A review of Alcoholics Anonymous/Narcotics Anonymous programs for teens
Sussman S

CRD summary
This review concluded that substance abuse treatment among teens was superior to no treatment. Participation in Alcoholics/Narcotics Anonymous appeared to be related to enhanced outcomes for drug/alcohol use. More research was required. The author's conclusions reflected the results of the review, but the nature of the evidence and problems with the review process made it difficult to determine their reliability.

Authors' objectives
To assess the applicability of Alcoholics Anonymous (AA) or Narcotics Anonymous (NA) to teens with substance abuse problems

Searching
PsycINFO and MEDLINE and Google Scholar search engine were searched up to June 2009. Search terms were reported. Relevant reference lists were checked where possible.

Study selection
Studies that explicitly mentioned an AA or NA treatment model, included participants aged 12 to 22 years old and had a sample size greater than four were eligible for inclusion. Studies were required to report alcohol or drug use behavioural outcome data.

All except one included study had a majority of male participants. Most participants in all studies were white. Various substance abuse problems were represented; these included alcohol, marijuana, cocaine and polydrug use.

The author did not state how the studies were selected for the review.

Assessment of study quality
The author did not state that he assessed validity.

Data extraction
The author did not state how data were extracted for the review.

Methods of synthesis
The studies were combined in a narrative synthesis grouped by outcomes or themes in the evidence.

Results of the review
Nineteen studies (n=7,142) were included in the review. Two studies were controlled studies (n=389) and one was a randomised controlled trial (RCT) (n=552). Sample sizes ranged from 56 to 2,317.

Reported levels of abstinence averaged from 30% to 40% across studies. Time points ranged from three months to two or more years. Eight studies reported abstinence at one year; rates ranged from 30% to 66% (average of 39%). Eleven studies assessed the effects of informal AA/NA attendance after discharge from formal treatment and all found a strong association between AA/NA attendance and abstinence.

Analyses of characteristics that predict AA/NA involvement in teens and mediating factors in the benefits of involvement were reported.

Authors' conclusions
Substance abuse treatment among teens was superior to no treatment. As with other types of treatment, participation in AA/NA either as formal programming or as informal mutual help meetings post discharge appeared to be related to
enhanced outcomes for drug or alcohol use. More research was required.

**CRD commentary**
The review question and the inclusion criteria were clear. Three sources were searched. No restrictions on publication status or language were reported. The author did not report using methods designed to reduce reviewer bias and error at any stage of the review process and did not report assessing the validity of the included studies. The decision to employ a narrative synthesis was reasonable in view of the nature of the included studies. Most of the included studies were uncontrolled and reported results for comparisons of programme completers and noncompleters; these data were likely to be impacted by numerous confounding factors.

The author's conclusions reflected the results of the review, but lack of reporting of the review process, designs of the included studies and the absence of a validity assessment made it difficult to determine the reliability of the evidence on which the conclusions were based.

**Implications of the review for practice and research**

**Practice**: The author made a number of suggestions for increasing the accessibility of AA/NA programmes to younger participants, which included examples of ways in which older members could make meetings more welcoming to teens.

**Research**: The author stated a need for much more research on AA/NA programmes for teens; these should particularly examine ethnic diversity and outpatient groups as outcome predictors.

**Funding**
National Institute on Drug Abuse, USA, (DA13814, DA016090 and DA020138).

**Bibliographic details**

**PubMedID**
20164105

**DOI**
10.1177/0163278709356186

**Original Paper URL**
http://ehp.sagepub.com/content/33/1/26.abstract

**Indexing Status**
Subject indexing assigned by NLM

**MeSH**
Adolescent; Adolescent Behavior; Adult; Age Factors; Alcoholics Anonymous; Alcoholism /epidemiology /prevention & control /therapy; Child; Female; Humans; Male; Opioid-Related Disorders /epidemiology /prevention & control /therapy; Patient Acceptance of Health Care /statistics & numerical data; Program Evaluation; Self-Help Groups; Substance-Related Disorders /epidemiology /prevention & control /therapy; United States /epidemiology; Young Adult

**AccessionNumber**
12010005840

**Date bibliographic record published**
19/01/2011
Date abstract record published
25/05/2011

Record Status
This is a critical abstract of a systematic review that meets the criteria for inclusion on DARE. Each critical abstract contains a brief summary of the review methods, results and conclusions followed by a detailed critical assessment on the reliability of the review and the conclusions drawn.