



Family Interventions Utilized by RHY Programs

Permanent connections are one of the priority outcomes identified by the Family & Youth Services Bureau, and family/support network engagement is a critical component of this, especially in the work with runaway and homeless youth (RHY). However, it is not always easy to engage family members or caregivers to re-establish or re-build those relationships. One of the primary roles for RHY service providers is to assist youth in identifying, creating, and building connections with family members, caregivers, and other support systems. Below is a collection of frameworks, interventions (both clinical and non-clinical), and curriculums that RHY service providers have implemented in their programs along with some additional resources.

Definitions:

Framework:

Conceptual framework: a guiding set of interrelated assumptions, based on one's worldview that is used to provide direction for practice methods.

Interventions (both clinical and non-clinical):

The methods, strategies, tasks, or assignments that a clinician will use to assist the client in achieving the identified goals and objectives. Interventions define the “*who*” and the “*what*” that will enable the specific responsibilities and actions to be taken by worker and client during the course of treatment (Roberts, 2009).

Family intervention: models for working with families or persons with severe mental illness, such as psycho-education, family education, family support, and family consultation, that help families understand and support their ill relatives. Research indicates that providing these interventions to families improves client outcomes (Roberts, 2009).



Frameworks:

Name	Brief Description	RHY Program	Primary Focus
Strengthening Families	<p>http://www.cssp.org/reform/strengtheningfamilies “Strengthening Families™ is a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect. It is based on engaging families, programs and communities in building five protective factors: Parental resilience, Social connections, Knowledge of parenting and child development, Concrete support in times of need, and Social and emotional competence of children.”</p> <ul style="list-style-type: none"> • “Core Meanings of the Strengthening Families Protective Factors”: http://www.cssp.org/reform/strengthening-families/2013/Core-Meanings-of-the-SF-Protective-Factors.pdf • “Solution Based Casework”: http://www.cssp.org/reform/strengthening-families/making-the-link/Making-the-Link_SBC.pdf 	BCP	Framework that addresses protective factors, programs that align with the framework
Wraparound Services	<p>http://nwi.pdx.edu/ “Since the term was first coined in the 1980s, ‘Wraparound’ has been defined in different ways. It has been described as a philosophy, an approach, and a service. In recent years, Wraparound has been most commonly conceived of as an intensive, individualized care planning and management process. Wraparound is not a treatment <i>per se</i>. The Wraparound <i>process</i> aims to achieve positive outcomes by providing a structured, creative and individualized team planning process that, compared to traditional treatment planning, results in plans that are more effective and more relevant to the child and family.”</p>	TLP MGH	
Teaching-Family Model	<p>http://teaching-family.org/ “TFM is a unique approach to human services characterized by clearly defined goals, integrated support systems, and a set of essential elements. TFM has been applied in residential group homes, home-based services, foster care and treatment foster care, schools, and psychiatric institutions. The model uses a married couple or other “teaching parents” to offer a family-like environment in the residence. The teaching parents help with learning living skills and positive interpersonal interaction skills. They are also involved with children’s parents, teachers, and other support network[s] to help maintain progress. The goals of the Teaching-Family Model (TFM) are (1) improved outcomes related to mental health; (2) reduced restrictiveness of living; (3) reunification with family; and (4) personalized goals identified by client and client’ family.”</p>	BCP TLP	Higher Level of placement and behavioral management programs



Interventions: Clinical

Name	Brief Description	RHY Program	Primary Focus
<p>Brief Strategic Family Therapy</p>	<p>http://www.bsft.org/ “Brief Strategic Family Therapy® (BSFT®) is designed to (1) prevent, reduce, and/or treat youth behavior problems; and (2) improve family functioning, including effective parental leadership and involvement with the youth. (Improve youth’s behavior by improving family relationships.) The BSFT® Program targets children and adolescents between the ages of 6 and 17 who are displaying or are at risk for developing behavior problems, including substance abuse, conduct problems and delinquency. The BSFT® Program has been implemented as a prevention, early intervention and intervention strategy for delinquent and substance-abusing adolescents. The BSFT® Program is typically delivered in 12 to 16 family sessions, depending on the severity of the communication and management problems within the family. Sessions are conducted at locations that are convenient to the family, including the family’s home in some cases. The BSFT® Program has been implemented with Hispanic, African-American and white families.”</p> <ul style="list-style-type: none"> • Short-term, problem-oriented intervention • Typical session: 60 to 90 minutes; average length: 12 to 16 sessions over a 3- to 4-month period • Certified therapist required; there is a training program offered by both the Family Therapy Training Institute & BSFT Institute at the University of Miami. Once certification is granted, re-certification is required. • Training and technical assistance available • Suitable for various settings (i.e., community social services agencies, mental health clinics, substance abuse prevention and treatment clinics) • Cost – organizations would need to contact the developer 	<p>BCP TLP</p>	<p>Substance abuse, behavioral management</p>



