



Multicomponent Interventions in Early Psychosis

What is a multicomponent intervention?

A multicomponent intervention refers to a person-centered treatment that comprises of one or more types of therapy provided simultaneously. The number and type of therapies provided is based on the individual's recovery needs and discussed in collaboration with the individual themselves, the clinical team and family where appropriate. Examples of individual therapies or components may include pharmacological intervention, cognitive behavioural therapy (CBT), individual supported employment, family therapy and cognitive remediation training ([Shrihari et al., 2012](#) [Breitborde & Moe, 2016](#); [Correll et al., 2018](#)).



What is the evidence for multicomponent intervention in early psychosis?

A large meta-analysis by Correll et al., (2018) describes multicomponent intervention at a *service level* where individuals enrolled in an early intervention for psychosis service (EIP) received 'core' components of medication (with regular medication review) and family psychoeducation/counselling, alongside 'optional' components of CBT, family therapy, vocational and education counselling, social skills training, crisis management and a crisis response team. On average 5 components were provided. Compared to treatment as usual (TAU) superior outcomes were observed across all outcomes assessed - treatment discontinuation, hospitalisation, symptom severity, global functioning, involvement in school or work, and quality of life. Seven studies (n= 1005) reported higher global functioning compared to TAU and six studies (n= 1743) reported significantly higher participation in school or work.

Multicomponent psychosocial Interventions

While multi-component intervention can be described at an EIP *service level*, multicomponent intervention can also be described at a *psychosocial intervention level* ([Breitborde et al., 2017](#), [Frawley et al., 2021](#)). In short, a multicomponent psychosocial intervention, rather than providing a single therapeutic approach, applies several approaches and underlying therapeutic principles with the aim of improving social and occupational functioning. These have been found to have a greater impact on functional recovery in early psychosis than single-component interventions ([Frawley et al., 2021](#)).

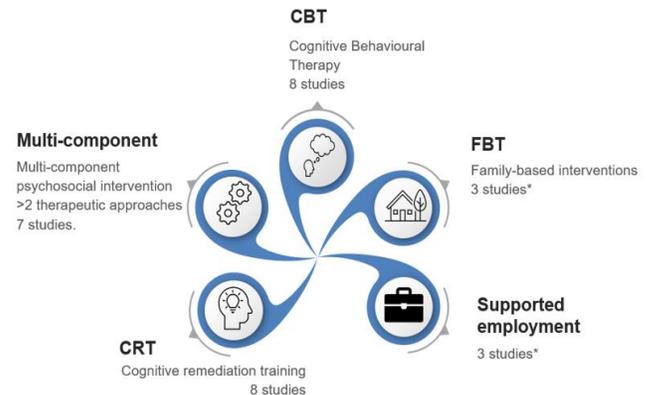


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In this systematic review and meta-analysis of 31 studies, involving 2811 participants, several psychosocial interventions were compared: Cognitive Behavioural Therapy for Psychosis (CBTp), Family Based Therapy (FBT), Supported Employment, Cognitive Remediation (CRT), and Multi-Component psychosocial interventions.

When looking at psychosocial intervention as a whole group, improved function was observed (SMD=0.293; 95% CI 0.115 to 0.364, $p < 0.001$). However, multicomponent interventions were associated with largest gains in function (SMD= 0.452)

Whether the therapy was delivered in the community or in a traditional clinic setting, the stage of illness, how long the therapy lasted for and how function was measured also appeared to have an impact on the extent of functional recovery.



For more information on the current HSE National Clinical Programme for Early Intervention in Psychosis model of care please visit: <https://www.hse.ie/eng/about/who/cspd/ncps/mental-health/psychosis/resources/>

References

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