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## Do Adult MH Services Need to be Developmentally Appropriate?

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# Do Adult Mental Health Services Need to be Developmentally Appropriate?

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## INTRODUCTION

### Background

- State level adult mental health administrators express little belief in needing developmentally appropriate services for *young* adults, and few such programs exist across the country

### Study Questions

- Does individual functioning differ across adult age groups within individuals with psychiatric disorders?
- Is the rate of developmental change different in younger than older adults with psychiatric disorders?

### Statistical Methods

- Weighted data-nationally representative (Kessler, 1994).
- Preliminary findings (unadjusted variance)
- Question 1** 1st 2 age groups (younger) & 2nd 4 age groups (older) compared with Chi-square
- Question 2** Multiple regression and Quangles

## Methods

### National Comorbidity Study

- Nationally representative household sample (n=8,098)
- Used CIDI to assess DSM-III-R disorders
- Interviews conducted 1990 - 1992
- Ages 15-54

### Quangles?

- Detects a single shift in mean level of a sequence of observations (e.g. rates over an age range).
- The observed rates for each age produce a sequence of rates over the age range, with a minimum and maximum rate value.
- Rates (e.g. not working) are transformed into an angle  $\Theta$ , by the formula:  

$$\Theta = \pi/2 + (\pi * (\Delta(t,k) - \min) / (\max - \min))$$
- A unit vector is then constructed, with co-ordinates (cos( $\Theta$ ), sin( $\Theta$ )), for each rate and these vectors are summed and plotted.

Kott, Samuel, and Norman L. Johnson, eds. *Encyclopedia of Statistical Sciences*. New York: J. Wiley, 1981

### This Analysis

- 1110 subjects with a current psychiatric diagnosis
- Significant age differences in race but not gender see *Table 1*

