# Young people receiving psychiatric and psychological outreach service in JC LevelMind @ Community - a community-based youth mental health program

JC LevelMind 賽馬會平行心間

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The LevelMind@JC project is a Hong Kong youth mental health initiative offering community-based support and early intervention. The initiative aims to provide youth engaging space and reduce distress awhile tackling barriers like stigma and limited access to care.


## INTRODUCTION

Mental disorders are a leading cause of disability among youth worldwide, yet most research has focused on Western populations, leaving gaps in understanding within non-Western contexts such as Hong Kong. In response to the growing mental health crisis among Hong Kong's youth and persistent barriers to accessing formal psychiatric services, the LevelMind@JC project was developed to provide an innovative, community-based model that integrates onsite psychiatric and psychological support directly into youth-friendly spaces.

## OBJECTIVE

To evaluate the effectiveness of the LevelMind@JC program in reducing psychological distress, suicidal ideation, and self-harm among youth by integrating onsite psychiatric and psychological support within a community-based mental health model in Hong Kong.

## METHODOLOGY

This study employed a cohort observational design involving young people aged 12–35 who received psychiatric or psychological consultations through the LevelMind@JC program, assessing pre- and post-intervention changes in psychological distress using the Kessler Psychological Distress Scale (K6).

## RESULTS

- A total of 386 youth received clinical consultations, with significant reductions in psychological distress (mean K6 scores decreased from 12.40 to 9.69, $p < 0.001$).
- 25.2% of participants showed reliable improvement in distress based on the Reliable Change Index, while 50% showed general reduction.
- Suicidal ideation, attempts, and self-harm behaviors significantly decreased (e.g., suicidal ideation from 26.4% to 11.1%, $p < 0.001$).
- Despite improvements, only about half of participants accepted external psychiatric referrals, citing stigma, financial constraints, and employment concerns as major barriers.

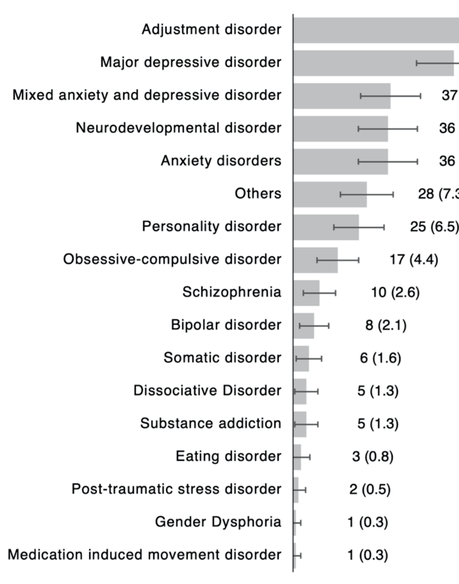


**Figure 1.** Diagnosis after formal clinical consultation, count (percentage). The error bars denote the 95% confidence intervals.

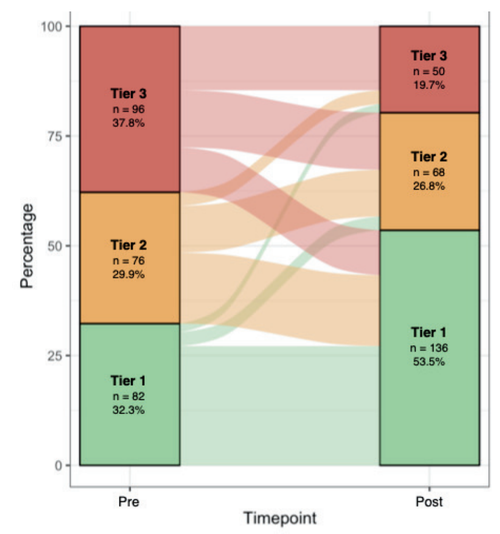


**Figure 2.** Tier changes after formal clinical consultations. K6, Kessler Psychological Distress Scale 6-item version.

## CONCLUSION

- The outreach clinical service in LevelMind@JC program effectively reduced psychological distress, suicidal ideation, and self-harm behaviors among young people with severe mental distress in Hong Kong.
- Its innovative integration of onsite psychiatric and psychological care within community settings demonstrates a promising model for improving youth mental health accessibility in resource-limited systems.

## RELATED LITERATURE


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