



Young Adult Mental Health *Overview*

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What is Mental Health?

- Diagnoses (DSM-IV or ICD-9)
 - Not
 - Cognitive Disorders (e.g. delirium, dementia)
 - Substance-Related Disorders
 - Due to a General Medical Condition
 - Sleep Disorders
 - Adjustment Disorders (clinically significant reaction to stressor)
 - None of the disorders first diagnosed in childhood EXCEPT; Attention Deficit and Disruptive Behavior Disorders and Attachment Disorders
- Most commonly
 - Mood Disorders (e.g. Major Depressive Disorder)
 - Anxiety Disorders (e.g. Generalized Anxiety Disorder)

Public Health Burden

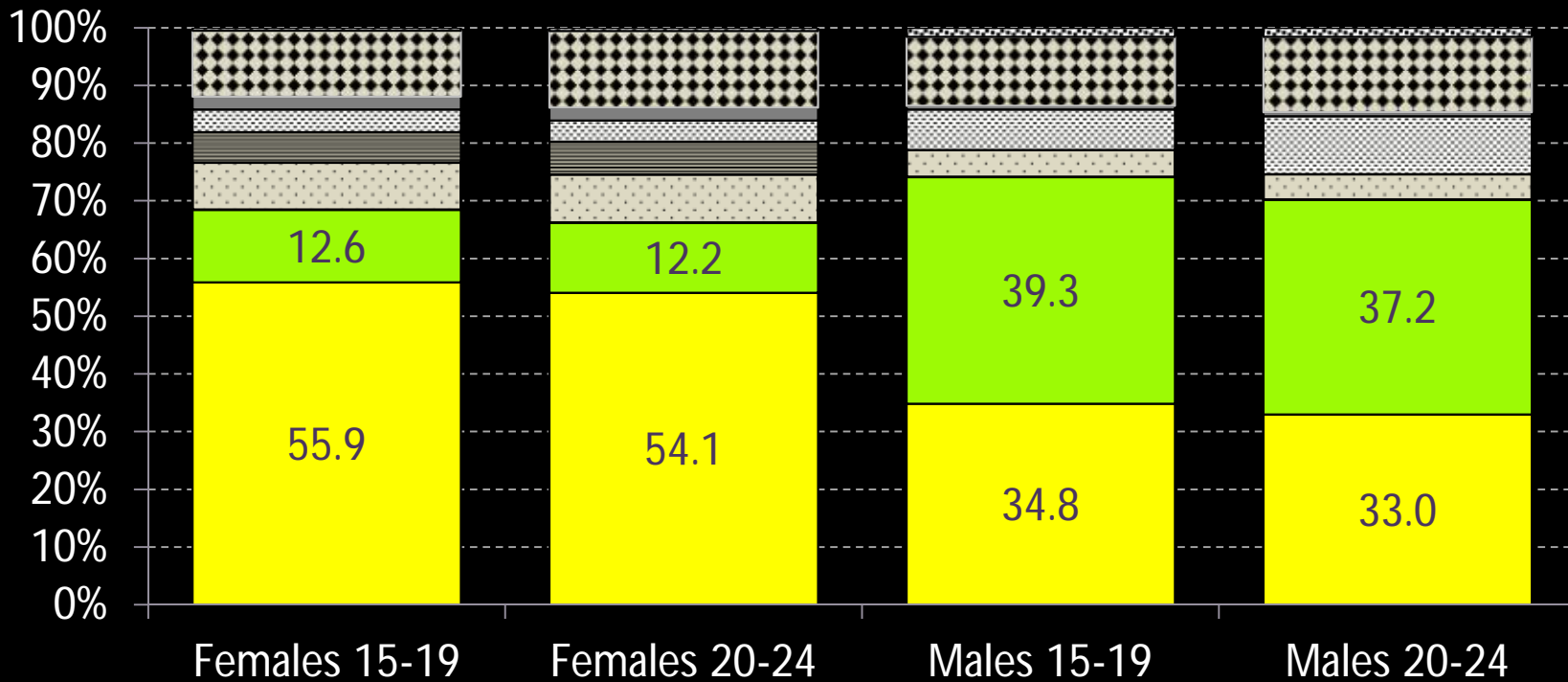
WHO's 2004 Global Burden of Disease Study

