

**THE BURDEN OF INTERNALISING PROBLEMS IN SOUTH
AUSTRALIAN ADOLESCENTS: A TRIPLE-PRONGED APPROACH TO
IMPROVING THE EVIDENCE BASE FOR SERVICE DELIVERY**

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SUMMARY

The alarming prevalence and distressing impact of internalising problems in adolescents are both clinically and empirically well established. Despite enhanced prevention and intervention efforts, particularly within educational environments over the last decade, the global burden of internalising problems is mounting. Due to the complexity of the issues, no “one-way” approach exists to address them. Thus, the present research employed a triple-pronged approach that aimed to improve the evidence base for service delivery for South Australian adolescents with internalising problems. This dissertation is presented as a combination of Publication and Conventional Formats, comprised of two published studies and one study in preparation for publication.

Study One (*paper one*) aimed to improve access to mental health service use for adolescents experiencing internalising problems within educational contexts. A simultaneous mixed-methods research design examined 152 high school teachers’ views on the existing disparity between referral rates for adolescents with externalising versus internalising disorders. Both quantitative and qualitative results highlighted that teachers perceive they face an expectation to identify the symptoms of internalising problems in their students; yet do not feel sufficiently capable to fulfil this expectation. This is particularly problematic as teacher referral is the most common pathway to treatment. Based on the present results a conceptual framework consisting of specific processes aimed at enhancing access to mental health services for adolescents experiencing internalising problems within an educational context is presented. Recommendations concerning pre-service teaching programs, current policy and government funding initiatives are provided.

Study two (*paper two*) aimed to improve the empirical evidence base for an under-researched, yet acknowledged high-risk rural adolescent population ($N = 388$; 13 to 15 years). The study cross-sectionally examined multiple domains of adolescent development including individual (self-esteem), family (parental acceptance), and community (social capital) determinants of internalising problems. It was anticipated that such knowledge would increase insight and assist in providing evidence-based guidelines for establishing priorities for newly appointed funds from the Federal government for youth services in rural South Australia. In light of the concerning rates of internalising problems demonstrated by the present study, coupled with the fact that young people from rural areas have not been considered in previous National Mental Health Surveys, this research emphasises the importance of including as many Australians as possible from rural and remote areas, in the approaching, subsequent national survey.

Study three aimed to improve the efficacy and effectiveness of intervention and prevention initiatives for young people with internalising problems by the addition of theoretically-derived family-level factors to conceptual frameworks. This was achieved by applying a novel empirical approach to a well known clinically-derived conceptualisation with a large sample of young South Australians ($N = 904$; 13 to 15 years). Four empirically-based parenting constructs (parental psychological control, parental acceptance, parental autonomy granting, and parental overprotection) were applied to Young's (1990) hypothesised "typical family origin" (TFO) conceptualisations. Young's posited corresponding Early Maladaptive Schemas (EMS) were simultaneously examined. The relationships between the parenting constructs, 11 EMS and internalising problems were also investigated. Further, in order to

enhance cognitive content-specificity, multivariate analyses investigated the unique contribution of adolescents' perceptions of the parenting constructs, anxiety and depression, and 11 EMS. As the efficacy and effectiveness of intervention and prevention initiatives relies heavily on a thorough evidence base, it is anticipated that the knowledge gained from the present study would reduce the high numbers of young people with internalising problems that terminate treatment prematurely and/or fail to respond to treatment efforts. In particular, the study highlights the importance of the addition of a parental component to traditional programs where appropriate.

For a Thesis that contains publications

NAME: Catherine Papandrea..... PROGRAM: M Psych (Clin) / PhD.....

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DECLARATION

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Papandrea, K., & Winefield, H. (2011). It's not only the squeaky wheels that need the oil: Examining teachers' views on the disparity between referral rates for students with internalising versus externalising problems. *School Mental Health, 3*, 222-235.

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Signed: -----

Date: -----

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DEDICATIONS

To my *precious* Ben and Natalie, may you both always feel that.....

**You are a child of the universe
no less than the trees and the stars;
you have a right to be here.**

(Desiderata; Ehrmann, 1927)

KEY TO ABBREVIATIONS

ABS	Australian Bureau of Statistics
AIHW	Australian Institute of Health and Welfare
APA	American Psychiatric Association
APS	Australian Psychological Society
CBT	Cognitive Behavioural Therapy
CCSH	Cognitive-Content Specificity Hypothesis
DSM IV	Diagnostic and Statistical Manual of Mental Disorders, Edition 4
DSM IV-TR	Diagnostic and Statistical Manual of Mental Disorders, Edition 4, Revised
EMS	Early Maladaptive Schema/s
GAD	Generalised Anxiety Disorder
MDD	Major Depressive Disorder
MDE	Major Depressive Episode
OCD	Obsessive Compulsive Disorder
PD	Panic Disorder
PDA	Panic Disorder with Agoraphobia
RCADS	Revised Child Anxiety and Depression Scale
SAD	Separation Anxiety Disorder
SP	Social Phobia
TFO	Typical Family Origin/s