PROCESS AND EFFICACY
EVALUATION MULTIDIMENSIONAL
TREATMENT FOSTER CARE (MTFC)

- summary final report -
SUMMARY

Introduction
Multidimensional Treatment Foster Care (MTFC) is a judicial behavioural intervention for adolescents with the main objective to reduce recidivism. In 2012, the Research and Documentation Centre of the Dutch Ministry of Security and Justice commissioned Regioplan to conduct an efficacy study on MTFC, in order that the results be available for the interim evaluation by the Ministry of Justice Accreditation Committee for Behavioural Interventions (March 2015). This study was carried out in the period between April 2012 up to and including January 2015. The intention is to measure the effectiveness of the intervention in terms of reduction of criminal recidivism, within a maximum of three years after the efficacy study.

The Intervention
MTFC was developed for boys and girls between the ages of 12 and 17 years, with a high risk of recidivism, severe anti-social behaviour, possibly in comorbidity with an oppositional defiant disorder (ODD), and often coupled with delinquent behaviour. MTFC is used instead of or to shorten closed treatment in correctional institutions for juvenile offenders (JJI) and, to a lesser extent, in secure youth care institutions (Jz+). The intervention includes intensive supervision within a foster family, where adolescents are trained in social behaviour. MTFC was developed in the US and in the Netherlands it is carried out under the responsibility of the Salvation Army.

The ultimate goal of MTFC is threefold: preventing recidivism, obtaining a diploma/certificate and a stable and permanent place to live after MTFC (with parents, assisted living or independent living). Intermediate (short-term) objectives of the intervention are:
- improving dynamic criminogenic factors and reducing antisocial behavioural problems (skills, antisocial cognitive style);
- increasing social and problem solving skills;
- increasing alternative behaviour, skills and cognitive style;
- establishing new relations/friendships with prosocial peers;
- attending school or having another meaningful daytime activity.

The essence of MTFC is the supervision and support of an adolescent by foster carers in a foster family.

Study Objective
The main objective of this study is to determine the extent to which the behavioural intervention MTFC is effective. In addition to this, the extent to which MTFC has added value compared to care as usual provided to the target group has been studied. Care as usual here means: residence in a correctional institution for juvenile offenders where the YOUTURN-approach is applied. Furthermore, the study should provide insight in the reach and
characteristics of the target group, the way the intervention is carried out and deviations compared to intended execution.

Research methods
The efficacy study was carried out among a group of eight adolescents who were involved in MTFC between April 2012 and March 2014. In this period, a total number of thirteen adolescents started MTFC. Two of these thirteen adolescents did not want to participate in this study and three adolescents have dropped out of the MTFC-programme. Use has been made of the n=1 design as an alternative for a Randomized Controlled Trial (RCT), which was ethically (randomisation) and practically (very low intake into MTFC) unfeasible in this setting. Furthermore, a mixed-method and multi-informant approach was applied with regard to data gathering. The development of the MTFC-participants during the MTFC-programme and three months after completion, has been mapped out by means of questionnaires, interviews and other data that is gathered during MTFC, paying attention to the intermediate objectives of MTFC. Per participant, a number of different informants – foster carers, school, participant’s informal network, the MTFC-team, and the adolescent him- or herself – have been consulted. The analysis focused on the extent to which there has been a significant decrease or increase in the indicators applying to the participants (intermediate objectives) and how strong these changes are.

In order to determine the added value of the behavioural intervention the MTFC-treatment group has been compared with a comparison group in order to measure the differences in development between MTFC and care as usual. The comparison group (n=800) was generated on the basis of the group of eight boys who have been recruited in the period between September 2013 and August 2014 at JJI Amsterbaken in Amsterdam. The focus is on the question whether the MTFC-participants have developed more favourably with regard to the (intermediate) objectives, than adolescents who are given care as usual (belonging to the best 20 percent of the simulated comparison group).

To conclude, two rounds of interviews have been held with the MTFC-team: in the initial phase and in the end phase of the study. Two rounds of interviews have also been conducted with the foster carers of all adolescents who participated in MTFC: when the participant started the programme and after completion of the programme. In addition to this, the document study took place and MTFC-participants were subjected to a questionnaire twice, in order to map out their motivation to participate in the programme.

