The effectiveness, acceptability and cost-effectiveness of psychosocial interventions for maltreated children and adolescents: an evidence synthesis

Geraldine Macdonald,1,2* Nuala Livingstone,1 Jennifer Hanratty,1 Claire McCartan,1 Richard Cotmore,3 Maria Cary,4 Danya Glaser,5 Sarah Byford,4 Nicky J Welton,6 Tania Bosqui,1 Lucy Bowes,7 Suzanne Audrey,6 Gill Mezey,8 Helen L Fisher,4 Wendy Riches9 and Rachel Churchill6

1Institute of Child Care Research, School of Sociology, Social Policy and Social Work, Queen’s University Belfast, Belfast, UK
2School for Policy Studies, University of Bristol, Bristol, UK
3Evaluation Department, National Society for the Prevention of Cruelty to Children (NSPCC), London, UK
4King’s Health Economics, King’s College London, London, UK
5University College London and Great Ormond Street Hospital for Sick Children, London, UK
6School of Social and Community Medicine, University of Bristol, Bristol, UK
7Department of Experimental Psychology, University of Oxford, Oxford, UK
8Population Health Sciences and Education, St George’s, University of London, London, UK
9Riches and Ullman Limited Liability Partnership, London, UK

*Corresponding author

Declared competing interests of authors: none

Published September 2016
DOI: 10.3310/hta20690

Plain English summary

Psychosocial interventions for maltreated children and adolescents

Health Technology Assessment 2016; Vol. 20: No. 69
DOI: 10.3310/hta20690

NIHR Journals Library www.journalslibrary.nihr.ac.uk
Plain English summary

What is the problem?

Sometimes children and adolescents are abused or neglected by their parents or other adults. Abuse can be physical, sexual or emotional, and many children experience more than one kind of abuse and neglect. We call this child maltreatment. Maltreated children often do less well than other children. For example, they often have poorer physical and mental health, do less well at school and find it more difficult to establish good relationships than non-maltreated children. Psychosocial interventions are ways of helping that do not rely on drugs, for example counselling, group work and music therapy.

What did we do?

We looked internationally for studies that assessed the effectiveness of psychosocial interventions for maltreated children and whether or not they were worth paying for (cost-effectiveness). We also looked for studies that told us something about what children and other people (such as parents or therapists) think about psychosocial interventions. We completed our searches in June 2014.

What did we find?

We found 198 effectiveness studies, six cost-effectiveness studies and 73 studies that told us what people thought of these interventions. Only a handful of these were conducted in the UK and most did not address outcomes that young people told us were important.

What does this mean?

Although we found some interventions that *might* improve outcomes for maltreated children, these need to be independently evaluated in the UK. Importantly, many of the interventions currently offered to children in the UK have not been evaluated at all. Our report makes recommendations for improving services for maltreated children, including looked-after children, and for future research.
Criteria for inclusion in the *Health Technology Assessment* journal

Reports are published in *Health Technology Assessment* (HTA) if (1) they have resulted from work for the HTA programme, and (2) they are of a sufficiently high scientific quality as assessed by the reviewers and editors.

Reviews in *Health Technology Assessment* are termed ‘systematic’ when the account of the search appraisal and synthesis methods (to minimise biases and random errors) would, in theory, permit the replication of the review by others.

**HTA programme**

The HTA programme, part of the National Institute for Health Research (NIHR), was set up in 1993. It produces high-quality research information on the effectiveness, costs and broader impact of health technologies for those who use, manage and provide care in the NHS. ‘Health technologies’ are broadly defined as all interventions used to promote health, prevent and treat disease, and improve rehabilitation and long-term care.

The journal is indexed in NHS Evidence via its abstracts included in MEDLINE and its Technology Assessment Reports inform National Institute for Health and Care Excellence (NICE) guidance. HTA research is also an important source of evidence for National Screening Committee (NSC) policy decisions.

