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Screening Adolescents: Helping to Unblock Psychiatric Services

J. KAHN¹, A. Tubiana¹

¹Psychiatry and Clinical Psychology, CHU de Nancy, Vandoeuvre Les Nancy, France

Screenings are accused of referring too many people when most countries experience difficulties in providing timely care due to congested mental health services.

One of the aims of the SEYLE ("Saving and Empowering Young Lives in Europe") study was to test different suicide-preventive interventions. In France, 235 students were screened at baseline for psychopathology and risk behaviors via a questionnaire and a clinical interview followed by a phone report to the parents. The whole cohort (1007) was similarly screened to detect at high suicidal risk students at baseline, 3 months and 12 months. All detected students benefited from a facilitator follow-up for eventual further assistance.

A total of 266 students were considered at risk (psychopathological symptoms, risk behaviors and high suicidal risk) via the questionnaire. 74 of the 245 students (30,2%) seen in clinical interview were referred for further treatment: 65 to adolescent mental health services (87,8%) and 9 to adolescent support services(12,2%).

All students referred to the adolescent support services agreed to the referral whereas 54 (83,1%) of the 65 medical services referred students agreed and 11 (16,9%) refused.

A qualitative report of the French SEYLE facilitator showed that for some students (including those who refused the referral), the clinical interview and the report to the parents had been beneficial enough to avoid making an appointment to mental health services.

This aspect of screenings should be taken into account in further research and mental health promotion plans.