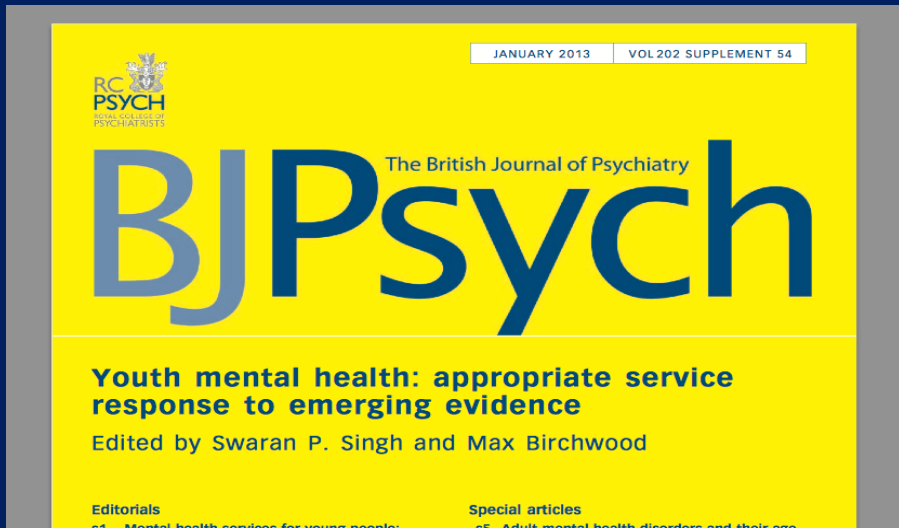


# Global Priorities in Youth Mental Health

Prof Swaran Preet Singh *MBBS; MD; FRCPsych; DM*

- Director, Centre for Mental Health and Wellbeing Research, University of Warwick
- Associate Medical Director for Research & Innovation, Coventry & Warwickshire Partnership Trust
- NIHR Senior Investigator
- Warwick Director, Wellcome Midlands Mental Health and Neuroscience Doctoral Training Programme

*S.P.Singh@warwick.ac.uk*



*From early intervention in psychosis to youth mental health reform: a review of the evolution and transformation of mental health services for young people*

**Ashok Malla, Srividya Iyer, Patrick McGorry, Mary Cannon, Helen Coughlan, Swaran Singh, Peter Jones & Ridha Joobar**

**Social Psychiatry and Psychiatric Epidemiology**  
The International Journal for Research in Social and Genetic Epidemiology and Mental Health Services

**SPEE** Social Psychiatry and Psychiatric Epidemiology



ISSN 0933-7954

## Early Intervention IN PSYCHIATRY



EDITORIAL

### Global research priorities for youth mental health

Cristina Mei, Joanna Fitzsimons, Nicholas Allen, Mario Alvarez-Jimenez, Günter Paul Amminger, Vivienne Browne, Mary Cannon, Maryann Davis, Barbara Dooley, Ian B. Hickie, Srividya Iyer ... [See all authors](#) ▾

First published: 20 January 2020 | <https://doi.org/10.1111/eip.12878> | Citations: 4

[Read the full text](#) >



## World Psychiatry

OFFICIAL JOURNAL OF THE WORLD PSYCHIATRIC ASSOCIATION (WPA)



Forum - Building New Systems of Youth Mental Health Care: A Global Framework | [Free Access](#)

### Designing and scaling up integrated youth mental health care

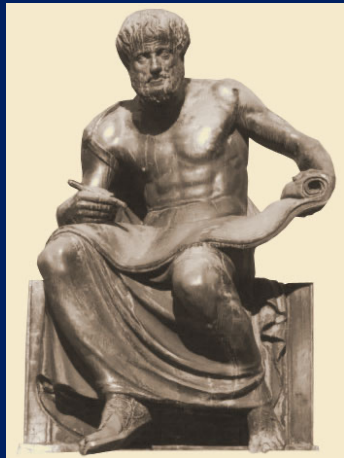
Patrick D. McGorry, Cristina Mei, Andrew Chanen, Craig Hodges, Mario Alvarez-Jimenez, Eóin Killackey

First published: 11 January 2022 | <https://doi.org/10.1002/wps.20938> | Citations: 9

***One in four suffers from mental illness!***

• *tertium non datur*

• *Catuskoti*



*Adolescence represents an inner emotional upheaval, a struggle between the eternal human wish to cling to the past and the equally powerful wish to get on with the future.* Louise J. Kaplan, psychoanalyst and author



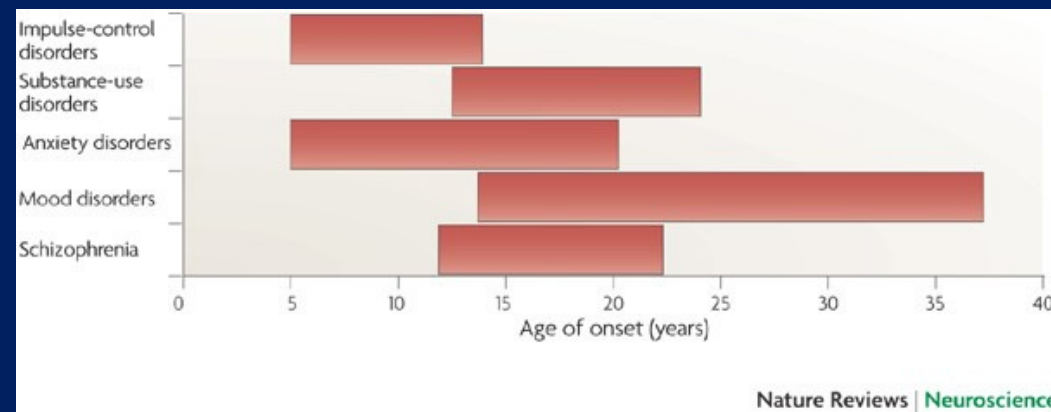
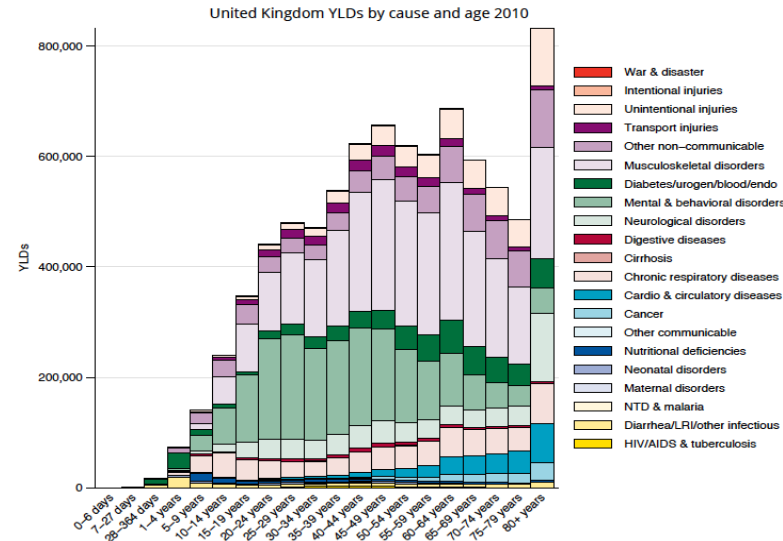
# “Mental disorders are the chronic diseases of the young”

