



**TITLE: Team-Based Behavioural Support for Youth Experiencing Mental Health or Addiction Issues: Clinical Effectiveness and Guidelines**

**DATE:** 12 January 2015

**RESEARCH QUESTIONS**

1. What is the clinical effectiveness of team-based behavioural support for youth experiencing mental health or addiction issues?
2. What are the guidelines associated with team-based behavioural support for youth experiencing mental health or addiction issues?

**KEY FINDINGS**

One non-randomized study and three evidence-based guidelines were identified regarding team-based behavioural support for youth experiencing mental health or addiction issues.

**METHODS**

A limited literature search was conducted on key resources including PubMed, The Cochrane Library (2014, issue 12), University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2009 and December 14, 2014. Internet links were provided, where available.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.

**SELECTION CRITERIA**

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

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**Table 1: Selection Criteria**

<b>Population</b>	Youth that are experiencing mental health or addiction issues
<b>Intervention</b>	Team-based behavioural support (an interdisciplinary team-based treatment approach involving psychiatrists, psychologists, social workers, mental health nurses, and addictions counselors)
<b>Comparator</b>	None
<b>Outcomes</b>	Clinical effectiveness (patient benefits and harms) Guidelines
<b>Study Designs</b>	Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, evidence-based guidelines

## 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.

One non-randomized study and three evidence-based guidelines were identified regarding team-based behavioural support for youth experiencing mental health or addiction issues. No relevant health technology assessments, systematic reviews, meta-analyses, or randomized controlled trials were identified.

Additional references of potential interest are provided in the appendix.

## OVERALL SUMMARY OF FINDINGS

One non-randomized study<sup>1</sup> compared two specialized team-based treatments with usual care for the early management of borderline personality disorder. After 24 months of treatment, participants who were a part of the Helping Young People Early (HYPE) program and received cognitive analytic therapy had lower levels of internalizing and externalizing psychopathology when compared to historical controls who received usual treatment. The HYPE program plus good clinical care resulted in lower levels of internalizing psychopathology and faster rate of improvement than historical controls.

Three guidelines<sup>2-4</sup> produced by the National Institute for Health and Care Excellence (NICE) were identified. Their recommendations are made in regards to bipolar disorder,<sup>2</sup> antisocial behaviour and conduct disorders,<sup>3</sup> and alcohol dependence and harmful alcohol use.<sup>4</sup> For all conditions multicomponent, multidisciplinary assessment and treatment programs specialized for children and youth are recommended. The team should work in conjunction with the parents or caregivers of the child requiring treatment.

## REFERENCES SUMMARIZED

### Health Technology Assessments

No literature identified.

### Systematic Reviews and Meta-analyses

No literature identified.

### Randomized Controlled Trials

No literature identified.

### Non-Randomized Studies

1. Chanen AM, Jackson HJ, McCutcheon LK, Jovev M, Dudgeon P, Yuen HP, et al. Early intervention for adolescents with borderline personality disorder: quasi-experimental comparison with treatment as usual. *Aust N Z J Psychiatry*. 2009 May;43(5):397-408.  
[PubMed: PM19373700](#)

### Guidelines and Recommendations

2. Bipolar disorder: the assessment and management of bipolar disorder in adults, children and young people in primary and secondary care [Internet]. London: National Institute for Health and Care Excellence; 2014 Sep. [cited 2015 Jan 8]. (NICE clinical guidelines 185). Available from:  
<http://www.nice.org.uk/guidance/cg185/resources/guidance-bipolar-disorder-the-assessment-and-management-of-bipolar-disorder-in-adults-children-and-young-people-in-primary-and-secondary-care-pdf>  
*See: 1.11 Recognising, diagnosing and managing bipolar disorder in children and young people, page 40*
3. Antisocial behaviour and conduct disorders in children and young people: recognition, intervention and management [Internet]. London: National Institute for Health and Care Excellence; 2013 Mar. [cited 2015 Jan 8]. (NICE clinical guidelines 158). Available from:  
<http://www.nice.org.uk/guidance/cg158/resources/guidance-antisocial-behaviour-and-conduct-disorders-in-children-and-young-people-recognition-intervention-and-management-pdf>  
*See: Developing local care pathways: pages 33-36*
4. Alcohol-use disorders: diagnosis, assessment and management of harmful drinking and alcohol dependence [Internet]. London: National Institute for Health and Care Excellence; 2011 Feb. [cited 2015 Jan 8]. (NICE clinical guidelines 115). Available from:  
<http://www.nice.org.uk/guidance/cg115/resources/guidance-alcoholuse-disorders-diagnosis-assessment-and-management-of-harmful-drinking-and-alcohol-dependence>  
*See: 1.3.7 Special considerations for children and young people who misuse alcohol*

