



Obstacles on the pathway to care for child and adolescent mental health problems

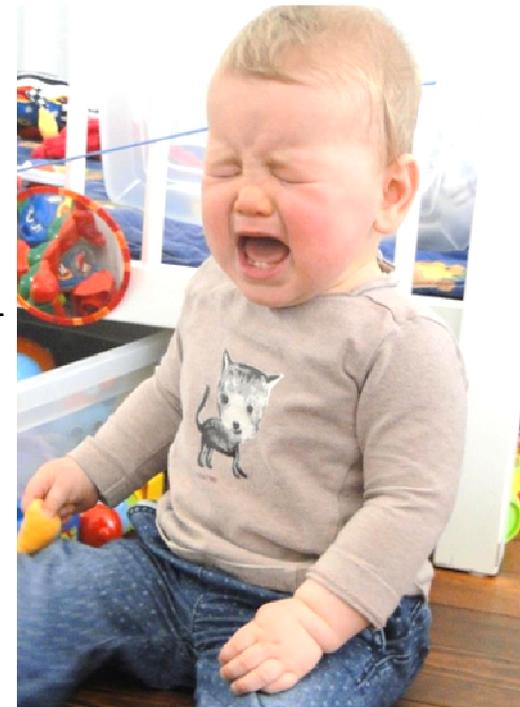
Marieke Zwaanswijk

NIVEL, Netherlands Institute for Health Services Research
Utrecht, the Netherlands

Background (1)

- High prevalence of child and adolescent mental health problems (14-22%)
- Influence on children's current and future wellbeing:
 - other mental health problems, problems with peer relationships, educational underachievement, etc.
 - adolescents' school career is negatively affected by the presence of mental health problems¹
 - risk factor for adult mental health