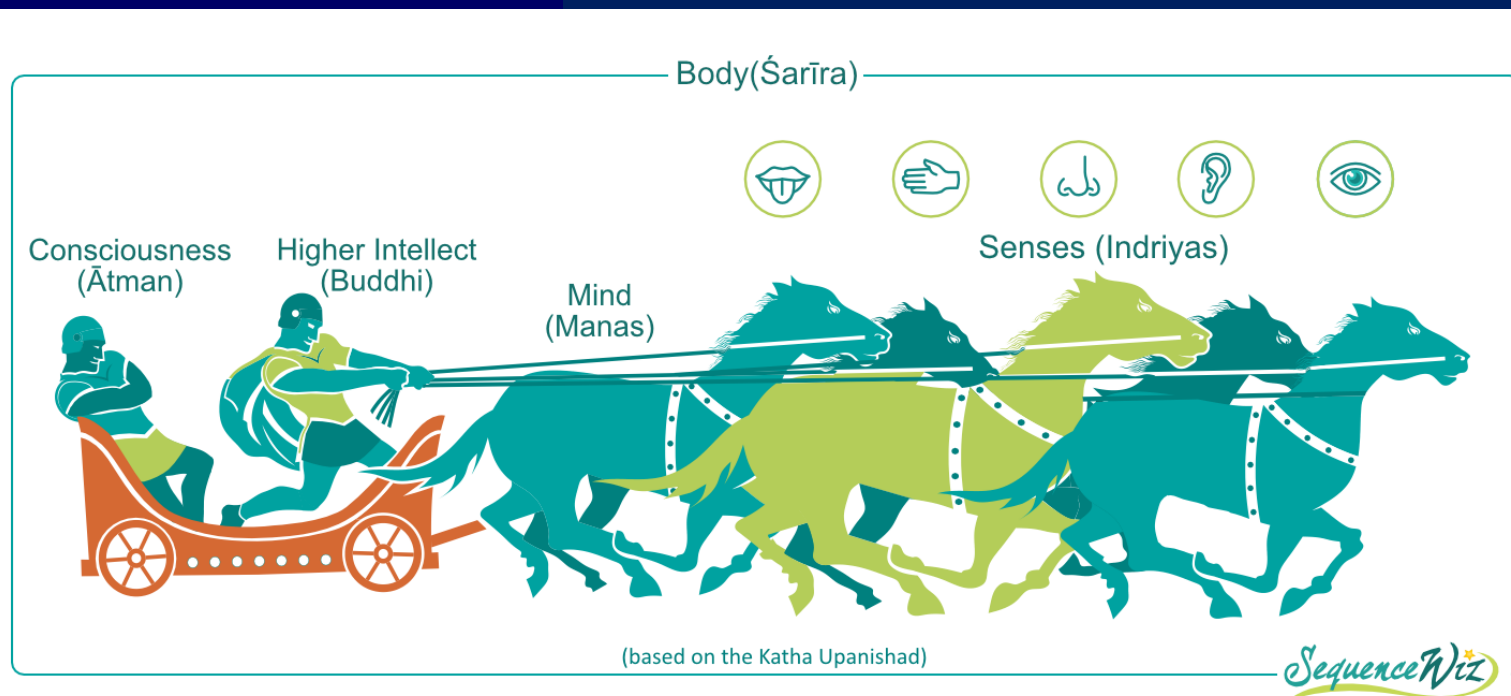
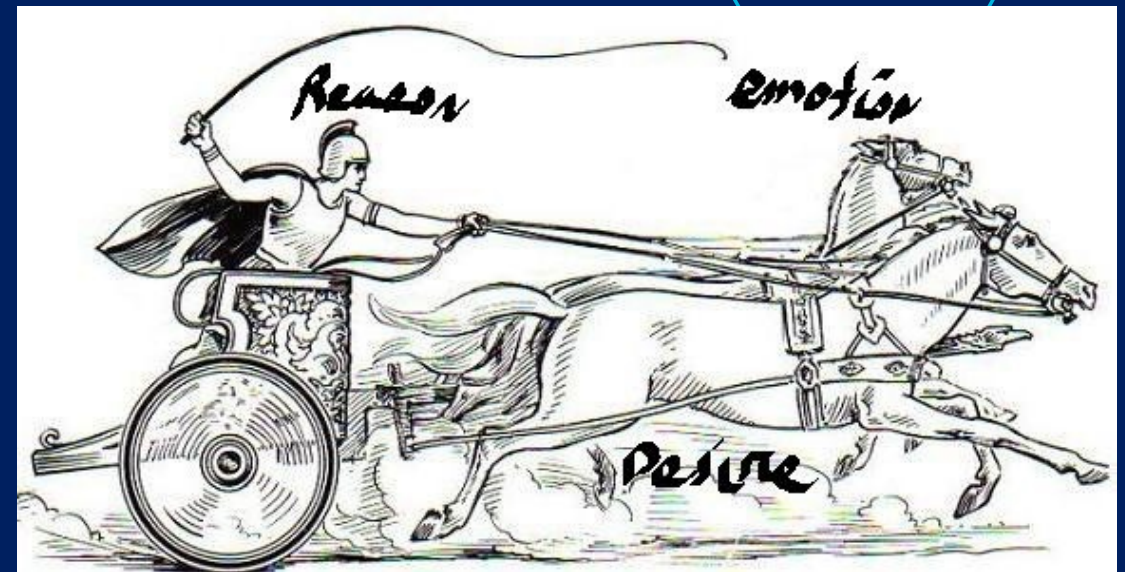
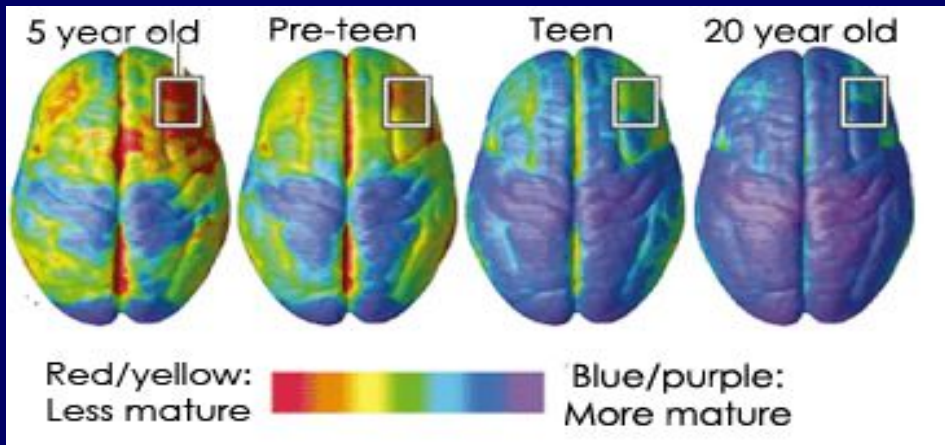
Insel TR, Fenton WS. Arch Gen Psychiatry. 2005

## YEARS LIVED WITH DISABILITY (YLDs)

Years lived with disability (YLDs) are estimated by weighting the prevalence of different conditions based on severity. The top five leading causes of YLDs in the United Kingdom are low back pain, falls, major depressive disorder, neck pain, and other musculoskeletal disorders.

The size of the colored portion in each bar represents the number of YLDs attributable to each cause. The height of each bar shows which age groups had the most YLDs in 2010. The causes are aggregated. For example, musculoskeletal disorders include low back pain and neck pain.

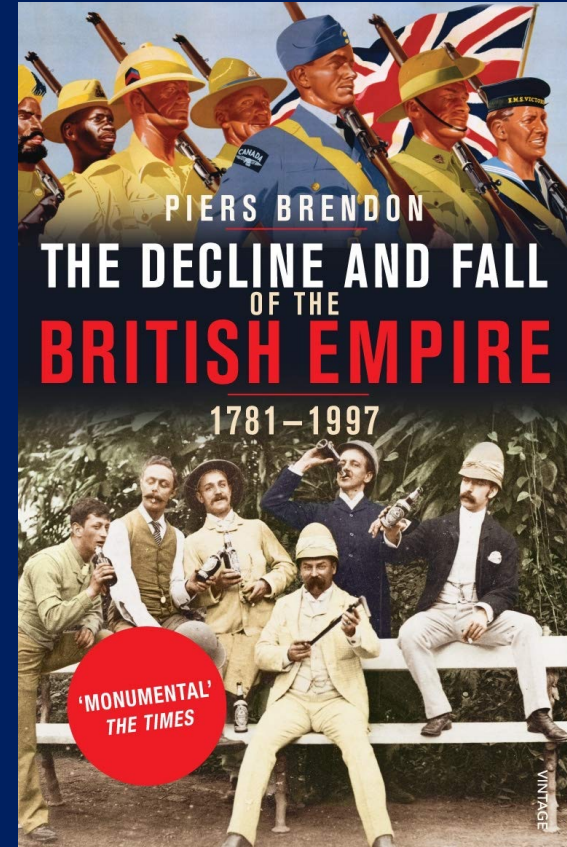




# The Schizophrenia Riddle

*What is the similarity between the treatment of schizophrenia and the loss of the British Empire?*

*Both involve an orderly management of decline*





## Three-year outcome of first-episode psychoses in an established community psychiatric service

SWARAN P. SINGH, TIM CROUDACE, SHAZAD AMIN,  
ROSEMARY KWIECINSKI, IAN MEDLEY, PETER B. JONES  
and GLYNN HARRISON

central patient information system, which records all new psychiatric contacts in both the hospital and the community. Patients with an organic mental illness or with severe learning disabilities were excluded.

### FOLLOW-UP STUDY (1995–1997)

#### Tracing exercise

The follow-up assessments were conducted by S.A. and S.P.S. between 1 June 1995 and

## Early intervention in psychosis

The critical period hypothesis

MAX BIRCHWOOD, PAULINE TODD and CHRIS JACKSON



original  
papers

SWARAN SINGH, CHRISTINE WRIGHT, EILEEN JOYCE, TOM BARNES AND THOMAS BURNS

## Developing early intervention services in the NHS: a survey to guide workforce and training needs

#### AIMS AND METHOD

We conducted a questionnaire study to establish the incidence, specialist staff availability, treatment provision and socio-demographic profile of patients with first-episode psychosis referred to all adult and child and adolescent community mental health teams in south and west London.