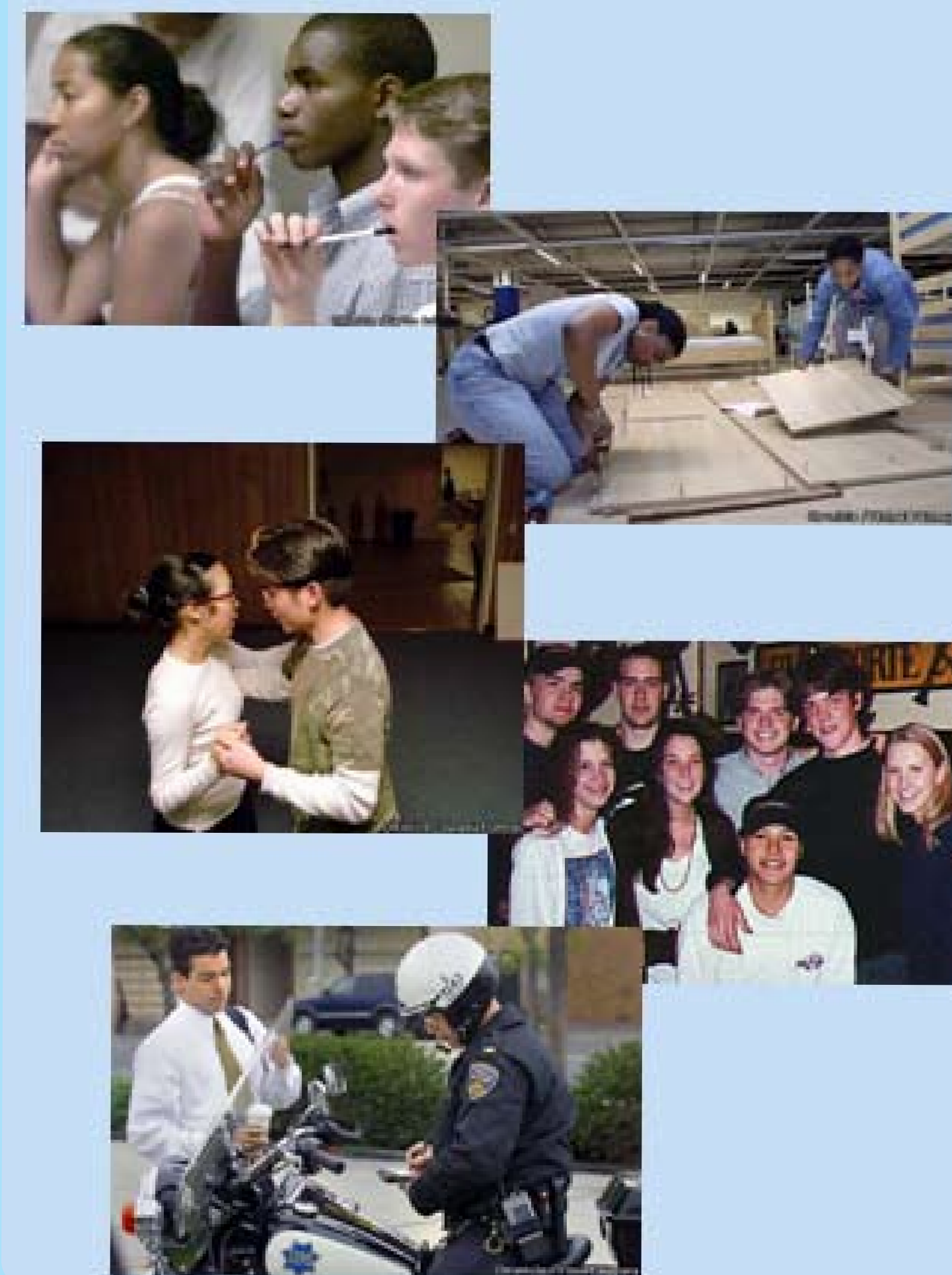
Table 1  
Demographics by Age Group

	% of age groups					Total
	18-21 yr olds N=174	22-30 yr olds N=372	35-40 yr olds N=228	41-45 yr olds N=150	46-50 yr olds N=130	
White Non*	67.8	72.3	78.9	80.0	80.8	75.9
Hispanic						
Black	10.9	13.2	11.4	7.3	9.2	10.8
Hispanic	13.8	10.5	7.5	10.0	6.2	9.5
Other Race	7.5	4.0	2.2	2.7	3.9	3.9
Male†	40.2	32.5	38.6	35.6	30.2	28.8

