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Components of Effective Long-Term Mental Health Treatment for Foster Youth

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BACKGROUND AND RATIONALE

- Research has shown that children in the foster care system in the United States are a “population at risk” for developing many psychological disorders.
- A national non-profit organization based in San Francisco offers pro-bono long-term psychotherapy to foster youth with the goal of reducing mental health problems.
- Our earlier work has demonstrated the effectiveness of long-term relationship based psychotherapy for children in foster care with significant initial and long-term changes across a variety of psychiatric symptoms.
- The current study evaluated the components of long-term treatment during the first two years. It was hypothesized that therapy would be primarily psychodynamic with an emphasis on attachment related issues.

METHOD

Participants

38 Therapists (mean age = 49.66 years, SD = 9.15 years; 79% female; 95% Caucasian; 63% had doctoral degrees; 50% were licensed psychologists) from four California counties, each of whom was providing long-term psychotherapy to one foster child.

Procedure

Telephone interviews with therapists at the beginning of treatment and at either one or two years into treatment.

Measures

Semi-structured telephone interviews regarding demographics of patients, parameters of treatment, primary targets of treatment and the nature of the treatment intervention.

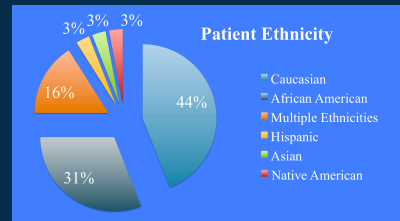
Analysis

A coding manual was developed based on previous literature to translate the data from the short answer question “give a brief description of treatment intervention over the last year”. Data was organized into two different categories: treatment type and intervention issues.

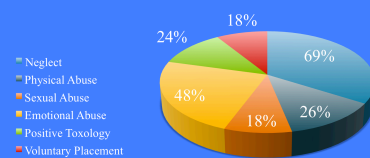
RESULTS

Patient Demographics

Mean age of child 10.43 years (SD = 4.5 years)
60% of child patients are female



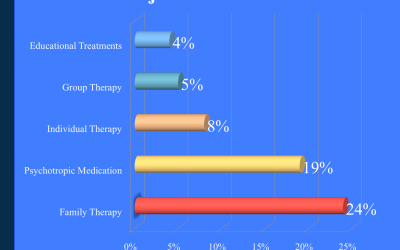
Reasons For Removal From Home



Parameters of Treatment

- The majority of therapists (87%) met with their foster child once per week.
- Collaborative work included work with
 - foster parents (65%)
 - DHS Social Workers (40%)
 - teachers (30%)
 - biological parents (14%)
 - psychiatrists (11%)

Adjunct Treatments



RESULTS

Targets of Treatment

Because of the nature of the survey question, therapist free response included comments about theoretical approach, treatment modality, and intervention issues; therefore each therapist may be represented in multiple categories within and across outcome variables.

