The EARLY Program
Early Intervention for Serious Mental Illness

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Why Early Intervention?
“Interventions before the disorder occurs offer the greatest opportunity to avoid the substantial costs to individuals, families and societies that mental, emotional and behavioral disorders entail.”
Institute of Medicine, 2009 Report

What is EARLY?
Early intervention program targeting young people at risk of developing a psychotic illness or who are in the earliest stages of a psychotic disorder.

Provides multi-disciplinary, wrap-around treatment for the individual and their family based in a recovery model.

Part of a 6-site national treatment research partnership, Early Detection and Intervention for the Prevention of Psychosis (EDIPPP).

Utilizes a public health model by relying on outreach and community engagement to train the public about early warning signs of serious mental illness.

The Importance of Community Outreach
Studies have shown the importance of taking a public health approach to mental health early intervention.

Delay in treatment is often associated with the public not being familiar with early warning signs or pathways to treatment.

Through public outreach, a psychosis early intervention program in Norway and Denmark reduced DUP from 16 wks to 5 weeks.

EARLY staff has made nearly 120 presentations to over 2,800 people in the Albuquerque area in the past two years.

What Next?
EARLY Psychosis Consultation Clinic:
A consultation clinic for adolescents in the earliest stages of psychosis or at high risk for developing a psychotic disorder.

NIMH Recovery After Initial Schizophrenia Episode Early Treatment Program (RAISE ETP):
UNM was chosen as one of 35 national sites to provide an innovative treatment intervention for individuals with a first-episode psychotic illness.

Half of all lifetime mental disorders start by age 14; ¾ by age 24

Average duration of untreated psychosis (DUP) is one to two years

Longer DUP is related to deteriorating course of illness and reduced response to treatment

Initial results from early intervention studies suggest a mean reduction in conversion to psychosis in the first year from 32.0% to 10.3%