Name	Brief Description	RHY Program	Primary Focus
Multidimensional Family Therapy	<p>http://www.mdft.org/ “Multidimensional Family Therapy (MDFT) is an integrated, comprehensive, family-centered treatment for teen drug abuse and related behavioral problems. MDFT focuses on key areas of the adolescent’s life and provides an effective and cost-efficient treatment. MDFT targets a range of adolescent problem behaviors – substance abuse, antisocial and aggressive behaviors, school and family problems, and emotional difficulties. It can be implemented in substance abuse and mental health treatment, child welfare, and juvenile justice systems, including detention centers and juvenile drug courts. In addition to its strong research outcomes, MDFT has high satisfaction ratings from teens, parents, therapists, and community collaborators.”</p> <ul style="list-style-type: none"> • Flexible treatment system – can be tailored for use with a variety of populations either in an office- based or community/home setting. • Costs – according to the website, the estimated cost ranges from \$2,000 to \$9,000, per youth per treatment; the cost of training/support falls significantly after the initial training in the first year. • Organization site minimum requirements: <ol style="list-style-type: none"> 1. Two therapists, each with a master’s degree 2. Adequate recording and playback equipment for supervision 3. Urine testing to monitor substance use 4. Cell phones for easy contact between therapist and clients • First-year site certification process: <ul style="list-style-type: none"> ○ First six months: therapist certification ○ Second six months: supervision certification ○ Annual clinical re-certification/trainer certification 	BCP	Substance abuse, behavioral management



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Functional Family Therapy	<p>http://www.fftllc.com</p> <p>“The FFT clinical model is appealing because of its clear identification of specific phases. Each phase includes specific goals, assessment foci, specific techniques of intervention, and therapist skills necessary for success designed to guide the therapist in working with the family to meet the outcomes and . . . short term and long term treatment goals. The major phase-based goals of Functional Family Therapy are to (1) engage and motivate youth and their families by decreasing the intense negativity (blaming, hopelessness) so often characteristic of these families; . . . (2) reduce and eliminate the problem behaviors and accompanying family relational patterns through individualized behavior change interventions; . . . and (3) generalize changes across problem situations by increasing the family’s capacity to adequately utilize community resources, and engage in relapse prevention.”</p> <ul style="list-style-type: none"> • Short-term intervention • Average of 12 to 14 sessions over a period of 3 to 5 months • Target age 11 to 18 years • Three-phase site certification process • Clinical staff – master’s degree required • Substantial cost, based on number of staff (more information can be found at http://www.blueprintsprograms.com/factsheet/functional-family-therapy-fft) 	BCP SOP	Disruptive behavior, substance abuse, behavioral management



Name	Brief Description	RHY Program	Primary Focus
Adolescent Community Reinforcement Approach	<p>http://ebtx.chestnut.org/Treatments-and-Research/Treatments/A-CRA</p> <p>“The Adolescent Community Reinforcement Approach (A-CRA) is a developmentally-appropriate behavioral treatment for youth and young adults 12 to 24 years old with substance use disorders. A-CRA seeks to increase the family, social, and educational/vocational reinforcers to support recovery. This intervention has been implemented in outpatient, intensive outpatient, and residential treatment settings. A-CRA includes guidelines for three types of sessions: individuals alone, parents/caregivers alone, and individuals and parents/caregivers together. According to the individual’s needs and self-assessment of happiness in multiple life areas, clinicians choose from a variety of A-CRA procedures that address, for example, problem-solving skills to cope with day-to-day stressors, communication skills, and active participation in positive social and recreational activities with the goal of improving life satisfaction and eliminating alcohol and substance use problems. Practicing new skills during sessions is a critical component of the skills training used in A-CRA. Every session ends with a mutually-agreed upon homework assignment to practice skills learned during sessions. Often these homework assignments include participation in pro-social activities. Likewise, each session begins with a review of the homework assignment from the previous session.”</p> <ul style="list-style-type: none"> • This has been adapted for use with Assertive Continuing Care, which provides home visits to youth following residential treatment for A/OD, as well as for use in a drop-in center for street-living, homeless youth. • There is a cost for training, materials, and implementation. 		Substance abuse behavior; offers individual and family sessions
Parent–Child Interaction Therapy	<p>http://www.pcit.org/</p> <p>“Parent–Child Interaction Therapy (PCIT) is an empirically-supported treatment for young children with emotional and behavioral disorders that places emphasis on improving the quality of the parent–child relationship and changing parent–child interaction patterns. PCIT utilizes a live-coaching model wherein parents are in a therapy room with their child while the therapist is in an observation room watching via one-way mirror and/or live video feed. The parent wears a ‘bug-in-the ear’ device through which the therapist coaches the parent live on the skills being learned in treatment.”</p> <ul style="list-style-type: none"> • There are three levels of trainers: Level 1, Level 2, and Masters trainers. • A certified PCIT therapist is required for this clinical intervention. 	TLP MGH SOP	