#### RESULTS

All 39 teams completed the questionnaire, identifying 205 cases

engage most patients with first-episode psychosis. A total of 73% of cases of first-episode psychosis were on some form of Care Programme Approach. However, many teams did not have adequately trained staff to provide psychosocial interventions. Even where such staff were available, care was focused mainly on monitoring medication and risk assessment, with only half the teams providing psycho-

#### CLINICAL IMPLICATIONS

Establishing early intervention services nationwide will require significant new resources, including specialist trained staff, which could prove difficult to provide in inner-city areas. Rather than a single, uniform service model, several models of early intervention services based on locally determined need might be more realistic and appropriate, and also allow research into



*Louis Wain*  
1860-1939

## *How 'Early' is Early Intervention?*



- Prodromal intervention
- Early detection
- Effective intervention in early psychosis

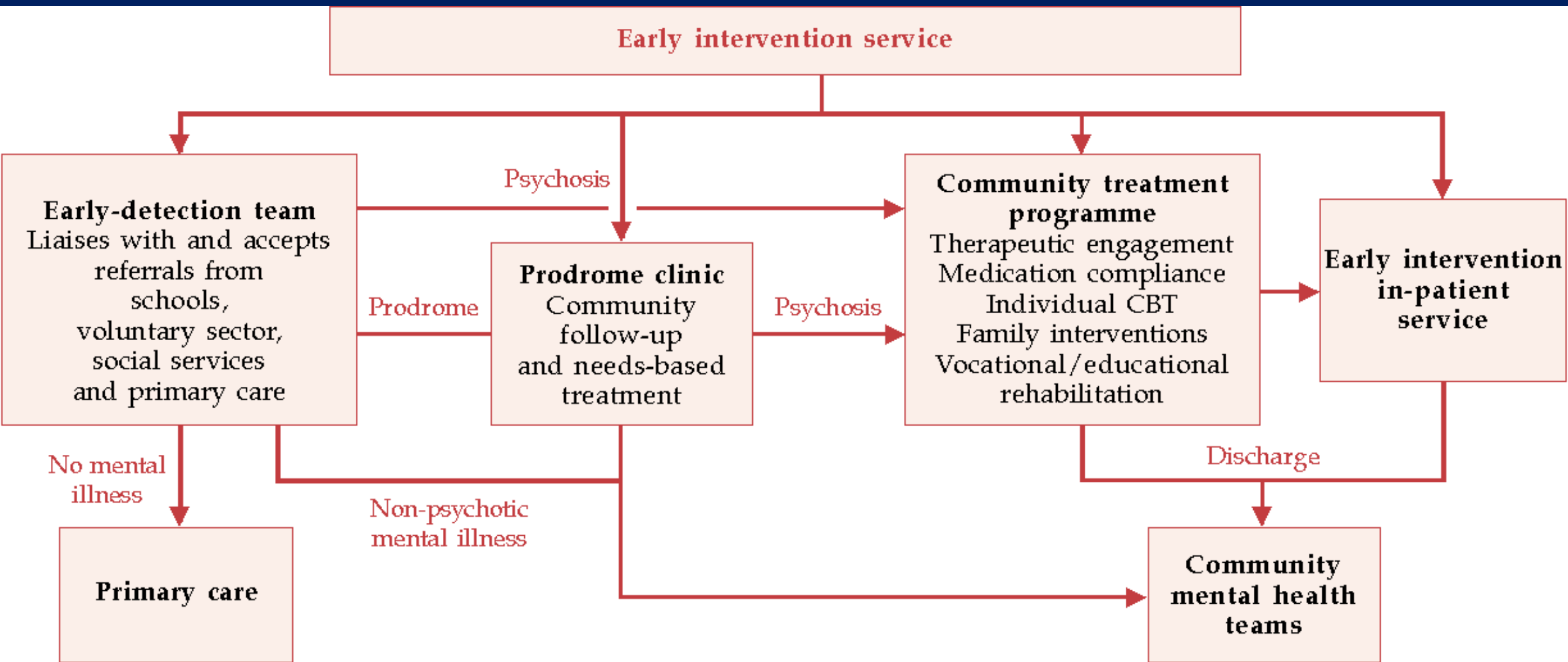


Fig. 1 A model for an effective early intervention service. Adapted from Singh & Fisher (2004).

**Vocational rehabilitation in early psychosis: cluster randomised trial**

Tom Craig, Geoff Shepherd, Miles Rinaldi, Jo Smith, Sarah Carr, Fay Preston and Swaran Singh  
*BJP* published online May 22, 2014 Access the most recent version at DOI: [10.1192/bjp.bp.113.136283](https://doi.org/10.1192/bjp.bp.113.136283)

**References**

This article cites 0 articles, 0 of which you can access for free at:  
<http://bjp.rcpsych.org/content/early/2014/05/09/bjp.bp.113.136283#BIBL>

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**P<P**

Published online 2014-05-22T00:09:40-07:00 in advance of the print journal.

**You can respond**

<http://bjp.rcpsych.org/letters/submit/bjprcpsych;bjp.bp.113.136283v1>

## THE ABANDONED ILLNESS

A report by the Schizophrenia Commission



November 2012

Early intervention is crucial to improving outcomes. The Commission's view is that Early Intervention in Psychosis (EIP) has been **the most positive development in mental health services** since the beginning of community care.

Connor et al. *BMC Psychiatry* 2013, **13**:67  
<http://www.biomedcentral.com/1471-244X/13/67>

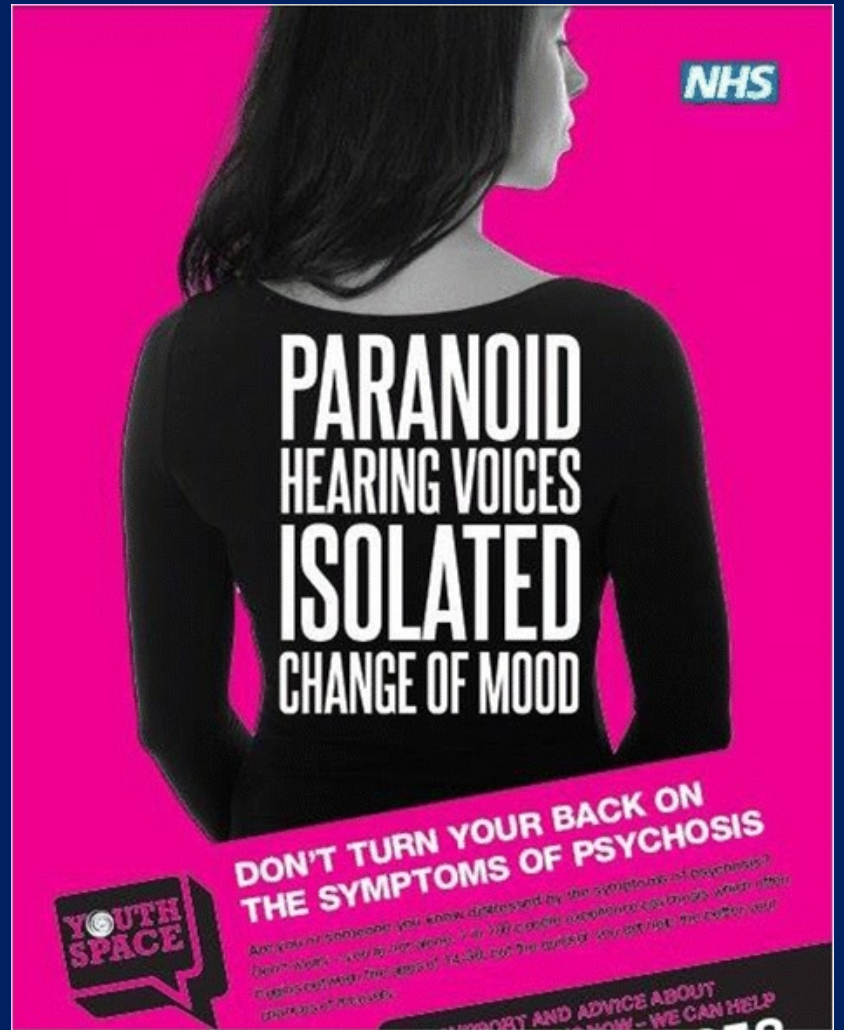


**STUDY PROTOCOL**

**Open Access**

# Don't turn your back on the symptoms of psychosis: a proof-of-principle, quasi-experimental public health trial to reduce the duration of untreated psychosis in Birmingham, UK

Charlotte Connor<sup>1,2\*</sup>, Max Birchwood<sup>3,4</sup>, Colin Palmer<sup>1</sup>, Sunita Channa<sup>1</sup>, Nick Freemantle<sup>5</sup>, Helen Lester<sup>6</sup>, Paul Patterson<sup>2,7</sup> and Swaran Singh<sup>8</sup>





opinion  
& debate

Psychiatric Bulletin (2005), 29, 292–294

**SWARAN P. SINGH, NAVINA EVANS, LESTER SIRELING AND HELEN STUART**

## Mind the gap: the interface between child and adult mental health services

Adolescents with mental health problems are poorly served by mental health services, since responsibility for

specialist services such as early intervention in psychosis, which bridge the child–adult divide.

