



Systematic review and meta-analysis of interventions relevant for young offenders with mood disorders, anxiety disorders, or self-harm

Ellen Townsend^{a,*}, Dawn-Marie Walker^b, Sally Sargeant^{a,1}, Panos Vostanis^c,
Keith Hawton^d, Olivia Stocker^{a,2}, Jabulani Sithole^{b,3}

^a Risk Analysis, Social Processes and Health group, School of Psychology, University of Nottingham, University Park, Nottingham, NG72RD, UK

^b Trent RDSU, University of Nottingham, University Park, Nottingham, NG72RD, UK

^c Department of Health Sciences, University of Leicester, 22-28 Princess Road West, Leicester, LE1 6TP, UK

^d Centre for Suicide Research, Department of Psychiatry, University of Oxford, Warneford Hospital, Oxford, OX3 7JX, UK

A B S T R A C T

Keywords:

Young offender
Juvenile delinquent
Mood disorder
Anxiety disorder
Attempted suicide
Self-harm
Systematic review
Interventions

Background Mood and anxiety disorders, and problems with self-harm are significant and serious issues that are common in young people in the Criminal Justice System.

Aims To examine whether interventions relevant to young offenders with mood or anxiety disorders, or problems with self-harm are effective.

Method Systematic review and meta-analysis of data from randomised controlled trials relevant to young offenders experiencing these problems.

Results An exhaustive search of the worldwide literature (published and unpublished) yielded 10 studies suitable for inclusion in this review. Meta-analysis of data from three studies (with a total population of 171 individuals) revealed that group-based Cognitive Behaviour Therapy (CBT) may help to reduce symptoms of depression in young offenders.

Conclusions These preliminary findings suggest that group-based CBT may be useful for young offenders with such mental health problems, but larger high quality RCTs are now needed to bolster the evidence-base.

© 2009 The Association for Professionals in Services for Adolescents. Published by Elsevier Ltd. All rights reserved.

Introduction

Numerous studies have demonstrated that young offenders experience high levels of mental health problems (e.g. Chitsabesan et al., 2006; Vermeiren, 2003). Depression, anxiety disorders, and self-harm occur particularly frequently in this population (Ahrens & Rexford, 2002; Callaghan, Pace, Young, & Vostanis, 2003; Carswell, Maughan, Davis, Davenport, & Goddard, 2004; Dixon, Howie, & Starling, 2004; Stallard, Thomason, & Churchyard, 2003; Sukhodolsky & Ruchkin, 2006; Vermeiren, 2003) and with high levels of comorbidity (Axelson & Birmaher, 2001). Moreover, there is considerable evidence that young offenders, both incarcerated and in the community, do not receive the referrals and interventions for mood and

* Corresponding author. Risk Analysis, Social Processes and Health group, School of Psychology, University of Nottingham, University Park Nottingham NG72RD, UK. Tel.: +44 115 8467305; fax: +44 115 951 5324.

E-mail addresses: Ellen.Townsend@nottingham.ac.uk (E. Townsend), Dawn-marie.Walker@nottingham.ac.uk (D.-M. Walker), s.j.e.sargeant@psy.keele.ac.uk (S. Sargeant), pv11@leicester.ac.uk (P. Vostanis), Keith.Hawton@psych.ox.ac.uk (K. Hawton), pcq07ys@sheffield.ac.uk (O. Stocker), Jabulani.Sithole@astrazeneca.com (J. Sithole).

¹ Present address: School of Psychology, Keele University.

² Present address: Department of Psychology, University of Sheffield.

³ Present address: AstraZeneca R&D Charnwood, Biostatistics, Clinical Information Science.

anxiety disorders, and self-harm that they need (Callaghan et al, 2003; Carswell et al, 2004; Chitsabesan et al, 2006; Gunn, Maden, & Swinton, 1991; Stallard et al, 2003), and that such problems predict offending status – the more psychiatric diagnoses a youngster has, the more likely they are to be an offender (Dixon et al., 2004).

