



Effective Health Care

Interventions to Prevent Adverse Mental Health Outcomes in Children who Have Experienced Abuse

Results of Topic Selection Process & Next Steps

- The topic, *Interventions to Prevent Adverse Mental Health Outcomes in Children who Have Experienced Abuse*, was found to be addressed by an AHRQ Comparative Effectiveness Review published in April 2013, and a 2013 Cochrane Review. Given that the existing reviews cover this nomination, no further activity will be undertaken on this topic.

Goldman Fraser J, Lloyd SW, Murphy RA, Crowson MM, et al. Child Exposure to Trauma: Comparative Effectiveness of Interventions Addressing Maltreatment. Comparative Effectiveness Review No. 89. (Prepared by the RTI-UNC Evidence-based Practice Center under Contract No. 290-2007-10056-I.) AHRQ Publication No. 13-EHC002-EF. Rockville, MD: Agency for Healthcare Research and Quality. April 2013.

<http://www.effectivehealthcare.ahrq.gov/ehc/products/298/1422/trauma-interventions-maltreatment-child-report-130415.pdf>

Parker B, Turner W. Psychoanalytic/psychodynamic psychotherapy for children and adolescents who have been sexually abused. Cochrane Database of Systematic Reviews 2013, Issue 7. Art. No.: CD008162.

<http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&ved=0CDgQFjAB&url=http%3A%2F%2Fwww.campbellcollaboration.org%2Flib%2Fdownload%2F3081%2F&ei=ZpjZUsiaMPKsATX8oC4Ag&usq=AFQjCNFempSyUPSKbPh1bagNeYcCLeo48Q&sig2=HV04v-8G1UKGwhAZyJRyzw&bvm=bv.59568121,d.cWc&cad=rja>

Topic Description

Nominator(s): Individual

Nomination Summary: The nominator is interested in the comparative effectiveness of interventions or treatments that reduce the incidence of future mental illness in children who have been abused.

Staff-Generated PICO

Population(s): Children aged 0 to 14 years who have experienced maltreatment (i.e., abuse, neglect)

Intervention(s): Psychosocial and pharmacological interventions or treatments designed to decrease the prevalence of future mental illness; resiliency training programs (delivered in person, online or in group settings); community resources including school and faith-based programs

Comparator(s): Usual care (no intervention) and all other treatment options

Outcome(s): Child wellbeing in later childhood, adolescence and adulthood, including

positive mental health outcomes

Key Questions from Nominator: What are the interventions or treatments that impact the prevalence of future mental illness in children who have been maltreated?

Considerations

- The topic meets EHC Program appropriateness and importance criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- The topic was found to be addressed by a 2013 AHRQ Comparative Effectiveness Review titled, *Child Exposure to Trauma: Comparative Effectiveness of Interventions Addressing Maltreatment (CER 89)*, on interventions that address child well-being and/or promote positive child welfare outcomes for maltreated children between the ages of birth to 14 years. Key questions from this report include:
 1. What is the comparative effectiveness of interventions with children exposed to maltreatment for promoting child well-being outcomes? Specifically: mental and behavioral health (e.g., severity or number of traumatic stress symptoms or syndromes; post-traumatic stress disorder [PTSD]; attachment disorders; depressive symptoms; anxiety symptoms; disruptive, aggressive, and delinquent behavior); healthy caregiver-child relationship; healthy development, and; school-based functioning.
 2. What is the comparative effectiveness of interventions with children exposed to maltreatment for promoting child welfare outcomes? Specifically: safety; placement stability for children in out-of-home care, and positive permanency outcomes for children in out-of-home care.
 3. Among the interventions under review, how do interventions with particular characteristics compare in improving child outcomes? Specifically: modality (i.e., individual, dyadic, group, family-based format); theoretical orientation (e.g., cognitive behavioral, psychodynamic), and; type of setting (i.e., specialty or non-specialty service-delivery settings).
 4. How do interventions compare for improving child outcomes within population subgroups? Specifically: child subgroups and caregiver subgroups.
 5. What is the comparative effectiveness of interventions with children exposed to maltreatment for engaging children and/or caregivers in treatment (e.g., treatment adherence, treatment withdrawal)?
 6. What adverse events are associated with interventions for children exposed to maltreatment (e.g., re-traumatization, caregiver distress)?
- The topic was also found to be addressed by a 2013 Cochrane review titled, *Psychoanalytic/Psychodynamic Psychotherapy for Children and Adolescents who Have Been Sexually Abused*, that assesses the effectiveness of psychoanalytic/psychodynamic psychotherapy for children and adolescents who have been sexually abused.
- The available systematic reviews concluded the evidence for this topic is limited.