



Access Early Intervention: Research Summary

The Problem:

Many children in regional and rural communities have treatable mental health problems.....few receive treatment.

Mental health problems have their origins in childhood: The majority of mental health expenditure is targeted at adults, but most problems begin in childhood. Conduct problems (CP) are the most frequent cause of referral to child/adolescent mental health services and the most reliable precursor of all adult mental health issues.

There is an effective evidence-based treatment for these children, but.....

Few people access an evidence-based treatment: In Australia, less than 24% of children who require treatment access evidence-based interventions (National Mental Health Survey: Sawyer et al., 2000). The percentage for rural children accessing treatment is far lower. The main reason for this is a lack of available local services.

Our solution:

RFW and the University of Sydney are partnering to develop and test an e-health intervention for child conduct problems – ACCESS EI

Supported by a National Health and Medical Research Council (NH&MRC) Partnership Project Grant, Royal Far West has partnered with Professor Mark Dadds and his team over 5 years to develop, implement and evaluate a therapist-assisted online health intervention for children (aged 3-9) with conduct problems in regional and rural areas.

Phase 1 involved developing, implementing and evaluating Access EI as an innovative, e-health intervention for rural families of children with conduct problems.

Phase 2 aimed to increase the level and sustainability of access to treatment providing training to a broad base of clinicians to enable them to provide support to rural families with children with conduct problems.

The research aims to evaluate the efficacy of the AccessEI model in a randomised controlled trial compared with treatment-as-usual. Results will be published late 2018.

The Outcomes:

This research aims to build the evidence based around e-health interventions for conduct problems and deliver a tangible improvement in outcomes for children with conduct problems in rural and remote communities

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