

The Modular Approach to Therapy for Children (MATCH)

An Evidence-Based Intervention for Better, Faster, More Efficient Care



THE BAKER CENTER
FOR CHILDREN AND FAMILIES

What is MATCH?

MATCH is an evidence-based therapy (EBT) for youth ages 6-17 with anxiety, depression, trauma, or behavior challenges. Built on 33 modules, it's adaptable for outpatient, in-home, and school settings using a flexible, data-driven approach.

Why MATCH Works *(Chorpita et al., 2013, Chorpita et al., 2017; Weisz et al., 2012)*

- **Faster improvement:** A randomized controlled trial found that youth receiving MATCH improved 37% faster than those receiving usual care.
- **Stronger outcomes:** MATCH significantly decreases anxiety, depression, disruptive behaviors, and family reported Top Problems.
- **Sustained impact:** Benefits are maintained for two years after treatment.
- **Reduced additional service use:** Youth treated with MATCH required fewer referrals for additional therapies or medications.
- **Equity in action:** MATCH has demonstrated strong results with racially diverse youth.

Why MATCH is Better for Agencies *(Okamura et al., 2017, Okamura et al., 2018)*

LOWER COST PER CLIENT

Just \$0.40 per consumer - cheaper than most EBPs

HIGH UTILITY

Applicable across diverse clients and settings

Why MATCH is Better for Providers *(Chorpita et al., 2015)*

- **Greater satisfaction:** Therapists using MATCH reported higher satisfaction than those using standard EBTs or usual care.
- **More responsive:** Therapists rated MATCH as more effective and better aligned with client needs.
- **Career growth opportunities:** The MATCH Supervisor pathway supports professional development and leadership skills.

MATCH Training enhances clinician competencies in:

Assessment and
treatment planning

Caregiver
engagement and
collaboration

Clinical
intervention

Measurement-based
care and data-
informed decision-
making



MATCH changes so much about my clinical practice, including how I formulate cases and readiness to discharge. — MATCH Clinician



MATCH has completely catapulted my skill level, everything I learned in school is clicking into place. — MSW Clinical Intern

Real Time Results with CHART

MATCH is paired with the Clinical Health Assessment and Response Tracking (CHART) system, a web-based progress monitoring and feedback tool that tracks progress, fidelity and outcomes:

Real-Time Outcome Tracking

Children and caregivers complete weekly surveys to assess symptoms using standardized tools like the Brief Problem Monitor (Achenbach et al., 2017) and the Top Problems Assessment (Weisz et al., 2011).

Therapist Session Data

Clinicians submit information on family engagement and therapeutic techniques used, allowing for continuous assessment of intervention effectiveness.

Actionable Insights

CHART helps therapists determine whether symptoms are improving, when treatment modifications are needed, and when treatment goals have been met.

Why it Matters

- **Enables shared decision-making:** Clinicians, caregivers, and clients can collaborate on treatment adjustments based on real-time data.
- **Improves treatment responsiveness:** Helps clinicians quickly identify symptom fluctuations and adapt interventions accordingly.
- **Supports implementation fidelity:** Agencies can track program adherence, identify barriers, and ensure ongoing quality improvement.



Want to learn more about MATCH, bring MATCH to your agency or explore training opportunities?

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Citations

Achenbach, T. M., & Rescorla, L.A. (2017). Brief Problem Monitor (8PM) manual for school-age children. University of Vermont, Research Center for Children, Youth, & Families. <https://aseba.org/wp-content/uploads/School-age-bpm-manual.pdf>

Chorpita, B. F., Daleiden, E. L., Park, A. L., Ward, A. M., Levy, M. C., Cromley, T., Chiu, A. W., Letamendi, A. M., Tsai, K. H., & Krull, J. L. (2017). Child STEPs in California: A cluster randomized effectiveness trial comparing modular treatment with community implemented treatment for youth with anxiety, depression, conduct problems, or traumatic stress. *Journal of consulting and clinical psychology*, 85(1), 13-25. <https://doi.org/10.1037/ccp0000133>

Chorpita, B. F., Weisz, J. R., Daleiden, E. L., Schoenwald, S. K., Palinkas, L.A., Miranda, J., ... & Ward, A. (2013). Long-term outcomes for the Child STEPs randomized effectiveness trial: A comparison of modular and standard treatment designs with usual care. *Journal of Consulting and Clinical Psychology*, 81(6), 999-1009.

Chorpita, B. F., Park, A., Tsai, K., Korathu-Larson, P., Higa-McMillan, C. K., Nakamura, B. J., Weisz, J. R., Krull, J., & Research Network on Youth Mental Health (2015). Balancing effectiveness with responsiveness: Therapist satisfaction across different treatment designs in the Child STEPs randomized effectiveness trial. *Journal of consulting and clinical psychology*, 83(4), 709-718. <https://doi.org/10.1037/a0039301>

Park, A. L., Tsai, K. H., Guan, K., Reding, M. E., Chorpita, B. F., Weisz, J. R., & Research Network on Youth Mental Health (2016). Service Use Findings from the Child STEPs Effectiveness Trial: Additional Support for Modular Designs. *Administration and policy in mental health*, 43(1), 135-140. <https://doi.org/10.1007/s10488-015-0625-1>