Copyright 1996 Randy Glasbergen.  
[www.glasbergen.com](http://www.glasbergen.com)



## Process, outcome and experience of transition from child to adult mental healthcare: multiperspective study

Swaran P. Singh, Moli Paul, Tamsin Ford, Tami Kramer, Tim Weaver, Susan McLaren, Kimberly Hovish, Zoebia Islam, Ruth Belling and Sarah White

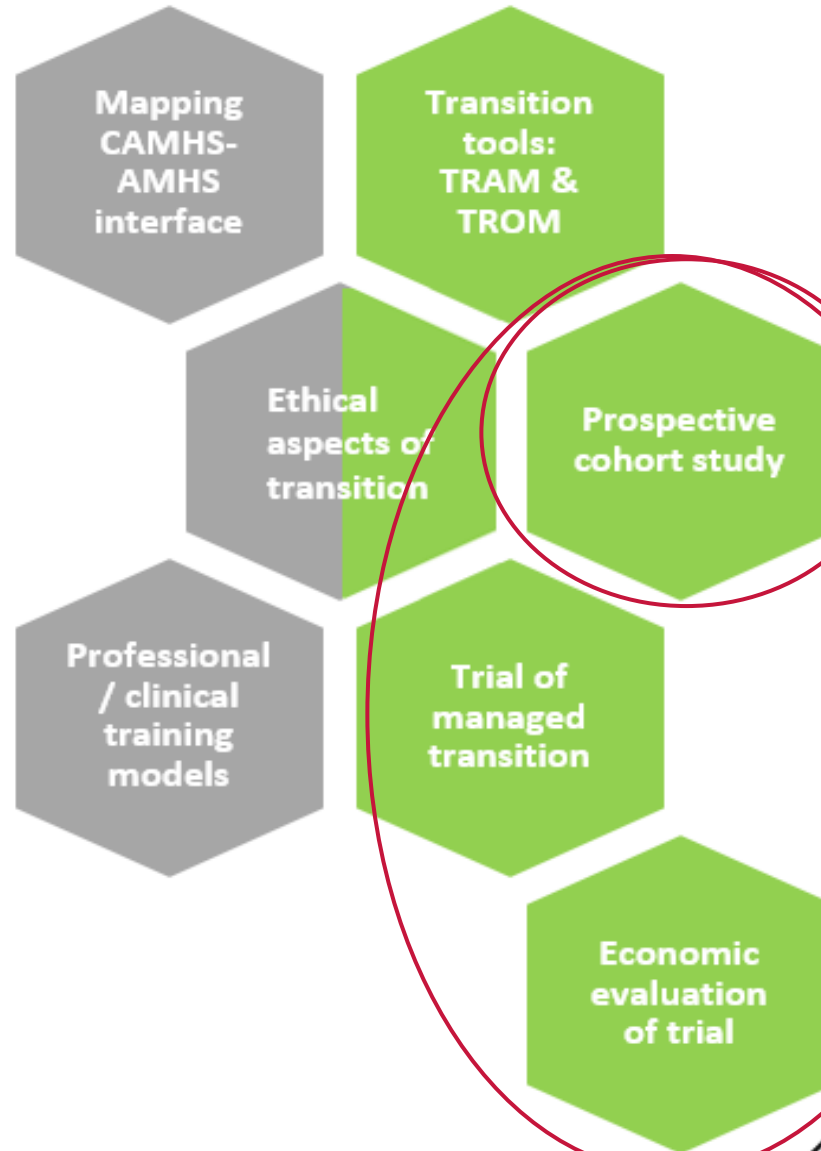
### Background

Many adolescents with mental health problems experience transition of care from child and adolescent mental health services (CAMHS) to adult mental health services (AMHS) (not referred to AMHS or not accepted by AMHS). Individuals with a history of severe mental illness, being on medication

## **Conclusion:**

*For the vast majority of service users, transition from CAMHS to AMHS is poorly planned, poorly executed and poorly experienced.*

