

## Prevalence of DSM-V mental disorders in a cohort of young adults in Ireland

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**Aims.** To estimate the prevalence of DSM-V mental disorders in a population of Irish emerging adults

**Background.** Mental disorders are the leading cause of years lived with disability in youth worldwide. Few studies use gold standard of face to face semi-structured standardized interview tools, and this is a limitation in the estimates of prevalence rates of mental disorder in the extant literature.

**Method.** Briefly, we recruited a representative sample of 212 adolescents and followed them up over ten years. In this wave of the adolescent brain development study, 103 of the initial 212 participants took part, 50 males and 53 females, with a mean age of 20.87 years (SD = 1.3). Psychopathology was assessed in all participants by trained research psychologists and mental health professionals using the Structured Clinical Interview for DSM-V (SCID).

**Result.** 52.4% of participants had one lifetime mental disorder, the prevalence rates were highest for Major Depressive Episode (25.3%), Social Anxiety (12.6%) and Generalized Anxiety (8.7%). 50.5% had a history of a mental disorder. 27.2% had 1 lifetime diagnosis, 15.5% had 2 and 7.8% had >2.

**Conclusion.** Rates of mental disorder rapidly increase during emerging adulthood. In a similar Irish study, 55% of young adults met the criteria for lifetime mental disorder. Whilst the rates of mental disorder are high in young people, previous longitudinal research has suggested that many common mental disorders remit by the late twenties. We suggest a need for further research investigating the comparative later functional and economic outcomes of these young people. Research to date is supportive of a need to expand capacity of youth friendly services for prevention and treatment.

### Ethical Approval

Ethical approval for the study protocols, including interviews and assessments, along with informed consent documents, was granted by the Beaumont Hospital Medical Ethics Committee in 2016.

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## A systematic review to evaluate the effectiveness of mental health literacy interventions implemented in schools and communities in low- and middle- income countries

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**Aims.** Mental health literacy campaigns have received increasing attention as a useful method of reducing the burden of mental disorders, by promoting public awareness and improving attitudes surrounding mental disorders. However, despite the wealth of research into the effectiveness of mental health literacy interventions in high-income countries, there is an absence of evaluations of these interventions in low-middle-income countries (LMICs). This systematic review aims to pool the evidence on effectiveness of these interventions in LMICs.

**Method.** MEDLINE(OVID), PsychInfo, Scopus and reference lists of included studies were searched. Studies that quantitatively measured the effectiveness of mental health literacy interventions amongst schools and communities in LMICs were included, regardless of study design. The included papers were not limited to a particular population demographic, ethnicity or educational level. Studies were included if conducted in LMICs according to the World Bank Classification. Each study was critically assessed according to CASP critical appraisal checklists.

**Result.** Ten studies met the inclusion and exclusion criteria, including 6 case series, 3 controlled before and after studies and 1 cross sectional study. Most of the studies claimed significant improvement of knowledge, attitudes and coping skills following the intervention. However, the overall the methodological quality of the studies was rated as fair to poor.

**Conclusion.** The review found that mental health literacy interventions may have promising effects, however the pooled evidence of the effectiveness in LMICs was inconclusive. Further research into the effectiveness of these interventions would benefit from using a RCT design, or controlled-before and after studies, with careful control of confounding variables in order to further establish effect. This study provided insights into the barriers to effective implementation of these programs and examined the contextual appropriateness of such interventions. The review provides recommendations for policy makers for the development of future interventions.

## Diversion and liaison services in England and Wales for mentally disorder offenders – a narrative review

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**Aims.** To critically examine the development of L&D services in England and Wales and critically appraise their evidence base.

**Background.** High levels of morbidity across the criminal justice pathway are well established. Although the strongest evidence has emerged from prison studies, the court literature also confirms these high levels. In acknowledgment of this, there have been a range of initiatives to improve access to services for mentally ill individuals involved with the criminal justice system. Once such initiative has been the development of court liaison and diversion services (L&D).

**Method.** Relevant literature was identified through a search of the following databases: PubMed, EMBASE, and PsycINFO. Data were appraised and synthesised to provide a comprehensive overview of the development of L&D services and their evidence base.

**Result.** The provision of L&D services has increased substantially since their first introduction in England and Wales in 1989. Early L&D services were largely small-scale, unfunded local schemes, and were dependent upon the energy and interest of clinicians who chose to lead in this area. This led to geographical variations in provision and variations in L&D model delivery. The Bradley Report (2009) recommended that a national L&D model be