- n Goal of Gore et al., 2011; characterize the burden of disease in young people around the world
- n Identified sources of death and disability
- n In young adulthood – unlike adulthood - the primary public health burden is disability, not mortality
- n In high income countries, over 80% of total disease burden was attributable to disability

Gore, FM., Bloem, PJN, Patton, GC, Ferguson, J, Joseph, V, Coffey, C, Sawyer, SM, & Mathers, CD (2011). Global burden of disease in young people aged 10–24 years: a systematic analysis. Lancet, DOI:10.1016/S0140-6736(11)60512-6

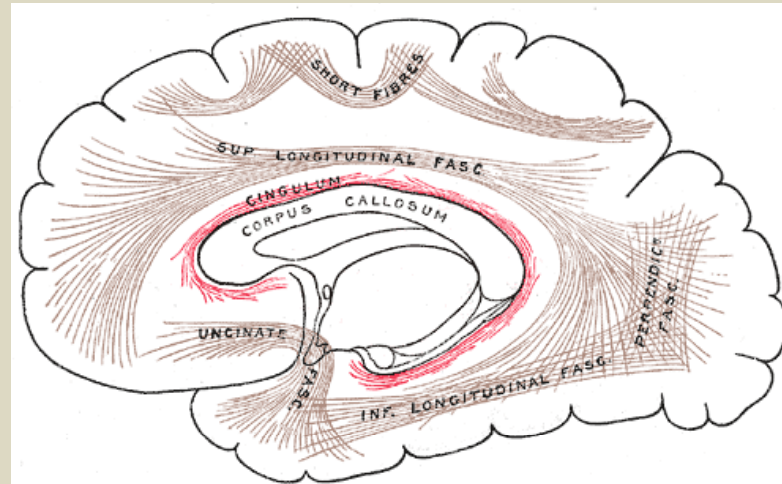
Major Causes of Burden Due to Disability U.S. 15-24 Yr. Olds

- Mental Health
- Substance Use
- Other Neuropsych
- ▨ Maternal Conditions
- ▨ Injuries
- ▨ Other Communicable
- ▨ Other Non Communicable
- ▨ HIV/TB



Data from *WHO Global Burden of Disease: 2004 Update*, retrieved 5/2/13

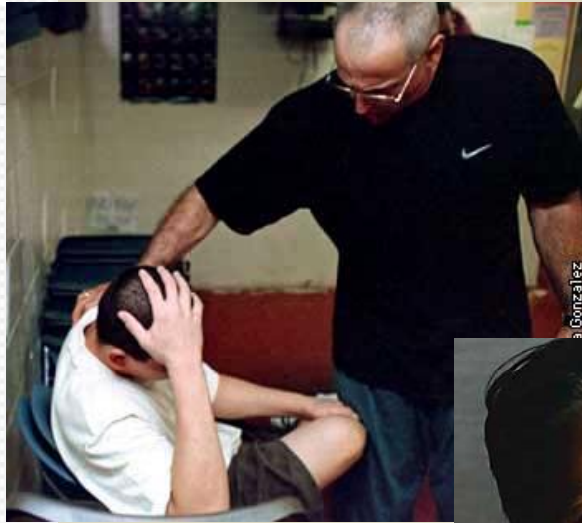
Psychosocial Development Affects Treatment



Psychotherapy is a psychosocial process

- Unique cognitive and psychosocial development of YA's renders "child" or "adult" interventions likely inappropriate

Typical Changes in Family Relations



Family involvement in treatment changes across these ages; parents are important but youth also developing self-determination skills

