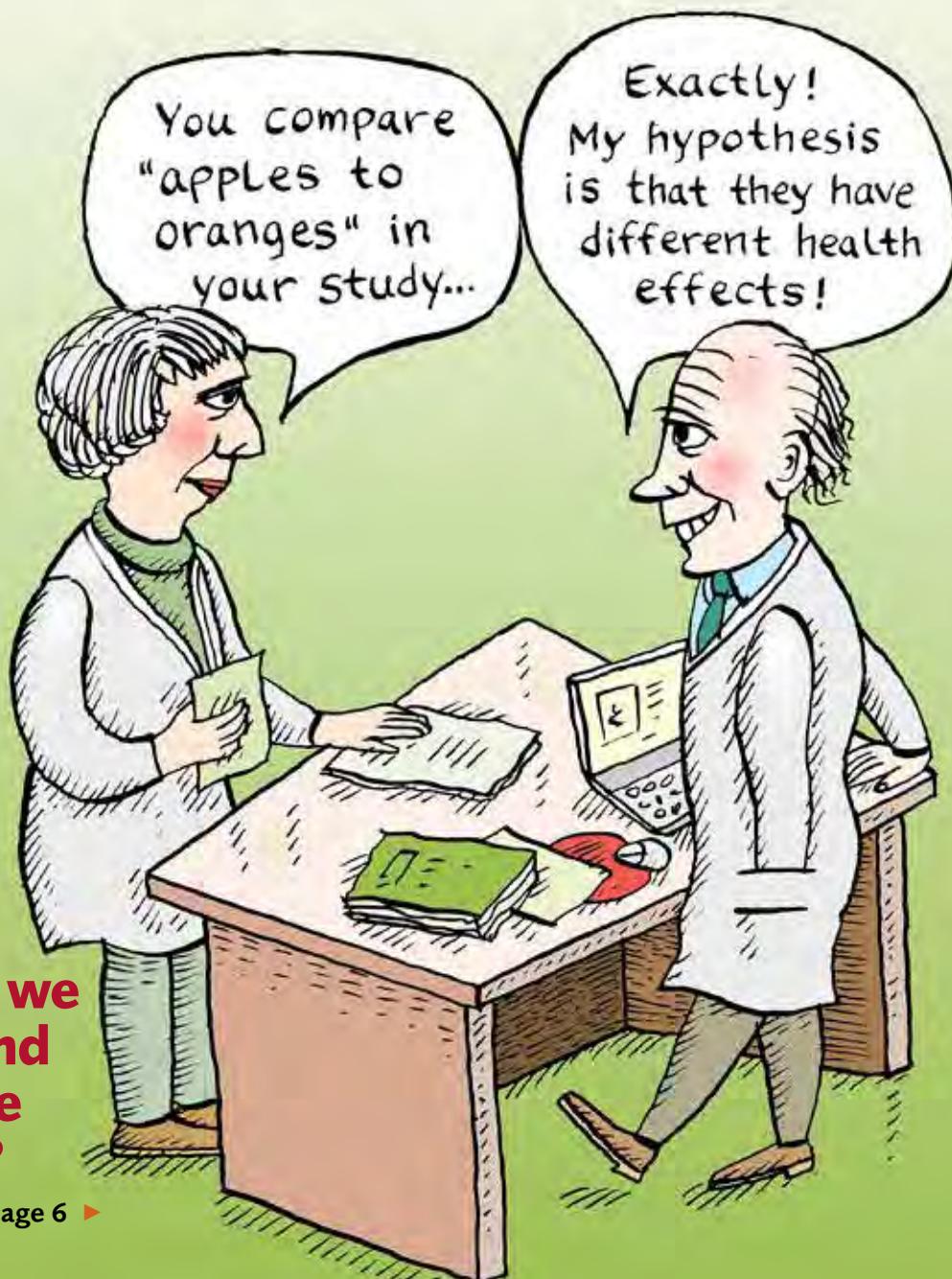


Science & Practice

Information from SBU – The Swedish Agency for Assessment of Health Technology and Social Services



How do we study and compare effects?

Read more on page 6 ▶

SBU – ASSESSING HEALTH TECHNOLOGY AND SOCIAL SERVICES

The research that changed practices in social services – examples from the field 2 • SBU's Director General Britta Björkholm: "SBU has the tools and the expertise" 4 • Chance, p-value and confidence interval 6 • About interventions to help people get back to work 9 • Improved quality of life among elderly in residential homes 10

READ ALSO INSIA TO PREVENT DUPLICATION IN SOCIAL SERVICES RESEARCH 5 • YOUTH AND GANG-RELATED CRIMINALITY – TWO REPORTS IN THE PIPELINE 12 • SBU REVIEWS SUPPORT INTERVENTIONS FOR ADDICTION AND CONCOMITANT MENTAL ILLNESS 14 • SUPPORTING GOOD MENTAL HEALTH IN CHILDREN AND YOUNG PEOPLE 16

The research that changed practices in social services

Research and evidence are increasingly in demand to promote growth in social services. SAVRY, TFCO, ILS, IPS – all these acronyms are examples of reviewed methods and interventions that are changing accepted practices in Swedish social services.