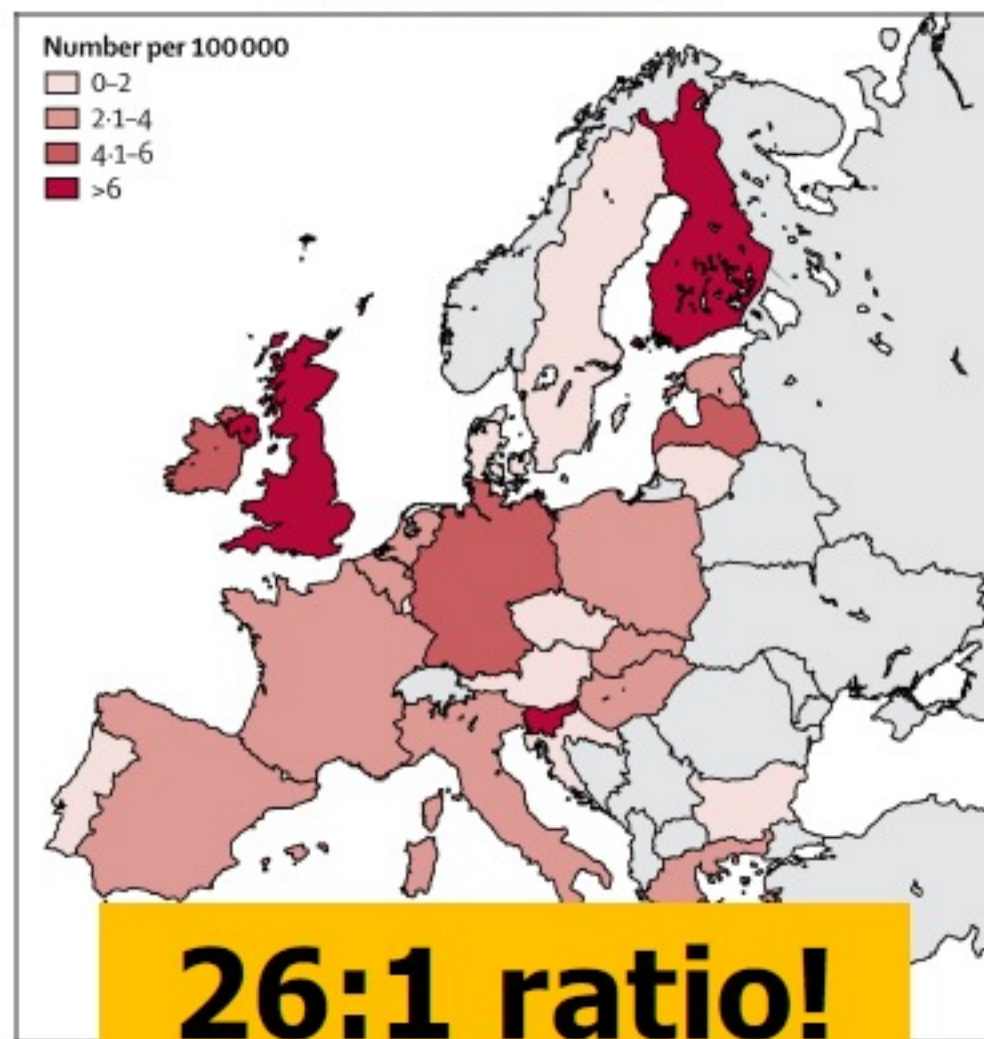




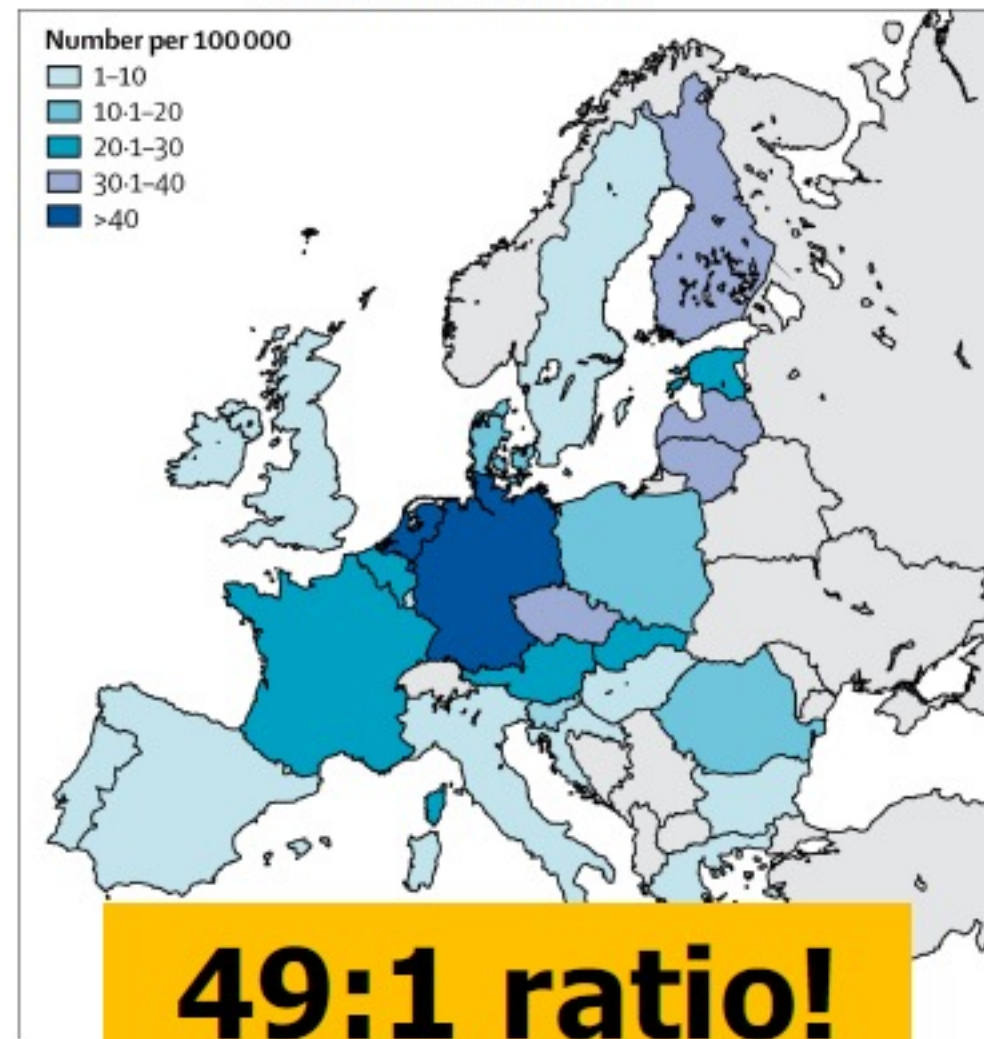
## MILESTONE Study

- > 1000 Young people
- 52 CAMHS
- 8 countries
- 900 parents
- Clinicians
- 4 assessments over 24 months

