
This article is based on the Campbell Review:

Geraldine Macdonald & William Turner: *Treatment Foster Care for improving outcomes in children and Young people*. A Campbell and Cochrane Collaboration systematic review, 2007.

*This article is written by the SFI Campbell. The article has been approved by the authors of the review.
Published May 2009*

Promising intervention gives new hope for severely troubled children

Treatment foster care (TFC) is a promising, individually tailored program for children and youth who are at risk of placement in restrictive settings. The results of a Campbell/Cochrane review suggests that TFC can lead to a reduction in antisocial and criminal behaviour, time spent in locked settings and absconsions. There is some evidence of a positive impact on school attendance and homework completion.

Avoiding multiple placements and locked settings

Children and adolescents with severe difficulties are at high risk of multiple placements and of ending up in restrictive placements. These difficulties include antisocial behaviour, behavioural problems, psychological disorders, and abuse or neglect.

As these young people are 'hard to place', many experience placement instability, and are at increased risk of finding themselves in locked settings, including psychiatric hospitals. Restrictive placements and placement instability can result in serious long-term adverse consequences (e.g. social exclusion) that can adversely impact on the social development of these children and adolescents, and on their educational potential and life chances.

Finding appropriate and effective placements in home settings for these young people is difficult. Mainstream foster care or residential care placements are typically unable to easily access services to accommodate the acute needs and complex problems facing these young people, and foster carers themselves are normally unable to provide such expert support. Treatment foster care (TFC) is an intervention that aims to combine an out of home placement with specially trained foster carers, supported by a multidisciplinary professional team who provide an individually tailored program for each child.

Findings

The authors of this systematic review conclude that TFC appears to be a promising intervention. However they caution that the evidence of its effectiveness for each of the outcomes reported in the review is based on only one or two studies.

Fewer criminal offences and less time spent in locked settings

TCF appears to generate worthwhile reductions in antisocial and criminal behaviour. In two studies analyses of both short- and long-term effects suggest moderate reductions in the number of criminal referrals; i.e., young people who received TCF were less likely to have committed criminal offences than those in the control group receiving usual non-TCF treatment.

Two studies reported a clinically and statistically significant reduction in the number of days spent in locked settings for the adolescents who receive a particularly intensive TFC intervention. Adolescents in these groups spent less time in locked settings compared to adolescents who did not receive TFC.

In one of the studies, the results suggest that the management of young people by foster carers who provide consistent and predictable forms of discipline and close supervision, together with the separation of these young people from their delinquent peers, were key factors contributing to reductions in delinquent behaviour.

The evidence suggests that TFC promotes stability. In one study delinquent boys receiving TFC not only spent more time in treatment over the long term but also more time at home.

One study with chronic delinquent adolescent girls receiving intensive TFC reported that they attended school more often and were more likely to do their homework, than girls in the control group.

Ingredients of TFC programs

In the context of this review TFC is used as an umbrella term. Specialised foster care, ‘wrap-around’ foster care and multidimensional treatment foster care (MTFC) are all programs that fall under the term TFC. MTFC is an intensive variant of TFC with numerous add-on components.

TFC programs are flexible and strive to accommodate the specific needs of the individual young person. Care for the young person takes place within a family setting and the number in any one placement is limited to two. Foster carers, the young person in placement and, where appropriate, their families receive support tailored to their needs. TFC programs are clearly described, tightly structured interventions designed to address the needs of the individual young person. They may include educational plans, set goals and regular assessments.

Child services select foster carers, and give them specialised training in managing the behaviour and needs of the individual young person. Foster carers receive extensive professional support, supervision and consultation. Immediate access to crisis services is also available.

Three MTFC studies and two less intensive TFC studies

Five studies, with a total of 390 young people between the ages of 7 and 18, are included in the systematic review.

Three studies involved intensive multi-dimensional TFC interventions. One of these studies focused exclusively on adolescent delinquent girls. The other two studies were TFC ‘light’ interventions with fewer components.

The control groups in the studies received standard treatment, such as usual foster care and group based community programs. All of the studies are from the US. One should take care when generalising the evidence from this review, as four of the five studies were conducted in the same region (Oregon, US) and involved primarily mainly Caucasian young people.

Program developers conducted all five studies. The authors recommend that independent researchers also conduct research.