

All people have mental health needs at some time. People with intellectual/developmental disabilities (IDD) also have mental health needs (IDD-MH).

Mental health needs are more common for people with IDD than for people without disabilities.

A mental health crisis is when something happens that makes someone's mental health worse and can even be dangerous.

We want to know how we can provide telehealth services to people with IDD-MH and their families to improve their mental health service experiences and help prevent mental health crises.

Mental health services provided over the phone or computer is called "telehealth."

Knowing more ways to provide services to people with IDD-MH and their families can help make their lives better.

START is a program that helps people with IDD-MH and their families who are at risk of having mental health crises. START is a community program that has mostly been provided in person.

Research shows that people with IDD-MH who get START services can be helped without going to the hospital.

People with IDD-MH who get START services also have better mental health than they did before they got START services.

Families report that START services help them feel more satisfied and supported.

START teams provided services over telehealth during COVID-19 when people could not get in-person services. We learned that START telehealth services were helpful for some people.

Giving START services over telehealth could help more people with IDD-MH and their families to get the help they need, but we need to learn more.

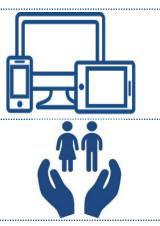
We want to know if START services over telehealth are as helpful for people with IDD-MH and their families as they are when provided in person.

We also want to know if people with IDD-MH and their families like telehealth as much as they like in-person services.











We are doing a research study because we want to know if START therapeutic supports, outreach, and team meetings are as helpful over telehealth as they are in person.

We will continue to provide START intake, assessments and emergency crisis response in person.

Part 1 of the Project

We talked to people with IDD-MH, their families, and START staff about the strengths and weaknesses of using telehealth to provide START planned outreach and therapeutic coaching. We will use what we learned to make START telehealth services better.

We also created a new survey that people with IDD-MH can use to tell us about the mental health services they receive. It is important to know if people with IDD-MH think that their mental health services meet their needs.

Part 2 of the Project

People who receive START services from programs in the study will be randomly selected for the telehealth START or in-person START group to receive planned outreach and therapeutic coaching services.

Random means we will not know ahead of time who will be put into which group. This helps to make sure that the people getting both types of START services are the same.

At the end of this research study, we will share what we learned with people with IDD-MH, families, mental health service providers, and other researchers.

This will help improve how we provide telehealth mental health services to people with IDD-MH and their families.

PROJECT LEADS



Joan B. Beasley, PI Joan.Beasley@unh.edu



Jessica Kramer, Co-PI Jessica.Kramer@phhp.ufl.edu



Luke Kalb, Co-PI Kalb@kennedykrieger.org