## CAMHS AVAILABILITY

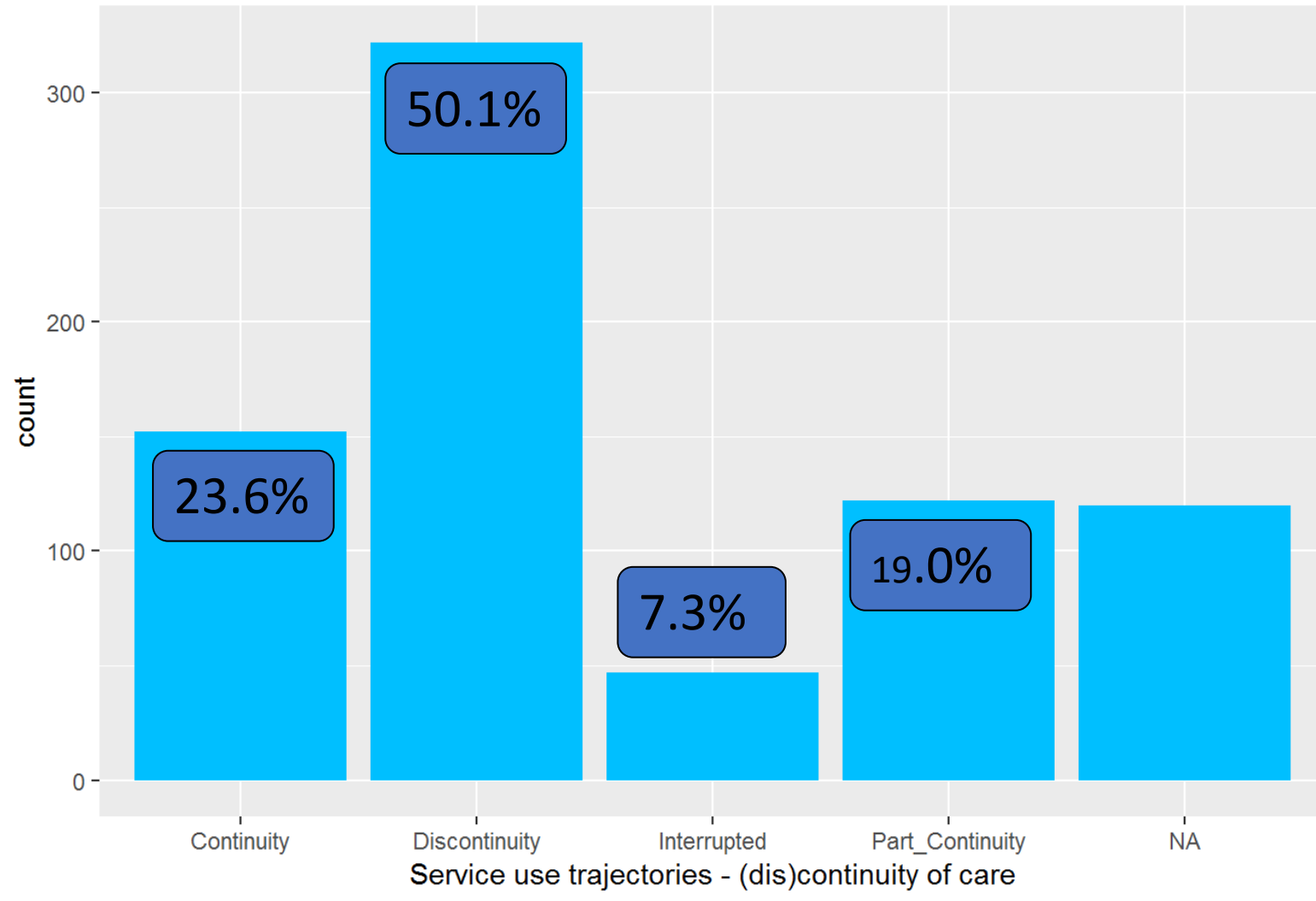


## BEDS AVAILABILITY

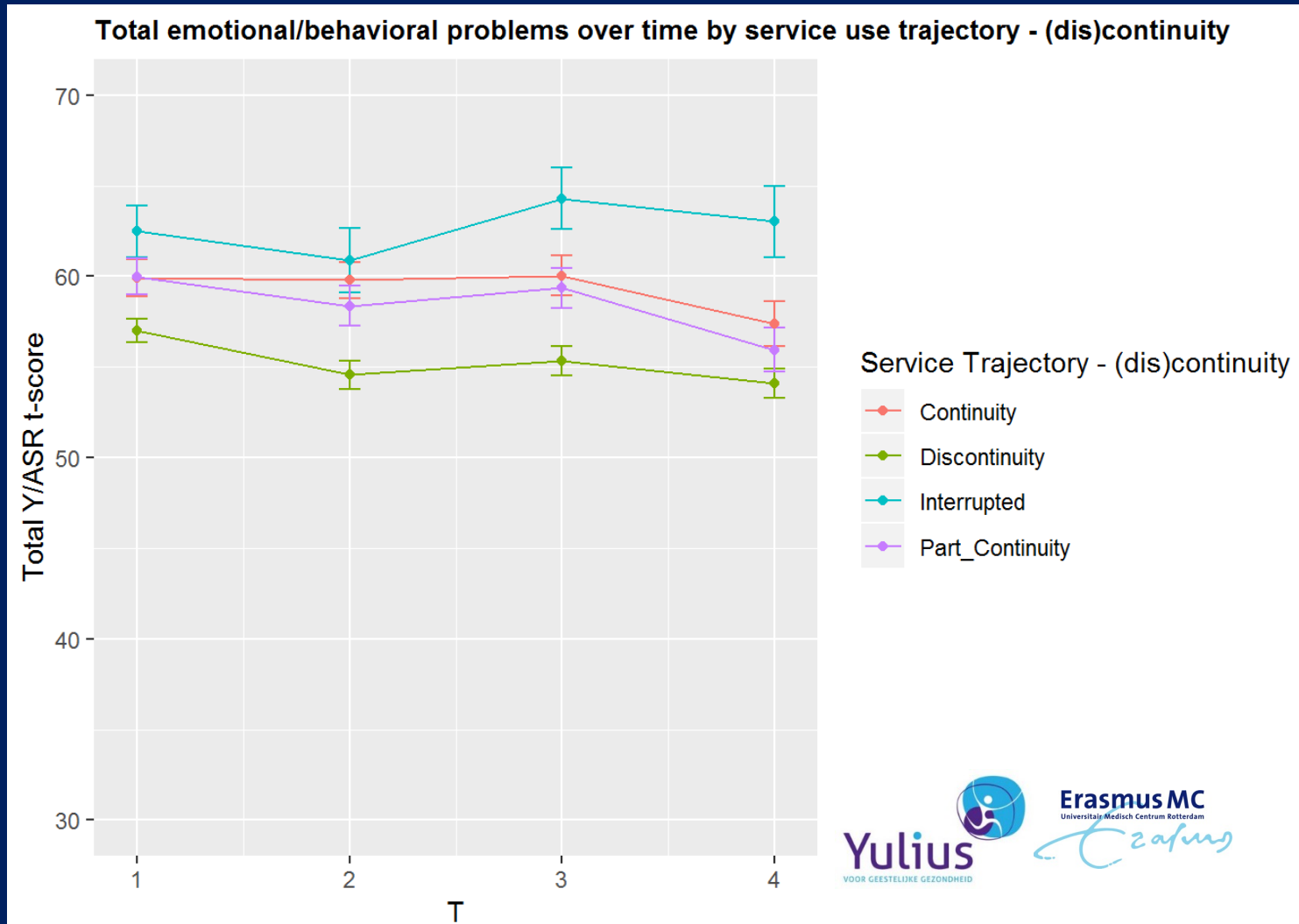


Signorini et al. *Lancet Psychiatry* (2017) 4(9):P715-724

### Service use trajectories - (dis)continuity of care

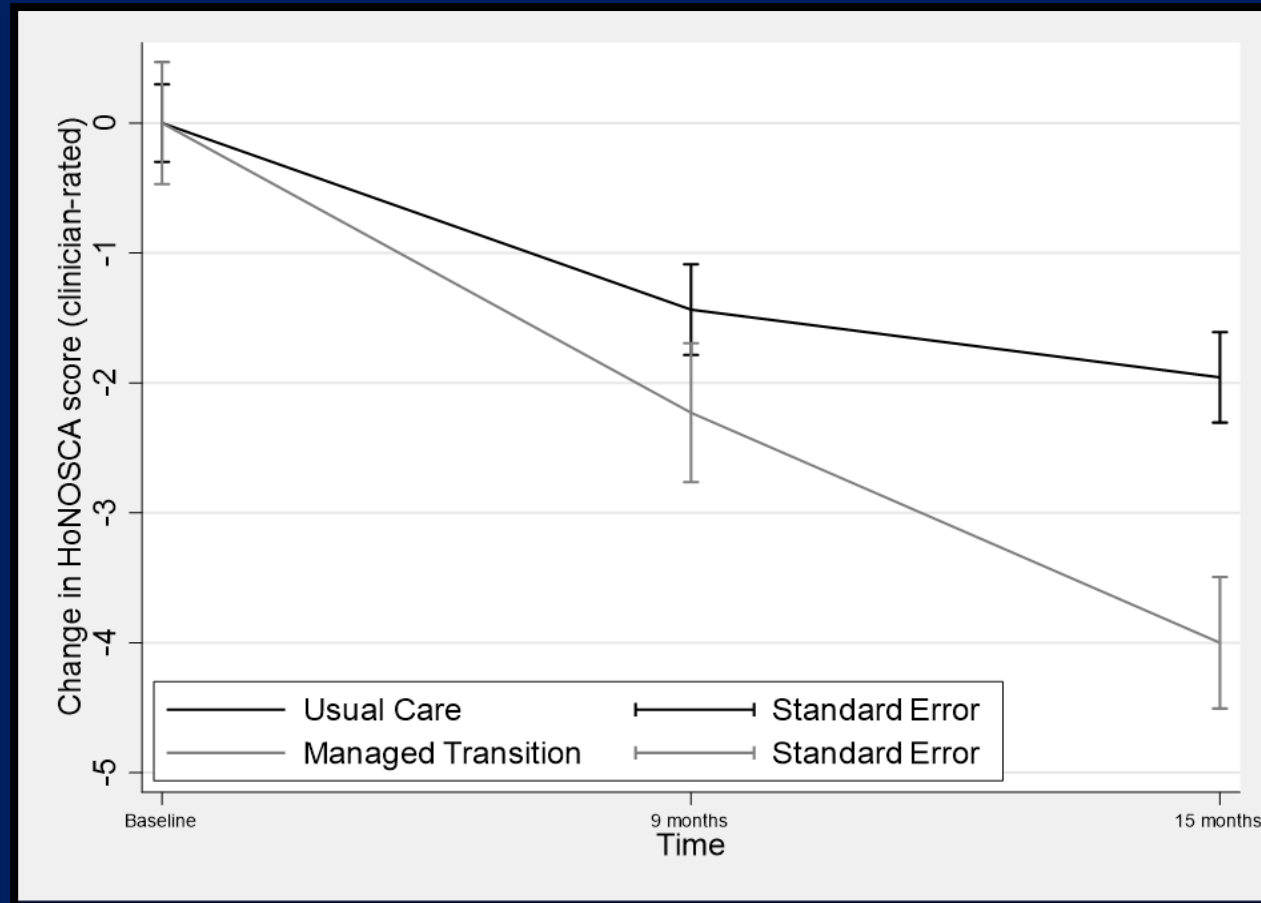


# Emotional/behavioral problems (YSR/ASR)



# Managed Transition - TRAM Guided *(Singh et al, Psych Med 2021)*

mean change in HoNOSCA (CR) scores over time



# NEWS

NOW PLAYING



▶ 9:12

**I'll lose my mental health care when I turn 18. Why?**

🕒 08 Aug

UP NEXT



▶ 2:48

**Cut off at 18: Why sling me out?**

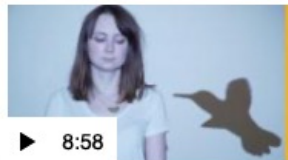
🕒 13 May



▶ 8:56

**I can't lose more friends to suicide**

🕒 05 Jul



▶ 8:58

**When mental health gets physical**

🕒 16 Feb 18



## I'll lose my mental health care when I turn 18. Why?

Thomas says he was close to ending his life a few months ago. He has been receiving mental health care for five years, but has been told his treatment will stop on his 18th birthday.

This is a common problem for young people in the UK. According to a leading expert, thousands of young people "fall off the cliff edge" when transitioning from child and adolescent mental health services to adult mental health services.

Thomas finds out why, ultimately taking his questions to the minister for mental health and suicide prevention.

*Produced by Laura Hearn. Filmed and edited by Tom Heyden. Additional filming by Alice Wright and Tom Beal.*

🕒 08 Aug 2019

[f](#) [m](#) [t](#) [e](#) [Share](#)



**'Bridging the Gap: Optimising transition from child to adult mental healthcare'**

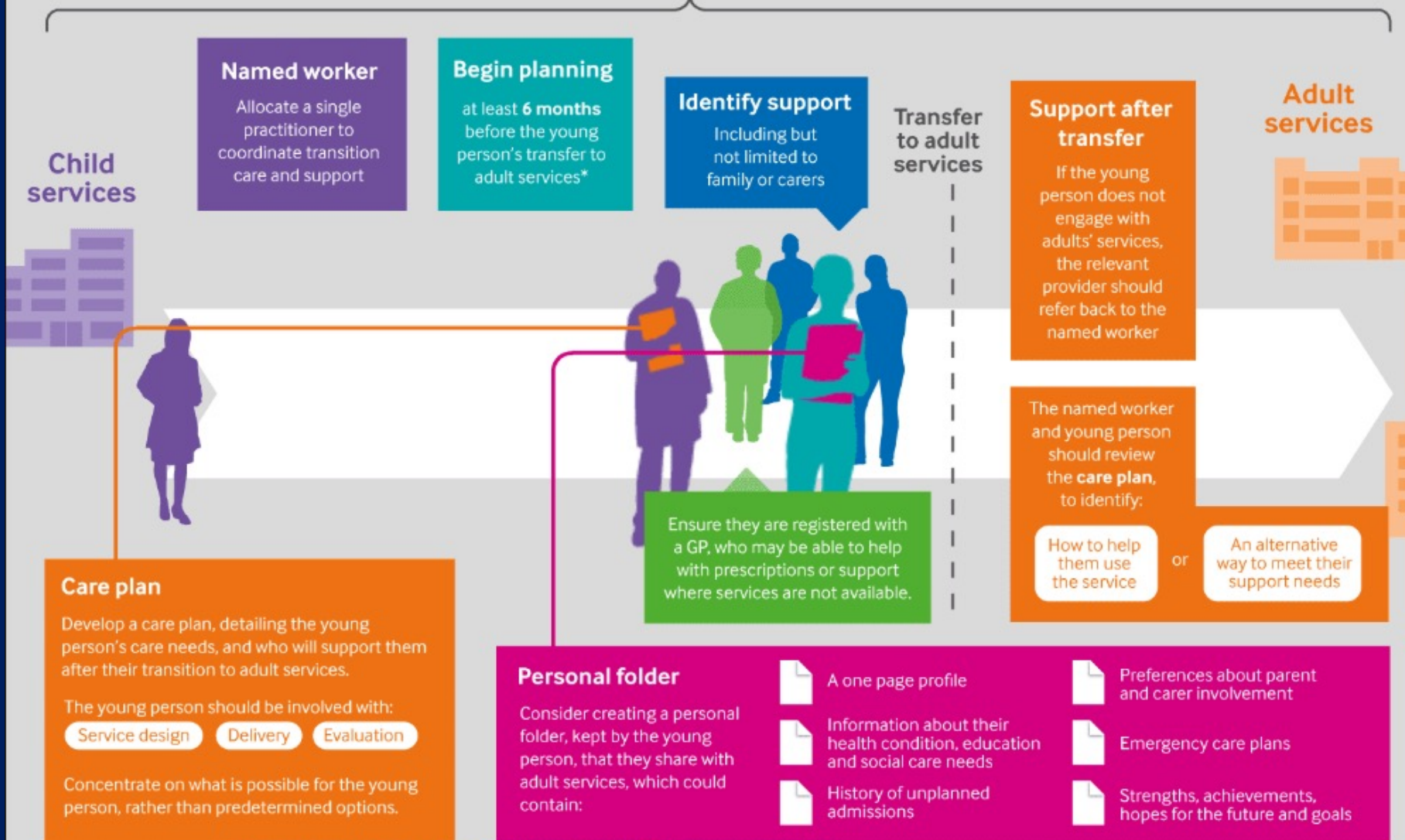
**Meeting organised by GAMIAN-Europe and the European Brain Council**

**Hosted by Tomas Zdechovsky MEP**

21<sup>st</sup> Nov 2017



## Transition process



\* For some conditions, such as arthritis, age 13 or 14 may be more appropriate



## Future in mind

Promoting, protecting and improving our children and young people's mental health and wellbeing



Swaran Singh's research on transitions

Birmingham 0-25

- i. ongoing strategic audits of admissions;
- ii. a co-ordinated outcome focused care plan for each inpatient (this could be part of an Education, Health and Care plan where the child was eligible because of their learning disability);
- iii. regular, comprehensive reviews of the suitability of the placement, against criteria focused on transition outcomes for the child or young person; and
- iv. engagement with the young person and their family.