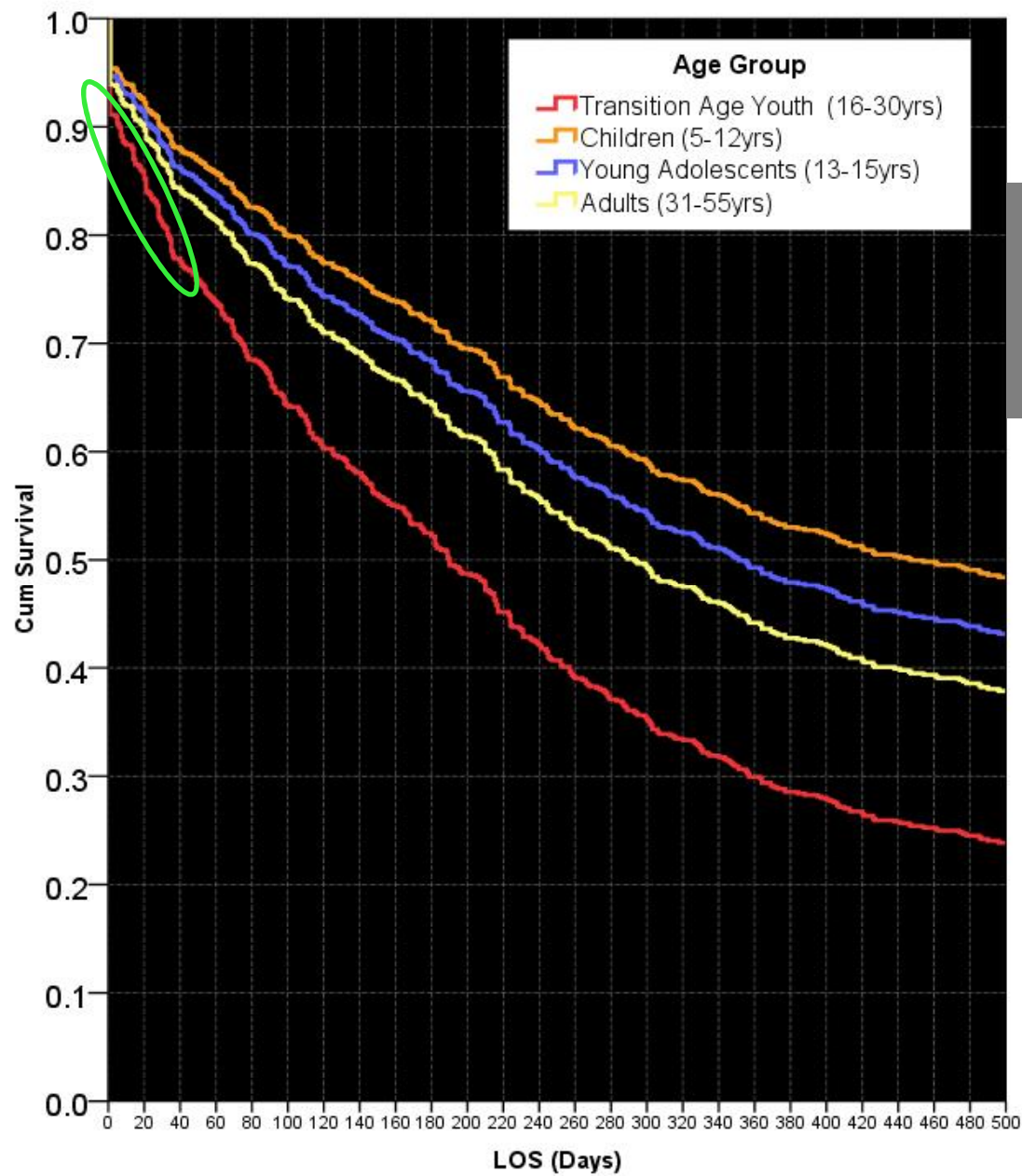
Suicide: Example of important age differences in clinical targets

Younger vs. Older (Kaplan et al. AJP, 2012, S131-137)


- é non alcohol substance problem
- é with high blood alcohol at suicide
- é relationship problems
- ê financial and medical health problems

- é associated with impulsive/aggressive

(McGirr et al., Psych Med, 2008, 407-417)



