Intervention components that have common impacts across parental domestic violence, mental ill-health, and substance misuse

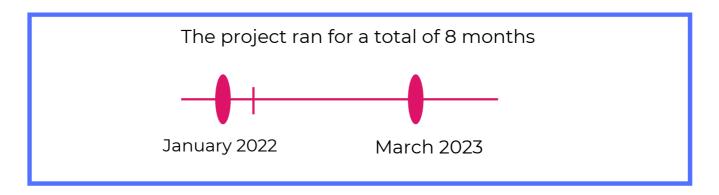
Project report

Principal investigator: Prof. Vashti Berry, University of Exeter

A UKRI Violence, Abuse and Mental Health Network funded project

Project background

This project was funded by the UKRI Violence, Abuse and Mental Health Network as part of its workstream on the theme of interventions for violence, abuse and mental health.



Project team:

- Vashti Berry, Senior Research Fellow at The University of Exeter
- Kate Allen, PhD student at The University of Exeter
- G.J. Melendez-Torres, Professor of Clinical and Social Epidemiology at The University of Exeter
- Chris Bonell, Professor of Public Health Sociology at The London School of Hygiene and Tropical Medicine
- Tamsin Ford, Professor of Child and Adolescent Psychiatry at The University of Cambridge

Project partners and collaborators:

• The Violence, Health and Society (VISION) Consortium (funded by UKPRP)



Background

Interventions for parental domestic violence and abuse (DVA), mental illhealth (MH), and substance misuse (SU) tend to be delivered by separate services even though these three issues often co-occur in families. Our recent review [1] found little evidence of ready-to-use interventions with combined impacts on all three issues that might inform policy or practice change. A promising alternative is to identify common programme components or change processes that have demonstrated success in reducing DVA, MH, or SU.

Methods

We reviewed the literature to find studies of programmes targeting DVA, MH and/or SU. We undertook an Intervention Components Analysis of these interventions. This involved identifying key features (components) of each programme which tell us something about how change is brought about for families. We explored which components were common across different interventions, and which – if any – were successful in improving parent outcomes.

Results

The review identified 164 interventions with a focus on MH, DVA or SU alone (n=124), or MH, SU and/or DVA in combination (n=40). We identified 20 programme components, all of which were common to at least two of the three outcomes, i.e., there were no outcome-specific components. The most common components were skills development, psychoeducation, and relationship enhancement. No single component was associated with a meaningful improvement in outcomes, and interventions focused on these issues in combination were less successful at improving MH outcomes than those targeting the issue in isolation.

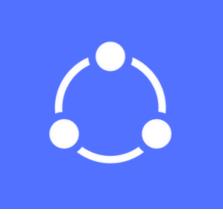
Conclusions

We found no evidence of commonly effective programme components in currently evaluated interventions. It is likely that better mapping of components to the processes driving MH/DVA/SU outcomes is required. Interventions responding to the needs of families with complex and multiple needs require alternative designs that consider the wider context and how risks interact in families.

Key messages

Top 3 key messages from the project

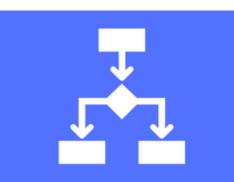
Ð	1
مر 000	



There was limited differentiation in intervention components by target outcome (DVA/MH/SU) but some components were more prevalent by outcome focus, and interventions targeting multiple needs tend to provide longer-term support and to address additional concerns of clients (e.g., housing, finances).

Most single-issue interventions (i.e., those targeting DVA, MH, or SU) were not successful in improving outcomes and there was some evidence to suggest clustered interventions (i.e., those targeting a combination of DVA, MH, and/or SU) were less likely to be helpful for MH outcomes.





No effective components were identified, i.e. no components were associated with significant treatment effects on any outcome/s.

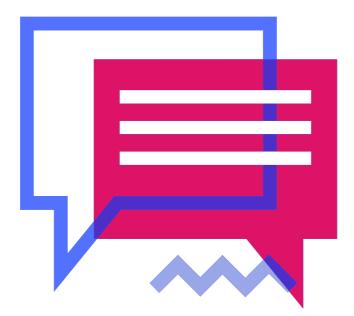
Outputs

Journal Publication: Family focused interventions that address parental domestic violence and abuse, mental ill-health, and substance misuse in combination: A systematic review

- The linked systematic review component of this project was published in PLoS One in 2022.
- You can read the paper <u>here</u>.

Project profile: NIHR Peninsula Applied Research Collaboration (PenARC)

- The project was profiled by the NIHR Peninsula Applied Research Collaboration (PenARC) on their website.
- You can read the profile <u>here</u>.



More outputs will be shared as part of this project including academic papers. We will be sure to signpost these when they become available.

The Violence, Abuse and Mental Health Network

We will be sure to keep our members updated on any outputs linked to this project in the future. To keep updated you can sign up to our mailing list and receive our monthly newsletter. You can also follow us on our socials . All links can be found at the bottom of this page.

About the VAMHN

We are a network of individuals and organisations aiming to reduce the prevalence of mental health problems by addressing associated violence and abuse, particularly domestic and sexual violence. We bring together and support research by experts from a range of disciplines, sectors, and backgrounds - some with personal experience, others with expertise from the work that they do, and survivor researchers with both.

The activities of the network are organised into 3 themes:

Measurement	Measuring the extent and impact of domestic and sexual violence in relation to mental health. Our first year activities focused on the theme of measurement
Understanding	Understanding the pathways that lead to domestic and sexual violence and their relationship to mental health problems
Intervention	Planning interventions and services to prevent, reduce and address domestic and sexual violence in people with mental health problems or at risk of developing mental health problems

Website	www.vamhn.co.uk	
Email	vamhn@kcl.ac.uk	
Twitter	@VAMHN	VAMHN
Forum	<u>vamhn6.wixsite.com/forum</u>	Violence Abuse & Mental Health Network
Instagram	@ukri_vamhn	rieatur Network