PRIORITISING INTERVENTIONS FOR PREVENTING MENTAL HEALTH PROBLEMS FOR CHILDREN EXPERIENCING ADVERSITY: A MODIFIED NOMINAL GROUP TECHNIQUE

AUSTRALIAN CONSENSUS STUDY

BACKGROUND

Despite the well-established link between childhood adversity and mental health problems, there is a lack of evidence to guide decision making about the most suitable interventions for preventing mental health problems for children who experience adversity at a local level.

This study considered six evidence-based intervention types, including:

- nurse home visiting programs
- parenting programs
- community-wide programs
- school-based anti-bullying programs
- psychological therapy for children exposed to trauma; and
- economic and social programs

AIMS OF STUDY



- to reach consensus on local priority interventions for preventing mental health problems for children living with adversity in Wyndham, Victoria; and
- to understand the enabling factors and barriers to implementing these interventions.

METHODS

Six online modified nominal group technique (NGT) workshops were held with 19 stakeholders. Stakeholders consisted of service providers from health, social and education sectors as well as caregivers of children aged 0-8 years.

KEY FINDINGS

Among the mixed stakeholder groups, three of the six evidence-based intervention types included in this study, reached consensus:

- nurse home visiting programs
- parenting programs; and
- community-wide programs

These interventions scored as a 'high' or 'very high' priority for implementation in Wyndham given their potential to act as a gateway for families to increase their knowledge about topics like parenting, and to increase awareness about supports available to families.

School-based anti-bullying programs, and psychological therapy for children exposed to trauma did not reach consensus as some providers and caregivers felt that these interventions were not a priority given they were not a first course of action.

On the other hand, Economic and social programs also failed to reach consensus with some service providers and caregivers acknowledging that these supports were already provided in Wyndham.

BARRIERS AND ENABLERS

Enabling factors and barriers to the implementation of interventions to support families living with adversity in Wyndham can be seen below :

 Enablers Flexible service structure Flexible service funding Longer service duration System navigation support Outreach services and 'soft entry' setting Intersectoral collaboration and integration Universal setting and program e.g. school 	 Barriers Inflexible service criteria Rigid service funding Inflexible service modality and hours Lack of available services Siloed services and sectors including lack of information sharing
Service Level Enablers • People-centred service approach • Cultural safety • Relational approach adopted by workforce • Whole family focus • No cost/free • Service location accessible	 Barriers Lack of cultural safety Insufficient workforce competencies and training Focus on a narrow definition of parent Cost Lack of transport/ distance from service
 Family and Community Level Enablers Awareness and knowledge raising of available supports Parental engagement Community cohesion 	 Barriers Lack of knowledge and awareness of available supports Lack of parent engagement Family life complexities

One key enabler is a people-centred service approach, specifically a focus on the needs and preferences of families through providers taking time to build trust and relationships with families.

Inflexible service criteria, specifically, the provision of services during business hours at a service location is a barrier for some families in Wyndham.

CONCLUSIONS

A relational approach through service provision, and raising awareness to existing services available were found to be a local priority for preventing mental health problems for children living with adversity in Wyndham.



The NGT consensus method was found to be effective in prioritising evidencebased practice interventions within health settings, engaging local stakeholders, and identifying enablers and barriers to implementation of interventions.

NEXT STEPS...

The process and outcomes identified in this study provide important background information and stakeholder engagement that will increase the likelihood of successful implementation of future integrated responses to child mental health in Wyndham. This may be useful to consider in the case of future research.

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