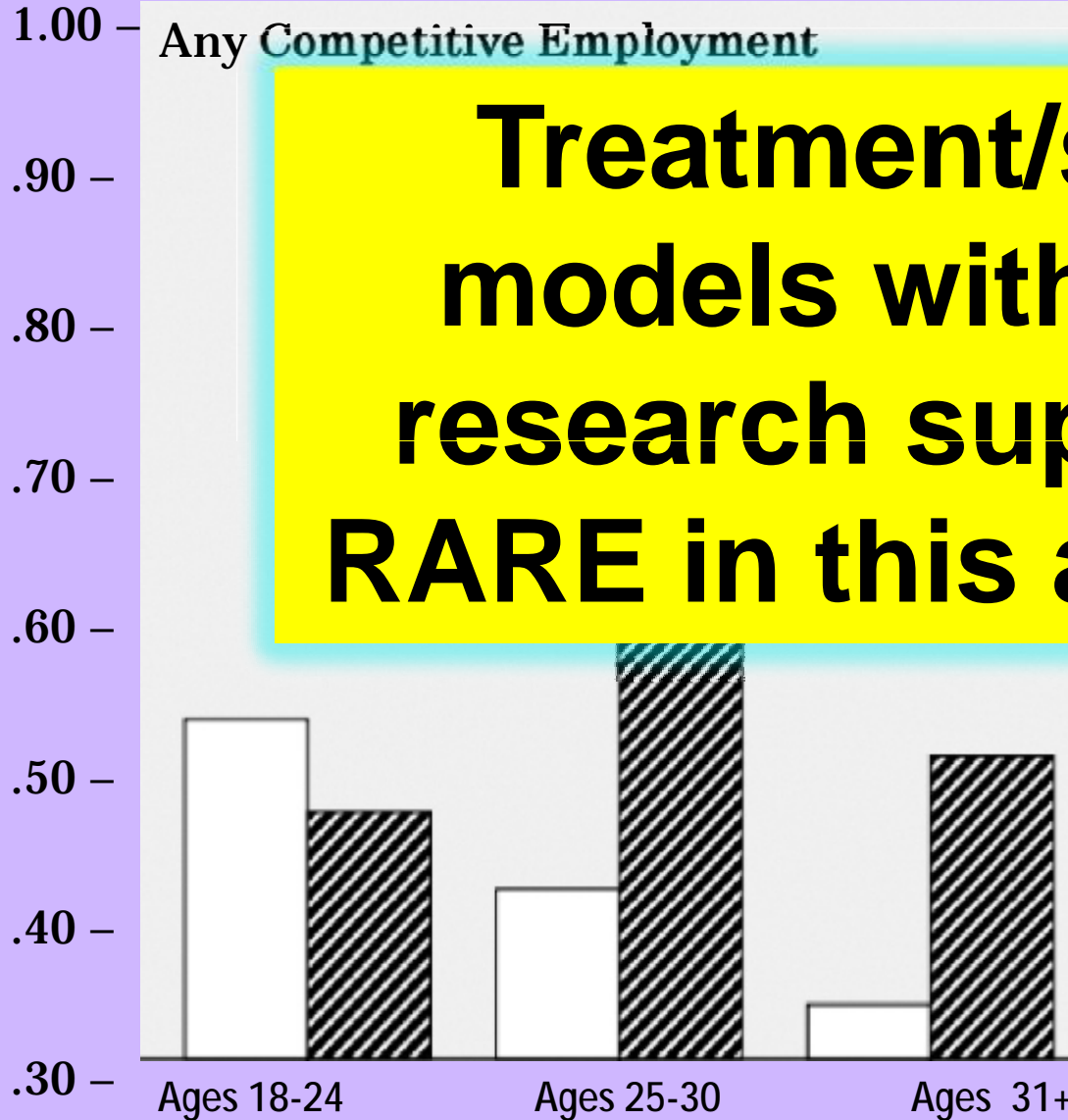
Transition Age Youth
Most Quickly Lost
from Treatment



Evidence of Treatment Efficacy in this Age Group

- Clinical trials conducted across ages
 - ✓ Sufficient sample size of young adults
 - ✓ Conduct analyses to detect age differences
- Clinical trials conducted within the age group (e.g. college students, early episode psychosis)

Employment Intervention Demonstration Program
Supported Employment Randomized Trial



Treatment/service models with strong research support are RARE in this age group

Burke-Miller, J., Razzano, L., Grey, D., Blyler, C., & Cook, J.(2012). Supported employment outcomes for transition age youth and young adults. *Psychiatric Rehabilitation Journal*, 35, 171-179.

