Patterns of Movement for Youth within an Integrated Continuum of Residential Services

At the core of the Boys Town Strategic Plan is the development of an integrated continuum of care. This means that service programs all have the same underlying theoretical and practice elements—along with a focus on safety, permanency, and well-being as outcome goals. This is a unique approach to care and treatment of children and their families.

A related goal for the Boys Town National Research Institute is to study the effectiveness of this integrated continuum. The current study examined patterns of movement for youth receiving services within the Boys Town residential continuum of care in the Nebraska/Iowa region. We hypothesized that, because of the integrated nature of the continuum, the majority of youth would move from more restrictive to less restrictive treatment or placement settings, and they would demonstrate significant progress over time in behavioral and emotional symptoms.

Method

The continuum of residential care examined in this study consisted of three Boys Town programs (from low to high intensity of services): Treatment Family Homes (TFH), Specialized Treatment Group Homes (STGH), and the Intensive Residential Treatment Center (IRTC).

The sample consisted of all completed episodes of care between October 2001 and October 2006. We defined an episode of care as a period of time when a youth remains in care in one or more of these residential programs. There were 701 completed episodes of care for this period, of which 425 episodes had one or more moves between programs.

Results

More than three-quarters (76%) of all episodes in the residential care continuum fell into one of six patterns (see figure, page 2). The most common pattern was for youth to enter and stay in the TFH program. There were 211 episodes of care that followed this pattern (30% of all episodes), with 85% of youth departing from this pattern either going to another treatment setting (such as the IRTC) and STGH were more likely to depart to another treatment setting, and less likely to depart to an independent living or home setting.

These results suggest that we are more likely to help youth who have significant behavior and emotional problems.

Nebraska/Iowa Region Growth

We interviewed Bob Pick, the Vice President of the Nebraska/Iowa Region, to learn more about the recent growth in this region.

How has the number of youth and families served in the NE/IA Region changed in the past few years?

At the conclusion of 2007, the Nebraska/Iowa Region had served approximately 3,500 youth and a very small number of families. January 2008 was the beginning of implementation for the Nebraska/Iowa Strategic Plan. At that time, I had hoped to double the number of kids served in Nebraska/Iowa over a 5-year time period. Amazingly, that was accomplished in two short years.

At the conclusion of 2003, Nebraska/Iowa had served 7,146 kids. Also, the number of families served tripled. At the end of 2007, 577 families were served, and at the conclusion of 2009, 1,628 families were served.

This growth in numbers of kids and families served has occurred in the areas of In-Home Family Services and Foster Care. We have major contracts in Nebraska and Iowa to serve families in their homes. In the meantime, we have maintained a vibrant ecological campus, keeping our Treatment Family Homes strong as they are a vital service in our continuum of care. It has truly been an amazing growth time for the Nebraska/Iowa Region.
NEBRASKA/IOWA REGION (cont.)

How has this growth changed the continuum of services provided in the NE/IA region?

Nebraska/Iowa is the only Boys Town Site that has the entire continuum of services. Historically, the use of the continuum is typically a youth from the Specialized Treatment Group Home stepping down to a Treatment Family Home. While this has continued, the major change in the continuum is the use of Foster Family Services, the Boys Town Day School, the Behavioral Pediatric Clinic, and In-Home Family Services.

Kids are entering Boys Town programs at different starting points, being linked to a tailor-made continuum to meet their needs, and able to leave Boys Town at a lower level of care. The emphasis has been about the right service at the right time for youth and families.

The other use of continuum has been the extensive change in involvement of families in the Nebraska/Iowa Region. Our services now reach out to families and also link them to the right service at the right time.

In other words, the primary continuum changes are how kids and families enter the system, the variety of treatment options available, and the emphasis on family reunification and healing the entire family, not just the youth in care.

What are the 2010 goals for the NE/IA region?

Our goals are as follows: First, to sustain/grow strategic services; second, to increase the number of youth served through the Nebraska Families Collaborative, and third, to expand program-transfer capacity.

The success we’ve had in helping more children and families is driven by our Strategic Plan and our dedication and passion in carrying out the Strategic Plan.

It is the staff in Nebraska/Iowa who are making this Strategic Plan happen at such an accelerated pace, with an emphasis on quality and evaluation.

Conclusion

This study supports the view that an integrated continuum of residential services with varying degrees of restrictiveness serves the needs of youth with significant emotional and behavioral disorders. The continuity between individual programs and the use of a strong treatment model add to the strength of the overall program and are perhaps the primary reason that, for the majority of youth, Boys Town’s Integrated Continuum of Care functions as it was designed to in preparing youth for a normal and well-adjusted life in society.

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Bob Pick started at Boys Town in 1979 as a Family-Teacher. Bob has held a wide variety of direct-care, supervisory, and managerial positions including: Residential Consultant; Evaluator; Trainer; Community Director; Director of Training, Evaluation and Audit; Operations Director of National Resources and Training Center; and Associate Executive Director of Home Campus. Bob is currently the Vice President of the Nebraska/Iowa Region.