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The primary aim of this research is to investigate the long-term effectiveness of a brief intervention model, delivered by Jigsaw (https://www.jigsaw.ie/), in reducing psychological distress, and strengthening psychological wellbeing. This research will also examine, using statistical modelling, the association between positive outcomes for young people and key variables such as socioeconomic status, gender, ethnicity, length of service engagement and baseline level of distress.

Mental health difficulties represent the largest health difficulty for young people, yet access to youth mental health supports is poor (Kessler et al., 2012; McGorry, 2007). As a consequence, a number of innovative healthcare models have been developed, including in Ireland (Jigsaw), Australia (Headspace), and Canada (ACCESS OM). However, very little research on these services and their associated treatment outcomes has been conducted to date (Hetrick et al., 2017). Jigsaw was established in 2006 and provides support to young people, aged 12-25 years, with mild to moderate mental health difficulties. Information on ~20,000 young people who have engaged with Jigsaw between 2007 and 2018 have been captured using the Jigsaw Data System (JDS), an online platform which serves as a case management and evaluation tool. Ascertained data includes demographic details, presenting issues, referral pathways, goals set, levels of distress, psychological wellbeing, and clinical case notes. To date, only limited analyses examining the profile of young people engaging with Jigsaw has been carried out (e.g. O'Reilly, Ilback, Peiper, O'Keeffe & Clayton, 2015) and the longer-term effectiveness of the primary care brief intervention model used is unknown. To address these knowledge gaps, three studies will be conducted. Study 1 will identify the demographic and clinical factors that predict level of distress at first presentation to a Jigsaw service, using distress as a primary outcome. Study 2 will investigate the model's long-term effectiveness of this intervention model in improving mental health outcomes. Finally, Study 3 will use qualitative methods to examine young people's experiences of Jigsaw's approach to mental health care. The results have important implications for our knowledge about youth mental health care internationally and for future primary care service delivery.