WHEN SBU INVESTIGATED what interventions were used for children and young people in need of support from social services, at least 102 interventions were identified. Only nine of them, however, had a strong scientific foundation.

But the future looks bright, according to Knut Sundell, senior advisor for social affairs at SBU:

“Currently, about one study a week is being published that measures the effect of an intervention, a dramatic increase since the 1990s when only a handful were published each year. The research findings are later compiled in SBU reports and ultimately used by institutions such as the National Board of Health and Welfare to produce a knowledge base and formulate guidance in the field. This approach allows municipalities to choose effective interventions and methods, and avoid spending money on measures that may not work.

Every year, approximately 800,000, from a population of 10 million, people benefit from Swedish social services and disability interventions.

Parental support based on the right components

The City of Stockholm is one of the municipalities that aims to put scientifically based methods into practice. One concrete example is parental support programs.

Katarina Munier is the head of the unit at the Center for Children and Youth (Kompetenscenter för barn och unga) in the City of Stockholm:

“Assessments have shown that some

parental support programs work well. Parents with children who act out are now offered this type of help, which is based on precisely those components deemed to have a beneficial effect.

Structured methods to predict repeat violence in young people

Structured methods such as SAVRY can provide guidance in assessing the risk of repeat violence and other criminal activities among young people, at least at lower levels of risk.

SAVRY stands for Structured Assessment of Violence Risk in Youth.

Between 2020 and 2022, the City of Stockholm trained almost 260 social workers in the SAVRY decision support tool.

Foster care treatment helps young people with behavioral problems

An alternative to living in special residential homes (SiS-hem) under the auspices of the Swedish National Board of Institutional Care is available for young people who have engaged in criminal behavior or who have other serious behavioral problems. An SBU report has shown that young people with serious behavioral problems fare better when living in the foster care setting, in which both they and adult family members receive special support. Foster care is also cost-effective for society compared with institutional care.

There are several types of foster care, but the approach supported by research is the US model known as Treatment Foster Care Oregon (TFCO).

Independent living is easier with proper support

Few Swedish municipalities provide support programs for youth who transition from placement in a “home for care and living” (HVB) or family home to independent living. Research has shown that



▲ Knut Sundell, senior advisor, social affairs, SBU.

PHOTO: MAGNUS GLANS

EFFECTIVE INTERVENTIONS AND METHODS

At the website www.sbu.se/ww SBU lists methods and interventions for which there is scientific support in one of our reports, and how strong that support is.



these young people successfully transition to independent adulthood better when receiving support, such as the program for Independent Living Services (ILS) in the US. Individuals about to exit from residential care are assigned a mentor who provides support as needed, for example regarding housing, education, employment, health care or in relation to social issues.

Support for vulnerable adults

Residential support can also be effective for adults who have been excluded from society, as shown by research on how to reduce homelessness among people with substance abuse, addiction and mental health problems. SBU has reviewed assessments of the Case Management (CM) and Housing First interventions, aimed at reducing homelessness in this group.

Peter Sonnsjö is head of operations in Kristianstad, one of the municipalities where these types of intervention are used in social services:

“We have several fully trained case managers in the municipality, and the

“Housing First” caseworkers have also received basic skills in CM to enable them to adhere to the program.

IPS provides jobs to more individuals with mental disabilities

A growing number of Swedish municipalities have availed themselves of recent research concerning support for individuals with mental disabilities in order to help them find and keep a job. With this approach, municipalities provide Individualized Support for Employment (Individanpassat stöd till arbete, IPS), which is supported by scientific research and significantly increases the chances of finding work in the open labor market with greater success than through traditional work rehabilitation programs.

Despite the good results from IPS and a recommendation from the National Board of Health and Welfare, this approach has only been used to a limited extent. To date, the National Board of Health and Welfare’s national guidelines only recommend IPS for people with schizophrenia or schizophrenia-like conditions. ◆ **ÅF**

About the reports

- Support program for parents of children who act out: Effects and active components. SBU 2019. (*Föräldrastödsprogram vid utagerande beteende hos barn: Effekter och verksamma komponenter.*)
- Foster care for young people with serious behavioral problems – Treatment Foster Care Oregon. SBU 2018. (*Behandlingsfamiljer för ungdomar med allvarliga beteendeproblem – Treatment Foster Care Oregon.*)
- Risk and needs assessment of young people regarding recidivism in violence and other criminality. SBU 2019. (*Risk- och behovsbedömning av ungdomar avseende återfall i våld och annan kriminalitet.*)
- Support for young people moving out of residential care. A systematic review. SBU 2020. (*Stöd till unga som ska flytta från placering i social dygnsvård. En systematisk översikt.*)
- Interventions to reduce homelessness for people with substance abuse, addiction and mental health problems. SBU 2018. (*Insatser för att minska hemlöshet för personer med missbruk, beroende och psykisk ohälsa.*)
- Individualized Support for Employment (IPS) for people with mental disabilities. SBU 2020. (*Individanpassat stöd till arbete (IPS) för personer med psykisk funktionsnedsättning.*)

METHOD GUIDE

The National Board of Health and Welfare’s “Method Guide” provides more information on interventions and assessment methods relevant to social work in Sweden.



