

Patient Characteristics and Positive Outcomes Associated with a Novel Youth Inpatient Program for Concurrent Disorders

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Introduction

- Concurrent substance use and mental health disorders in youth is a major public health concern and requires specialized and comprehensive services.
- Patients with concurrent disorders have been historically underrepresented in research and service provisions as mental health and substance use services traditionally operated separately⁷, thus providing a gap in published literature regarding patient characteristics and program efficacy within the context of concurrent disorder treatment.
- The Carlile Youth Concurrent Disorders Centre (CYCDC), located in North Vancouver, British Columbia, offers a tertiary inpatient concurrent disorders program for adolescents aged 13-18 years old that reside within the Vancouver Coastal Health community of care.
- CYCDC is a 10-bed, three week, inpatient unit program with an interdisciplinary team care model consisting of child and youth psychiatry, pediatrics, clinical psychology, social work, occupational therapy, nursing, youth care work, peer support work, teachers; as well as various therapeutic facilitators with skill sets ranging from art therapy, meditation, music therapy, Indigenous talking circles, yoga, to twelve step programming.

The purpose of this program evaluation was to assess mean differences in youth quality of life and suicidality from admission to discharge.

Measures

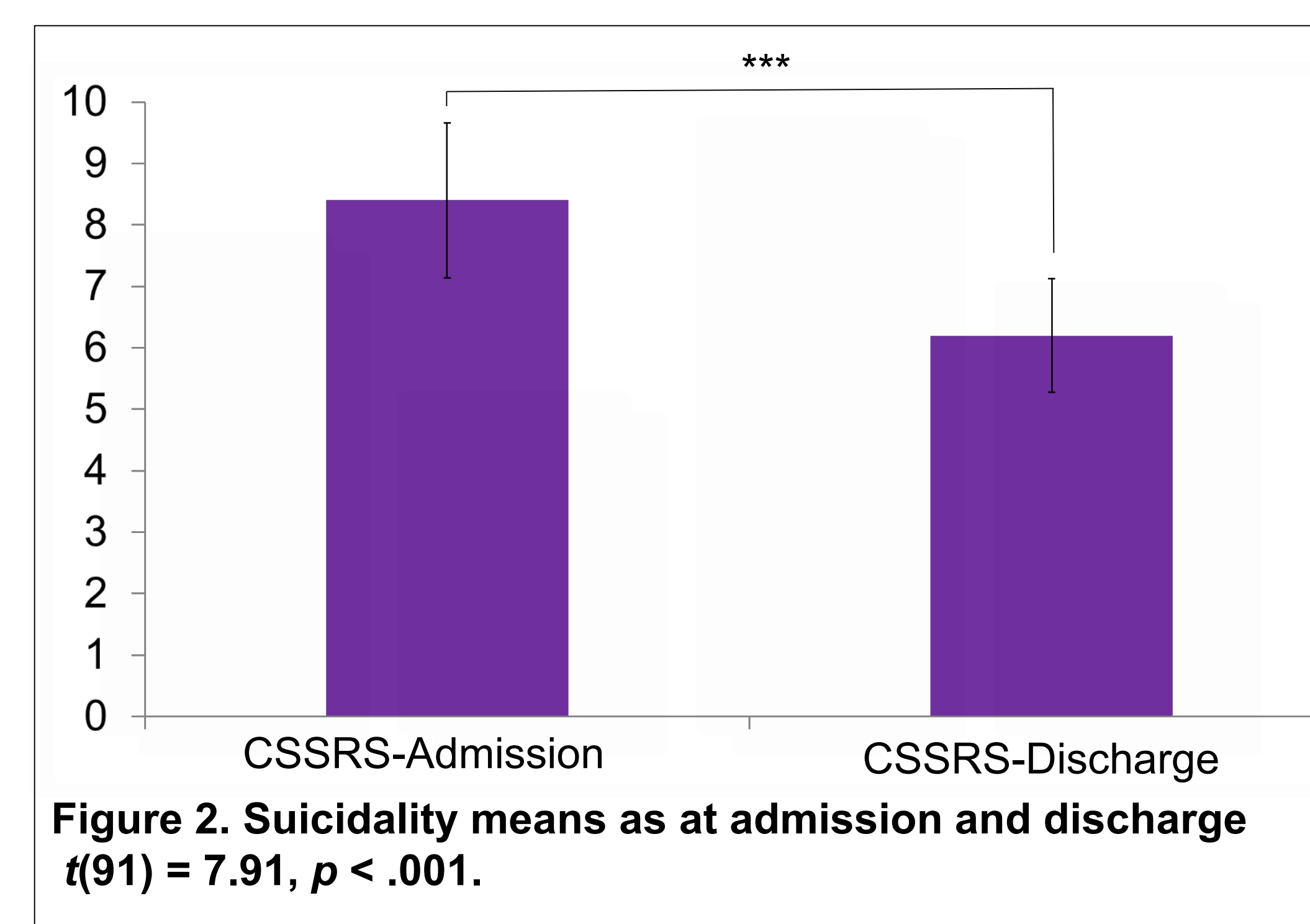
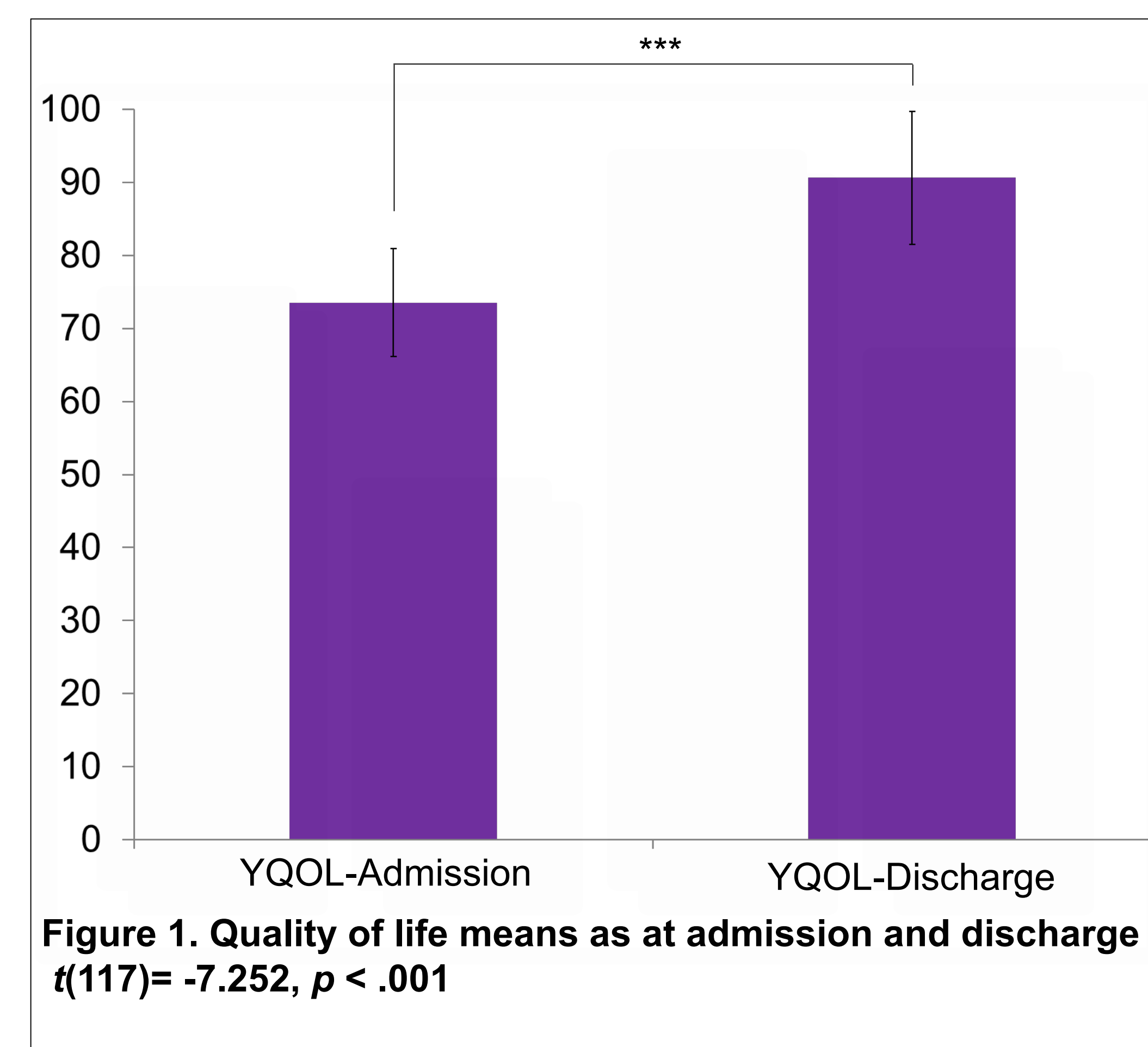
- **Quality of Life.** The Youth Quality of Life Instrument (YQOL)-Short Form measures generic quality of life in youth aged 11-18 years. This measure was completed on admission and before discharge.
- **Suicidality.** The Columbia Suicide Severity Rating Scale (C-SSRS) is designed to quantify the severity of suicidal ideation and behaviour. This measure was completed on admission and before discharge.