In order to identify which interventions should be recommended for young offenders experiencing problems with mood or anxiety disorders, or self-harm, we have conducted a systematic review of trials of interventions using Cochrane Collaboration methods (Higgins & Green, 2008). A systematic review is a scientific and robust methodology which aims to provide a synthesis of data which is as free from bias as possible (Khan, Kunz, Kleijnen, & Antes, 2003). In particular, it is important that clinical and policy related decisions are made using the highest quality evidence and the systematic review is seen as the gold standard in evidence-based research (Egger, Davey Smith, & Altman, 2001). Moreover, evidence-based research and practice helps to ensure that public money is not wasted on interventions which have exaggerated effect sizes due to biases (Schulz, Chalmers, & Hayes, 1995), or on interventions which may do more harm than good. This is particularly crucial in the domain of mental health, especially when working with a vulnerable group like young offenders. It is crucial that decision-making in relation to health services and treatments for this group are based on current best evidence.

The main objective of the review was to determine what interventions are relevant to, and effective in, alleviating the symptoms and behaviours associated with mood and anxiety disorders and self-harm. Where possible we wished to determine whether specific interventions are effective for different types of disorder.

Method

Search strategy

We searched the following electronic databases (until August 2007) using Ovid Online: AMED (from 1985), CINAHL (from 1982), EMBASE (from 1980), Ovid Medline[®] In-Process and other non-indexed citations and Ovid Medline (from 1950), and PsycINFO (from 1967). Our search strategy included keywords to encompass: (i) specific characteristics of young offenders using person and population-based terms like 'young offender' or institution-based terms like 'prison', (ii) specific types of literature such as Randomized Controlled Trials (RCTs) and systematic reviews and (iii) specific mood and anxiety disorders (e.g. depression) and self-harm. To implement the search across all disorders and literature types eight separate strategies were executed based on the information in Fig. 1. These were (i) Anxiety and RCT, (ii) Anxiety and Systematic review, (iii) PTSD and RCT, (iv) PTSD and Systematic review, (v) Depression and RCT, (vi) Depression and Systematic review, (vii) Self-harm and RCT, (viii) Self-Harm and Systematic review. The details of the separate strategies are available from the corresponding author.

We checked reference lists of key papers identified in our searches. In order to identify unpublished studies we: (i) searched the National Research Register (includes details of ESRC and Forensic Mental Health programme grants), the Youth Justice Board reports, Children's Fund grants, The National Electronic Library for Health, Bandyolier, Turning Research into Practice (TRIP) and the National Criminal Justice Reference Service (NCJRS), (ii) contacted experts in the field with the list of RCTs identified by our search strategy to see if they knew of any further studies, (iii) searched the ISI Web of Science proceedings to access literature from conferences and meetings, (iv) undertook hand searches of twelve key journals in the field for trials relevant to this review including *International Journal of Law and Psychiatry*, *International Journal of Forensic Mental Health* and *Criminal Behaviour and Mental Health*. The full list of journals hand-searched is available from the corresponding author.

Inclusion criteria

Studies were eligible for inclusion in the study if they (i) examined interventions relevant to the treatment of mood or anxiety disorders, or self-harm, in young offenders; (ii) included participants with a mean age of 19 years or under which is in line with the current structure of the UK Youth Justice system (Youth Justice Board, 2006); (iii) included a specific mental health assessment which measured suicidality, anxiety symptoms or depressive symptoms; (iv) were randomised controlled trials or systematic reviews of randomised controlled trials. Where studies also included non-offenders we included those trials where 75% of the sample was young offenders.

Selection of studies and data extraction

Two authors independently screened potential studies for inclusion in the review. Data extraction for key outcome variables was completed separately by two authors and any disagreements were resolved by consensus and, where needed, a third reviewer's decision was sought. Data extraction forms were standardised and included the information on baseline, post-treatment and follow-up outcome measures (means, standard deviations, and proportions), participant information and information about interventions and the setting of the study (see Tables 1 and 2 for full details of information extracted).

Assessment of the quality of studies

This was carried out independently by two reviewers (blind to authorship and publication information) using a standardised form. The form used for randomised controlled trials was based on the criteria described in the Cochrane

Download English Version:

<https://daneshyari.com/en/article/880998>

Download Persian Version:

<https://daneshyari.com/article/880998>

[Daneshyari.com](https://daneshyari.com)