▲ Britta Björkholm,
Director General of SBU.

Equitable social services based on sound research. This concept is the foundation on which SBU produces scientifically supported research.

Evidence and evidence-based practices in social services

EVERY YEAR, APPROXIMATELY 800,000 people benefit from Swedish social services. Beneficiaries include the elderly, children, adolescents and families. But how much evidence is there to support that the outcomes are those that were desired?

“It is important for society as a whole that social services’ interventions are based on sound research to establish what actually works. However, research on interventions and methods in social work is in part based on different premises than, for example, in health care and dental care,” according to Britta Björkholm, Director General for the Swedish Agency on Health Technology Assessment and Assessment of Social Services (SBU).

SBU helps to identify solid well-founded science for health care and social services. *SBU culls.*

And reviews.

And assesses.

When all is said and done, just a few reliable studies may remain from the tens of thousands of articles identified in SBU’s literature searches. A search may run the gamut from foster care to elderly care. High-quality assessment is more important than ever as research articles are being published at an ever-faster pace. SBU has the tools and the expertise, according to Britta Björkholm.

“**SBU IS TASKED** with specific assignments from sources such as the government, but we also address research questions that we consider to be especially pressing. We also serve as a source of information to other authorities, such as the Family Law and Parental Support Authority (*Myndigheten för familjerätt och föräldraskapsstöd*) and the National Board of Health and Welfare (*Socialstyrelsen*).”

As a component of national knowledge management, the National Board of

Health and Welfare provides guidance for social services, founded upon evidence-based practice (EBP). In EBP, the scientific basis is one of several aspects that decision-makers must take into account. Other aspects may include proven experience, as well as the practical and organizational circumstances relating to the intervention.

“Even if there is no scientific basis for an intervention, it does not necessarily mean that the intervention is ineffective, we just don’t know for sure. EBP also means taking into account the needs of the individual for support.”

SBU HAS EVALUATED research in several areas of social services. In this issue of Medical and Social Services Science & Practice, we share some reports that have already been published, as well as others that are in the pipeline for 2023. ♦ ÅF

New international organization cooperates on social services reviews

 At the initiative of the Swedish Ministry of Health and Social Affairs, the International Network for Social Intervention Assessment (INSIA) was established in November 2021.

“INSIA works to avoid duplication by improving the methodological and overall quality of social services reviews,” says Sophie Werkö, SBU’s international coordinator and



▲ Sophie Werkö

secretary of the INSIA network. INSIA is open to publicly funded organizations that focus on reviews of social interventions and methods. Currently, the network has members from eight countries, mainly from Europe, but also from Canada.

Read more at www.insia.network

STA network closed

The National Social Technology Assessment (STA) network was established in the fall of 2017 to improve coordination and to develop and strive for a more consistent methodology in the field of social services and disability support.

Although the STA network has now been dissolved, collaboration and exchange of

knowledge will continue in three already existing networks:

- National Liaison for Knowledge Management in Social Services (*Nationell samverkansgrupp för kunskapsstyrning i socialtjänsten, NSK-S*)
- Partnership to support knowledge management in social services (*Partnerskapet till stöd för kunskapsstyrning inom socialtjänsten, Partnerskapet*)
- Regional cooperation and support structures (*Regionala samverkans- och stödstrukturer-na, RSS*)

Questions? Please contact Maral Jolstedt, SBU representative in NSK-S and Partnerskapet, e-mail: maral.jolstedt@sbu.se

Just how do we study effects?

Will this intervention enable more people to earn a living? Will fewer young offenders become repeat offenders as a result of the new approach? And what about possible negative consequences?

TO JUDGE WHETHER or not an intervention is appropriate to put into practice, we would really like to know about its effects. And to obtain reliable answers, research studies must be meticulously planned and conducted. But even if this is the case, pitfalls may be encountered, including the tricks that chance plays on us.

When evaluating effects, researchers and authorities such as SBU have a penchant for experimental studies. In these, outcomes for those who receive a particular intervention are compared with those who receive a control intervention, such as customary care, which is to say the intervention commonly provided. Ideally, participants should be divided into groups based on random selection. Drawing conclusions about effects can still be attempted even when participants have not been randomly assigned to the compared groups, but this requires careful management of potential confounders that may skew the results. Otherwise there is a risk of comparing apples to oranges.

