

Issues in the measurement of outcomes in evaluating interventions for families recovering from child sexual abuse

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as long as it takes

Overview

- Contextual background
- Key questions
- Systematic meta-review of literature about impact of therapeutic interventions in child sexual abuse
- Defining practice relevant outcomes
- Mind the gap!

Contextual background

- Critiques of EPB in social/psychosocial/community based work
- Key critique is that EBP researcher led and not relevant to practice
- One way of addressing this is joining up between research and practice in defining practice relevant outcomes

Questions:

What are the outcomes of interest for practitioners providing services for children of sexual abuse?

How well does research reflect these outcomes of interest?

Background

Child sexual abuse has been associated with:

- Sexualised behaviour (McClellan et al, 1996)
- Symptoms of Post Traumatic Stress Disorder (PTSD) (Deblinger, Lippman & Steer, 1996; Paolucci, Genius & Violato, 2001).
- Poor psychological functioning (e.g. Fergusson, Horwood & Lynskey, 1996; Read, 1997)
- Depression and low self-esteem (Mullen et al, 1996)
- Eating disorders (Wonderlich et al, 1997)
- Suicide (Paolucci, Genius & Violato, 2001)
- Substance misuse (Arellano, 1996)

Background

Research does not always provide best fit with practitioner knowledge needs:

A review of practitioner priorities in child care highlights that research does not always meet practitioners' expressed needs for knowledge (Stevens et al, 2006)

Background

“The practitioners voice remains largely unheard and the knowledge base inconsistency utilised in practice” (Coren, 2008)

“ the relevance of research to practice optimally should be informed by both practitioner and service user priorities” (Davis & Nutley, 2002)

Background

Evidence informed practice may enable greater 'democratisation' of knowledge (Gough, 2007)

Evaluation: Systematic meta-review

1. Meta-review comprised an overview of the results of research reviews that evaluate and summarise the effectiveness, or the impact on outcomes of interventions offered to children and families affected by sexual abuse
2. Outcomes of interest agreed with Action for Children staff for longitudinal component of evaluation prior to meta review

Evaluation: Systematic meta-review

Inclusion Criteria

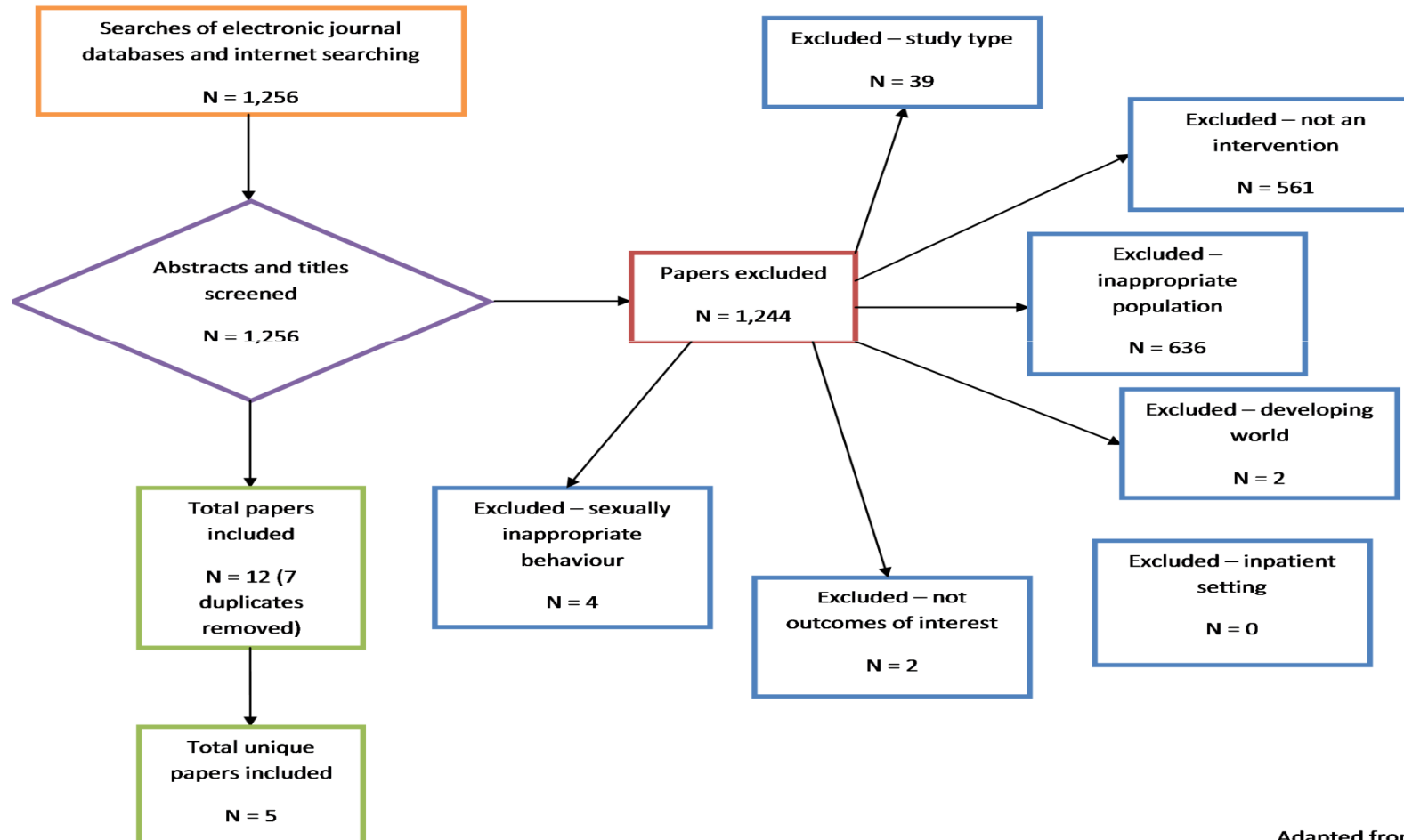
Type of study/report: literature reviews of therapeutic interventions for child sexual abuse published from 2005 to 2008 in the English language (studies included in individual reviews go back decades)

