

## **Ensuring Quality Residential Care for Kids Is a Top Priority at Boys Town**

Throughout Boys Town's history, one of our most important guiding principles has been to always do what is in the best interests of children or families so they have the greatest opportunity to find healing and success.

With the development and implementation of our Integrated Continuum of Care<sup>®</sup> over the past several years, Boys Town has enhanced our ability to follow this principle and offer an even wider range of life-changing services. The Continuum includes in-home and community-based programs that allow more children to get the help they need while remaining with their families (whenever possible) or during short-term stays in foster care.

In fact, where Boys Town used to help 85% of the youth in its care through our Family Home residential program, our Continuum now serves more than 90% of the nearly 30,000 youth who receive Boys Town services each year in their own families or in family-like settings such as foster care.

Even with that significant shift, Boys Town knows that these less-restrictive approaches cannot meet the needs of all youth, particularly those with serious behavioral or emotional problems. There will always be children who need more intensive treatment, and research and practice demonstrate that **quality residential care** is an essential component of any continuum of care for at-risk youth.

**Why is Boys Town increasing its efforts to advocate for quality residential care?**

**What is Boys Town's position on providing community-based services to help troubled children?**

**How valid are the arguments of critics who would like to eliminate residential care as a treatment option for children?**

**How is Boys Town advocating for residential care as a treatment option for at-risk kids?**

**Why is Boys Town increasing its efforts to advocate for quality residential care?**

Residential care has come under attack recently by policy advocates and system reformers who argue that it should be reduced or eliminated as an out-of-home placement for at-risk youth. Some of these critics contend that foster care and family-based programs can adequately meet the needs of all of these children. They also contend that residential care is costly, and want to eliminate it in order cut costs and save money.

Some critics, such as the Annie F. Casey Foundation, argue that it is best to keep these children in the very programs where they have continually failed. Sadly, this only hurts these youngsters further as they are re-traumatized by frequent moves to new placements, new caregivers and new schools, and add even more entries to their resumes of failure.

### **What is Boys Town's position on providing community-based services to help troubled children?**

No one would argue that children who can be safely and successfully served in their own families or surrogate families should be in residential care. Most children can and should be served in community-based care, which is evidenced by Boys Town's shift to help more boys and girls in their own homes or in other family-like settings. But the debate over residential care vs. less-restrictive options turns in favor of residential care when we are looking at children who have been removed from their families and whose behavioral, emotional, or mental health needs are too challenging for community-based options such as foster care, kinship care, in-home family services, or outpatient therapy. These are the very children that our Family Homes serve so successfully.

Children who have repeatedly failed in alternative, less-restrictive placements need residential care. The traumatic cycle of failure that occurs in family-based and foster care-based care must be broken, and quality, family-style residential care is a key solution.

### **How valid are the arguments of critics who would like to eliminate residential care as a treatment option for children?**

Boys Town disputes their arguments because they are not supported by research and practice, and do not pertain to all residential care. The critics ignore research that shows that quality residential care is the best option for a subset of at-risk, high-needs children whose treatment needs cannot be met through less-restrictive approaches like foster care and family-based programs.

Overall, the research cited by critics of residential care pales in comparison – in depth, scope, and amount – to the research that shows residential care can be an effective, life-changing way to help children. Simply put, we have research on our side that more than trumps what the critics present as proof in their arguments.

Quality residential care like that provided in the Boys Town Family Home Program<sup>SM</sup> has been demonstrated to be effective for youth with high needs, especially those who have repeatedly failed in less-restrictive interventions. And while quality residential care is costly in the short term, it results in long-term personal and economic benefits for youth, their families and society.

## **How is Boys Town advocating for residential care as a treatment option for at-risk kids?**

We're doing this by training our own staff to be better advocates of residential care for children who need it and by sharing the merits and value of such care for these youth with policy advocates and decision-makers.

We also continue to recruit caring, competent staff and to strengthen our Family Home Program so it can stand as a beacon of hope for children and an example to others of how quality residential care can and should be provided for at-risk youth.

Boys Town also is enlisting the support and collaboration of other agencies and organizations that believe quality residential care must remain a treatment option for troubled kids.

With the continued support of our loyal donors and the increased advocacy efforts of our dedicated staff, Boys Town can ensure that quality residential care will always be there for boys and girls whose serious emotional and behavioral problems require more-intensive care and who haven't found the help they need in other care settings.