¹ Uiters et al., BMC Public Health, 2014

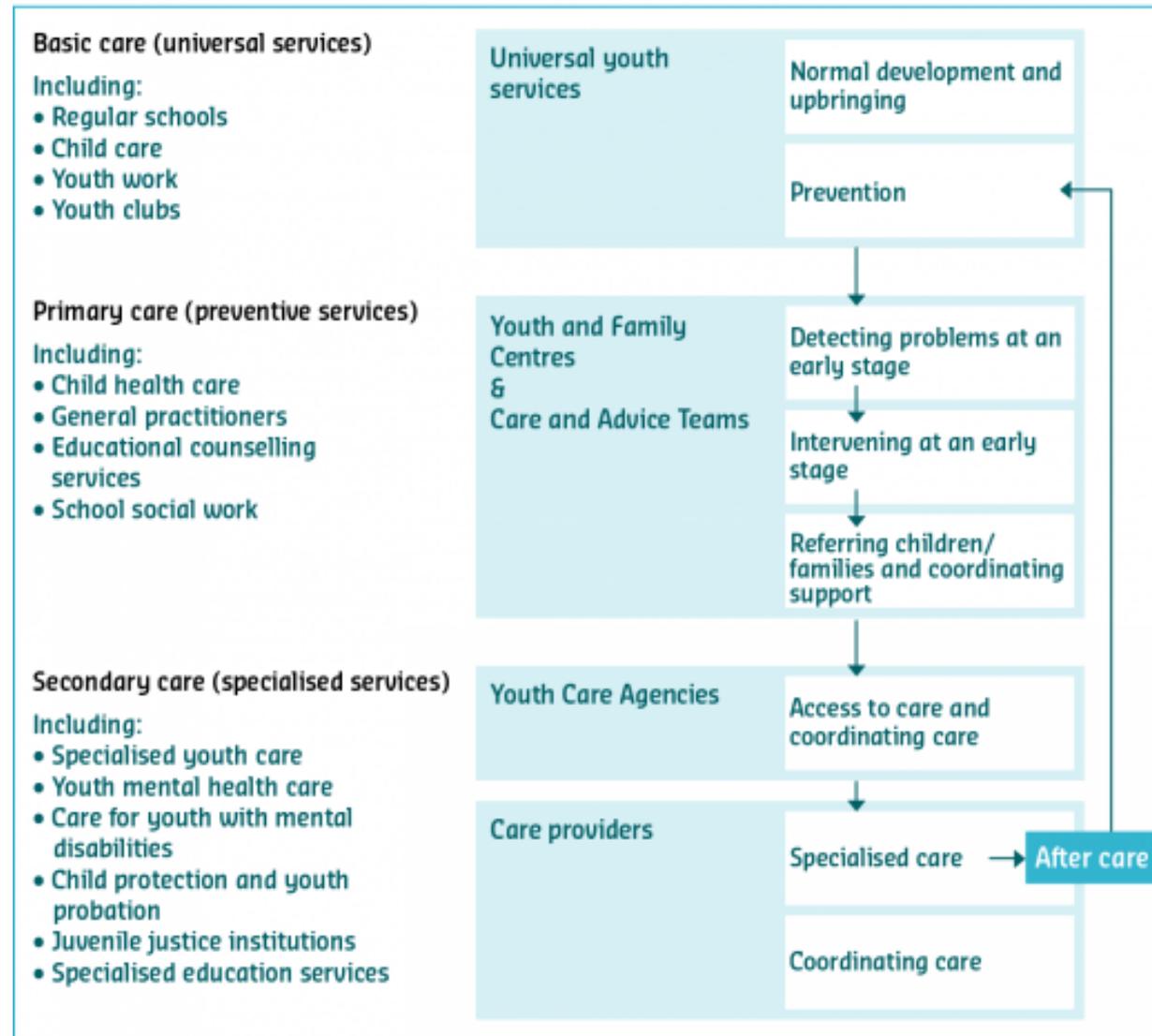


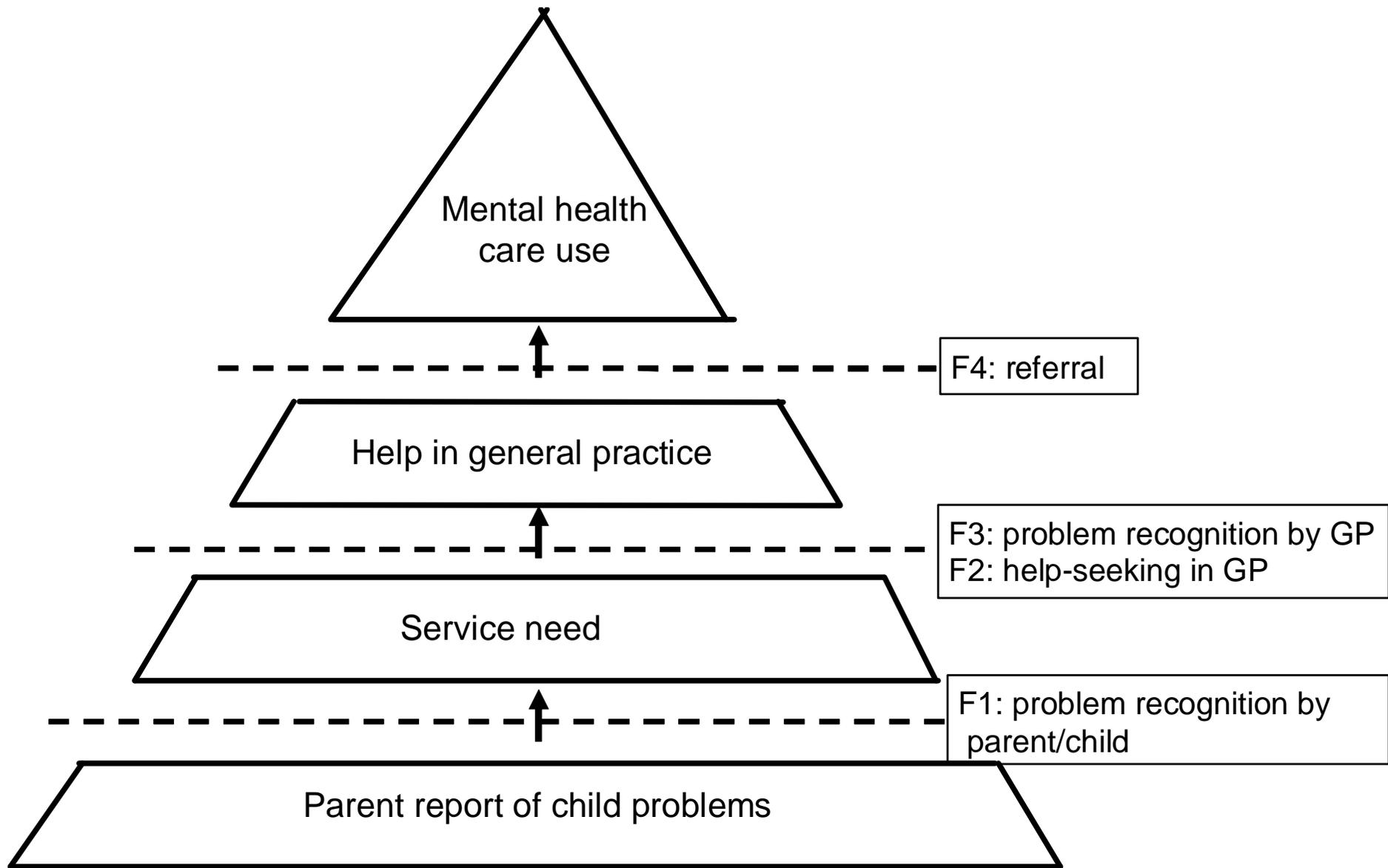
Background (2)