Name	Brief Description	RHY Program	Primary Focus
Cognitive Behavioral Therapy	<p>http://www.abct.org/Information/?m=Information&fa= WhatIsCBTpublic</p> <p>“Cognitive and behavioral therapies usually are short-term treatments (i.e., often between 6–20 sessions) that focus on teaching clients specific skills. CBT is different from many other therapy approaches by focusing on the ways that a person's cognitions (i.e., thoughts), emotions, and behaviors are connected and affect one another. Because emotions, thoughts, and behaviors are all linked, CBT approaches allow for therapists to intervene at different points in the cycle.”</p> <ul style="list-style-type: none"> • A certified/licensed CBT therapist is required. 	All Programs	

Interventions: Non-Clinical/Curriculum

Name	Brief Description	RHY Program	Primary Focus
Family Group Decision Making/Family Team Meeting	<p>http://www.ucdenver.edu/academics/colleges/medicalschoo/department/pediatrics/subs/can/FGDM/Pages/FGDM.aspx</p> <p>“FGDM recognizes the importance of involving family groups in decision making about children who need protection or care, and it can be initiated by child welfare agencies whenever a critical decision about a child is required. In FGDM processes, a trained coordinator who is independent of the case brings together the family group and the agency personnel to create and carry out a plan to safeguard children and other family members. FGDM processes position the family group to lead decision making, and the statutory authorities agree to support family group plans that adequately address agency concerns. The statutory authorities also organize service providers from governmental and non-governmental agencies to access resources for implementing the plans. FGDM processes are not conflict-resolution approaches, therapeutic interventions or forums for ratifying professionally crafted decisions. Rather, FGDM processes actively seek the collaboration and leadership of family groups in crafting and implementing plans that support the safety, permanency and well-being of their children.”</p> <p>Similar models utilized in RHY: Family group conferencing and family team meetings</p> <ul style="list-style-type: none"> • There are four training opportunities available; agencies are encouraged to contact the FGDM organization about training. • Coaching and on-the-job support are available to agencies. 	BCP SOP	Placement stabilization, family stabilization, reduction in racial disparity and disproportionality, child welfare



Name	Brief Description	RHY Program	Primary Focus
Active Parenting of Teens	<p>http://www.activeparenting.com/ http://www.activeparenting.com/Teens_main</p> <p>“This video and discussion program is for parents of preteens and teens. Provides parents with the skills they need to use effective discipline, teach responsibility and communicate with their teens. Each session also shows parents how to handle sensitive issues such as drugs, sexuality and violence.”</p> <ul style="list-style-type: none"> This is a flexible course that can be taught in two to six sessions. There are two kit options: <ol style="list-style-type: none"> DVD Kit – \$399 PPT Kit – \$449 The kits include DVDs or PowerPoint slides, a leader guide, a parent guide, measurement tools, and promotional materials. 	BCP	Parent training programs curriculum
Parenting Wisely	<p>https://www.parentingwisely.com/ http://www.familyworksinc.com/teenagers.html</p> <p>“Ten typical problem situations are presented including: doing household chores, stepparent-youth relationships, monitoring ‘troublesome’ friends, improving poor school performance, sibling fighting, and complying with parental requests (phone use and music volume) and more. Both effective and ineffective solutions are depicted for each problem followed by comprehensive critiques and explanations of the parenting and communication skills viewed. Typically suited for ages 10 and up.”</p> <ul style="list-style-type: none"> The online course is \$45.95; the completion time is three to five hours. DVD kits are also available; more are available for group settings, and completion time depends on presentation and dialogue. No certification or special training is required. 		Disruptive behavior, parent training curriculum