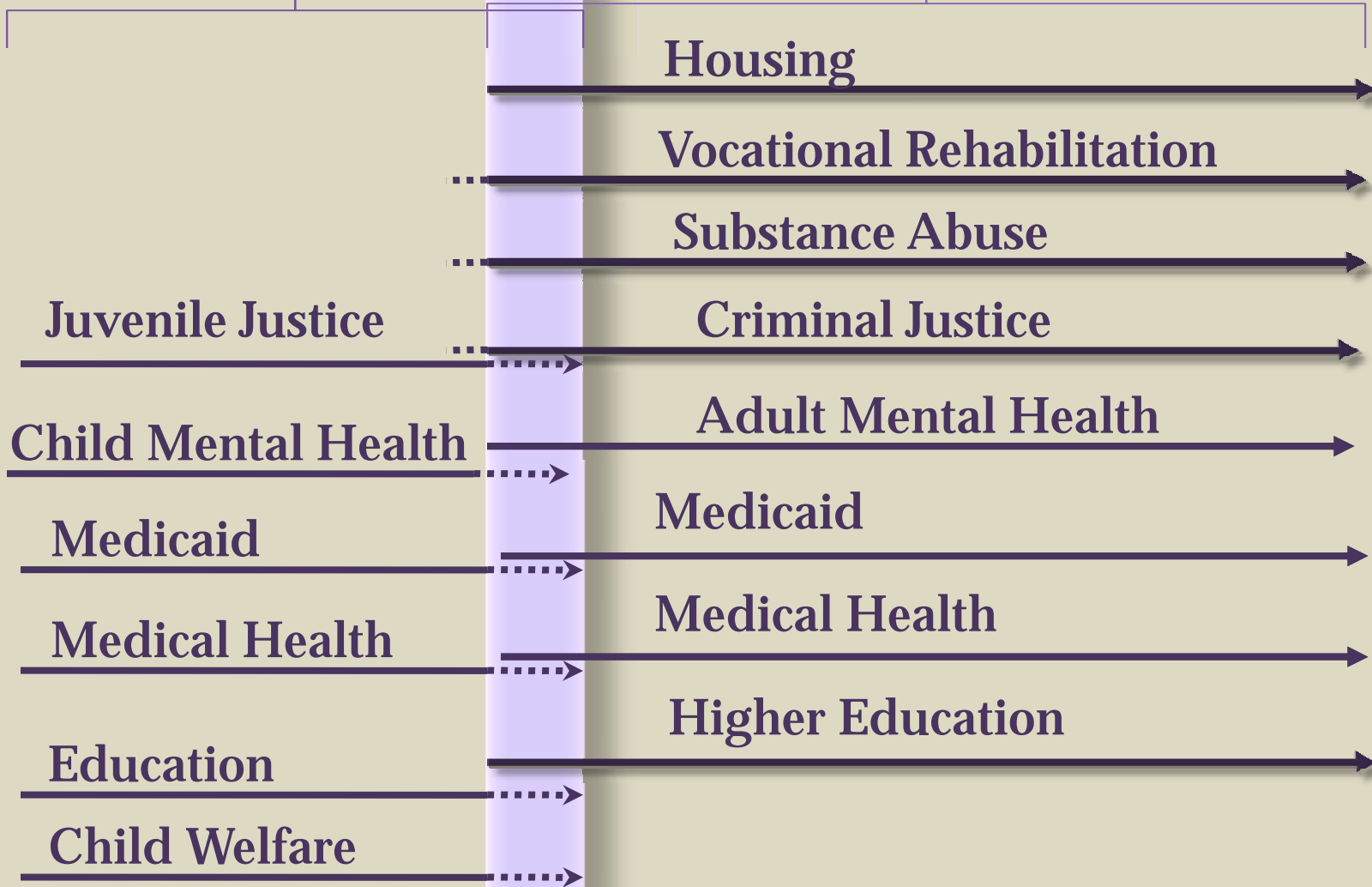
Common Themes of Developmental Adaptations

- Youth Voice; all developing models put youth front and center, and provide tools to support that position
- Involvement of Peers roles; several interventions try to build on the strength of peer influence
- Struggle to balance youth/family; delicate dance with families, no clear guidelines
- Emphasize in-betweenness; simultaneous working & schooling, living w family & striving for independence, finishing schooling & parenting etc.

CHILD SYSTEM

18-21 Yrs.

