

Community Collaboration Helps to Target Early Detection and Intervention for Psychosis

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There is a unique treatment research program in Portland, Maine called the Portland Identification and Early Referral Program, PIER. PIER's mission is to identify young people between the ages of 12 and 25 who might be at risk for psychosis in the Greater Portland area, and then offer appropriate treatment. In August 2006, the Robert Wood Johnson Foundation recognized PIER, under the direction of Dr. William McFarlane, for its pioneering work in the field of early intervention for psychosis by awarding a significant grant to replicate the program in other locations in the U.S.

Following an application process, four sites were chosen in April 2007 to replicate the PIER Program in Sacramento, California; Salem, Oregon; Washtenaw County, Michigan; and Glen Oaks, New York. PIER and the four other sites are now part of a replication study known as the Early Detection and Intervention for the Prevention of Psychosis Program or EDIPPP.

inability to maintain friendships, and difficulty attaining life goals, such as completing school and working. It has been estimated that the cost to society can be higher than \$10 million over the course of an individual's lifetime, especially if they have schizophrenia. When we consider that psychosis can derail a young person's life permanently, it is hopeful to think that offsetting an illness process early in its development is possible.

PIER's outreach effort to educate community members was based on initiatives developed in Australia, Norway, and Denmark — where the focus was to interrupt the progression of schizophrenia and other severe psychotic disorders. PIER's goal was to improve outcomes and prevent the onset of the psychotic phase of those illnesses. The Australian and Norwegian initiatives identified stakeholders outside of the mental health system who could participate in early detection and show commitment to the effort. Stakeholders were recognized as people who were in a unique

them and the PIER staff would develop and lead to early referrals of "at risk" youth. The community education presentations and outreach activities were designed to give specific information about early signs of psychosis, to network with community members outside the mental health system, and to demystify and destigmatize mental illness. These trainings offered important information about the biology of the brain, which raised awareness about brain disorders versus personality disorders. They also offered resource and referral suggestions for stakeholders. The result of PIER's outreach was that school professionals, teachers, health professionals, parents, and mental health practitioners became familiar with PIER's message, knowledgeable about the importance of making early referrals as a deterrent to disability, and learned how to make referrals.

PIER has been designed to respond quickly to referrals and to partner with young persons and their families from the start — through the intake assessment process and then through various client-centered psychosocial interventions, such as family psychoeducation, counseling, supported education, and supported employment. When appropriate, clients have also had occupational therapy assessments to better understand cognitive and functional difficulties — results and recommendations are then shared with the family and treatment team.

Most participants have been on low-dose medications, but overall, their symptoms have subsided as they and their families have learned to keep stress low and identify early signals of symptom recurrence. Research has been an important component of the program because much still needs to be learned about the early phases of illness, what works in terms of interventions, and what individuals and their families need. The result is that the majority of young people who have participated in the program have stayed in school,

Psychotic illnesses are disabling and expensive. It has been estimated that the cost to society can be higher than \$10 million over the course of an individual's lifetime, especially if they have schizophrenia.

Starting in December of 2000, the multidisciplinary PIER team began educating community stakeholders about the early signs of psychosis. Psychotic illnesses, such as schizophrenia, are known to be disabling and expensive in multiple ways. There is a tremendous cost to individuals with these illnesses, as well as to their families and communities, e.g., lost productivity, increased family stress, increased physical illnesses, diminished self-esteem, increased dependency, repeated need for hospitalizations,

position to identify young people demonstrating the early mental changes predictive of a developing psychosis. Stakeholders were also "the general public." The PIER team made the assumption that certain groups of professional and lay people spent more time with teens and young adults, and would therefore notice early symptoms and respond more quickly.

It was reasoned that if specific community professionals were offered information and support, collaborative relationships between

graduated, held jobs, maintained relationships, participated in extra-curricular activities, and set goals for the future.

The M3P (Michigan Prevents Prodromal Progression) Program is one of the EDIPPP replication sites and is located in the diverse community of Washtenaw County, Michigan. M3P prepared for outreach activities by completing a community mapping tool, which allowed it to prioritize efforts.

Community outreach started in the spring of 2007 and to date, has reached seven public high schools, six middle schools, several primary care physicians and nurse managed clinics, the local community college, as well as two major universities and two major health systems. In most instances, outreach to a school involves a minimum of two to three visits, first with the counselors or social workers, followed by the administrators and teachers, and frequently, a request to meet with various student groups. Outreach efforts have extended beyond the schools to include student advocacy centers, churches, multi-cultural groups, the local National Alliance for Mental Illness chapter, police, campus security staff, resident assistants, the local health department, veteran services, and county administrators.

Part of M3P's strategy is to create extensive and inclusive outreach opportunities. Outreach targets include any professional or community group that encounters those aged 12 to 25. When reaching out to a wide variety of community members, it is important to tailor the information presented, including the development of "leave behind" materials. For example, what one would present to a group of teachers or counselors would be different from what is presented to hospital staff, students or the police. The most effective leave behind material has been the "youth brand" bookmark, which includes the early warning signs of early psychosis and program information. When crafting a message, M3P considers the age of the target population, as well as the circumstances under which the community group encounters them. The community response to date has been remarkable. A local school principal has requested weekly M3P onsite office hours for support and screening of students. This is a model that truly focuses on health promotion and secondary prevention services.

PIER's community outreach has helped school professionals, teachers, health professionals, parents, and mental health practitioners become knowledgeable about the importance of making early referrals as a deterrent to disability.

M3P is a replication site, and therefore uses the same content for its outreach materials and messages to audiences that PIER and the other program sites use. An important part of the research is to better understand what messages work with what audiences in different communities, especially in culturally diverse communities. The EDIPPP "youth brand" bookmarks are visually appealing and carry simple messages about getting help early and recognizing the early warning signs that "something's not quite right." To date, these bookmarks have been instrumental in helping community members of all ages gather basic information about the importance of dealing with symptoms early, along with going to the website to gather further information.

If most citizens can understand that there are very early signals that point to brain changes, then perhaps more individuals will get help early and avoid a major mental illness.

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Elizabeth Spring, R.N., B.S.N, M.S., Deputy Director of M3P, has training and expertise in health promotion, prevention, engaging at risk populations and program development and implementation. She is also a part-time faculty member at Washtenaw Community College, teaching mental health nursing and has an adjunct appointment at the University of Michigan School of Nursing.



» EARLY SIGNS OF PSYCHOSIS

In combination...

- Being fearful for no good reason
- Jumbled thoughts and confusion
- Feeling "something's not quite right"
- Declining interest in people, activities, and self-care
- Hearing sounds/voices that are not there
- Trouble speaking clearly

❖ **Don't ignore the early symptoms!**
www.preventmentalillness.org