Referral pathways to early intervention services for psychosis and their influence on perceptions of care: an Interpretive phenomenological analysis

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Abstract

Background: Most young adults experiencing psychosis enter early intervention services for psychosis (EIS) via inpatient services and emergency departments. Referral in this manner is believed to increase young adults' risk for adverse outcomes while in EIS such as diminished trust and engagement in services. However, little research has empirically examined the impact of young adults' referral and help-seeking experiences on their subsequent views towards EIS and engagement to services. Methods: This qualitative study involved semi-structured interviews with 12 young adults (mean age = 24.83) within 3-12 months following acceptance to an EIS. Interviews aimed to examine their experiences of help-seeking and referral to EIS as well as the impact of these experiences on their subsequent perception of, and engagement with EIS. Data were analyzed using the Interpretative Phenomenological Analysis approach. Results: 3 superordinate themes emerged: (1) Navigating the Maze of Healthcare (2) Dignity and (3) Impact of Events. Participants with referral pathways involving urgent care services, particularly through involuntary hospitalization, described more adversity during their referral pathway and were more likely to describe help-seeking experiences as contributing to negative views towards EIS and diminished engagement in treatment. Conclusions: The impact of early negative experiences with healthcare on views towards EIS and engagement is evident in participants' accounts. Sense making was further contextualized by participants' illness insight, degree of recovery, and social support throughout experiences. Emergent themes highlight the need for psychiatric services to emphasize service users' dignity and for EIS to provide opportunities for patients to process past negative healthcare experiences to strengthen engagement.

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