- A minority of youths with mental health problems receive care:
 - 14% received care from GP
 - 16% received care from mental health care services¹
- Why?
 - Which obstacles exist on the pathway to child mental health care?
 - How can we overcome these obstacles?

¹ Zwaanswijk, 2005

The Dutch Youth Care system





Filter 1:

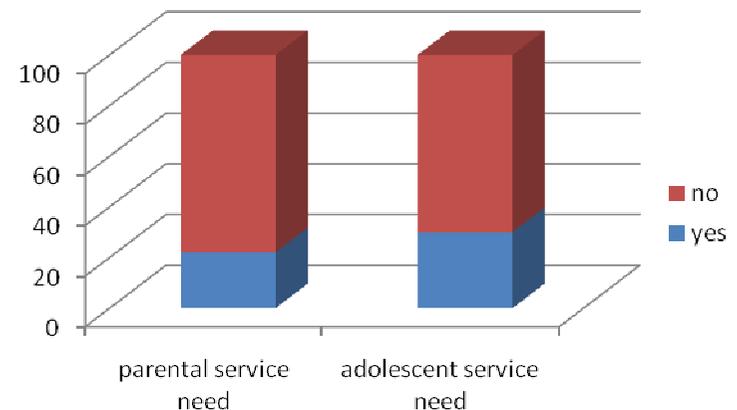
Problem recognition by parent/child

Children with deviant CBCL Total Problems scores:

- 49% of parents also acknowledged the presence of a child mental health problem when asked directly¹
- 33% regarded to be in need of services by their parents²

Adolescents with deviant CBCL/YSR Total Problems scores:

- 22% regarded to be in need of services by their parents³
- 30% reported a service need themselves³



¹ Zwaanswijk et al., Eur Child Adoles Psy, 2006

² Zwaanswijk et al., J Am Acad Child Psy 2005

³ Zwaanswijk et al., Clin Child Psychol Psychiatry, 2007

Filter 2: Help-seeking in general practice

- >80% of youths with mental health problems had contacted their GP in the preceding year. However, mainly for physical problems¹
- Merely 14% of youths with mental health problems had visited their GP specifically for these problems in the preceding year¹
- Dutch GPs are supposed to function as gatekeepers to mental health care -> limited GP consultation is the next filter on the pathway to care