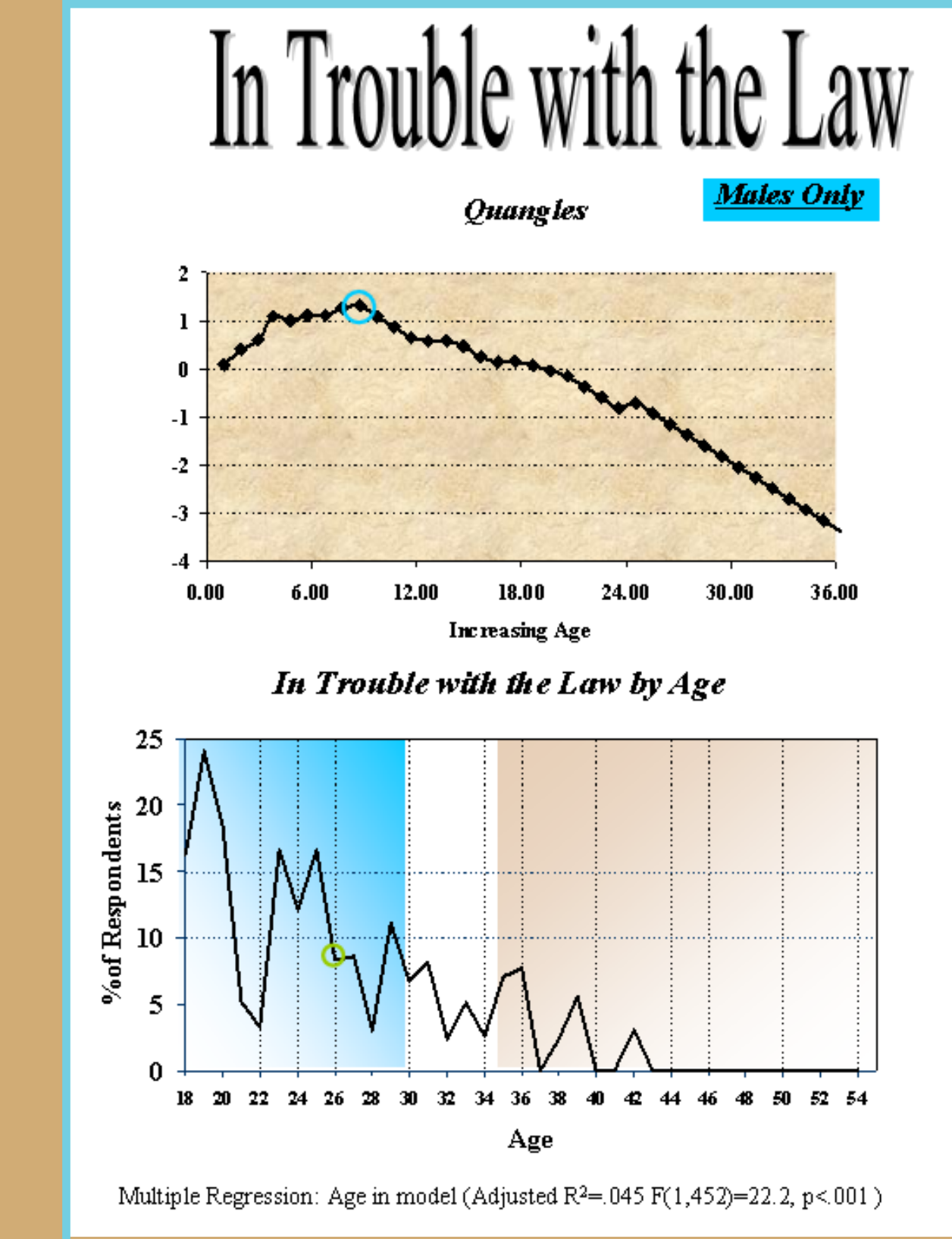
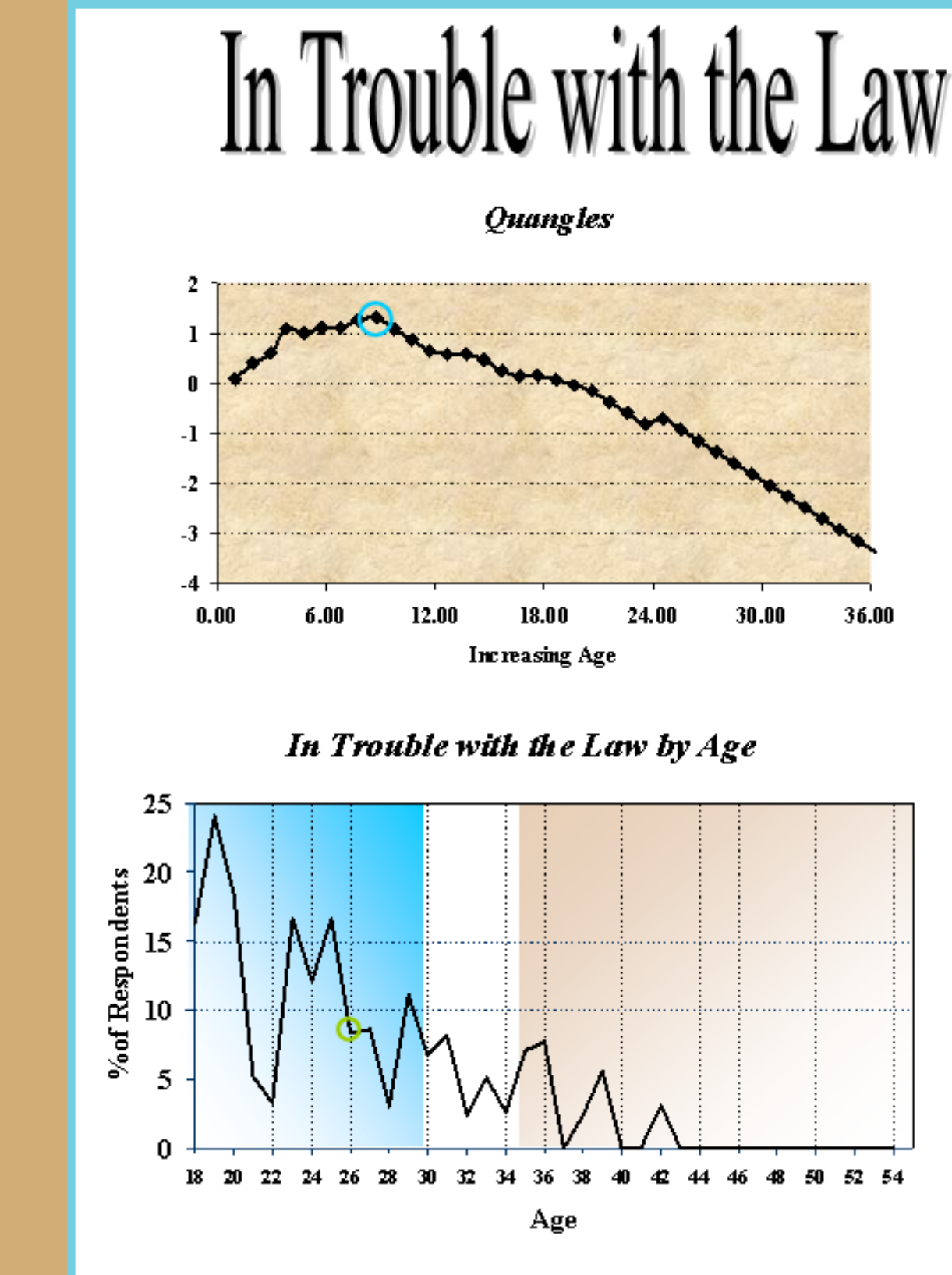
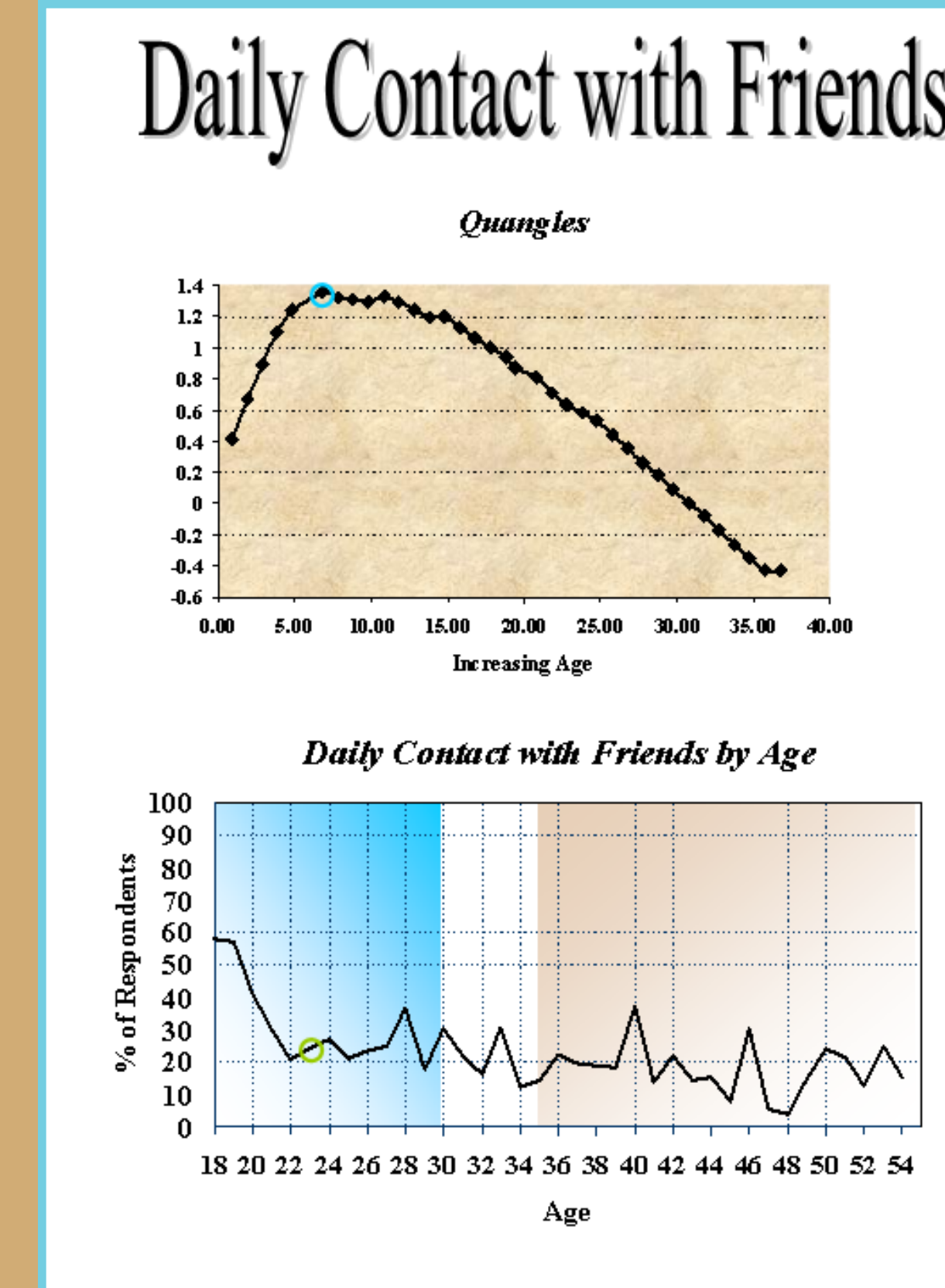
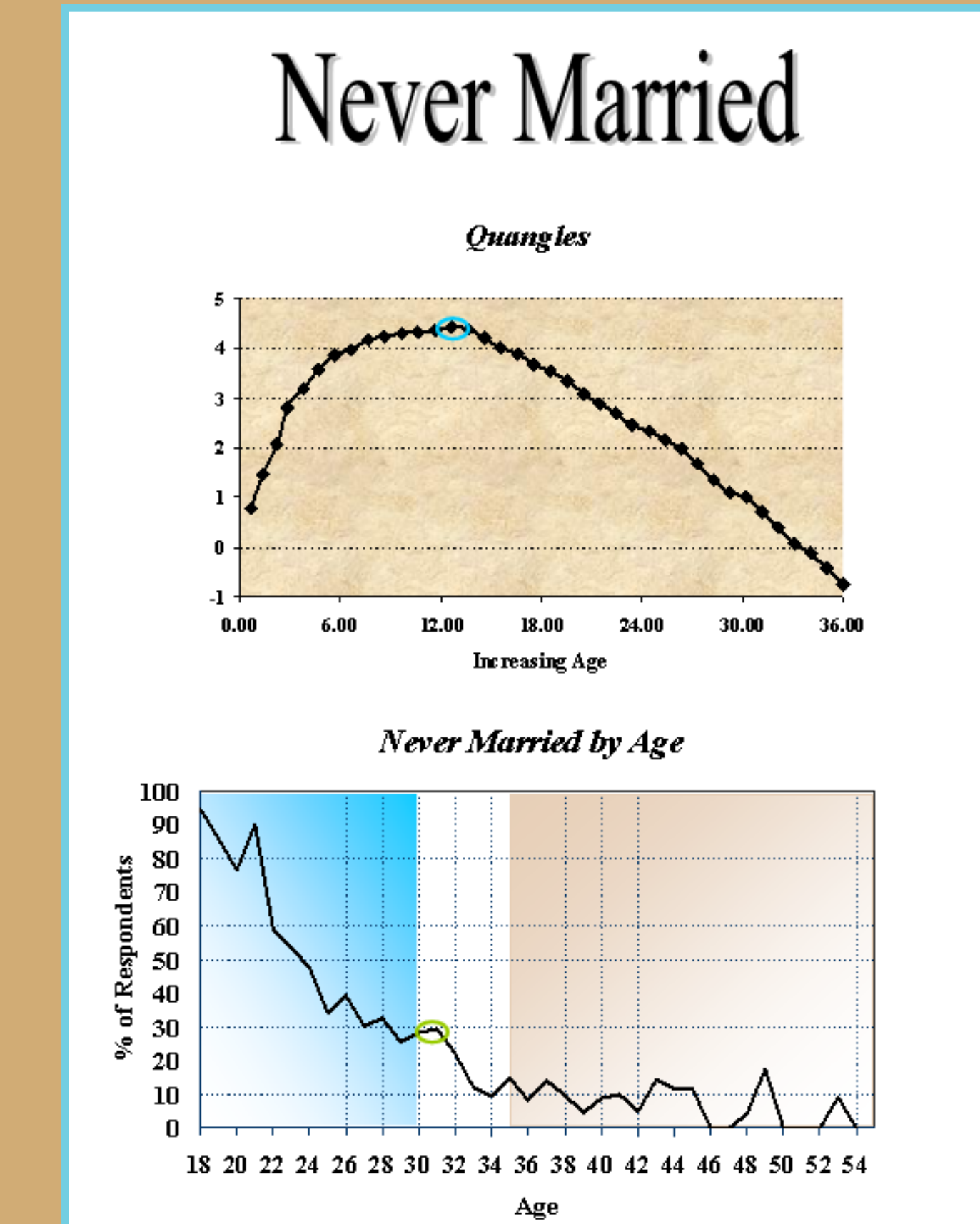
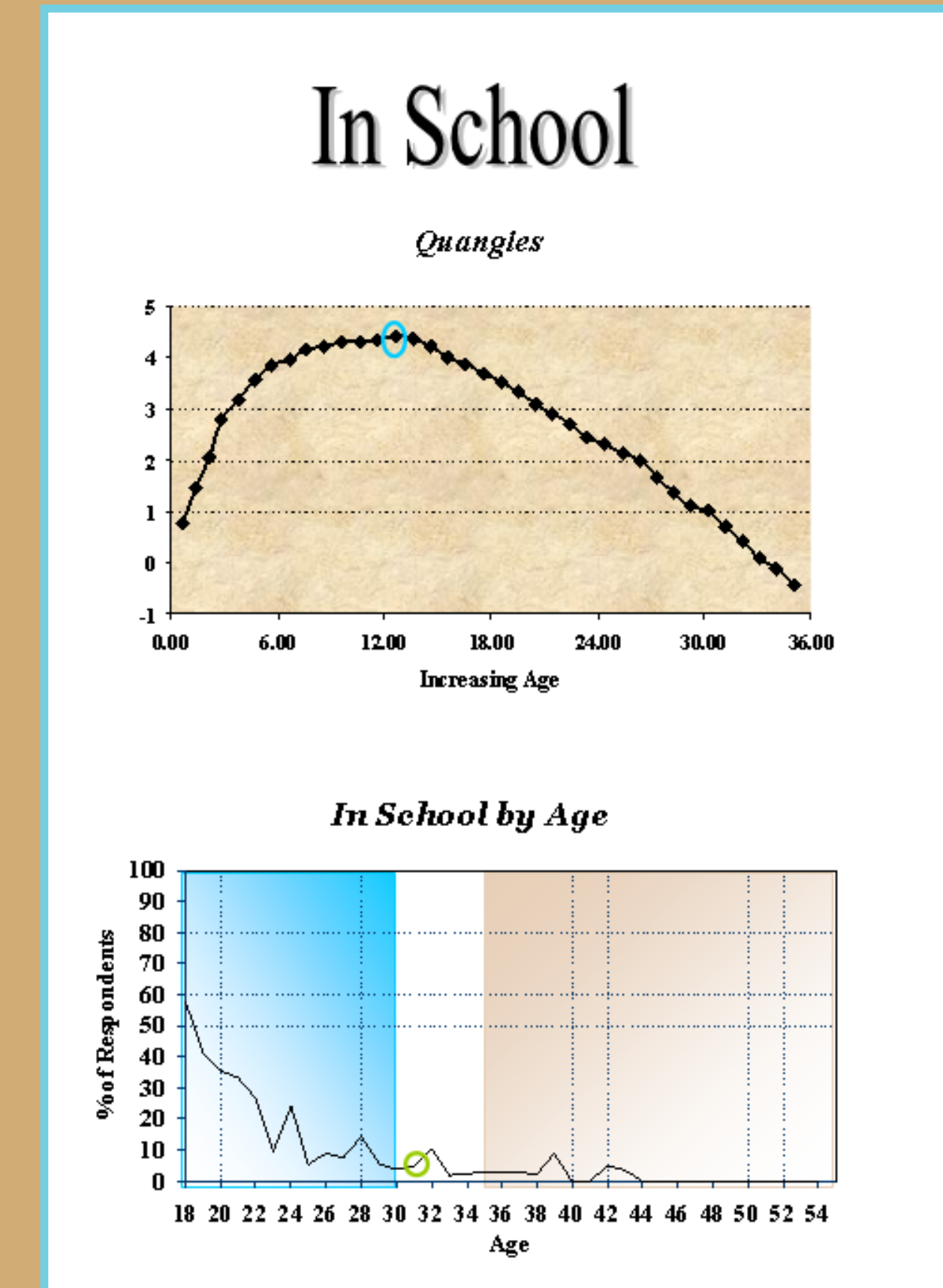