### Managing transitions

"I had a very bad transition from CAMHS to adult services. One day I was in CAMHS with plenty of support and then the next, the only support I knew of was a crisis number. It took over 6 months for me to have a proper assessment and be assigned a care co-ordinator, by which time I had suffered a complete relapse in my condition."

A young person who took part in the Taskforce engagement exercises.

5.24 The issue of transition for young people is longstanding, but focusing on a moment in time masks the real issue, which is how we ensure better co-ordination of mental health services for young adults.

5.25 All young people face multiple and often simultaneous transitions as they move to adulthood. This can be from school to higher or further education or work. They may be in the process of leaving home or care. The families of those in the armed forces may be particularly affected by multiple moves. Young people transferring from children and young people's mental health services differ

from those leaving physical services in that, for many, adult mental health services are either not available or not appropriate. Adult mental health services are not universally equipped to meet the needs of young people with conditions such as ADHD, or mild to moderate learning difficulties or autistic spectrum disorder.

5.26 For some young people, the nature of adult mental health services and their emphasis on working with the individual rather than a more holistic approach including the family means that young people prematurely disappear from services altogether despite needing further support.<sup>524</sup>

5.27 Youth Information Advice and Counselling Services (YIACs) usually operate over the age of transition, often up to the age of 25. We also note that in some parts of the country, such as Birmingham and Norfolk, there is a move to develop mental health services for 0-25 year olds. This new development will be watched with considerable interest.

5.28 The key components of best practice transition which are valued by both young people and clinicians should be built into Joint Strategic Needs Assessments (JSNAs), joint strategies for young people's and adult services and into all contracts between commissioners and providers of

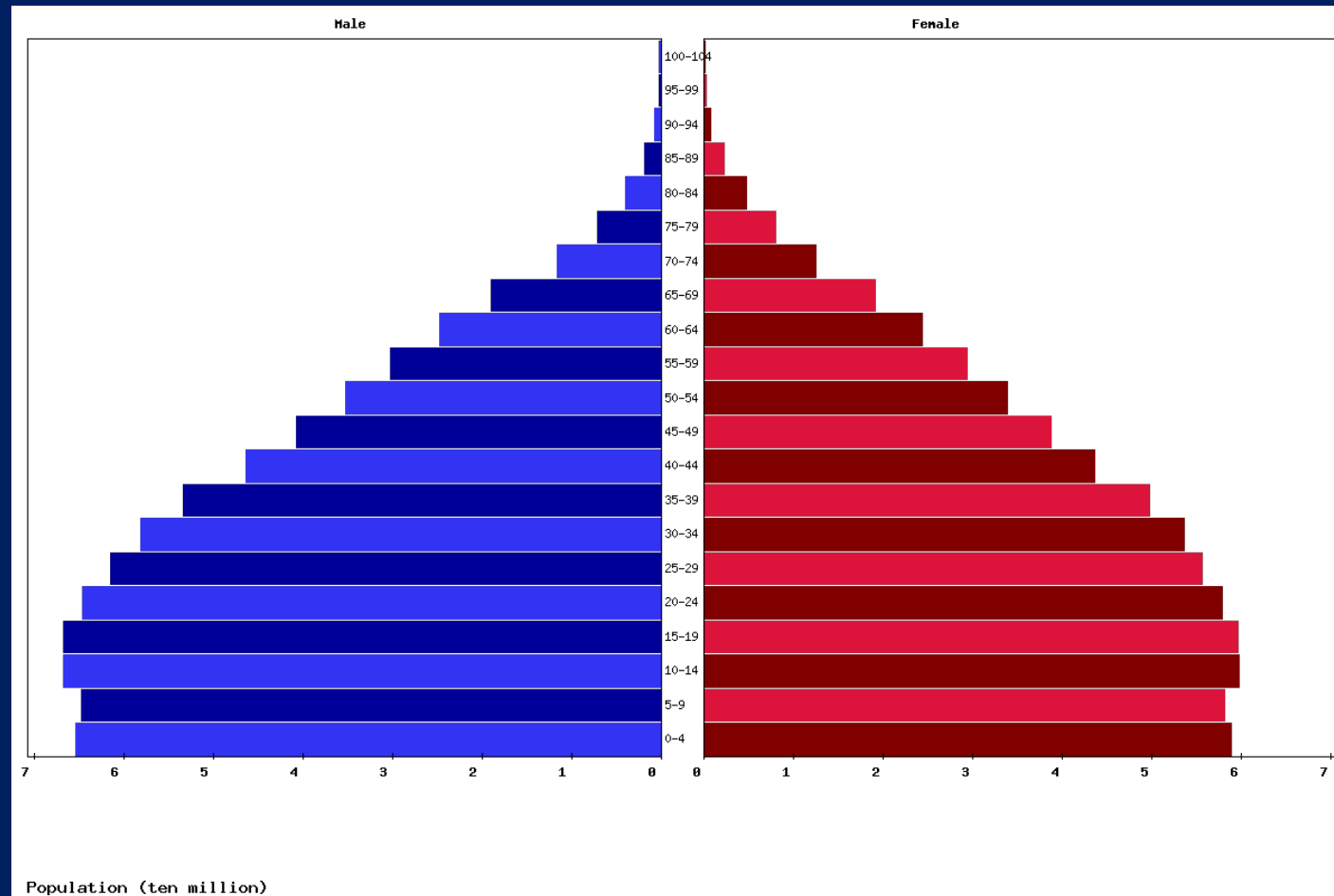
<sup>524</sup> Singh SP, Paul M, Ford T, Kramer T, Weaver T (2008). Transitions of Care from Child and Adolescent Mental Health Services to Adult Mental Health Services (TRACK Study): A study of protocols in Greater London. *BMC Health Services Research* 8: 135.

<sup>525</sup> McLaren S, Belling R, Paul M, Ford T, Kramer T, Weaver T, Hovish K, Islam Z, White S, Singh SP (2013). 'Talking a different language': an exploration of the influence of organizational cultures and working practices on transition from child to adult mental health services. *BMC Health Services Research* 13: 254.

# Where are children and young people?

25% of the world population

90% of <18 live in LMICs *(Kieling et al, 2011)*





MRI studies in youth depression/100,000 youth in each country (Battel et al, 2021)

## Review article

# Relationship between gross domestic product and duration of untreated psychosis in low- and middle-income countries

Matthew Large, Saeed Farooq, Olav Nielssen and Tim Slade

## Background

The duration of untreated psychosis (DUP), the period between the first onset of psychotic symptoms and treatment, has an important influence on the outcome of schizophrenia.

## Aims

To compare the published studies of DUP in low- and middle-income (LAMI) countries with the DUP of high-income countries, and examine a possible association between DUP and per capita income.

## Method

We used six search strategies to locate studies of the DUP from LAMI countries published between January 1975 and January 2008. We then examined the relationship between DUP and measures of economic activity, which was assessed using the LAMI classification of

countries and gross domestic product (GDP) purchasing power parity.

## Results

The average mean DUP in studies from LAMI countries was 125.0 weeks compared with 63.4 weeks in studies from high-income countries ( $P=0.012$ ). Within the studies from LAMI countries, mean DUP fell by 6 weeks for every \$1000 of GDP purchasing power parity.

## Conclusions

There appears to be an inverse relationship between income and DUP in LAMI countries. The cost of treatment is an impediment to care and subsidised antipsychotic medication would improve the access to treatment and the outcome of psychotic illness in LAMI countries.

## Declaration of interest

None.

