Research Summary

Peer support during transition from youth to adult mental health services: A systematic review of the evidence

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This systematic review of the literature was designed to identify how “peer support” is being used to assist youth as they transition between child to adult mental health services. The electronic searches of 20 years of seven health-related databases identified 476 potential articles for analysis. Upon completion of the review process, 19 articles met all of the inclusion criteria. Eleven of the included studies were conducted in the United States, three in Australia, and five in Europe (Belgium, the Netherlands, Norway, Sweden, and the United Kingdom). Participants included youth and adults over the age of 13 with mental health disorders.

The studies generally agreed that there are benefits associated with the inclusion of peer support throughout treatment regimens, though only two explicitly discussed benefits of providing that support during the transition period from child to adult services. These two studies suggest that the formal inclusion of peer support as part of the transition process can enhance overall patient resilience and lead to improved outcomes. Other studies noted that, among youth receiving standard mental health services, peer support is highly effective as an additional service, with one specifically stating that peer support can lessen the negative relationship between stigmatization and self-esteem among individuals who have limited experiences with stigmatization. Other researchers found that youth participation in specific community activities, including peer support, led to positive recovery-oriented outcomes; and, that peer support aided in learning and knowledge-sharing regarding coping and self-care strategies. Other studies highlighted the benefits of peer support for specific psychiatric diagnoses.

Among the most surprising findings was the absence of standard definitions of ‘peer support’ and ‘youth’. This made it difficult to directly compare findings across studies. While there was general agreement on the value of peer support, most studies were limited in that they did not discuss this potential benefit for the transition period specifically. In addition, the majority of studies relied on qualitative interviews with relatively small numbers of participants and of those, few participants were ‘youth’ (between 13 and 18 years of age). There was also a general lack of detail describing communication between the providers of youth and adult mental health services, making it difficult to identify how transitions were actually facilitated.

The strongest area of agreement across studies was the conclusion that services related to the needs and life experiences of transition-age youth need improvements, ensuring provision of peer support opportunities, better coordination with family doctors and a greater focus on the design and delivery of mental health services specifically tailored to the needs of youth and emerging adults. There is also an urgent need to conduct further research to better understand, design, and deliver appropriate services to improve outcomes for emerging adults who require mental health care.

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