
This study highlights the important role that professionals in various public service sectors play in helping youth with emotional and behavioral problems receive mental health services. Findings indicate that professionals who come into contact with youth (e.g., physicians, social workers, teachers, and police officers, etc.) are most likely to refer youth for mental health services when they feel capable of making a mental health assessment of the child, and when they are familiar with the mental health services available in the community for that child. This study reveals that the combination of assessment skills and knowledge of referral sources plays a greater role in helping youth receive services than do youths’ own self-reports of internalizing and externalizing problems.

The authors report on the Gateways and Pathways Project (GAPP), conducted in 1996. The GAPP study builds upon the findings of the Youth Service Project (YSP), which reported on youth ages 14-18 who were already involved with four public service sectors (i.e., education, health services, juvenile justice, and child welfare) in the city of St. Louis (see Data Trends #28). For the GAPP study, 282 youth from the YSP sample were interviewed for self-reported mental health problems and for names and addresses of the agencies or professionals from whom they had received help with these problems. The authors refer to the agencies or professionals reported by the youths as “providers,” and write that “[p]roviders from these sectors often have the first contact with the youth, identify the problem, provide some immediate services, and/or refer the youth to psychiatric or other specialty mental health services” (p. 142).

The 282 youth reported that they had received “some help in the last six months” from a total of 533 different providers, out of which the authors were able to locate 364. These providers were sent surveys to assess their level of formal education or in-service training in mental health issues; the degree to which they had connections with mental health resources in the community; and other characteristics including treatment and referral practices. Of the 222 providers who responded to the survey, about 50% were associated with the education sector. Almost 20% were from the mental health sector, with general health providers care the third largest responding group (12.4%), followed by juvenile justice (11%), and child welfare (7.4%).

As would be expected, respondents with professional backgrounds in psychiatry, medicine, psychology, and social work had formal training in mental health interventions. Yet professionals with backgrounds in education, counseling, and coaching received “minimal” formal training in mental health issues, and those with backgrounds in policework reported no formal training. With regard to informal training, half of the providers reported an average of 14 hours of in-service training within the last 12 months. The types of in-service training reported and the percentage of providers who had received the training were as follows: assessment and diagnosis (39%), intervention (24%), general mental health (24%), and adolescent development (35%).

Professionals with mental health backgrounds or in-service training were found to be very likely to refer youth for services, and those who reported both training and an on-going connection with mental health service providers were the most likely of all respondents to refer youth for services. Nevertheless, the providers surveyed for this study reported having contacts with only about one-fourth of the area’s inpatient and outpatient resources. The most often reported contacts were with school psychologists, tutors, psychiatric hospitals, residential treatment centers, professional counselors, and probation officers.

In conclusion, professionals who serve children in everyday settings such as schools and neighborhoods are increasingly being called upon to identify youth with possible mental health problems and to play a role in seeking help for these youth. In-service training for professionals who see youth on a daily basis, and training that enables them to become familiar with mental health resources in the community, are crucial components to the ongoing attempt to bridge the gap between assessment and receipt of services for children and adolescents with emotional disturbances and their families.