Name	Brief Description	RHY Program	Primary Focus
Parents as Teachers	<p>http://www.parentsasteachers.org/</p> <p>“The research-informed Parents as Teachers curriculum serves as the bedrock of our evidence-based model, but also is used by other home visiting models and schools focusing on parent engagement. The model enhances child development and promotes parent engagement and school performance by reaching out to families sometimes even before a child is born. Its goal is to engage parents and to help them understand their important role in the development and educational success of their children. The PAT model has four dynamic components: personal visits, group connections, child screenings, and resource network. PAT’s core Foundational Curriculum is designed to work with families prenatally to kindergarten entry.”</p> <ul style="list-style-type: none"> • There are four main goals: <ol style="list-style-type: none"> 1. Increase parent knowledge of early childhood development and improve parenting practices. 2. Provide early detection of developmental delays and health issues. 3. Prevent child abuse and neglect. 4. Increase children’s school readiness and school success. • There is a start-up cost and other costs; a sample budget is provided on the website for the first year or two. 	BCP	Home visiting programs for child well-being



Name	Brief Description	RHY Program	Primary Focus
Systematic Training for Effective Parenting	<p>http://www.steppublishers.com/ http://www.cebc4cw.org/program/systematic-training-for-effective-parenting/detailed “STEP (Systematic Training for Effective Parenting) is a multi-component parenting education curriculum. The three STEP programs help parents learn effective ways to relate to their children from birth through adolescence by using parent education study groups. By identifying the purposes of children’s behavior, STEP also helps parents learn how to encourage cooperative behavior in their children and how not to reinforce unacceptable behaviors. STEP also helps parents change dysfunctional and destructive relationships with their children by offering concrete alternatives to abusive and ineffective methods of discipline and control. STEP is offered in three separate programs covering early childhood, children ages seven through twelve, and teenagers. Each program contains a leader’s resource guide, promotional tools, videos and parent handbooks.”</p> <ul style="list-style-type: none"> • There are three STEP programs: <ol style="list-style-type: none"> 1. STEP Kit 2. Early Childhood STEP Kit 3. STEP/Teen Kit • The publishers also have the materials available in Spanish for purchase: STEP Spanish Kit • Each program or kit has its own cost for materials. • No training is required to lead a STEP group; however, the publishers do offer workshops for group leaders. 	TLP BCP	Parenting skills curricula



Name	Brief Description	RHY Program	Primary Focus
Family Finding	<p>http://www.familyfinding.org/</p> <p>“The Family Finding model, developed by Kevin A. Campbell, offers methods and strategies to locate and engage relatives of children currently living in out-of-home care. The goal of Family Finding is to connect each child with a family, so that every child may benefit from the lifelong connections that only a family provides.” This model was developed in coordination with the National Institute for Permanent Family Connectedness.</p> <p>There are six essential components:</p> <ol style="list-style-type: none"> 1. Urgency 2. Expanded definition of permanency 3. Effective relative search 4. Family-driven processes 5. Development of multiple plans 6. Well-defined and tactical procedures <ul style="list-style-type: none"> • Monthly costs are \$25 per Family Finding Report or \$30 per Family Finding Report with Social Network Search. • Annual pricing includes a minimum of 25 searches (pre-paid) – \$20 Family Finding Report with Social Network Search. • Training options are available from half days to three days, depending on which option is selected. • A Family Finding Training and Consultation Series includes six sessions over a six-month period. • Child Trends released a research brief on Family Finding, which can be found here: http://www.childtrends.org/wp-content/uploads/2013/06/2011-32FamilytoTable1.pdf 	SOP	Permanent connections



Name	Brief Description	RHY Program	Primary Focus
Nurturing Parenting Programs	<p>http://www.nurturingparenting.com/NPLevelsPrevent.html</p> <p>“The Nurturing Parenting Programs are a <i>family-centered trauma-informed</i> initiative designed to build nurturing parenting skills as an alternative to abusive and neglecting parenting and child-rearing practices. The long term goals are to prevent recidivism in families receiving social services, lower the rate of multi-parent teenage pregnancies, reduce the rate of juvenile delinquency and alcohol abuse, and stop the intergenerational cycle of child abuse by teaching positive parenting behaviors.”</p> <ul style="list-style-type: none"> • Target ages are 5 to 12 years. • The Nurturing Parenting Program has several focus options, in regard to those that are relevant for RHY programs: Prenatal, Being a Teen, Young Parents, Parents and Adolescents, and Teen Parents. • Each program and its corresponding materials has its own cost (use the above link, scroll to the “Browse Nurturing Parenting Programs” section, and make selections to learn about costs). • The number of sessions and the setting (group or individual/family) are also dependent on which program option is selected. 	BCP	Treatment and prevention of child abuse and neglect