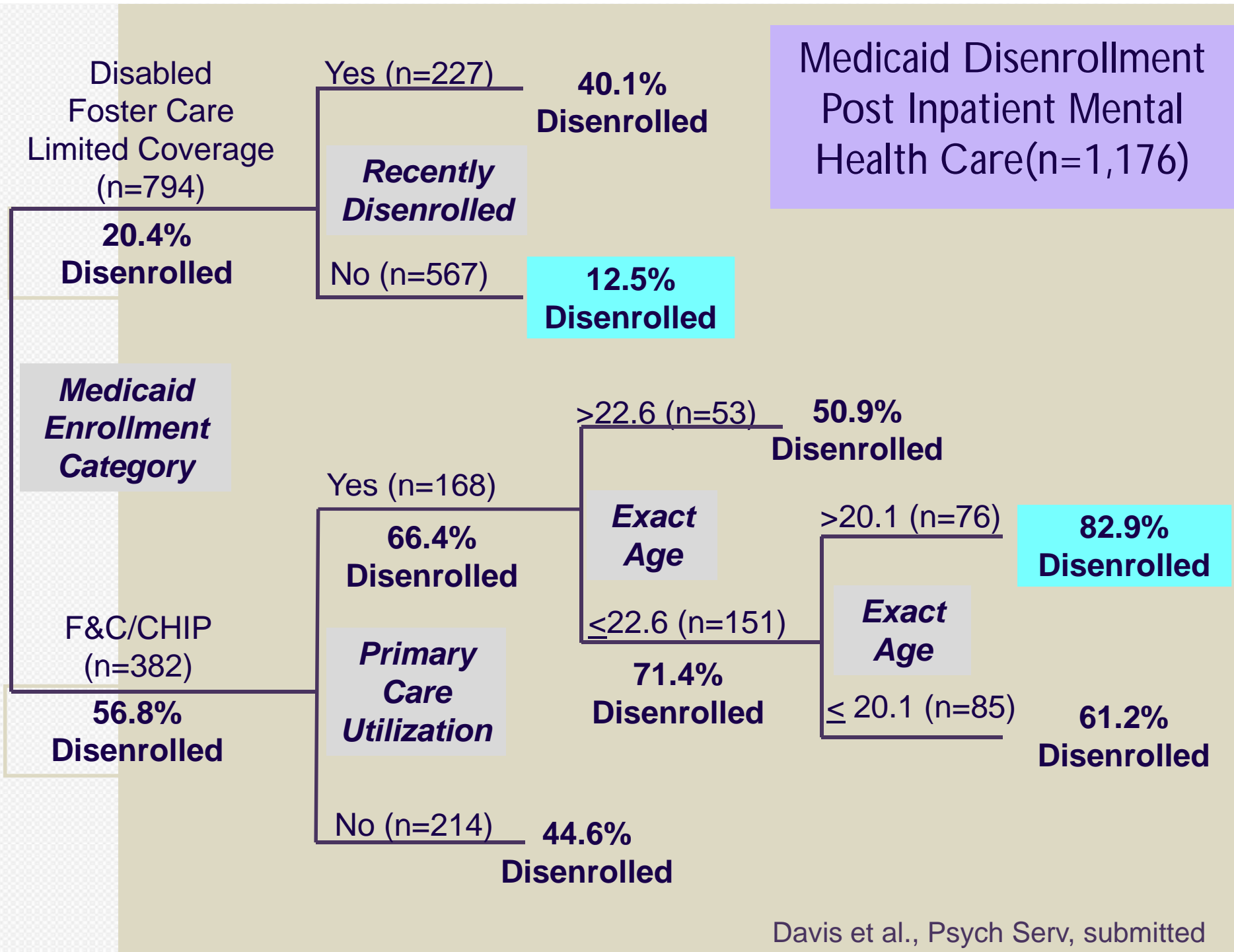
ADULT SYSTEM



Birth

AGE → → → → → → → →

Death



Affordable Care Act

- Enrollment will be simplified; single application developed for Medicaid, CHIP and Exchange plans;
- Outreach to underserved populations such as homeless youth
- Those uninsured for more than six months may be eligible for federally-subsidized state high-risk insurance plans for those with pre-existing conditions;
- Exchanges will offer a plan specifically for youth under age 21
- Incomes up to 133% FPL can be eligible for Medicaid (state option),
- Parent's insurance up to age 26 option



Conclusions

1. Mental health, with substance use disorders are the most impairing health conditions of young adulthood
2. Young adults need age-tailored interventions
3. Few interventions are evidence based for this age
4. Numerous interventions are in development
5. System is fragmented at the point of entry into adulthood
6. Fragmentation contributes to discontinuity
7. ACA helps, but not sufficient
8. Research needed to elucidate targets of interventions, test interventions, test system interventions

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