Random effects – a problem with repeated tests

Researchers may have more or less good reasons to assume that a particular treatment or intervention really does have a particular effect before a study is

even conducted. In the pharmaceutical world, it is not uncommon to randomly test a large number of candidate drugs in order to select those that are worth investigating more thoroughly in clinical trials. But many statistical tests are associated with an increased risk of drawing improper conclusions as a result of chance outcomes. This problem is less of a concern in social work, where interventions are often complex and researchers need to formulate their research question based on different premises. From a statistical standpoint, however, it is not the research question that is being tested, i.e. whether the intervention in question actually has an effect. Instead, one takes the opposite approach: the researcher makes the hypothetical assumption that the intervention has no effect (assumes that the “null hypothesis” is correct). The researcher then analyzes to what extent the observations in the experiment *contradict* the null hypothesis.

“‘Trawling’ research data for low p-values (sometimes called p-hacking, data dredging, or data mining) is one of the more serious sins of research.”

P-value – popular, much sought after, but also questioned

One result from such analyses is the “p-value.” A p-value is a measure of how unlikely the results are, given that the null hypothesis is indeed correct.

Researchers are usually overjoyed to end up with a low p-value because it may be a sign that they are hot on the trail of something important, but also that they have a good chance of getting their results published in a scientific journal. But p-values are also controversial for various reasons; for example, they hold such high value for researchers that they risk overshadowing the importance of the research question. “Trawling” research data for low p-values (sometimes called p-hacking, data dredging, or data mining) is one of the more serious sins of research. Because for every statistical test that is conducted, there is a small risk that chance may be playing a trick. If researchers run sufficiently many variations on a test, the chances are good of ultimately obtaining a statistically significant result, even if the intervention being tested actually has no effect.

Waiting to formulate a hypothesis until after the data have already been analyzed is sometimes referred to as Hypothesizing After the Results Are Known, or HARKing. In such cases, researchers conduct various analyses and massage the data until they find a result



of interest, as reflected by a low p-value. Only in the aftermath of this process is the hypothesis formulated to explain the findings, exactly the opposite of good research practices.

The HARKing phenomenon does not seem to be entirely rare. When researchers in various fields were asked to do some soul-searching, an average of 43% admitted to HARKing at some point in their research careers (1).

It is difficult to control what researchers do behind closed doors, but one way to counteract trawling for low p-values is to require researchers to publish, in advance, a protocol in which they describe the research question and the statistical analyses they plan carry out (2). Such pre-published protocols can be used for control purposes if necessary and can almost be considered as a stamp of quality in itself. ▶

▲ Waiting to formulate a hypothesis until after the data have already been analyzed is sometimes referred to as Hypothesizing After the Results Are Known, or HARKing.

In such cases, researchers conduct various analyses and massage the data until they find a result of interest, as reflected by a low p-value.



PHOTO: MAGNUS GLANS

▲ Per Lytsy, medical expert and project manager SBU.

Size does matter, after all

Over the past decade, p-values, statistical significance and the black-and-white view of research findings that easily materialize in their wake have been widely discussed in the scientific literature. In part, this is because low p-values have not proved to be as reliable and replicable as expected (3), but also because the concepts are often misunderstood (4, 5).

A growing number of proponents are now advocating less emphasis on the importance of p-values and instead recommending that results be presented in such a way that the magnitude of the effect becomes apparent, including the

"A growing number of proponents are now advocating less emphasis on the importance of p-values and instead recommending that results be presented in such a way that the magnitude of the effect becomes apparent, including the associated confidence interval."

MANY COMPILED STUDIES PROVIDE A BETTER BASIS FOR DECISION-MAKING

Even if an individual study is well designed, such as a randomized controlled trial in which the protocol is published in advance and the dropout rate is low, it is still just a study where chance may have affected the outcome.

When considered together, several well-designed studies exploring the same question provide a better basis for assessing the effects of a method. Consequently, the

associated margin of error, as reflected by the confidence interval. The reporting of effect results expressed as confidence intervals has become increasingly common in the research literature (6). The width of the confidence interval reflects the uncertainty concerning the magnitude of the average effect. In practice, the interval describes all the values that the effect can assume, and which from a statistical standpoint are not contradicted by the data analyzed. Should the confidence interval be extremely wide, it will fail to provide meaningful insight since no conclusions can then be drawn as to whether the effect even exists and if so, whether or not it is beneficial. But if the interval is narrow, it provides intuitively understandable information that becomes important when deciding whether or not to recommend an intervention.

Then the question becomes how small or large an effect should be in order to be considered relevant in practice. This question cannot be answered by statistics, and instead depends on context and the value ascribed to the effect. Only people are able to make such a judgment call. ♦ PL

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INTERVENTIONS TO HELP PEOPLE GET BACK TO WORK

Some interventions appear to help people that do not regularly partake on the labor market to get back to work, according to three recent SBU reports. Bringing the workplace on board is often important.

SBU HAS INVESTIGATED the scientific basis for interventions aimed at helping people who for various reasons are far from the labor market, to return to work.

One of the reports concerns the group of adults on long-term social assistance. The results show that workplace-based training, as well as more comprehensive education, is likely to result in more people becoming employed, compared with usual practices or no intervention.

“Even within this vulnerable group, we now see that training leads to employment. But this does not apply to just any training, but specifically training in a workplace, linked to a real job,” says Elizabeth Åhsberg, project manager at SBU.

