# DBT Steps-A: Inter-agency Collaboration to Promote Positive Mental Health in Adolescents

**Presentation to:** 

National Clinical and Integrated Care Forum: October 18th 2016

Dr Caitriona O' Malley Principal Specialist Clinical Psychologist, CAMHS, Cork, HSE South











# Background

- Increasing concerns for young people exhibiting emotional and behavioural dysregulation but a small minority seek professional help
- "CAMHS Standard Operational Procedure" (2015): "seamless mental health services available in a continuum stretching from the community at large to primary care and specialist mental health services."
- Connecting for Life, (DoH, 2015) recommends inter-agency collaboration to support mental health needs of adolescents.
- Local schools approached CAMHS and NEPS for support / ideas / consultation around deliberate self harm
- A Crisis = An opportunity for a <u>new way of working</u>

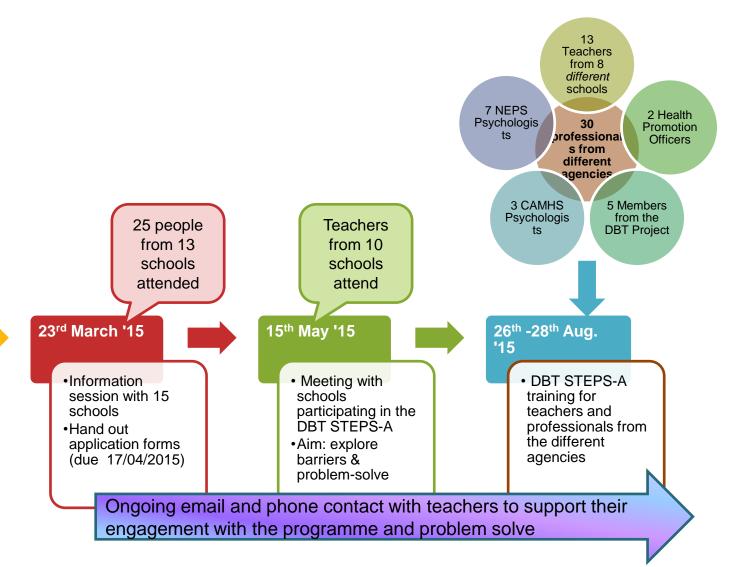
## Aims:

- Target non-referred, universal population of school-going adolescents in Cork
- Teach emotional problem solving skills within Transition Year curriculum to build resilience
- Capitalise on existing interagency relationships and build confidence in teachers as agents of change
- Evaluate robustly outcomes and experiences from all perspectives

# What is DBT Steps-A?

- DBT Skills in Schools: Skills Training for Emotion Problem Solving for Adolescents
  - Universal Social Emotional Learning curriculum for middle and high school students (30 x 1h lessons).
  - Developed in the US by Psychologists in Seattle, WA at the University of Washington
- Based on Skills from Dialectical Behavior Therapy
  - Core Mindfulness Skills
  - Distress Tolerance Skills
  - Emotion Regulation Skills
  - Interpersonal Effectiveness Skills

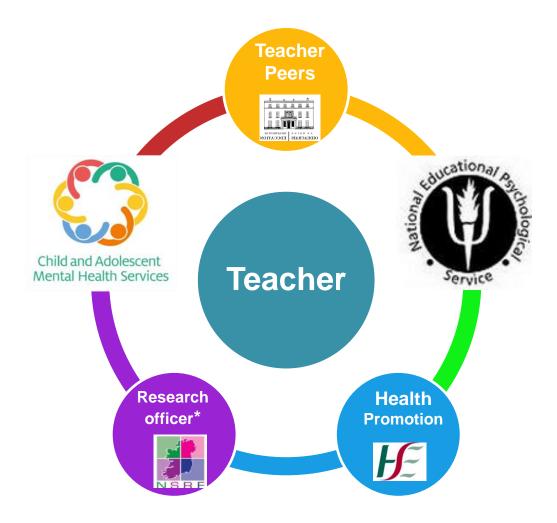
# Planning and Engagement



23<sup>rd</sup> Feb. '15

 Meeting NEPS\*, CAMHS, and Health Promotion scoping links with schools & create multi-agency framework

# Continuous inter-agency collaboration as a support for the champions of change



<sup>\*</sup>Funding was provided by the National Office for Suicide Prevention (NOSP), Ireland

# **Evaluation of Effectiveness:**

Intervention: N= 386 Control: N= 49

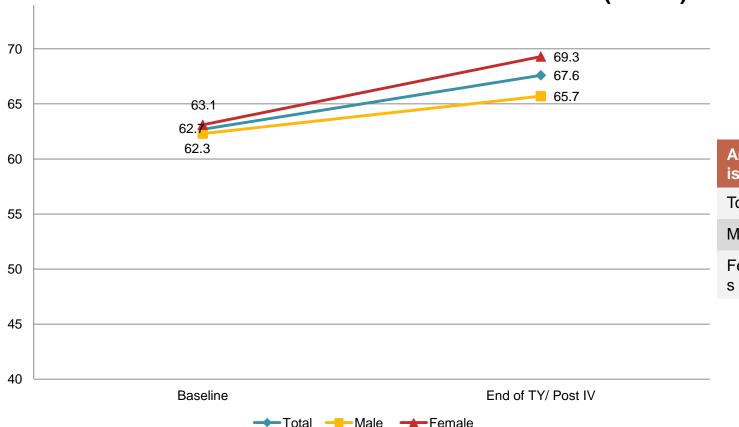
Transition year Students across 8 schools