¹ Zwaanswijk et al., Fam Prac, 2005

Filter 3: Problem recognition by GP

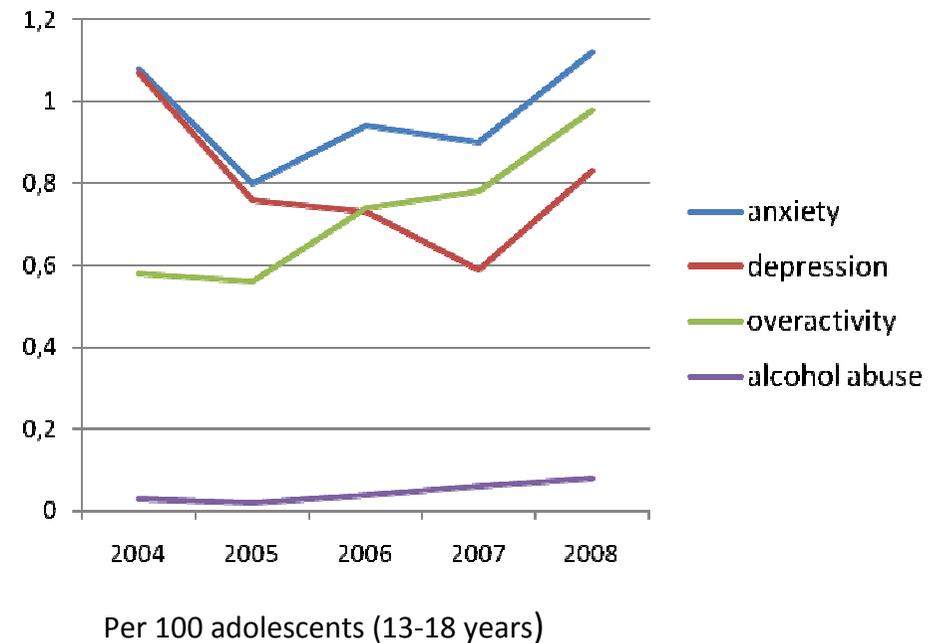
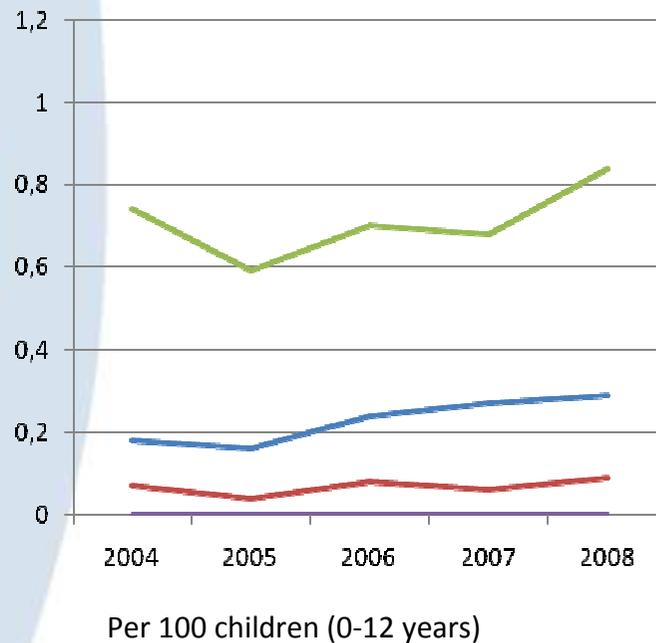
Merely 14% of children and 13% of adolescents who were considered to have mental health problems by their parents or teachers, were diagnosed with psychological problems by their GP¹

¹ Zwaanswijk et al., Fam Prac, 2005

Mental health problems in general practice

7% of youths diagnosed with a mental health problem by their GP (2008)