Limitations of the study
The limitations of the study have to do with involving different informants in the study and with the set-up of the comparison group. With regard to all participants, a number of informants have been consulted. However, it turned out to be difficult to consult all intended informants, due to the fact that not all participants granted permission, or because informants could not be reached.
(both measurements) or did not cooperate. For instance, with regard to a number of participants, no members of their (in)formal network have been consulted. This also applied to the comparison group. With regard to the latter group, supervisors of the correctional institution (JJI) have only to a limited extent been able to fill in a questionnaire on the anti-social behaviour of the adolescents twice. Regarding the comparability of the MTFC-group with the comparison group, as a limitation it must be mentioned that the time-span between the first and the second measurement was substantially shorter for the comparison group (on average 3 months) than for the MTFC-group (on average 6 months). Moreover, a third measurement did not take place three months after the completion of the intervention, whereas this measurement did take place for the MTFC-group.

**Characteristics participants study**

The MTFC-treatment group consists of seven boys and one girl. One of the adolescents was involved on the basis of civil law, the others on the basis of criminal law. All adolescents have severe problems, including antisocial and oppositional defiant disorders (ODD), personality disorders, post-traumatic stress disorder (PTSD) and problems with emotion regulation. All adolescents come from families with problems, such as divorce, domestic violence, crime within the family and the absence of one of the parents. In general, the eight MTFC-participants meet the inclusion criteria for MTFC, and with regard to background characteristics they correspond to a larger group of 44 MTFC-participants, who started with the programme preceding this study. This is an indication of the representativeness of the group under study. The motivation of the adolescents to participate in the programme differs from person to person. Two of the adolescents had a high motivation which remained high throughout the programme; the motivation of two other adolescents decreased during the programme; the motivation of one of the adolescents increased and the motivation of the other three adolescents was moderate throughout the programme.

Three out of eleven participants to the study have dropped out of the MTFC-programme. Two of these dropouts have run away. According to the MTFC-team, the third participant came into contact with deviant friends during MTFC. These three adolescents have been placed in a closed treatment facility.

The eight boys in the comparison group recruited from the correctional institution for juvenile offenders JJI Amsterbaken are to a large extent comparable to the eight adolescents in the MTFC-treatment group, with regard to the characteristics: age (between 14 and 18 years of age), risk of recidivism, (behavioural) problems and IQ (as far as this is known).

**Results process evaluation**

From the documents on the certification of the MTFC-team it turns out that the intervention is carried out as intended. The adolescents receive sufficient training and support, the feedback system which uses Point Cards is
adequately applied by the foster carers and the Parent Daily Reports (PDR) are kept up to date. This image was confirmed in the conversations with the MTFC-team. Involved in MTFC are a team of programme supervisors, a behaviour trainer, a skills trainer, a family trainer, a recruitment, selection and training worker, a registration coordinator and a programme consultant. The team is stable, and this study shows that the team members are capable of carrying out the programme in a methodically adequate way, meanwhile focusing on their specific task in MTFC and to treat participants in a non-confrontational manner. The team receives sufficient training and supervision; the weekly meetings with foster carers and other professionals involved generally run as intended.

The extent to which the foster carers carry out their role within the programme, varies in practice. A number of foster carers give adequate feedback to the participants, sufficiently reinforce appropriate behaviour of participants positively, and sufficiently ignore negative behaviour. The study shows that other foster carers have more difficulties with this. Cooperation with the foster carers of one of the participants in the study was discontinued.

With regard to the execution of MTFC a number of bottlenecks are mentioned that have negatively influenced the effectiveness of the programme:

- In contrast to earlier phases of the programme, the aftercare phase of MTFC is not a well-defined, structured whole. The aftercare phase does not sufficiently take shape for all adolescents. Moreover, a number of participants find themselves in a risky outflow situation after MTFC. For example, a participant who returns to the old environment of crime and problem behaviour and/or to a dysfunctional family situation.
- In a number of cases the outflow perspective of the participants changes during the programme. This may have the result that during MTFC it is harder to anticipate the future situation.
- Starting up meaningful daily activities of the participants (school, work or other meaningful activities outside the home) is sometimes a difficult process. Difficult application and intake procedures at school play a part in this.
- In a number of cases family training proves to be a difficult process to start up. Due to this, there is a risk that the stimulation, development and acquiring of skills does not sufficiently take root for the adolescents to fully benefit from them once they have returned to their home situation.
- In practice, a good match between the foster carers and the participants cannot always be found instantly. With regard to the participants in this study, a change of foster family took place twice.

Recruiting foster carers is normally a difficult process, says the recruitment, selection and training worker. However, up to now, it has never occurred that an adolescent could not be placed, because there were no foster carers available. With regard to the participants in this study, in two cases a change
of foster family occurred during the programme, owing to a mismatch between the foster family and the adolescent.

