

Mental health problems in people with learning disabilities
Appendix N: GRADE evidence profiles for all studies

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Parent training	Waiting list control	Relative (95% CI)	Absolute (95% CI)		
Mental health after individual training (end of treatment) (follow up: range 10 weeks to 16 weeks; assessed with: Depression Anxiety and Stress Scales (DASS))												
2	randomised trials	very serious ¹	not serious	serious ²	not serious	none	73	-	-	SMD 0.36 SD lower (1.27 lower to 0.55 higher)	⊕○○○ VERY LOW	CRITICAL
Carer satisfaction after individual training (end of treatment) (follow up: range 10 weeks to 16 weeks; assessed with: Parenting Sense of Competence Scale (PSOC))												
1	randomised trials	not serious	not serious	serious ²	serious ³	none	50	-	-	SMD 0.81 SD higher (0.3 higher to 1.31 higher)	⊕⊕○○ LOW	CRITICAL
Quality of life after individual training (end of treatment) (follow up: range 10 weeks to 16 weeks; assessed with: Abbreviated Dyadic Adjustment Scale (ADAS))												
1	randomised trials	not serious	not serious	serious ²	serious ³	none	50	-	-	SMD 0.29 SD higher (0.2 lower to 0.78 higher)	⊕⊕○○ LOW	CRITICAL
Stress after individual parent training (end of treatment) (follow up: range 10 weeks to 16 weeks; assessed with: Parenting Scale)												
1	randomised trials	not serious	not serious	serious ²	serious ³	none	50	-	-	SMD 0.55 SD lower (1.05 lower to 0.05 lower)	⊕⊕○○ LOW	IMPORTANT
Mental health after standard or enhanced individual parent training (follow up: mean 52 weeks; assessed with: Depression Anxiety and Stress Scales (DASS))												

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1	randomised trials	not serious	not serious	serious ²	serious ³	none	23	19	-	MD 5.98 lower (15.13 lower to 3.17 higher)	⊕⊕○○ LOW	CRITICAL
Quality of life after standard or enhanced individual parent training (follow up: mean 52 weeks; assessed with: Abbreviated Dyadic Adjustment Scale (ADAS))												
1	randomised trials	not serious	not serious	serious ²	serious ³	none	19	23	-	MD 0.73 higher (1.95 lower to 3.41 higher)	⊕⊕○○ LOW	CRITICAL
Carer satisfaction after standard or enhanced individual parent training (follow up: mean 52 weeks; assessed with: Parenting Sense of Competence Scale (PSOC))												
1	randomised trials	not serious	not serious	serious ²	serious ³	none	19	23	-	MD 0.43 higher (7.27 lower to 8.13 higher)	⊕⊕○○ LOW	CRITICAL
Stress after standard or enhanced individual parent training (follow up: mean 52 weeks; assessed with: Parenting Scale)												
1	randomised trials	not serious	not serious	serious ²	serious ³	none	23	19	-	MD 0.15 higher (0.23 lower to 0.53 higher)	⊕⊕○○ LOW	IMPORTANT
Carer satisfaction after group parent training (end of treatment) (follow up: mean 8 weeks; assessed with: Kansas Parental Satisfaction Scale - Short Form (KPS-SF))												
1	randomised trials	serious ⁴	not serious	serious ²	serious ³	none	16	13	-	MD 3.43 higher (0.54 higher to 6.32 higher)	⊕○○○ VERY LOW	CRITICAL
Stress after group parent training (follow up: mean 8 weeks; assessed with: Parenting Stress Index (short and long forms))												

Quality assessment							№ of patients		Effect		Quality	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Parent training	Waiting list control	Relative (95% CI)	Absolute (95% CI)		
2	randomised trials	very serious ⁵	serious ⁶	serious ²	serious ³	none	30	-	-	SMD 0.08 SD higher (0.44 lower to 0.61 higher)	⊕○○○ VERY LOW	IMPORTANT

CI: Confidence interval; SMD: Standardised mean difference; MD: Mean difference

1. Downgraded as high risk of bias on allocation concealment, missing outcome data and unclear risk of selective reporting
2. Downgraded as patients have learning disabilities but no mental health problem
3. Downgraded as small sample size
4. Downgraded as high risk of performance and detection bias
5. Downgraded for unclear allocation concealment and high risk of performance and detection bias
6. Downgraded as studies show opposing direction of effect

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