Prevalence of mental health problems recorded in general practice in 2004-2008



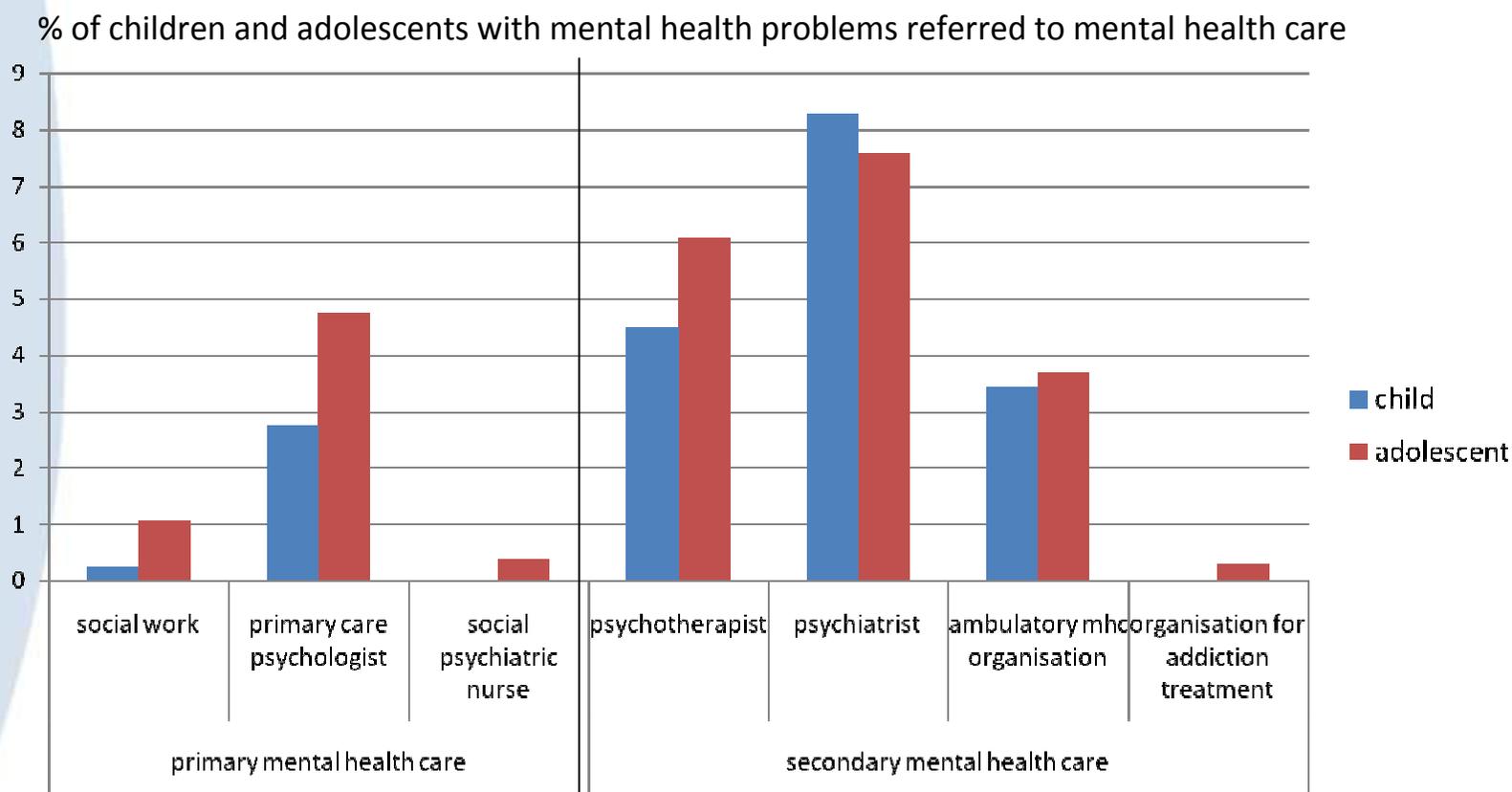
¹ Zwaanswijk et al., BMC Fam Prac, 2011

Alternative explanations

- Parents or children do not explicitly mention their concerns
- GPs are reluctant to diagnose children with mental health problems (e.g. because of fear of stigma or limited referral possibilities)
- Children function adequately despite the presence of mental health problems

Filter 4: Referral to mental health care

21% of youths with mental health problems referred to mental health care by their GP (2008)¹



¹ Zwaanswijk et al., BMC Fam Prac, 2011

Implications

Obstacles on the pathway to care :

- Limited problem recognition by parents and/or youths
- Limited consultation of GPs for mental health problems
- Limited problem recognition by GPs
- Limited referral to additional care

Main questions:

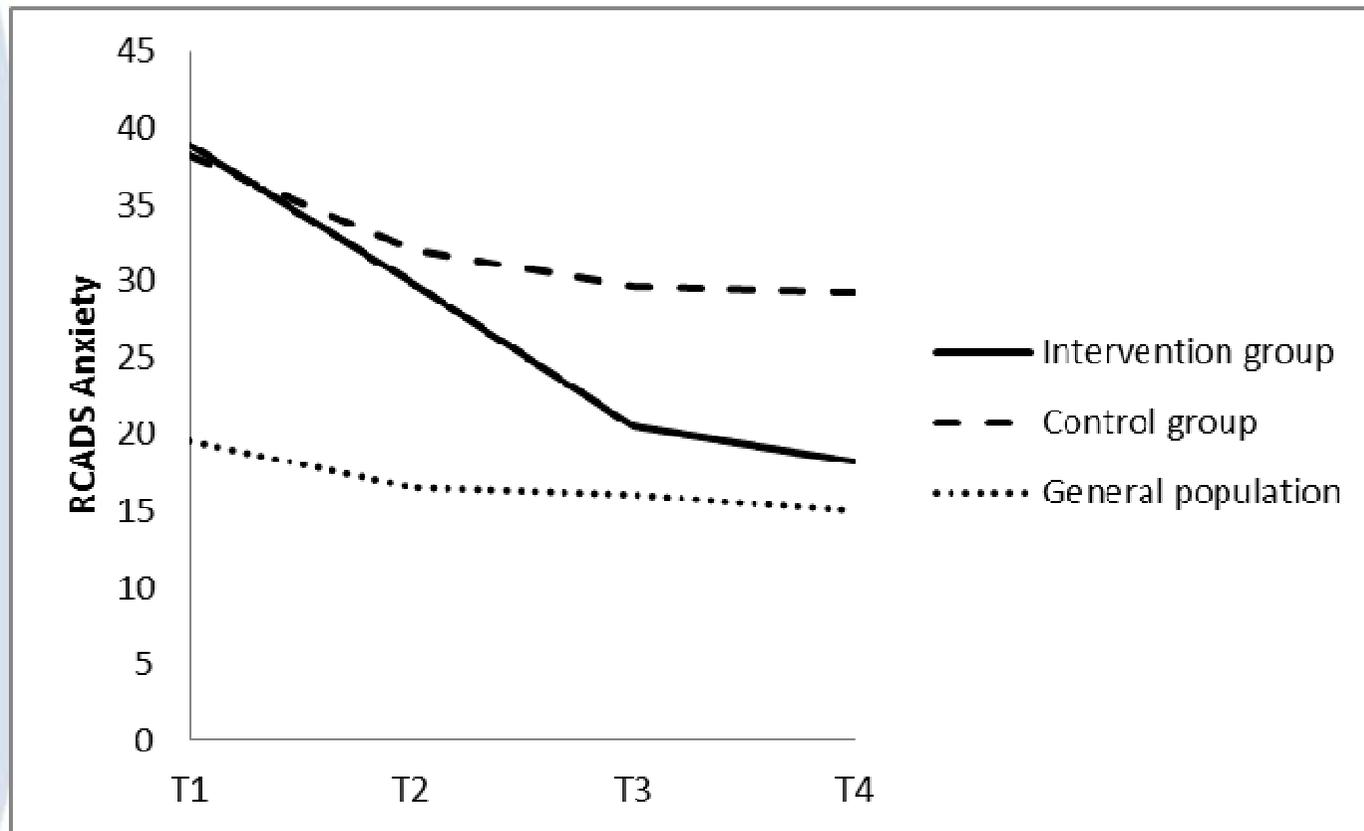
- How can we prevent children to be in need of additional care?
- How can we increase service use for children who need additional care?

Prevention

- FRIENDS for Life¹: school-based prevention for children with symptoms of anxiety and depression
- Implemented at elementary schools in Amsterdam
- Long-term effectiveness under naturalistic conditions
- Intervention group: N=339 children, control group: N=157 (8-13 years)
- Self reports of symptoms of anxiety and depression (RCADS) collected pre- and post-intervention, and 6 and 12 months after intervention