Measures of Change	DERS (Difficulties with Emotion Regulation Scale) DBT-WCCL (DBT Ways of Coping Checklist)
Outcome Measure	BASC-2 (Behaviour Assessment System for Children): - 4 composite clinical scales - 12 clinical subscales - 1 adaptive scale with 4 subscales



# Preliminary Results: DBT WCCL

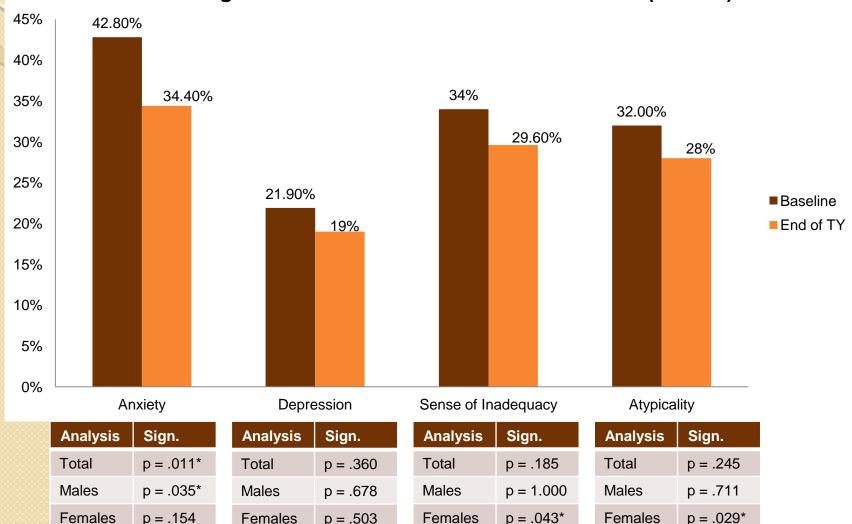
### Skill Use STEPS-A students (n=250)



Analys is	Sign.
Total	p = .000*
Males	p = .023*
Female s	p = .000*

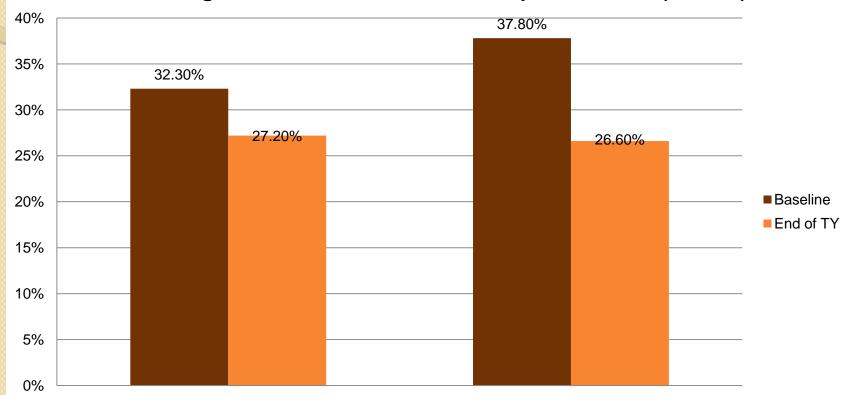
# Preliminary Results: BASC-2

Percentage of Students "at risk" across subscales (n = 250)



# Preliminary Results: BASC-2

### Percentage of Students "at risk" on composite scales (n = 250)



Composite of:
Atypicality. Locus of
Control, Social
Stress, Anxiety,
Depression, Sense
of Inadequacy,
Somatisation.

Internalising Problems

Analysis	Sign.
Total	p = .088
Males	p = .332
Females	p = .230

### **Emotional Symptom Index**

Analysis	Sign.
Total	p = .000*
Males	p = .263
Females	p = .000*

Composite of:
Social Stress,
Anxiety, Depression,
Sense of
Inadequacy,
Somatisation, SelfEsteem, Self-



# Lessons Learned:



- Working within and across systems
- No multimedia teaching material
- Ordering of modules
- Structure of programme (USA v's Irish System)
- ? SEN students?
- ? Linking in parents

- Changed vocabulary / culture in school
- Relationship with students as facilitator
- Teacher creativity and flexibility
- Mindfulness well received by students
- Importance of interagency support

# Conclusion:

- DBT-STEPS-A represents a promising model of successful inter-agency collaboration between health and education – working "upstream".
- An opportunity to build resilience, normalise school-based conversations around mental health and potentially identify earlier adolescents who need onward referral.