Resiliency Interventions for Adverse Childhood Experiences in All Ages: Clinical Effectiveness and Guidelines
Research Questions

1. What is the clinical effectiveness of psychological resilience-building interventions for patients (any age) exposed to adverse childhood experiences (ACEs) or trauma?

2. What are the evidence-based guidelines regarding psychological resilience-building interventions for patients (any age) with ACEs or trauma?

Key Findings

Four systematic reviews, four randomized-controlled trials, and seven non-randomized studies were identified regarding the clinical effectiveness of psychological resilience-building interventions for patients (any age) exposed to adverse childhood experiences (ACEs) or trauma. No relevant evidence-based guidelines were identified.

Methods

This report makes use of a literature search strategy developed for a previous CADTH report. For the current report, a limited literature search was conducted on key resources including PsycInfo, Medline, the Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. Methodological filters were applied to limit retrieval to health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, and guidelines. Where possible, retrieval was limited to the human population. The search was limited to English-language documents published between January 1, 2017 and January 11, 2019 to capture any articles published since the previous report.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

<table>
<thead>
<tr>
<th>Table 1: Selection Criteria</th>
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<tr>
<td><strong>Population</strong></td>
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<td><strong>Intervention</strong></td>
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<td><strong>Comparators</strong></td>
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<td><strong>Outcomes</strong></td>
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<td><strong>Study Designs</strong></td>
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Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

Four systematic reviews, four randomized-controlled trials, and seven non-randomized studies were identified regarding the clinical effectiveness of psychological resilience-building interventions for patients (any age) exposed to adverse childhood experiences (ACEs) or trauma. No relevant health technology assessments, meta-analyses or evidence-based guidelines were identified.

Additional references of potential interest are provided in the appendix.

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

   PubMed: PM30033666


   PubMed: PM25389279

Randomized Controlled Trials

   PubMed: PM30091688

   PubMed: PM30270489
PubMed: PM23738530

PubMed: PM23868708

Non-Randomized Studies

PubMed: PM30626199

PubMed: PM30475045

PubMed: PM29544158

PubMed: PM30468990

PubMed: PM29413079

PubMed: PM28335746

PubMed: PM26711904

Guidelines and Recommendations

No literature identified.
Appendix — Further Information

Previous CADTH Reports


Systematic Reviews and Meta-Analyses

Alternative Population – General Population


Qualitative Studies


Clinical Practice Guidelines – Unspecified Methodology


Review Articles


Additional References

Examples of Policies and Activities