Participants: Children and young people who have disclosed sexual abuse (as defined by the included reviews).

Settings: Community settings defined as non inpatient or residential environments. Services provided by any provider, including: Statutory/Voluntary/Health/Social care/Education.

Interventions: interventions for children/young people who have reported sexual abuse or for families/carers of children/young people where the intervention is intended to promote the child's recovery

Evaluation: Systematic meta-review



Evaluation: Systematic meta-review

Included Reviews

1. **Avinger and Jones (2007)** reviewed the impact of various types of group interventions on recovery from sexual abuse in adolescent girls. They included a total of 10 studies reporting the effects of such interventions.
 2. **Cohen et al (2006)** reviewed 20 randomized controlled trials of psycho-social interventions, seven of which were specifically aimed at children who had been sexually abused.
 3. **Hetzel-Riggin et al (2007)** conducted a statistical meta-analysis of 28 studies reporting pre- and post-test results for any type of intervention for children and young people who have been sexually abused.
 4. **MacDonald et al (2006)** conducted a systematic (Cochrane) review of cognitive behavioural interventions for child sexual abuse.
 5. **Skowron and Reinemann (2005)** conducted a statistical meta-analysis of psychological interventions for child maltreatment, including seven studies specifically related to child sexual abuse.
- Reviews included 62 unique studies excluding overlaps

What are the outcomes of interest for practitioners who treat children of sexual abuse?

Outcomes agreed with Action for Children staff prior to literature review.

These outcomes were arrived at following considerable discussion with project staff. They focus on priorities identified by the agency as:

1. Being focused on which elements promote the child's recovery in practitioner experience
2. Measure the development of stability in children's lives following trauma of abuse
3. Being related to service delivery as applicable to their various stakeholders

Practitioners' outcomes of interest

Service delivery

Referrals to other agencies

Safety

Is child having contact with alleged abuser?

Is work with non-abusing carer/parent to be undertaken?

Parents/carer engagement with the therapeutic process

Behaviour

Sexualised behaviour

Violent/aggressive behaviour

Self harm behaviour

Education

Attendance levels at appropriate educational provision/employment

Mental/emotional health

Depression/anxiety (standardised measure)

Social functioning/relationships (standardised measure)

Sleep patterns

Bedwetting

Nightmares

Other

Medication

Security of residential placements, measured as changes of placement or breakdown in placement stability.

Outcomes of Interest: **NOT** addressed by research

Service delivery

Referrals to other agencies

Safety

Is child having contact with alleged abuser?

Is work with non-abusing carer/parent to be undertaken?

Parents/carer engagement with the therapeutic process

Education

Attendance levels at appropriate educational provision/employment

Mental/emotional health

Sleep patterns

Bedwetting

Nightmares

Other

Medication

Security of residential placements, measured as changes of placement or breakdown in placement stability.

Outcomes of Interest: **addressed by research**

Mental/emotional health

Depression/anxiety (standardised
measure)

Behaviour

Sexualised behaviour

Violent/aggressive behaviour

Self harm behaviour

Mind the gap!

Service delivery

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Security of residential placements, measured as changes of placement or breakdown in placement stability.

Outcomes addressed in research but not expressed of interest to practitioners

- Parenting outcomes e.g., measures of parental depression (Avinger & Jones (2007))
- Number and duration of therapy sessions (Hetzl-Riggin et al, 2007)
- Some process factors (Avinger & Jones, 2007)

The way ahead

- Imperative that the practitioner voice is heard in the development of research and evaluation if research is to be relevant and influence development of best practice
- Research and evaluation should join up with practitioner priorities

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