Multisystemic Therapy (MST) is an intensive family and community-based intervention that targets the multiple causes of antisocial behaviour in young people who, without intervention, could be at risk of being placed into Local Authority Care or at risk of custody or Secure Care.

MST adopts a social-ecological approach to understanding problematic behaviours in young people. Viewing the individual as being surrounded by a network of interconnected systems that include the young person themselves, their family as well as their peer group, school and wider neighbourhood.

In MST, parents and caregivers are viewed as the main instigators of change in the young person. Therefore, the ultimate goal of MST is to empower the family to take responsibility for making and maintaining positive changes in the young person’s behaviour.

### ULTIMATE MST AIMS

- To keep families together when the young person is at risk of entering Care, custody or secure placement.
- For the young person to be engaged in education or training.
- For there to be a reduction in antisocial behaviour and charges brought against the young person.

### FINDINGS FROM ACROSS THE UK

Research and audit data from the MST teams based across the UK shows that it is possible to replicate the positive results and that MST:

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keeps Children In Their Homes</td>
<td>92.6%</td>
</tr>
<tr>
<td>Keeps Children In School</td>
<td>77.5%</td>
</tr>
<tr>
<td>Keeps Children Out of Trouble</td>
<td>86.7%</td>
</tr>
</tbody>
</table>

### RESEARCH AND EVALUATION

MST has an evidence base that spans over 30 years and includes numerous Randomised Controlled Trials (RCT) completed both within the US and across Europe. The majority of studies show positive and sustainable outcomes for MST compared to management as usual. For more information about MST research in the UK please visit: [www.mstuk.org/mst-outcomes/uk-research](http://www.mstuk.org/mst-outcomes/uk-research)

Following a rigorous assessment and evaluation process, standard MST, MST for Child Abuse & Neglect (CAN) and MST for Problem Sexual Behaviour (PSB) were all found to improve outcomes for children and young people, and have therefore been included in *The Early Intervention Foundation’s Guidebook* - an online resource for those who wish to find out more about how to commission and deliver effective Early Intervention.

*MST has been adapted for different populations and includes MST for Child Abuse & Neglect (MST-CAN) and MST for Family Integrated Transitions (MST-FIT). Please visit [www.mstuk.org](http://www.mstuk.org) for more information.

### WHAT FAMILIES AND PROFESSIONALS SAY...

The following quotes are taken from a study about families’ experiences of MST by the Brandon Centre, London (April 2012):

- “It was all working together. Everybody had their part to play. You know, you owned something, which was quite good, especially for young people, they need to feel part of something.”
- “[MST] opened me up more, like made me think about ambitions. So now I’ve thought about everything, I’ve got things to look forward to… I want to get to go college and then go to uni and then get a job.”
- “It was really bad... every minute it’s like, you know, phone calls and at police stations... that’s all gone... he hasn’t been in trouble since.”

To understand how MST works from a child’s perspective please visit: [www.mstuk.org/families/what-families-say](http://www.mstuk.org/families/what-families-say)

For more information about MST research in the UK please visit: [www.mstuk.org/mst-outcomes/uk-research](http://www.mstuk.org/mst-outcomes/uk-research)
WHO IS MST FOR?

INCLUSIONARY CRITERIA
- Young people at risk of placement (care or custody) due to their own antisocial behaviours, including substance abuse
- Young people involved with the Youth Justice System (Youth Offending System)
- Young people who are living at home with a parent or care giver
- Young people who are aged between 11 (if in secondary school) and 17

EXCLUSIONARY CRITERIA
- Young people living independently
- Young person is presenting with suicidal, homicidal or psychotic behaviour.
- Young people whose psychiatric problems are the primary reason leading to referral, or who have severe and serious psychiatric problems
- Sex offending in the absence of other anti-social behaviour
- Young people with Autism Spectrum Disorder (ASD) where this is assessed as being moderate to severe (level 2/level 3).

*MST UK team will guide you through the stages of the MST site development process which covers the following areas:
- needs analysis of local population
- funding and sustainability
- MST model fidelity requirements
- stakeholder collaboration and support
- recruitment and training
- ongoing quality assurance

For more information about the set up process please visit: www.mstuk.org/setting-mst-programme/implementation-process

WHERE ARE WE?
There are now over 30 teams in England, Scotland and Ireland, with more in the process of setting up.

For a full list of current MST teams visit: www.mstuk.org/mst-uk/mst-uk-teams

MST IN SCOTLAND
There are currently four MST teams in Scotland across two sites (Edinburgh City Council and Fife Council). NHS Education for Scotland (NES) have come together in partnership with MST UK and now employ a full time MST consultant and Programme Lead for Scotland. The aim of this post in addition to providing consultation and quality assurance to the current MST teams is to offer centralised support for NHS Boards, Local Authority partnerships and service providers in Scotland that wish to improve outcomes for young people who are looked after at home and reduce the numbers of young people who become looked after and accommodated. The Scottish Consultant links directly into the UK Network Partnership which offers the advantage of integration into Scottish policy and national planning whilst also being part of the MST quality assurance system within the UK Network Partnership.

COST EFFECTIVENESS
International and UK research indicates that MST is a cost-effective intervention as evidence suggests it reduces the cost of placing children out of home and also costs associated with offending and anti-social behaviour.

Research about MST’s cost effectiveness is available here: www.mstuk.org/mst-outcomes/cost-effectiveness

DEVELOPING AN MST PROGRAMME
The MST UK team will guide you through the stages of the MST site development process which covers the following areas:
- needs analysis of local population
- funding and sustainability
- MST model fidelity requirements
- stakeholder collaboration and support
- recruitment and training
- ongoing quality assurance

For more information about the set up process please visit: www.mstuk.org/setting-mst-programme/implementation-process

You can also find us on:

For more information about MST in Scotland please contact Mhairi Fleming, MST UK Consultant: Mhairi.Fleming@nes.scot.nhs.uk or visit: www.mstuk.org