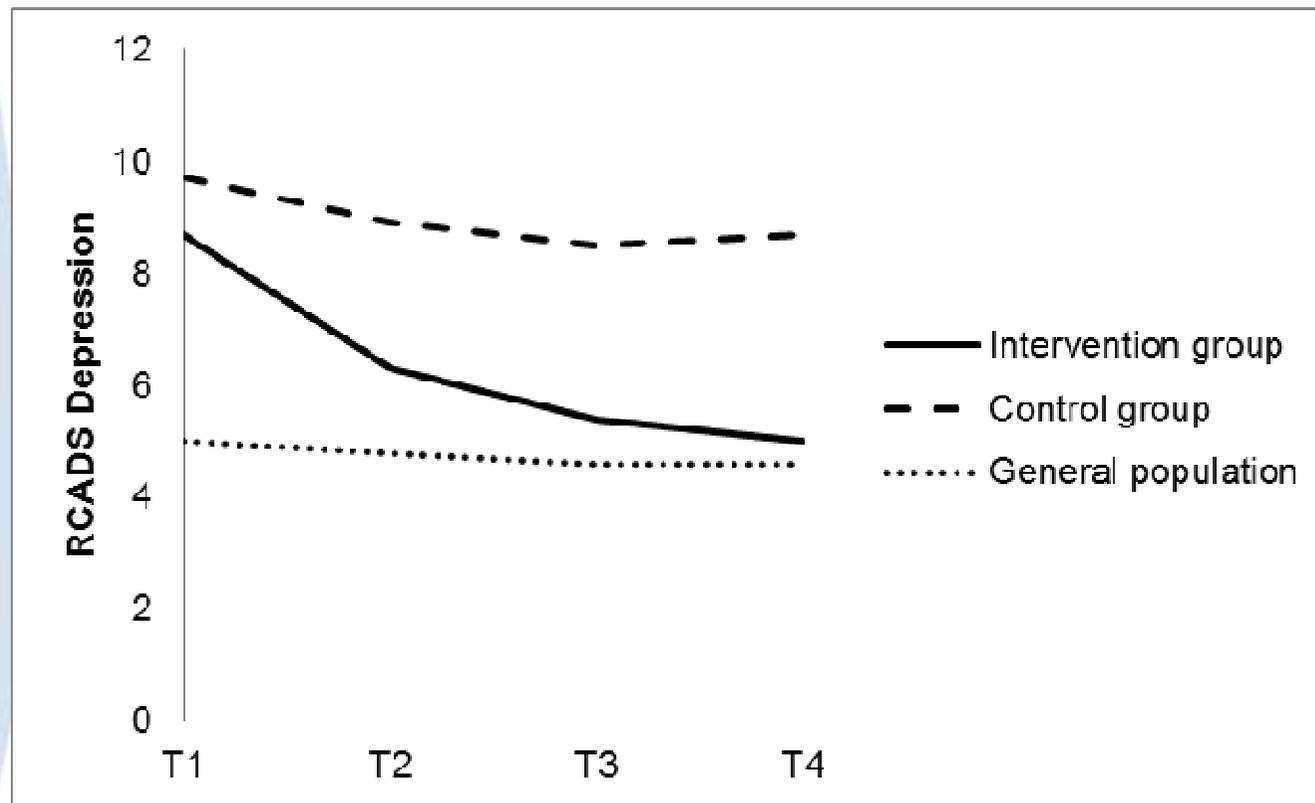
¹ Barret, 2004

Long-term effects on self reported anxiety



T1: pre intervention, T2: post intervention, T3: 6 months, T4: 12 months

Long-term effects on self reported depression



T1: pre intervention, T2: post intervention, T3: 6 months, T4: 12 months

Implications

Obstacles on the pathway to care :

- Limited problem recognition by parents and/or youths
- Limited help-seeking in general practice
- Limited problem recognition by GP
- Limited referral to additional care

Implications:

- How can we prevent children to be in need of additional care?
- How can we increase service use for children who need additional care?

Implications

- Mental health literacy programs -> increase awareness of:
 - the presence of mental health problems
 - where to get help
- Improve problem recognition by GPs:
 - Increase awareness of the possible occurrence of mental health problems in high risk groups
 - Teach GPs to use psychosocially oriented communication skills
- Develop short-term interventions in primary care
- Direct contact between GPs and mental health professionals
- Strengthen the role of schools

More information

m.zwaanswijk@nivel.nl

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