



Factors Associated with Residential Treatment for Youth in the Child Welfare System: A Modified Systematic Review

Lauren Pryce McCarthy, MSW, LCSW
[University of Maryland School of Social Work]

ABSTRACT

BACKGROUND:

Youth placed in out-of-home care through the child welfare system have typically experienced maltreatment. This can result in trauma associated with the development of significant internalizing and externalizing behaviors. Residential treatment centers (RTC) can become necessary sources of care and stability if these behaviors place a child or their community at risk of further harm.

OBJECTIVES:

1) review the extant literature on characteristics of youth with child welfare involvement in RTC, 2) identify factors associated with placement in a RTC for youth with child welfare involvement and 3) compare and critique studies of factors associated with placement in a RTC for youth with child welfare involvement.

METHODS:

The study author conducted a comprehensive search in relevant databases in June 2019. The review included a critical comparison and evaluation of study designs, methodologies, and findings. Finally, the author extracted, synthesized, and presented study characteristics and results in data matrices and diagrams.

RESULTS:

A total of nine studies met the criteria for review. Most studies included in the review had significant limitations in their design or analyses. Factors associated with placement in RTC compared to other placement settings included history of multiple forms of maltreatment, restrictive placement settings, psychiatric medications, and significant behavioral difficulties. Studies that presented the characteristics of child welfare involved youth in RTC found a high proportion of significant behavioral problems, family risk factors, and complex maltreatment histories among their samples. Two studies were able to identify distinct sub-groups within child welfare involved youth admitted to RTC, suggesting different pathways to residential care.

CONCLUSIONS:

Youth with child welfare involvement who are placed in RTC experience multiple forms of maltreatment and have complex behavioral and child welfare system histories. The findings further suggested that there may be multiple pathways to residential care for these youth.

BACKGROUND

Child welfare involved youth may be removed from the home due to maltreatment or due to behavioral or developmental challenges

Although child welfare involved youth are at higher risk of mental health concerns, they have less access to mental health services in the home or community

Therefore, therapeutic residential care may become an important part of the care continuum that allows child welfare involved youth to access necessary mental health services in a safe, stable environment

The cost of residential treatment as well as concerns regarding efficacy and safety have led to legislative efforts to reduce the use of this setting for child welfare involved youth

Understanding the factors associated with entry to RTC for child welfare involved youth will equip practitioners with the knowledge they need to target youth at risk of placement and provide higher quality services to youth in residential care.

OBJECTIVES

This study aimed to synthesize the current knowledge on factors associated with entry to therapeutic residential care for child welfare involved youth. This study had the following specific objectives:

- To review the extant literature on characteristics of youth with child welfare involvement in RTC
- To identify factors associated with placement in a RTC for youth with child welfare involvement
- To compare and critique studies of factors associated with placement in a RTC for youth with child welfare involvement.

METHODS

Search Strategy & Article Selection:

- Search conducted in June 2019:

The search included the following databases: Scopus, SocINDEX, & PsychINFO

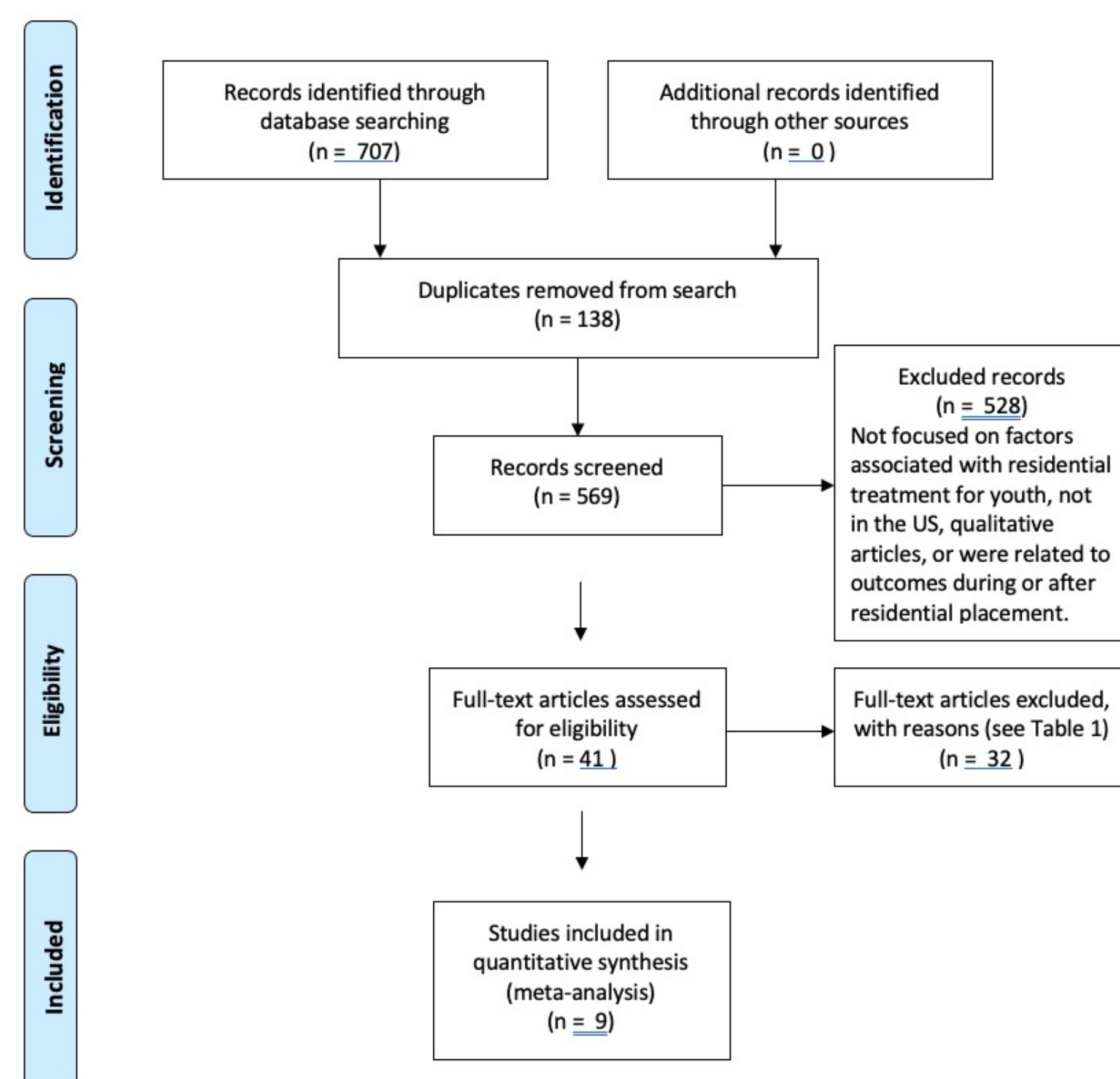
- The search was limited to peer-reviewed studies in English and utilized the following keyword strategy:

"child* OR teen* OR youth OR adolescent*" AND "treatment* OR therapeutic*" AND "residential* OR congregat* OR restrictive OR institution* OR "out-of-home*" AND "child welfare". Titles, abstracts, and keywords were included in the search parameters. The keyword strategy used in SocINDEX and PsychINFO was: "child* OR teen* OR youth OR adolescent*" AND "treatment* OR therapeutic*" AND "residential OR congregat* OR restrictive OR institution* OR "out-of-home*" AND "child welfare*" AND "placement".

- Articles were included that met the following criteria:

- Peer-reviewed quantitative studies conducted in the United States
- Focused on the factors associated with entry or transfer to RTC
- Sampled child welfare involved youth

PRISMA Diagram:



Data Extraction:

- Data were extracted into a matrix including the following information:

- Study authors & publication year
- Research design
- Research aims, questions, & hypotheses
- Independent variables
- Dependent variables
- Sample characteristics & sampling strategy
- Data analysis
- Main findings

- Effect sizes for bivariate and multivariate tests were calculated and plotted to represent factors associated with RTS placement in three areas: Behavioral Health, Placement History, and Maltreatment History.

RESULTS

Selected Studies:

- The nine studies selected for this review utilized a variety of methods and analysis to explore factors associated with child welfare involved youth's entry to residential care
- The varied analytical approaches used by the made synthesizing results challenging
- Six studies explored how child welfare history characteristics were associated with entry to RTC
 - Maltreatment history
 - Placement history
- Eight studies explored how mental and behavioral health history characteristics were associated with entry to RTC

