Key Concepts in Early Psychosis Care

Steven Adelsheim, MD
January 13, 2022

Disclosure Statement

- Faculty Disclosure Statement: As a jointly accredited provider of continuing education, the IHS Clinical Support Center must ensure balance, independence, objectivity, and scientific rigor in its educational activities. Course directors/coordinators, planning committee members, faculty, reviewers and all others who are in a position to control the content of this educational activity are required to disclose all relevant financial relationships with any commercial interest related to the subject matter of the educational activity. Safeguards against commercial bias have been put in place. Faculty will also disclose any off-label and/or investigational use of pharmaceuticals or instruments discussed in their presentation. All those who are in a position to control the content of this educational activity have completed the disclosure process and have indicated that they do not have any relevant financial relationships or affiliations with any manufacturers or commercial products to disclose.
- There is no commercial interest support for this educational activity.

Disclaimer

The views expressed in this presentation are those of the speaker and do not necessarily represent the views, policies, and positions of the Indian Health Service (IHS), or the U.S. Department of Health and Human Services (HHS).

Personal Disclosures

- I am a cisgender male & a 6th generation Jewish Pittsburgher
- I am a father of 4 in a blended family
- There is formally diagnosed mental illness in every generation I know of within my extended family
- I have sought out and received my own mental health care
- I am aware that I am grounded in my own cultural and personal biases and am working to better understand them and come to my work with greater awareness and sensitivity.
- I continue to work to improve my own cultural humility and to break down hierarchies in healthcare delivery systems.
Learning Objectives
At the end of this presentation, participants will be able to:
- Recognize the concept and components of clinical high risk and early psychosis programs.
- List three practical therapeutic approaches for working with youth presenting clinically with early psychosis.
- Acquire new knowledge in understanding early psychosis within an American Indian and Alaska Native cultural context.

Cultural Considerations in Early Psychosis
- The concept of psychosis in American Indian/Alaska Native communities is controversial
- Western medicine approaches to care tend to ignore cultural aspects and understanding of spiritual experience
- We need to better understand the individual and family interpretations of voices, visions, and strongly held beliefs across all cultures

What is psychosis from the Western medicine perspective?
Any number of symptoms indicating a loss of contact with reality, including:
- **Hallucinations**: most often hearing voices or seeing visions
- **Delusions**: false beliefs or marked suspicions of others
- **Associated features**:
  - Neurocognitive impairment
  - Behavioral and emotional changes
  - Disordered speech
  - Sleep difficulties

Duration of Untreated Psychosis (DUP) and Outcome
Shorter DUP is associated with:
- Better response to anti-psychotics
- Greater decrease in both positive and negative symptom severity
- Decreased frequency of relapse
- More time at school or work
- Overall improved treatment response over time
Slido Q1: “Do American Indian and Alaska Native youth experience psychosis?”


RAISE Early Treatment Program

After 2 years, Coordinated Specialty Care was superior to usual community care on:
- Engagement in treatment
- Quality of life
- Symptomatic improvement
- Involvement in work or school
- Cost-effectiveness

CSC worked better for patients with a shorter duration of untreated psychosis

Number of Native American participants in the treatment arm was certainly less than 10% but not named in the report


Coordinated Specialty Care

Early Intervention Programs, 2008

August 2008 – 12 clinics
Understanding the individual’s and family’s interpretations of the person’s experience within their own cultural, community and family context

Cultural-Bio-Psycho-Social Context

Questions to consider:
- How does the identified client understand their experience?
- Are there functional changes they are experiencing they want help with?
- How might their family interpret what is happening and what support is needed?
- How can I, as a health care provider, support the person in their exploration of what is happening and what support, if any, is desired?

Critical Questions in Early Psychosis Care

- What are healing models within each community?
- To what degree are these models jointly embraced by various family members?
- If psychotropic medication is being discussed, how to fit meds into the individual and family system and the entire intervention process?
- How do we define “family education and support” within different communities and cultural groups?
- What does peer and family support look like across different cultural groups and communities?
- How do we best support individuals in their own interpretations of their experience and support each person on their path to healing?
Opportunities for Early Psychosis Program Development in AI/AN Settings

• Each state receives a 10% addition to their federal mental health SAMHSA block grant for Early Psychosis Care
• Over the current years, states are receiving these targeted funds several times over
• Almost none of these funds have found their way to AI/AN programs
• If interested, an opportunity to reach out to access these funds and develop culturally appropriate models of care

4th First Episode Psychosis Conference March 10-11, 2022

• Sponsored by PEPPNET, NIMH, SAMHSA, & MHTTC Network
• Focus on supporting all members of Early Psychosis clinical teams, ranging from peer & family support specialists to supported education/employment to behavioral health team members
• Information: https://app.smartsheet.com/b/form/fa5e9f0d59df4710aa3f1b21a20f275d
• PEPPNET: https://med.stanford.edu/peppnet.html

References


Presenter Contact Information

• Steven Adelsheim, MD
• Director
• Stanford Center for Youth Mental Health and Wellbeing
• sadelsheim@stanford.edu
• 650-725-3757