Screening for the At-Risk Mental State in Educational Settings: A Systematic Review
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Learning Goal:
This is a systematic narrative review examining the screening tools that have been used in educational settings, with three key questions. Can screening in this setting detect individuals at-risk? What screening tools have been used in educational settings? Are there differences in threshold scores in screening tools in this context?

Abstract Text:
Background
The at-risk mental state provides a model which can allow clinicians to identify individuals at-risk of developing psychosis and intervene to prevent or delay onset. Early intervention is linked with better prognosis and recovery. At present, most screening is carried out within help-seeking populations, however screening within educational settings may allow clinicians to identify individuals at-risk earlier.

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Methods
Searches were carried out on PsycINFO, MEDLINE, EMBASE, Scopus and Web of Science. The searches aimed to find any articles that detailed screening procedures for the at-risk mental state carried out within educational settings. Inclusion criteria were studies that were carried out in educational settings using a screening measure for attenuated psychotic symptoms with a follow-up assessment to assess for the at-risk mental state. All study types were included. Studies that did not include these three criteria were excluded.

Results
2097 references were identified for title and abstract screening. 104 articles were identified for screening by full-text. 13 articles are included in the review. Data extraction was completed using an adapted version of the template from the Cochrane Collaboration Data Collection Form for Intervention Reviews: RCTs and non-RCTs.

Discussion
The PQ-16 is the most commonly used screening measure in educational settings such as colleges and university settings and secondary schools. A full review will be presented and the potential benefits of identifying young people at risk of psychosis in educational settings will be discussed.