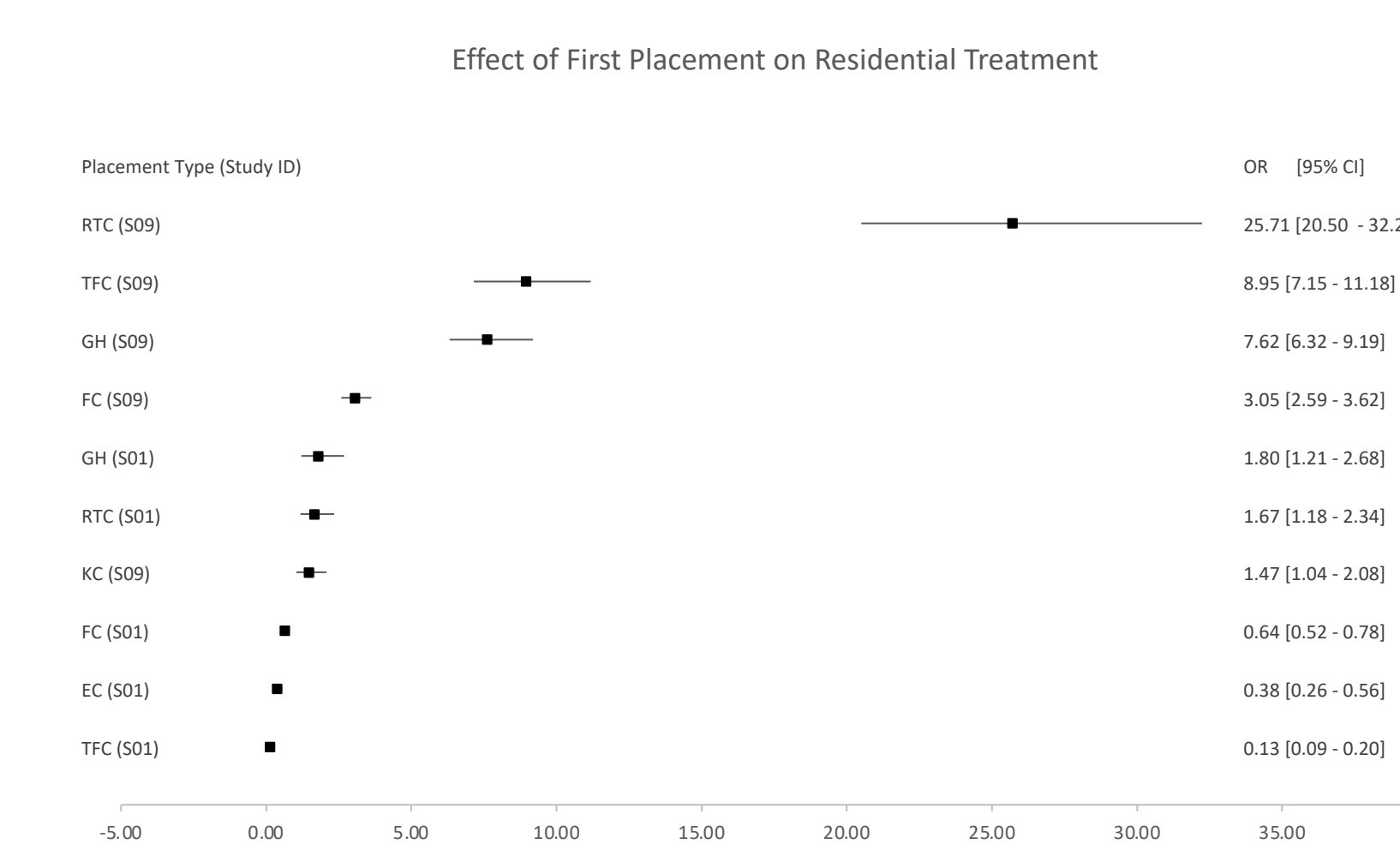
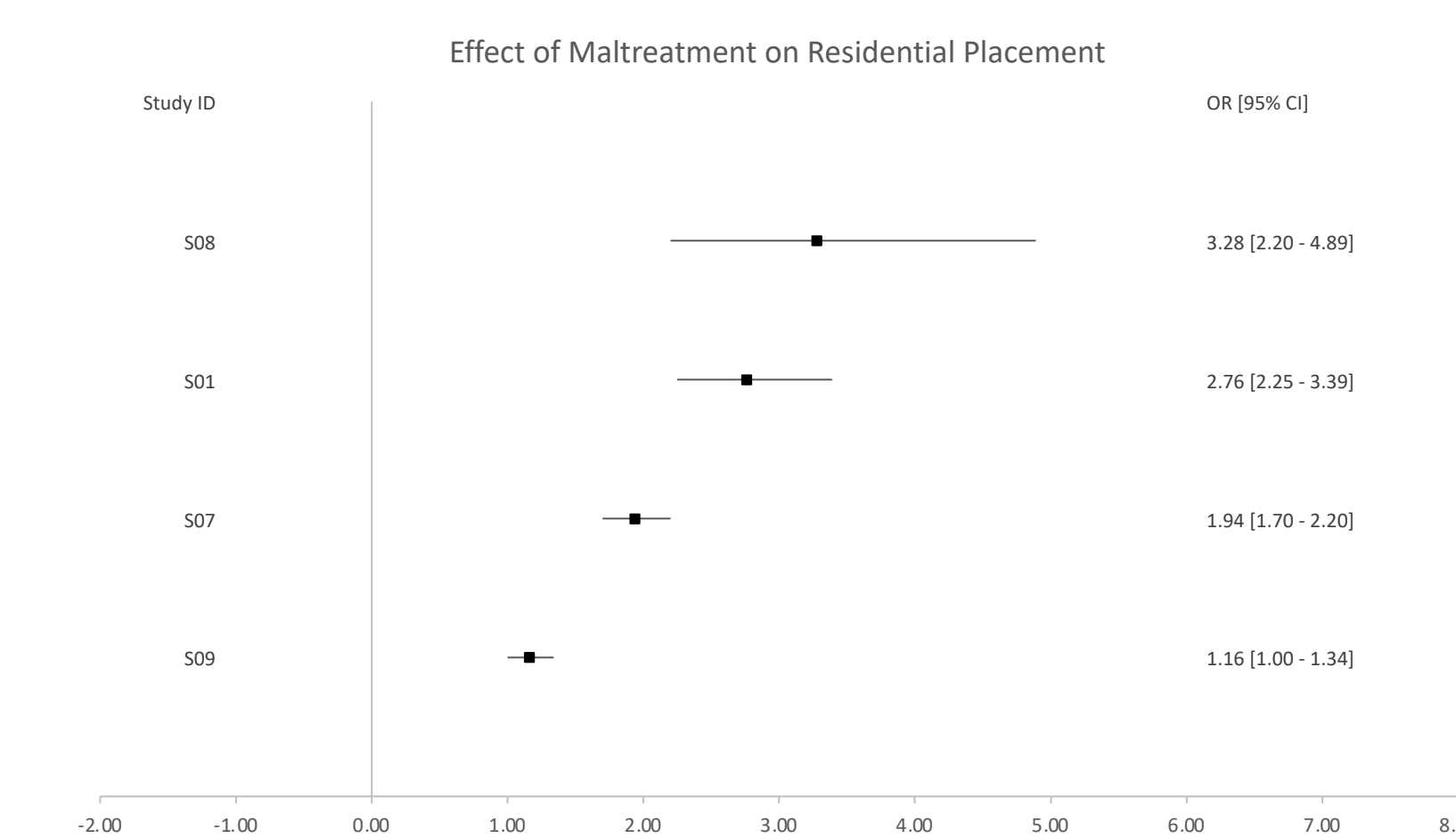