INTERNSHIPS IN REGULAR municipal services also seem to result in more people becoming employed, compared with internships outside regular work activities.

The second report examined the effect of work-directed interventions for people on long-term sick leave due to anxiety, depression, or reactions to severe stress – the most common causes of long-term sick leave in Sweden.

The results show that cognitive behavioral therapy and team-based support, in both cases in-

cluding workplace involvement, may increase the number of people returning to work compared with care as usual or no intervention.

“Occupational health services can play an important role here, such as providing team-based support to employees on long-term sick leave,” says Elizabeth Åhsberg.

SBU HAS ALSO examined how interventions offered by health services to people who are on or at risk of long-term sick leave can support their return to work. The evaluation covered common causes of long-term sick leave, which are mainly psychological and musculoskeletal disorders.

The included studies were shown to examine many different interventions that were evaluated in many different ways, making it difficult to compile the results. “Nevertheless, important conclusions can be drawn,” says Per Lytsy, project manager at SBU.

“There is evidence that different categories of interventions can have beneficial effects on return to work, and these are largely interventions and methods already used in Swedish healthcare today,” he says.

Categories shown to have a beneficial effect, compared with customary care, include unimodal interventions (individual treatments or therapies), multimodal interventions (several treatment interventions are provided, often by a multi-professional team) and interventions involving workplace contact, either directly or through a coordinator. **◆ SN**



PHOTO: MAGNUS GLANS

▲ Elizabeth Åhsberg, project manager SBU.

“Even within this vulnerable group, we now see that training leads to employment.”

About the reports

- Effects of active labor market programs for long-term social assistance recipients: a systematic review. SBU, 2022. www.sbu.se/351
- Effects of work-directed interventions on return-to-work among people on sick leave due to depression, anxiety or adjustment disorders: A systematic review. SBU, 2022. www.sbu.se/352
- Healthcare interventions for long-term sick leave. A systematic review and evaluation of medical, health economic and ethical aspects. SBU, 2022. www.sbu.se/359



Many interventions can be beneficial for older people in residential homes

SBU has undertaken a quality review and commented on six well-designed international systematic reviews on various interventions aimed at older people with dementia and who live in special housing. The results show that several interventions effectively improve quality of life. Although the interventions have no known adverse effects, individual assessment is important since no single intervention is appropriate in all cases.

Robotic pets may benefit health and well-being

Therapy involving live animals may increase well-being and decrease mental ill health in the elderly. The research results that we reviewed demonstrate that robotic animals can also have the same

effects, especially in those with dementia. The elderly, staff and family members describe how robotic animals contribute to various aspects of well-being, such as reduced loneliness and increased social interaction. The results apply to those who choose to interact with the robotic animal. Not everyone has a positive experience with them. It is important to assume an individualized approach and use them as a complement to traditional care services.

Improved quality of life from indoor nature-based interventions

Indoor nature-based interventions involving active participation benefit the health and well-being of the elderly with dementia in a similar way as being out in nature. The interventions may also have a benefi-

cial effect on mental and social well-being, involvement and quality of life.

However, it is important for older people to be actively involved. Examples include planting or caring for potted plants. In this approach, residents should also take responsibility for the plants.

Non-pharmacological treatment for depression at least as effective as drugs

Many patients suffering from dementia are depressed. One common treatment for depression is antidepressants, which often have side effects. Non-pharmacological treatments are equally or more effective than drug treatment in reducing the symptoms of depression. Such treatments include physical exercise, massage, touch therapy and cognitive stimulation.



PHOTO: DAN KOSMAYER/SHUTTERSTOCK

These results are applicable for mild to moderate depression. For major depression, the scientific support is unclear. The results are based on a network meta-analysis and should be interpreted with some caution.

Cognitive training can have a beneficial effect on dementia

Dementia-related cognitive impairments cannot be reversed. But efforts can be aimed at slowing progression of cognitive decline. Cognitive training is a term used to describe an array of techniques used to stimulate and train functions such as information processing, problem-solving and memory. The training likely has a small to moderate effect on general cognition among individuals with mild to moderate dementia.

Music therapy can reduce symptoms of depression

Music is used in various ways within healthcare and social services for people with dementia. The review by SBU shows that music-based therapeutic interventions provided by a qualified music therapist are likely to reduce depressive symptoms and behavioral problems in people with dementia who are hospitalized or live in long-term care facilities.

Physical exercise reduces the risk of falls

The proportion of individuals who fall increases with both advancing age and worsening health, and is also higher among those living in long-term care facilities or who are hospitalized. Physical exercise can reduce the number of falls by about 25%. Such programs are most effective if led by health professionals. The programs are effective regardless of whether the participants are at high or normal risk of falling and whether they are younger or older than age 75. ♦ NI

About the commentaries

SBU reviews the quality of systematic reviews by outside researchers and comments on them from a Swedish perspective. We call this type of compilation "SBU Commentary."

SBU considers all six reviews to be well done, which means that the risk that the results have become skewed during the studies is low. However, SBU has not assessed the risk of bias in individual studies included in the reviews.