Results effectiveness of MTFC
This study shows how, according to various informants, the MTFC-participants have developed with regard to the intermediate objectives of MTFC and what their work, school, and living situation looks like after completion of the programme. When we combine the results of the eight MTFC-participants, the conclusion can be drawn that with regard to more than half of all the behavioural indicators that have been measured during MTFC, participants’ conduct shows no significant changes. Other measured behaviour more often develops in line with the intermediate objectives (this applies to 32% of all measured behaviour) than in the opposite direction (this applies to 12% of all measured behaviour). The self-reported behaviour on average shows a more favourable development than the measured behaviour as reported by the other informants. The outcomes of the ‘hard’ indicators (i.e., work, school, and living situation after completion of MTFC) show a more favourable image of the effectiveness for MTFC-participants than the ‘soft’ indicators (development of antisocial and prosocial behaviour, antisocial cognitive style, coping skills and association with delinquent friends). Six of the seven adolescents of whom the situation after completion of MTFC is known, are attending school after MTFC. Two adolescents have a (side) job and four have not been in conflict with the law anymore. Two adolescents have started living on their own, by moving to an assisted living facility. One adolescent is currently in detention. Four adolescents have moved back in with their mothers. All in all, these results indicate that the extent to which MTFC is effective is limited.

Results analysis added value of MTFC
With regard to reducing antisocial behaviour and antisocial ways of thinking the expectation that MTFC-participants would belong to the best twenty percent of the simulated comparison group has only been met to a limited extent. Compared with the comparison group, the results of two participants show a favourable development on three indicators. The results of the other participants only show a favourable development on one indicator, namely antisocial behaviour as reported by adults. On this indicator, a structurally favourable pattern appears regarding five of the eight MTFC-participants. The results concerning prosocial behaviour show the expected positive development for five of the eight participants. With regard to the coping skill ‘seeking social support’ this is the case for four participants and with regard to the coping skill ‘active approach’ for all eight participants. With regard to the latter skill it must be mentioned that most participants scored high on this skill throughout the programme. Four of the eight participants have realised the expected development on all indicators regarding both prosocial behaviour and coping skills. All in all, it can be concluded that with regard to a minority of the intermediate objectives MTFC-participants belong to the best 20 percent of the simulated comparison group. This indicates that the added value of MTFC
as compared with care as usual in correctional institutions for juvenile offenders is limited.

Additional research by the MTFC-team
Preceding this study, the MTFC-team put out a questionnaire which was filled in by a total number of 24 participants who completed the programme in the period between 2010 and mid-2012. Given that the content and design of these additional measurements differ from those of the current study, the analysis of these questionnaires have not been taken into account in this efficacy study. However, the results do provide a complementary view of the development of MTFC-participants on the intermediate objectives of MTFC. As also appears from the results of the efficacy study, after completion of the programme most MTFC-participants are attending school or in a (side) job. On average, with regard to the MTFC-participants of the additional study, there are no (significant) changes on the intermediate MTFC-objectives at the end of the programme as compared to the beginning of the programme. It appears from the efficacy study that with regard to the eight participants of this study, there is no significant development on half of the measured indicators. Therefore, the results of the additional study are in line with the efficacy study.

Conclusion
Although from the process evaluation it appears that the execution of MTFC is adequately under control in general, both the efficacy study and the study on the added value of MTFC show an inconsistent image regarding the results of MTFC for the participants. On a minority of the intermediate MTFC-objectives a positive development can be discerned with regard to the eight participants in this study, whereas on part of the objectives no development is visible. Furthermore, the hypothesis that MTFC-participants belong to the best (most favourably developed) 20 percent compared to the comparison group, can be confirmed with regard to a minority of the intermediate MTFC-objectives.

With regard to the execution of MTFC a number of points for improvement can be identified, which are likely to lead to increased effectiveness of the programme if adaptations are made accordingly. Firstly, an improved aftercare phase, in which adolescents are consistently prepared for the life after MTFC, may contribute to a positive result for the participants. Secondly, a better inflow in family training may positively influence the effectiveness of MTFC. As a third point, an improvement of the selection and training of the foster carers can be mentioned. The study shows that a number of foster carers found it difficult to adequately apply the programme. Moreover, in two cases a change of foster family occurred during the programme, owing to a mismatch between the foster family and the adolescent. To conclude, participation of adolescents with an IQ that is lower than average should be restricted, for the risk is high that their abilities to learn from the programme are limited.