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**WILEY**

[Intervention Review]

# Psychoanalytic/psychodynamic psychotherapy for children and adolescents who have been sexually abused

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## ABSTRACT

### Background

The sexual abuse of children and adolescents is a significant worldwide problem. It is associated with a wide variety of negative psychological, social and physical consequences for the victims. These effects can often be seen immediately following sexual abuse, but they may manifest later on and sometimes only in adult life. There are a number of different interventions aimed at helping children and adolescents who have been sexually abused, and psychoanalytic/psychodynamic psychotherapy has a long-established tradition of being used for such victims. In this review, we set out to find the evidence for its effectiveness specifically in children and adolescents who have been sexually abused.

### Objectives

To assess the effectiveness of psychoanalytic/psychodynamic psychotherapy for children and adolescents who have been sexually abused.

### Search methods

We searched the following databases in May 2013: CENTRAL, Ovid MEDLINE, Embase, PsycINFO, CINAHL, Sociological Abstracts, Social Science Citation Index, Conference Proceedings Citation Index - Social Science and Humanities, LILACS and WorldCat. We also searched three trials registers, checked the reference lists of relevant studies and contacted known experts.

### Selection criteria

Randomised and quasi-randomised trials comparing psychoanalytic/psychodynamic psychotherapy with treatment as usual or no treatment/waiting list control for children and adolescents up to age of 18 who had experienced sexual abuse at any time prior to the intervention.

### Data collection and analysis

The review authors (BP and WT) independently screened search results to identify studies that met eligibility criteria.

### Main results

No studies were identified that met the inclusion criteria for this review.

### Authors' conclusions

There are no randomised and quasi-randomised trials that compare psychoanalytic/psychodynamic therapy with treatment as usual, no treatment or waiting list control for children and adolescents who have been sexually abused. As a result, we cannot draw any conclusions as to the effectiveness of psychoanalytic/psychodynamic psychotherapy for this population. This important gap emphasises the need for

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further research into the effectiveness of psychoanalytic/psychodynamic psychotherapy in this population. Such research should ideally be in the form of methodologically high-quality, large-scale randomised controlled trials. If these are not conducted, future systematic reviews on this subject may need to consider including other lower quality evidence in order to avoid overlooking important research.

## PLAIN LANGUAGE SUMMARY

### **Psychoanalytic/psychodynamic psychotherapy for children and adolescents who have been sexually abused**

The sexual abuse of children and adolescents remains a significant problem worldwide. Children and adolescents who have been sexually abused often experience a wide range of psychological, social and physical problems and these problems often follow them into adulthood. This makes it very important to know how best to help those who have been subjected to sexual abuse. Treatments based on psychoanalytic or psychodynamic psychotherapy are often provided to victims of sexual abuse. These treatments work on the idea that difficulties in past relationships or experiences are often pushed into the unconscious, but later re-emerge in the form of problems in the present. Through a relationship with a psychoanalytic/psychodynamic psychotherapist, the person is helped to gain a greater conscious understanding of their unconscious conflicts and this is thought to help them recover. However, we did not find any studies of this kind of therapy that met the strict inclusion criteria for this review. As a result, we cannot draw any conclusions as to the effectiveness of psychoanalytic/psychodynamic psychotherapy for children and adolescents who have been sexually abused. The implications of this lack of evidence for research and clinical practice are discussed. High quality randomised controlled trials should be conducted, but future systematic reviews on this subject may need to consider including other lower quality evidence in order to avoid overlooking important research.