- The role of robotic animals in the health and well-being of older people with dementia in special housing. SBU, 2022. www.sbu.se/2022_02
- Nature-based indoor interventions in residential homes to improve the health and well-being of the elderly. SBU, 2022. www.sbu.se/2022_01
- Treatment of depression in people with dementia. SBU, 2022. www.sbu.se/2022_04
- Cognitive training for people with mild to moderate dementia. SBU, 2022. www.sbu.se/2022_03
- Music-based therapeutic interventions for people with dementia. SBU, 2020. www.sbu.se/2020_02
- Physical exercise to reduce the risk of falls in the elderly. SBU, 2021. www.sbu.se/2021_05



PHOTO: CRAZY NOOK/SHUTTERSTOCK

Electric wheelchair perceived as contributing to participation and independence

Users feel that electric wheelchairs contribute to participation and independence. According to users, the best use of wheelchairs can be achieved through practical training, knowledge and information, as shown by SBU's assessment.

Quantitative studies show that practical education and training programs in wheelchair maneuvering skills produce the desired results in adult wheelchair users. These results may serve as the basis for developing standardized care programs and guidelines for practical education and training for wheelchair users.

In a different SBU project, we are updating the state of knowledge regarding social service interventions for people with disabilities. The state of knowledge was presented at the end of 2019 in the form of an evidence map, which will be updated as new research reviews are identified. ♦ NI

About the report

Wheelchairs and wheelchair accessories: A systematic review and assessment of medical, economic, social and ethical aspects. SBU, 2022. www.sbu.se/347e

SBU evaluates social interventions to counter youth crime

Reducing recidivism among young people is a priority for both the individual and society. SBU will soon publish two reports that examine what social methods the various Nordic countries recommend to prevent youth crime and the scientific support for social service interventions against gang-related crime among children and young adults.

“Social services play a key role in combating juvenile crime, a complex area in which many different factors interact. This analysis can move the work in a more knowledge-based direction, so that relevant interventions can be offered to these young people, while providing an opportunity for the Nordic countries to learn from each other,” says Maral Jolstedt, project manager at SBU in reference to an assignment focused on social interventions against juvenile crime, with the results to be reported this year.

Most people commit some crime during their youth. But while the majority may commit an occasional crime, a small percent of young people commit many crimes. Among Swedish youths aged 15–17 who were prosecuted for their first crime between 2010 and 2014, just over half committed a single crime, while 19 percent committed four or more crimes during the follow-up period up to 2019, according to a 2021 report from the Swedish National Council for Crime Prevention. These repeat offenders accounted for almost two-thirds of all crimes in this group.

SBU WAS COMMISSIONED by the Swedish government to analyze the social methods listed in the Nordic countries’ national knowledge base to prevent or deter further juvenile criminality. “Juvenile criminality” is defined here as referring to youths who are repeatedly prosecuted for crime, while “knowledge base” refers to guidelines or scientific papers published by or for the Nordic countries.

The project examines social service interventions, including those undertaken in collaboration

with institutions such as the police and schools. Prevention is limited to interventions targeting individuals or groups with various risk factors for committing crime and established criminality.

The initiative involves analyzing the content of the knowledge base of each country and investigating whether there are differences among the countries, such as the foundation of the documentation and how it is produced. The report will also address possible reasons for any differences. Perhaps knowledge has been assessed in different ways; perhaps some countries put greater focus on prevention while others put more effort into deterring recidivism, and if so, why?

THE REMIT ALSO includes highlighting areas that SBU believes may be of particular interest and that can serve as a basis for discussion at next year’s Nordic Council of Ministers meeting.

Simply copying another country’s system is unlikely to be successful – the Nordic countries differ as to organization and legislation and approach juvenile criminality from different perspectives, according to Maral Jolstedt. But the comparison may still yield lessons.

“We might not do the same thing, but we should all have the best possible knowledge resource for our social services. It may be possible to do some cherry picking – gather certain knowledge from others and adapt it to our situation to strengthen our system,” says Maral Jolstedt.

GANG-RELATED CRIME – WHAT IS IT?

Gang crime is used here to refer to: (1) groups involving more than three people, (2) that have been active for at least three months, (3) are youth-related or street-related, (4) accept illegal activities and (5) commit crimes together.

Upcoming report: Interventions to prevent and reduce gang-related crime among children and young adults.



Alternative approaches to coercive measures

The Swedish Government commissioned SBU to conduct a pilot study to identify and evaluate alternative approaches to coercive measures within the Swedish National Board of Institutional Care (SiS), as well as in compulsory psychiatric care and forensic psychiatric care.

The pilot study will serve as a basis for compiling knowledge regarding alternative methods to coercive measures, especially isolation and restraint. The results will be reported this year.

Upcoming report: Pilot study concerning alternative approaches to coercive measures within the Swedish National Board of Institutional Care (SiS), compulsory psychiatric care and forensic psychiatric care.