Name	Brief Description	RHY Program	Primary Focus
Families and Schools Together (FAST)	<p>http://familiesandschools.org/</p> <p>“Families and Schools Together (FAST) is a multifamily group intervention program designed to build protective factors for children, to empower parents to be the primary prevention agents for their own children, and to build supportive parent-to-parent groups. The overall goal of the FAST program is to intervene early to help at-risk youth succeed in the community, at home, and in school and thus avoid problems such as adolescent delinquency, violence, addiction, and dropping out of school. The FAST program achieves its goals by respecting and supporting parents and by using the existing strengths of families, schools, and communities in creative partnerships. The program is geared to at-risk children ages 4 to 12 and their families.”</p> <ul style="list-style-type: none"> • Target ages – based on school levels (elementary, middle, and high school) • Short-term intervention (eight weeks) • Five steps to implementation: 1 – orientation; 2 – build team; 3 – train team; 4 – run the eight-week program; and 5 – evaluate team • Typical orientation two days • Requires thorough training, evaluation, and certification of the local FAST team (for the local agency) • Targeted for middle and high school • Able to be implemented in various settings 	BCP	Family functioning, parent training



Name	Brief Description	RHY Program	Primary Focus
Love and Logic	<p>https://www.loveandlogic.com/ https://www.loveandlogic.com/documents/Becoming%20a%20Love%20and%20Logic%20Parent%20-%20Supporting%20Theory%20and%20Research.pdf (research)</p> <p>“The Love and Logic Institute, Inc., developed training materials designed to teach educators and parents how to experience less stress while helping young people learn the skills required for success in today’s world. This approach is called Love and Logic and is based on the following two assumptions:</p> <ul style="list-style-type: none"> • That children learn the best lessons when they’re given a task and allowed to make their own choices (and fail) when the cost of failure is still small; and • That the children’s failures must be coupled with love and empathy from their parents and teachers.” • According to the site, the curriculum is appropriate for all ages. • There are two main courses: <ol style="list-style-type: none"> 1. “9 Essentials Skills for the Love and Logic Classroom Curriculum” 2. “Becoming a Love and Logic Parent Curriculum” • The course runs for seven weeks, with one session per week. • The cost for training runs approximately \$395; training options are from one day to six days. • The cost for parent curriculum materials is \$700 to \$730. • The cost for classroom curriculum materials is \$900 to \$930. 	BCP MGH	Curriculum



Other Resources Available on Family Engagement and/or Working with Youth and Their Support Network

- “Evidence Based (EB) and Promising Practices (PP) with Latino Children and Families”:

Produced in 2014, the California Child Welfare Indicators Project developed and released several resources on strategies and practices that address the cultural needs of Latino families.

Link to the main site for the project and the Latino Practice Advisory Committee: http://cssr.berkeley.edu/ucb_childwelfare/default.aspx and http://cssr.berkeley.edu/ucb_childwelfare/lpac/.

For additional resources, see the following: http://cssr.berkeley.edu/ucb_childwelfare/lpac/Resources.aspx?topic=2.

The actual report can be found here:

<http://cssr.berkeley.edu/cwscmsreports/LatinoPracticeAdvisory/Summary%20of%20Practice%20Innovations.pdf>.

- Family-Centered Case Management:

In 2012, Child Trends reviewed and updated the practice model on family-centered intensive case management. To learn more, see the following: <http://www.childtrends.org/?programs=family-centered-intensive-case-management>.

The Child Welfare Information Gateway has extensive resources and articles on family case management and family engagement.

Information can be found here: <https://www.childwelfare.gov/topics/famcentered/caseworkpractice/caseplanningmgmt/> and <https://www.childwelfare.gov/topics/famcentered/caseworkpractice/working/>.

The National Dropout Prevention Center/Network discusses family engagement and its relation to the prevention of school dropouts. The resources can be applied to various settings. Resources and information can be found here: <http://dropoutprevention.org/effective-strategies/family-engagement/>.

References:

Roberts, A. R. (Ed.). (2009). *Social workers' desk reference*. New York, NY: Oxford University Press.