## COUNTRY PROFILE

# Mental Health in Somaliland: a critical situation

Fatumo Abdi Abdillahi,<sup>1</sup> Edna Adan Ismail<sup>2</sup> and Swaran P. Singh<sup>3</sup>

<sup>1</sup>Speciality Registrar in Public Health, Faculty of Public Health, London, UK. Email: [Fatumaabdi7@gmail.com](mailto:Fatumaabdi7@gmail.com)

<sup>2</sup>Founder and Dean of Edna Adan Teaching Hospital and Edna Adan University, Hargeisa, Somaliland, East Africa

**Somaliland is experiencing an explosion of mental health problems that has received little coverage. The country has experienced devastating civil wars that have resulted in widespread trauma, and the lack of necessary mental health infrastructure is an obstacle to**

the Mental Health Action Plan (2013–2020) also sets a range of targets aimed at achieving equity through universal health coverage.

Given Somaliland's admirable efforts to rebuild and seek international recognition as a peaceful and progressive country in the region,



**Fig. 1**  
Entrance to Mental Health Department, Hargeisa Group Hospital, Hargeisa, Somaliland.

# The scale of the challenge





# BMJ Open Warwick-India-Canada (WIC) global mental health group: rationale, design and protocol

Swaran P Singh ,<sup>1,2</sup> Mohapradeep Mohan ,<sup>1</sup> Srividya N Iyer,<sup>3,4</sup> Caroline Meyer,<sup>5</sup> Graeme Currie,<sup>6</sup> Jai Shah,<sup>3,4</sup> Jason Madan ,<sup>7</sup> Max Birchwood,<sup>1</sup> Mamta Sood,<sup>8</sup> Padmavati Ramachandran ,<sup>9</sup> Rakesh K Chadda,<sup>8</sup> Richard J Lilford,<sup>10</sup> Thara Rangaswamy,<sup>9</sup> Vivek Furtado,<sup>1</sup> on behalf of the WIC Consortium

**To cite:** Singh SP, Mohan M, Iyer SN, *et al.* Warwick-India-Canada (WIC) global mental health group: rationale, design and protocol. *BMJ Open* 2021;**11**:e046362. doi:10.1136/bmjopen-2020-046362

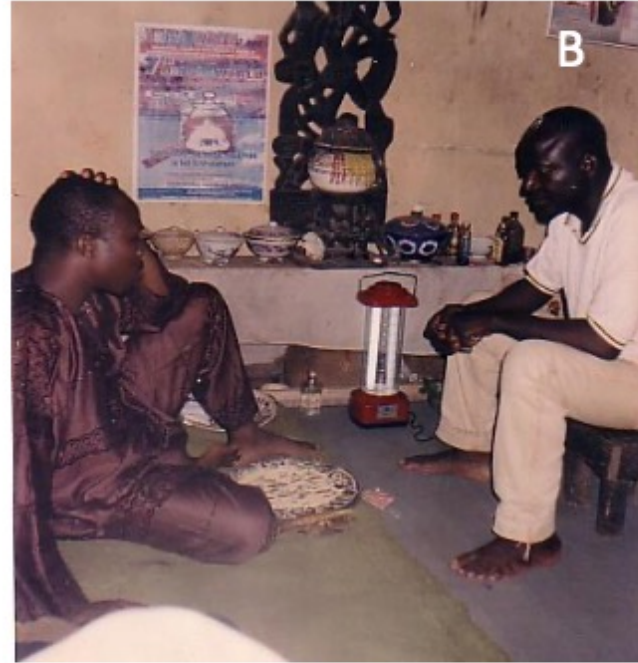
## ABSTRACT

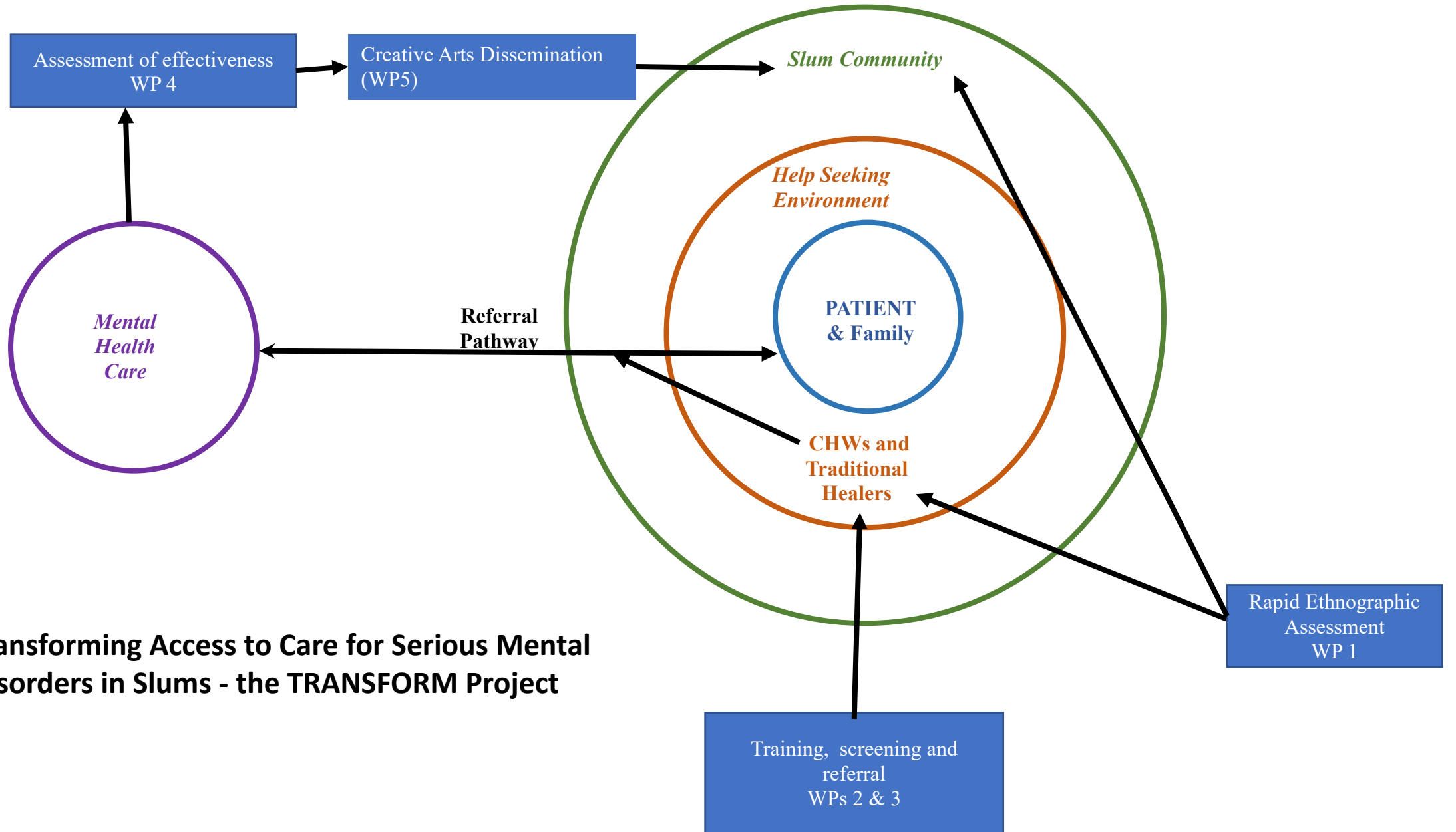
**Introduction** The primary aim of the National Institute of Health Research-funded global health research group, Warwick-India-Canada (WIC), is to reduce the burden of psychotic disorders in India. India has a large pool of undetected and untreated patients with psychosis and a treatment gap exceeding 75%. Evidence-based packages

## Strengths and limitations of this study

- ▶ Warwick-India-Canada (WIC) will develop a bespoke clinical interventions with proven efficacy that is culturally adapted, appropriate, accessible and acceptable.
- ▶ This is the first multisite study to identify barriers







**Transforming Access to Care for Serious Mental Disorders in Slums - the TRANSFORM Project**

# Telepsychiatry





WPA News | [Free Access](#)

## Early intervention in psychosis in low- and middle-income countries: a WPA initiative

Swaran P. Singh, Afzal Javed, [on behalf of the WPA Expert International Advisory Panel for Early Intervention in Psychosis](#) ... [See fewer authors](#) ^

First published: 10 January 2020 | <https://doi.org/10.1002/wps.20708>

The WPA Expert International Advisory Panel includes S. Borgwardt, M. Broome, R. Chithiramohan, S. Farooq, P. French, J.O. Johannessen, R. Krishnadas, E. Iacoponi, S. Lawrie, P. Mallikarjun, S. Marwaha, C. Mohan, H.-J. Möller, S. Rathod, N. Sartorius, F. Schultze-Lutter, T.G. Schulze, A. Soghoyan, N. Stefanis, A. Thampi and J. Walter.



PDF



TOOLS



SHARE

Specialist early intervention in psychosis (EIP) services have been considered the "most

# Adam Smith

An Inquiry into  
the Nature and Causes of

## The Wealth of Nations



Edited and with an  
Introduction, Notes, Marginal Summary, and Index  
by EDWIN CANNAN

With a new Preface by George J. Stigler

***The wealth of a nation  
is the mental health of  
its youth***