

# What do we know about the risks to young people using inpatient mental health services?

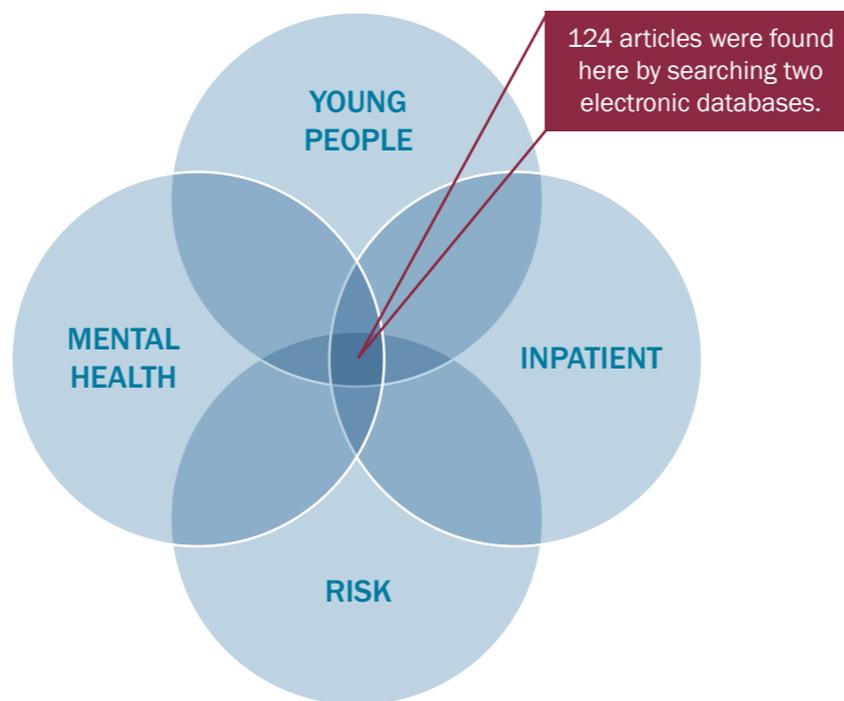
## ACCESSIBLE SUMMARY



In our two part study we brought together evidence in the area of risk for young people admitted to mental health hospital. In the first part of our study we searched two electronic databases, each database containing information on published health care research articles. We found a total of 124 relevant articles in the area illustrated in Figure 1 below.

FIGURE 1

Phase 1 search

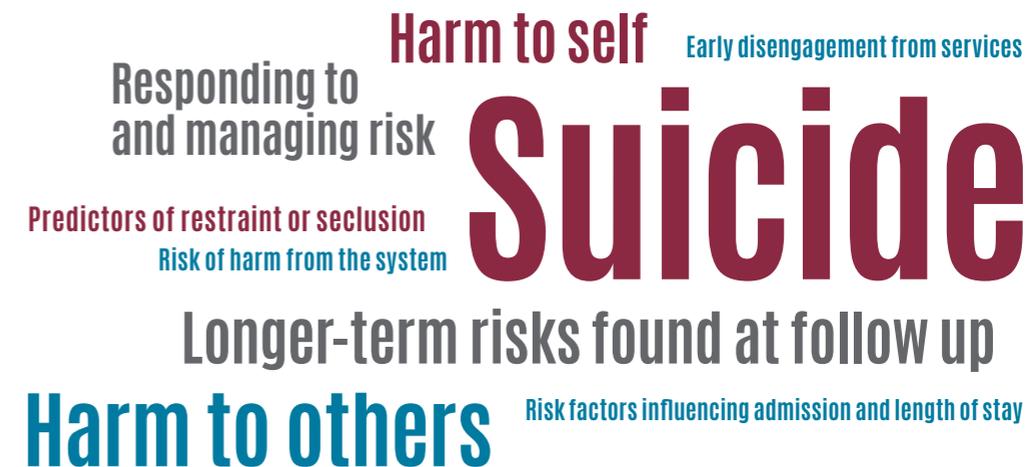


Most of the articles we found in this first phase of our study were concerned with clinical risks, such as the risks of suicide. Using diagrams we brought these articles

together under a number of themes, which we reproduce in Figure 2. The size of each word reflects the number of articles grouped in each category.

FIGURE 2

Phase 1 themes



Young people who had been inpatients in mental health hospital, carers, managers and professionals helped us prioritise the types of risk we should concentrate on in the second part of our study.

Our top two priorities were the risks of dislocation and contagion. We used the word 'dislocation' to refer to the risks of being removed from normal life, of experiencing challenges to identity and of being stigmatised. We used it to refer to the risks to friendships and to families, and to education.

We used 'contagion' to refer to the risks of learning unhelpful behaviour and making unhelpful friendships.

We searched 17 electronic databases and a large number of websites for evidence in these areas. We asked hospital staff to send us information on how they managed these risks and we searched individual journals and reference lists. In total we identified 40 published articles to include in our review and 20 policy and guidance documents. The quality of the research studies we found varied.

We grouped all of this evidence together using themes, shown in Figure 3.

## FIGURE 3

Phase 2 themes: Dislocation and Contagion

### Dislocation

**Normal Life**

- i) Everyday life and interactions in hospital
- ii) Missing out on life outside and transition home

**X Stigma**

- i) Young people's experiences during admission
- ii) Young people's experiences post-discharge

**? Identity**

- i) Mental health problems as identity-changing
- ii) Responding to threats to identity

**Education**

- i) Education provision and facilities
- ii) Quality of inpatient education
- iii) Academic progress
- iv) Re-integrating with school post discharge

**Friends**

- i) Relationships with young people outside hospital
- ii) Relationships with young people in hospital

**Families**

- i) Impact on family relationships
- ii) Family involvement
- iii) Maintaining contact with families

### Contagion

- i) Experiences of contagion
- ii) Evidence of contagion

Although we found evidence of risk to young people in these areas we found little evidence to guide and improve practice and services. The risks of dislocation and contagion are important, but new research is needed to inform how staff might understand, identify, assess and manage them.

## Research team

### Dr Ben Hannigan

School of Healthcare Sciences, College of Biomedical and Life Sciences, Cardiff University

### Deborah Edwards

School of Healthcare Sciences, College of Biomedical and Life Sciences, Cardiff University

### Dr Nicola Evans

School of Healthcare Sciences, College of Biomedical and Life Sciences, Cardiff University

### Elizabeth Gillen

Information Services, Cardiff University

### Dr Mirella Longo

College of Human and Health Sciences, Swansea University

### Professor Steven Prymachuk

School of Nursing, Midwifery and Social Work, University of Manchester

### Dr Gemma Trainor

Greater Manchester West Mental Health NHS Foundation Trust

## Where can I find out more?

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[www.journalslibrary.nihr.ac.uk/hshr/volume-3/issue-22](http://www.journalslibrary.nihr.ac.uk/hshr/volume-3/issue-22)

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## Department of Health disclaimer

The views and opinions expressed therein are those of the authors and do not necessarily reflect those of the Health Services and Delivery Research Programme, NIHR, NHS or the Department of Health.

