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Young People in Therapy: What's Working and Why?

This bulletin highlights findings from a major study on youth mental health care in Ireland, providing valuable insights into what drives positive outcomes for young people in talk therapy. The study shows that 6 in 10 young people experienced meaningful improvements, with timely access to care and personalized support emerging as key factors in their success.



Background

Youth mental health is in crisis. Across Ireland and beyond, rates of anxiety, depression, and distress among young people are rising, yet too many struggle to access the support they need¹. Most mental health difficulties first emerge in adolescence², making early intervention critical but services remain underfunded and fall well short of national policy recommendations³. Over the past two decades, a global movement has reshaped youth mental health care, emphasizing community-based, accessible, and youthfriendly support. In Ireland, Jigsaw is part of this movement, operating 14 services that provide primary care talk therapy. This enhanced primary care model delivers personalised, youth friendly, evidence-based interventions, offering crucial support to young people across the country.

With more and more young people needing mental health support and limited resources available, it's more important than ever to understand what makes services work best.

A recent study published in the Journal of Early Intervention in Psychiatry examined the experiences of 4,565 young people who used Jigsaw's services between 2017 and 2019, identifying key factors that contribute to positive outcomes, such as timely access to care and personalized support⁴. By learning more about what works and why, we can ensure mental health services provide the right help at the right time to those who need it most.

JIGSAW Young people's health in mind

Main Findings

Improvement Rates:

Between 57% and 66% of young people showed improvements in their mental health, highlighting positive outcomes from the support they received.

Timely Access:

Waiting more than 60 days reduced improvement rates by 11% for 12-16-year-olds, showing how important it is to provide quick access to care. For older youth, wait times had less impact.

Helping Those in Need:

Young people who came to Jigsaw feeling the most distressed saw the largest improvements, suggesting that Jigsaw's services are especially helpful for those with higher distress.

Right Number of Sessions:

More sessions didn't always lead to improvements, suggesting a need to personalise the duration of therapy.

What does this mean for Policy and Practice?

Invest in Early Intervention:

Providing timely, effective care for young people not only leads to highly positive outcomes but also has the potential to reduce long-term costs by addressing mental health issues early.

Focus on Personalised Support:

Prioritize tailored, need-based interventions, especially for those experiencing higher levels of distress, as they are most likely to benefit from focused, high-quality care.

Ensure Timely Access:

Quick access to services is critical. Providers should aim to keep wait times under 60 days, particularly for 12–16-year-olds, where delays can significantly reduce improvement rates.

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⁴ Moore, J., Doyle, E., Carey, E., Blix, A., Booth, A., Rossouw, J., O'Reilly, A., O'Brien, S., & Duffy, J. (2025). Predicting Reliable Improvements in Primary Care Youth Mental Health. *Early intervention in psychiatry, 19*(1), e13637. https://doi.org/10.1111/eip.13637



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¹ Dooley, B., O'Connor, C., Fitzgerald, A., & O'Reilly, A. (2019). My World Survey 2: *The national study of youth mental health in Ireland*. UCD School of Psychology and Jigsaw. https://www.myworldsurvey.ie

² Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6), 593–602. https://doi.org/10.1001/archpsyc.62.6.593

³ McGorry, P. D., Mei, C., Dalal, N., Alvarez-Jimenez, M., Blakemore, S.-J., Browne, V., & The Lancet Psychiatry Commission on Youth Mental Health. (2024). The Lancet Psychiatry Commission on youth mental health. *The Lancet Psychiatry*, 11(9), 731–774. https://doi.org/10.1016/S2215-0366(24)00163-9