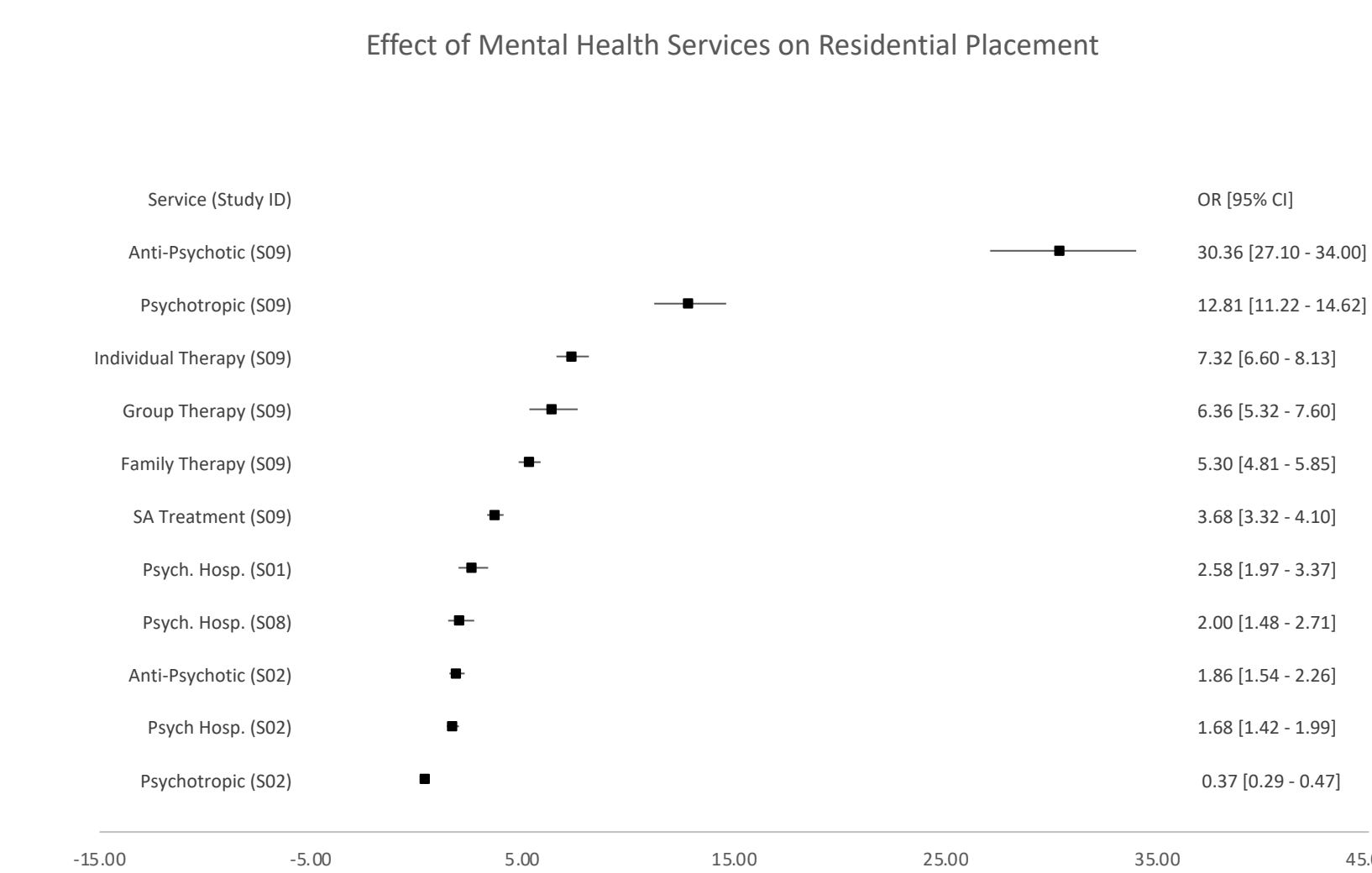
Common Findings:

- Demographics:
 - Older age was consistently associated with entry to RTC
 - Male gender was consistently associated with entry to RTC
 - White race was consistently associated with entry to RTC
- Mental & behavioral health history characteristics:
 - Number of outpatient visits was associated with reduced risk of entry to RTC
 - Psychiatric hospitalization was consistently associated with entry to RTC
 - Prescription of psychiatric medications was consistently associated with entry to RTC
 - Anti-psychotics specifically were consistently associated with entry to RTC
 - Significant behavioral issues were associated with entry to RTC:
 - Substance Abuse
 - Suicidal Ideation
 - Juvenile Justice system involvement
 - Inappropriate sexual behavior
 - Several mental health conditions were associated with entry to RTC:
 - Anxiety
 - Depression
 - Trauma-associated diagnosis

Child Welfare History Characteristics:

- Maltreatment History:
 - Substantiated maltreatment history was consistently associated with entry to RTC
 - History of physical abuse and neglect were associated with lower probability of entry to RTC compared to history of sexual abuse
- Placement history:
 - Adverse placement histories were associated with higher risk of entry to RTC
 - Higher number of previous placements
 - Behavior-related placement disruptions
 - History of re-entry to care
 - Several placement settings were consistently found to be associated with entry to RTC:
 - Treatment foster care
 - Non-kinship foster care
 - Group home
 - Previous entry to RTC
 - Entry from home of origin
 - Kinship care was consistently found to lower risk of entry to RTC

RESULTS



CONCLUSIONS

The existing research on factors associated with entry to RTC for child welfare involved youth is outdated, inconsistent, and few studies are methodologically sound

Despite these issues with the literature, this review offers some insight into the characteristics that put child welfare involved youth at greater risk of entry to RTC settings:

- Child welfare involved youth who enter RTC have complex maltreatment histories that may require trauma-informed care to address
- Child welfare involved youth who enter RTC are more likely to have experienced instability in their caregiver experiences
- Child welfare involved youth who enter RTC often have complex behavioral histories

For additional information please contact:

Lauren Pryce McCarthy, MSW, LCSW
School of Social Work PhD Program
University of Maryland, Baltimore
lmcCarthy@ssw.umaryland.edu