PHOTO: GROUND PICTURE/SHUTTERSTOCK

SBU is also currently evaluating the scientific support for interventions that can be used by social services to prevent or reduce gang-related crime among children and young adults. The government-commissioned report will be published at the end of the year.

THE EVALUATION CONCERNS psychosocial interventions aimed at people under the age of 30 that Sweden carries out through either social services, schools, after-school activities, or the community. All preventive interventions will be included here, even those known as universal interventions, provided that the outcome under study pertains to gang crime.

The report could become a valuable tool for decision-makers, according to Knut Sundell, who heads up the project at SBU.

“Although there are no simple solutions to the problems in question, the evaluation may provide insight into what methods function better or worse,” he says.

Should it not be possible to comment on the effectiveness of certain methods due to the current state of research, that may indicate knowledge gaps that require further research.

Since most of the research is conducted in

North America, the project also analyzes how the evaluated methodology could be applied to Sweden. The results of the evaluation will also be compared to the methods and interventions used in Sweden, as reported by the Swedish National Council for Crime Prevention in its annual reports on crime prevention. ♦ SN

KNOWLEDGE BASE IN SWEDEN – PSYCHOSOCIAL INTERVENTIONS TO PREVENT JUVENILE CRIME

SBU report “Outpatient interventions to prevent criminal recidivism among young people. A systematic review and evaluation of economic, social and ethical aspects” from 2020. The report serves as a knowledge resource for the National Board of Health and Welfare’s knowledge guidelines “Interventions to prevent continued deviant behavior and criminal recidivism,” published in 2021, which contains recommendations for social services when working with children aged 6–17.

Previous report: Outpatient interventions to prevent criminal recidivism among young people A systematic review and evaluation of economic, social and ethical aspects. SBU, 2020. www.sbu.se/308

Upcoming report: Preventing and reducing juvenile criminality in the Nordic countries.



PHOTO: MAGNUS CLANS

▲ Maral Jolstedt, project manager SBU.

“This analysis can move the work in a more knowledge-based direction, so that relevant interventions can be offered to these young people, while providing an opportunity for the Nordic countries to learn from each other.”



New report examines treatments for people who have both mental health and substance-use disorders

Better treatment and social support for people who have a mental disorder and a substance-use or addictive disorder. This could become the result of a long-awaited systematic review of interventions for comorbidity which SBU will present this year.

IT IS COMMON FOR PEOPLE to have both substance-use and psychiatric disorders, especially among those with more severe symptoms. When concomitant, the symptoms of each diagnosis often aggravates the other. Therefore people with these comorbidities often

have more psychosocial problems, a lower quality of life, and are at increased risk of premature death, compared to individuals with a single diagnosis.

“This group has a high mortality and suffers enormously, so we really need to find out more about how we can help

them,” says Sara Wallhed Finn, clinical psychologist and PhD at Stockholm Center for Dependency Disorders (Beroendecentrum Stockholm), and an expert in the ongoing project in which SBU is evaluating the effects of treatments and social support interventions for people who have comorbid substance use and mental health disorders.

THE DIFFICULTIES HAVE long been recognized. Nevertheless, people in Sweden with these comorbidities often do not receive the treatment and social inter-



PHOTO: MICROGEN/SHUTTERSTOCK

ventions that they need, according to the 2021 interim report from the Comorbidity Inquiry (Samsjuklighetsutredningen). Treatment options and interventions are inadequate, and coordination of care is often insufficient between the those who provide specialist addiction care, psychiatric care, and social services, so people risk falling between the cracks.

“Treatment is still often aimed at only one of these problems at a time, even though there is consensus that both disorders should be addressed simultaneously. For example, if a patient who is in treatment for depression is also found to have a substance use disorder, the patient may be referred to addiction care or social services, which can interrupt their current mental health treatment and lead to a worse prognosis. Awareness of this dilemma has increased, but we have not yet found out how to effectively combine treatments” says Agneta Öjehagen, a social worker and professor emerita at the Department of Psychiatry, Lund University, and an expert in the project.

THE INITIATIVE FOR the evaluation comes from SBU, which has received consistent signals from representatives of both social services and health care that a better knowledge base is needed for this group of patients. The fact that the National Board of Health and Welfare’s national guidelines pertaining to this area are meager and have not been updated since they were initially published in 2015 underscores this need.

The work spans the whole range of substance use disorders combined with a wide range of mental disorders. The studies under review also evaluate many different types of interventions: pharmacological treatments, psychological and psychosocial, as well as social support. This broad approach is important, according to Nils Stenström, project manager at SBU.

“We hope that this review will be relevant for many professionals from both the social services and health care settings. That is why we chose to take such a broad approach,” he says.

Sara Wallhed Finn believes that the results will become a valuable tool in daily work with patients.

“This report has the potential to improve care and social support for this group of patients. Current guidelines are insufficient to guide everyday clinical practice in treating both conditions.

We hope this assessment will be able to provide more concrete guidance to those working in the clinical setting – that would be a great help,” she says.