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**APPENDIX – FURTHER INFORMATION:**

**Randomized Controlled Trials**

5. Zatzick D, Russo J, Lord SP, Varley C, Wang J, Berliner L, et al. Collaborative care intervention targeting violence risk behaviors, substance use, and posttraumatic stress and depressive symptoms in injured adolescents: a randomized clinical trial. *JAMA Pediatr.* 2014 Jun;168(6):532-9.  
[PubMed: PM24733515](#)

**Non-Randomized Studies – Quality Indicators**

6. Kutash K, Aciri M, Pollock M, Armusewicz K, Serene Olin SC, Hoagwood KE. Quality indicators for multidisciplinary team functioning in community-based children's mental health services. *Adm Policy Ment Health.* 2014 Jan;41(1):55-68. Available from:  
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3953037>

**Clinical Practice Guidelines**

7. Psychosis and schizophrenia in children and young people. Recognition and management [Internet]. London: National Institute for Health and Care Excellence; 2013 Jan. [cited 2015 Jan 8]. (NICE clinical guidelines 155). Available from:  
<http://www.nice.org.uk/guidance/cg155/resources/guidance-psychosis-and-schizophrenia-in-children-and-young-people-pdf>
8. BC Guidelines & Protocols Advisory Committee. Anxiety and depression in children and youth - diagnosis and treatment [Internet]. Victoria (BC): British Columbia Ministry of Health; 2010 Jan 1. [cited 2015 Jan 8]. Available from:  
<http://www.bcguidelines.ca/pdf/depressyouth.pdf>  
*Child and Youth Mental Health team mentioned throughout*

**Guidance Documents – Not Specific to Adolescents**

9. Wasserman D, Rihmer Z, Rujescu D, Sarchiapone M, Sokolowski M, Titelman D, et al. The European Psychiatric Association (EPA) guidance on suicide treatment and prevention. *Eur Psychiatry.* 2012 Feb;27(2):129-41.  
[PubMed: PM22137775](#)

**Additional References**

10. SAMHSA-HRSA Center for Integrated Health Solutions. Integrating behavioral health and primary care for children and youth: concepts and strategies [Internet]. Washington: The National Council for Behavioral Health; 2013 Jul. [cited 2015 Jan 8]. Available from:  
[http://www.integration.samhsa.gov/integrated-care-models/Overview\\_CIHS\\_Integrated\\_Care\\_Systems\\_for\\_Children.pdf](http://www.integration.samhsa.gov/integrated-care-models/Overview_CIHS_Integrated_Care_Systems_for_Children.pdf)
11. Fraser Region Aboriginal Youth Suicide Prevention Collaborative. Suicide prevention, intervention and postvention initiative [Internet]. Surrey (BC): Fraser Health; 2012 Dec. [cited 2015 Jan 8]. Available from: [https://www.fraserhealth.ca/media/AH\\_suicide-prevention.pdf](https://www.fraserhealth.ca/media/AH_suicide-prevention.pdf)

12. Mann MY. The role of the medical home in optimizing children's mental health [Internet]. Rockville (MD): Human Resources and Services Administration (HRSA); 2010 Jul 2. [cited 2015 Jan 8]. Available from:  
<http://www.nami.org/ContentManagement/ContentDisplay.cfm?ContentFileID=100115>
13. Chanen AM, McCutcheon LK, Germano D, Nistico H, Jackson HJ, McGorry PD. The HYPE Clinic: an early intervention service for borderline personality disorder. *J psychiatr pract.* 2009 May;15(3):163-72.  
[PubMed: PM19461389](#)