BACKGROUND AND RATIONALE

• Children in foster care are at increased risk for emotional and behavioral problems due to their experienced maltreatment, separation and loss, and the instability of the foster care system.
• Research with adults has demonstrated that relationship elements are positively associated with patient progress and secure attachment to therapist.
• Relationship elements in treatment outcome have not been researched with a foster care population.
• The stable presence of a therapist may improve the attachment of foster children to the therapist, leading to a reduction of behavioral issues and improved relationships.
• This study evaluates the impact of Relationship Based Therapy provided to current or former foster youth by licensed clinicians through A Home Within (AHW), a national non-profit organization that provides pro-bono mental health treatment to current and former foster youth with one therapist “for as long as it takes.”

METHOD

Measures

Semi-structured telephone interviews about therapist and patient demographics, patient mental health symptoms, degree of healthy attachment, and overall progress by the conclusion of treatment.

Procedure

• AHW provides names and contact information of therapists upon each new therapist-patient match.
• The research team contacts the therapists and invites them to participate in the study.
• Telephone interviews are conducted with therapists who agree to participate; initial interviews occur within three months of the start of treatment; interviews occur annually thereafter and an exit interview occurs within three months of the end of treatment.

RESULTS

Patient Demographics

• School-aged youth and adolescents (M = 11.40 years, SD = 5.45 years, range: 3.04 – 41.00 years)
• 70.8% Female

Patient Ethnicity

American Indian 10.7%
White 31%
Hispanic 23.8%
Asian American 6.1%
Multiple 13%
Multiple 12.5%

Reasons for Entry into Foster Care

Parental loss to Caesarean 46.7%
Neglect 39.5%
Emotional Abuse 64.2%
Physical Abuse 29.3%
Sexual Abuse 9.7%
Voluntary Placement 10.7%
Abuse/ Family Violence 5.5%
Major Life Transitions 3.8%
Other 3.8%

Treatment Parameters

• Frequency: Once Weekly (62.5%), Once Every Other Week (16.7%)
• Duration: 2.59 years (SD = 1.77 years, range: 0.7 – 8.11 years)

Degree of Attachment to Therapist

Great = 2
Moderate = 3
None = 4

Degree of Progress at End of Treatment

Very Great = 4
Great = 3
Moderate = 2
None = 1

Symptom Scale: 1=Non-, 2=Mild, 3=Moderate, 4=Severe, 5=Extremely

Correlation between attachment to therapist at end of treatment and overall progress

Correlation between change in Degree of Healthy Attachment (DHA) to Therapist and change in Symptomology

Degree of Healthy Attachment (DHA) was rated on a scale of 1 (None) to 5 (Great). DHA to Therapist change was calculated by subtracting ratings of DHA at treatment and exit DHA at treatment start, such that a more negative number indicates greater attachment at the end of treatment.

The severity of 24 symptoms was rated on a scale of 0 (None) to 5 (Extremely). Change in symptom was calculated by taking the sum of all the symptom ratings at start of treatment and subtracting the sum of all the symptom ratings at the end of treatment. A more positive number indicates greater decrease in Symptomology.

DISCUSSION

• Symptoms that significantly changed during the course of outpatient treatment with this sample of current and former foster youth included depression, anxiety, aggression or violence as the perpetrator, and problems in relationship with people in current living situation.
• Increased attachment to therapist over the course of treatment was significantly correlated with reductions in severity of psychological symptoms and greater progress in therapy.
• Limitations include a small sample size, reliance on therapist report, and use of correlational analysis.
• Future work should include assessments of the foster child patient's attachment to other people in his/her life besides the therapist, interviews with foster youth patients, and standardized measures of attachment and psychological symptoms.

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