“Even if the results show that there is not enough evidence to make certain pronouncements, it will still provide important information about where more research is needed,” she says.

THE REPORT ALSO draws attention to this important area, according to Agneta Öjehagen. Another important feature, she notes, is that the review includes groups with mild or moderate conditions:

“In the past, most attention has been to those with severe illness, which is reasonable. But this has the consequence that we know less about effective treatment interventions for the group with less severe problems, who may still have a stable life with a job and a family. I hope we can direct more attention to this latter group now,” says Agneta Öjehagen.

Nils Stenström agrees with these expectations and adds that he hopes the report will result in a wider range of treatment options.

“There are few facilities today that can offer patients a multifaceted range of treatments. We hope that our report will contribute to finding more effective treatment interventions so that the possibilities for health care and social services to meet patients’ needs can improve.” ♦ **SN**

THREE-PART PROJECT ON COMORBIDITY

1. Effects of pharmaceutical treatment – report coming this fall.
2. Mild to moderately severe mental illness combined with substance use/abuse – report to be published in late 2023 or early 2024.
3. Severe mental illness combined with substance use/abuse, with a subsection on how different approaches to organizing care can impact outcomes – report to be published before summer 2024.



PHOTO: MAGNUS GLANS

▲ Nils Stenström, project manager SBU.

“We hope that this review will be relevant for many professionals from both the social services and health care settings.”

COMMON COMBINATION

In Sweden, 64% of women and 52% of men who received treatment for substance abuse in 2017 were also treated for one or more psychiatric diagnoses in the year before or after addiction treatment, according to the National Board of Health and Welfare’s “Analysis of comorbidity as pertaining to mental illness and addiction problems” (“Kartläggning av samsjuklighet i form av psykisk ohälsa och beroendeproblematik”) from 2019.



SEVERAL PROGRAMS SUPPORT GOOD MENTAL HEALTH

An assessment by SBU shows that several programs may promote mental well-being or prevent mental health problems in children and adolescents. Some of the programs are provided to all children, regardless of risk for developing mental ill health, while other programs are offered exclusively to groups at higher risk, and some are intended only for children who have already such developed problems.

Good mental health is fundamental to well-being and is a necessary element for building relationships and coping at school or at work. Conversely, mental health problems leads to low well-being, which may entail long-term consequenc-

es such as substance abuse, criminal behavior and suicide. Interventions, such as structured school programs to strengthen the foundation for good mental health among children, may therefore be of great benefit to both the child and society in both the short and long term. The programs may be broad-based or tailored to specific groups or individuals depending on the purpose.

Evidence has been found to support two types of programs that can be administered in schools to promote mental well-being among children. Social-emotional learning (SEL) programs, such as PATHS, have a beneficial impact on the social and emotional skills and resilience of

children and adolescents. Mindfulness-based programs improve quality of life and resilience, especially among girls. Children and adolescents feel that the programs improve their psychological well-being and their ability to handle emotions and relationships.

Four parenting programs – The Incredible Years, Parent Child Interaction Therapy, Triple P and Family Check Up – can prevent acting out for at least six months. The PATHS program for pre-school and primary school children is also able to prevent acting out. The programs Coping with Stress and Penn Resilience Program, administered through schools, can prevent depression among children who have depressive symptoms. The FRIENDS program, which is administered to all children in a school, can prevent anxiety.

Concerning programs to prevent suicide and suicide attempts among children, studies are scarce and follow-up is short. The state of knowledge has not changed since a 2015 SBU evaluation concluded that two universal programs, YAM and GBG, can prevent suicide attempts. However, as yet unpublished findings in a Swedish replication study of YAM do not confirm previous positive results regarding suicide or suicide attempts. ♦ NI

About the reports

All three reports are summarized in the publication "Supporting good mental health in children and adolescents." It is available at www.sbu.se.

- Programs to prevent mental health problems in children. SBU, 2021. www.sbu.se/339
- Programs for preventing suicide and suicide attempt in children. SBU 2021. www.sbu.se/336
- Promoting mental well-being in children and young people. SBU, 2022. www.sbu.se/350

Videos on systematic reviews

SBU has produced several short videos on systematic reviews and the different steps involved in creating them. These videos explain how to review studies, synthesize the results and assess the reliability of the results. The videos are designed to be used in university courses, as well as by decision-makers and policy developers working in municipalities or regions. You can find the videos at: www.sbu.se/metod.

Ask SBU about research

Last year, SBU responded to 34 literature search requests for specific questions. Examples include the importance of level of education among home service providers, environmental therapy in institutional care, and crisis support in schools regarding suicide. Some of these requests came directly from professionals within health care, dental care, social services and disability services. Are you facing a difficult decision for which a research review would be helpful? Proposals can be submitted to SBU at: www.sbu.se/fragasbu

Attend a course at SBU

In 2022, SBU organized 44 educational events with over 1,000 participants, including on how to understand a systematic review and how to conduct a literature search. In certain cases, a course may be designed to suit the needs of a given group.

Interested? Read about SBU's courses here: www.sbu.se/utbildning