For more information about the HTA programme please visit the website: [http://www.nets.nihr.ac.uk/programmes/hta](http://www.nets.nihr.ac.uk/programmes/hta)

**This report**

The research reported in this issue of the journal was funded by the HTA programme as project number 11/110/01. The contractual start date was in February 2013. The draft report began editorial review in February 2015 and was accepted for publication in July 2015. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors’ report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health.

© Queen’s Printer and Controller of HMSO 2016. This work was produced by Macdonald et al. under the terms of a commissioning contract issued by the Secretary of State for Health. This issue may be freely reproduced for the purposes of private research and study and extracts (or indeed, the full report) may be included in professional journals provided that suitable acknowledgement is made and the reproduction is not associated with any form of advertising. Applications for commercial reproduction should be addressed to: NIHR Journals Library, National Institute for Health Research, Evaluation, Trials and Studies Coordinating Centre, Alpha House, University of Southampton Science Park, Southampton SO16 7NS, UK.

Published by the NIHR Journals Library (www.journalslibrary.nihr.ac.uk), produced by Prepress Projects Ltd, Perth, Scotland (www.prepress-projects.co.uk).
Health Technology Assessment Editor-in-Chief

Professor Hywel Williams  Director, HTA Programme, UK and Foundation Professor and Co-Director of the Centre of Evidence-Based Dermatology, University of Nottingham, UK

NIHR Journals Library Editor-in-Chief

Professor Tom Walley  Director, NIHR Evaluation, Trials and Studies and Director of the EME Programme, UK

NIHR Journals Library Editors

Professor Ken Stein  Chair of HTA Editorial Board and Professor of Public Health, University of Exeter Medical School, UK

Professor Andree Le May  Chair of NIHR Journals Library Editorial Group (EME, HS&DR, PGfAR, PHR journals)

Dr Martin Ashton-Key  Consultant in Public Health Medicine/Consultant Advisor, NETSCC, UK

Professor Matthias Beck  Chair in Public Sector Management and Subject Leader (Management Group), Queen's University Management School, Queen's University Belfast, UK

Professor Aileen Clarke  Professor of Public Health and Health Services Research, Warwick Medical School, University of Warwick, UK

Dr Tessa Crilly  Director, Crystal Blue Consulting Ltd, UK

Dr Eugenia Cronin  Senior Scientific Advisor, Wessex Institute, UK

Ms Tara Lamont  Scientific Advisor, NETSCC, UK

Professor Elaine McColl  Director, Newcastle Clinical Trials Unit, Institute of Health and Society, Newcastle University, UK

Professor William McGuire  Professor of Child Health, Hull York Medical School, University of York, UK

Professor Geoffrey Meads  Professor of Health Sciences Research, Health and Wellbeing Research and Development Group, University of Winchester, UK

Professor John Norrie  Health Services Research Unit, University of Aberdeen, UK

Professor John Powell  Consultant Clinical Adviser, National Institute for Health and Care Excellence (NICE), UK

Professor James Raftery  Professor of Health Technology Assessment, Wessex Institute, Faculty of Medicine, University of Southampton, UK

Dr Rob Riemsma  Reviews Manager, Kleijnen Systematic Reviews Ltd, UK

Professor Helen Roberts  Professor of Child Health Research, UCL Institute of Child Health, UK

Professor Jonathan Ross  Professor of Sexual Health and HIV, University Hospital Birmingham, UK

Professor Helen Snooks  Professor of Health Services Research, Institute of Life Science, College of Medicine, Swansea University, UK

Professor Jim Thornton  Professor of Obstetrics and Gynaecology, Faculty of Medicine and Health Sciences, University of Nottingham, UK

Professor Martin Underwood  Director, Warwick Clinical Trials Unit, Warwick Medical School, University of Warwick, UK

Please visit the website for a list of members of the NIHR Journals Library Board:
www.journalslibrary.nihr.ac.uk/about/editors

Editorial contact: nihredit@southampton.ac.uk