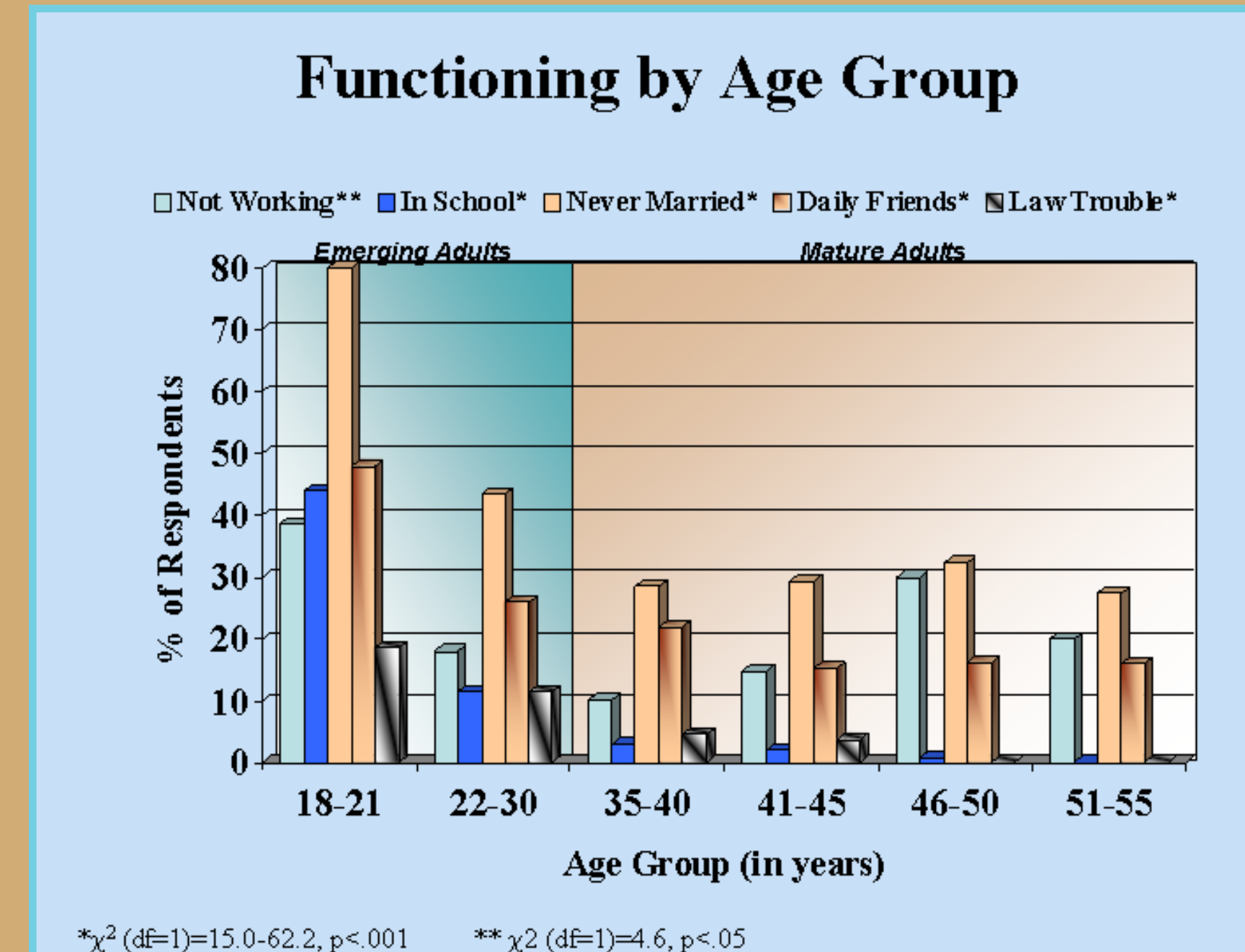
\*  $\chi^2(df=15)=29.2, p=.015$   
†  $\chi^2(df=9)=7.4, p=.10$

### ACKNOWLEDGEMENT

The Substance Abuse and Mental Health Data Archive and Inter-University Consortium for Political and Social Research at the University of Michigan provided these data.



## RESULTS



## Conclusions

- Important developmental changes in functioning occur between emerging adulthood and older adulthood.
- Rapid changes occur during emerging adulthood, with less variability among older individuals.
- Adult mental health services need a developmental perspective
- Specialized services or approaches for young adults are needed

### REFERENCES:

- Cochran, W. G. (1952). The Chi-square tests of goodness of fit. *Annals of Mathematical Statistics*, 23, 315-345.
- Kessler, R. C. (1994). The National Survey of the United States. *International Review of Psychiatry*, 6(4), 365-376.