psychiatrist, working in an interdisciplinary approach
  - Appropriate onsite educational facilities which meet the national education requirements

**Children are our present and  
future.....**

**“Through well-conceived policy and  
planning, *the* Government can  
promote the mental health of  
children, for the benefit of the child,  
the family, the community and  
society”**

THANK YOU