

OUTPATIENT PSYCHOSOCIAL SUBSTANCE USE TREATMENTS FOR YOUNG PEOPLE: AN OVERVIEW OF REVIEWS

Authors: Nicole Snowdon^{1*}; Julaine Allan¹; Anthony Shakeshaft²; Debra Rickwood³, Emily Stockings², Veronica Boland², & Ryan J. Courtney²

¹*Lives Lived Well, Australia*, ²*National Drug and Alcohol Research Centre, The University of New South Wales, Australia*, ³*headspace The National Youth Mental Health Foundation, Melbourne, Australia; University of Canberra, Canberra, Australia*

Presenters email: n.herridge@student.unsw.edu.au

Introduction and aims: Systematic reviews and meta-analyses (reviews) report conflicting evidence regarding the efficacy and feasibility of treatments addressing substance-related disorders in young people (YP). This overview of reviews, synthesizes, and methodologically assesses systematic reviews examining alcohol and other drug (AOD) interventions for YP in outpatient settings.

Method: Systematic reviews published between 1990 and March 2018 were searched using 5 databases (EBM Reviews, PsycINFO, Embase, Ovid Medline, and Campbell Collaboration). Reviews investigating efficacy and/or implementation of AOD psychosocial interventions for YP in outpatient settings were included.

Results: Forty-three reviews met all inclusion criteria. Forty were assessed using A Measurement Tool to Assess Systematic Reviews 2 (AMSTAR 2) and three were narratively assessed. Study, participant, and intervention data were extracted by a single reviewer, and 30% (n=13) were extracted in duplicate to assess inter-rater reliability.

Six reviews met high methodological quality criteria (n = 6). Five high quality reviews found insufficient evidence to establish the superiority of any one intervention. One high quality review reported potential efficacy of Multidimensional Family Therapy (MDFT) in reducing YP substance use when compared to treatment as usual, Cognitive Behavior Therapy, Adolescent Community Reinforcement Approach and Multifamily Educational Therapy.

Discussion and Conclusion: The efficacy of AOD outpatient interventions for YP remains unknown. There is a lack of methodologically rigorous clinical trials, systematic reviews, and meta-analyses. MDFT was the only treatment with promising outcomes. No robust reviews for the implementation of interventions were found.

Disclosure of Interest Statement: This work was supported by the NSW Ministry of Health. The funding body had no role in the design, analysis, or interpretation of the data.