Results

- Data from 347 admissions from April 2017 up until December 2020 were included in this program evaluation.
- Patients identifying as female had significantly lower quality of life, higher suicidality, and higher prevalence of adverse childhood events compared to those identifying as male.
- Patients admitted to this program had significantly higher quality of life ($d = .65$) and significantly lower suicidality ($d = .86$) upon discharge, compared to admission.

This program evaluation affirms the effectiveness of a short-term comprehensive inpatient program in treating youth with complex concurrent disorders.

Figures



Conclusion

- The results from this intra-unit program evaluation emphasize that a novel inpatient model for the treatment of concurrent disorders in adolescents aged 13-18 is effective and influences clinical variables that are related to positive health outcomes.

Reference / Bibliography

1. Rush B, Urbanoski K, Bassani D, Castel S, Wild TC, Strike C, Kimberley D, Somers J. Prevalence of co-occurring substance use and other mental disorders in the Canadian population. *Canadian Journal of Psychiatry*. 2008;53(12):800-809.
2. Ayala N.C., Edwards T.C., Patrick D.L. (2014) Youth Quality of Life Instruments. In: Michalos A.C. (eds) *Encyclopedia of Quality of Life and Well-Being Research*. Springer, Dordrecht.
3. Moberg, D.P., Hahn, L. The Adolescent Drug Involvement Scale. *Journal of Adolescent Chemical Dependency*. 1991; 2(1), 75-88.
4. Posner, K., Brown, G. K., Stanley, B., Brent, D. A., Yershova, K. V., Oquendo, M. A., Currier, G. W., Melvin, G. A., Greenhill, L., Shen, S., & Mann, J. J. The Columbia-Suicide Severity Rating Scale: initial validity and internal consistency findings from three multisite studies with adolescents and adults. *The American Journal of Psychiatry*. 2011;168(12), 1266-1277.

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