

Evidence review: Analysis of the evidence for Out-of-Home Care

Appendix 1

June 2013

Parenting Research Centre and the
University of Melbourne

Commissioned by the Community Services
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Disclaimer

This analysis of Out-of-Home-Care was commissioned by the Community Service Directorate of the ACT Government. It was conducted between April and June 2013. Readers are advised to consider new evidence arising post the publication of this review when selecting and implementing parenting interventions.

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APPENDIX 1: REVIEW OF SYSTEMATIC REVIEWS AND GAP ANALYSIS

Aims

This review of systematic reviews and gap analysis is the first step in a review of Out of Home Care evaluations to be undertaken by the Parenting Research Centre and the University of Melbourne. The purpose of this step is to determine what evidence currently exists for Out of Home Care and what gaps there are in the evidence. Information gathered during this analysis will be augmented with the findings from a Rapid Evidence Assessment (next step) to form a picture of the effectiveness of Out of Home Care programs, practices and policies.

Search Methodology

To identify relevant high quality systematic reviews in the area of Out of Home Care, The Cochrane Library and The Campbell Library were searched using the terms “out of home care or foster care or kinship care”. We also searched PsycInfo and MEDLINE via OVID using the terms (foster adj1 care) and ((systematic adj1 review) or (meta-analysis)) and limited to English.

Identified papers were screened for quality and relevance. It is important to remember that, while regular literature reviews are appealing in the sense that they focus on a relevant topic, the bias they bring in terms of the studies they include and the weight each are accorded is considerable. Systematic reviews were included in the gap analysis where they met the following criteria:

- They related to Out of Home Care;
- The review addressed a clearly defined question;
- There was an a priori search strategy and clearly defined inclusion and exclusion criteria;
- Grey (unpublished) literature was specifically searched for;
- There was more than one rater for extraction of study information;
- Meta-analysis was included if there were sufficient studies, conducted in similar enough ways and with similar enough populations.

Search Results

Searches of The Cochrane Library, The Campbell Library, PsycInfo and MEDLINE identified 122 results. Forty-five of these were duplicate results, which were removed, leaving 77 potential reviews to assess. We found that 59 of these were not related to Out of Home Care and a further 10 did not meet our criteria for high quality systematic review (see Table 1 for a list of excluded reviews). See fig. 1 for a flow of papers through this review of reviews.

Figure 1: Flow of papers through the review of systematic reviews in Out of Home Care

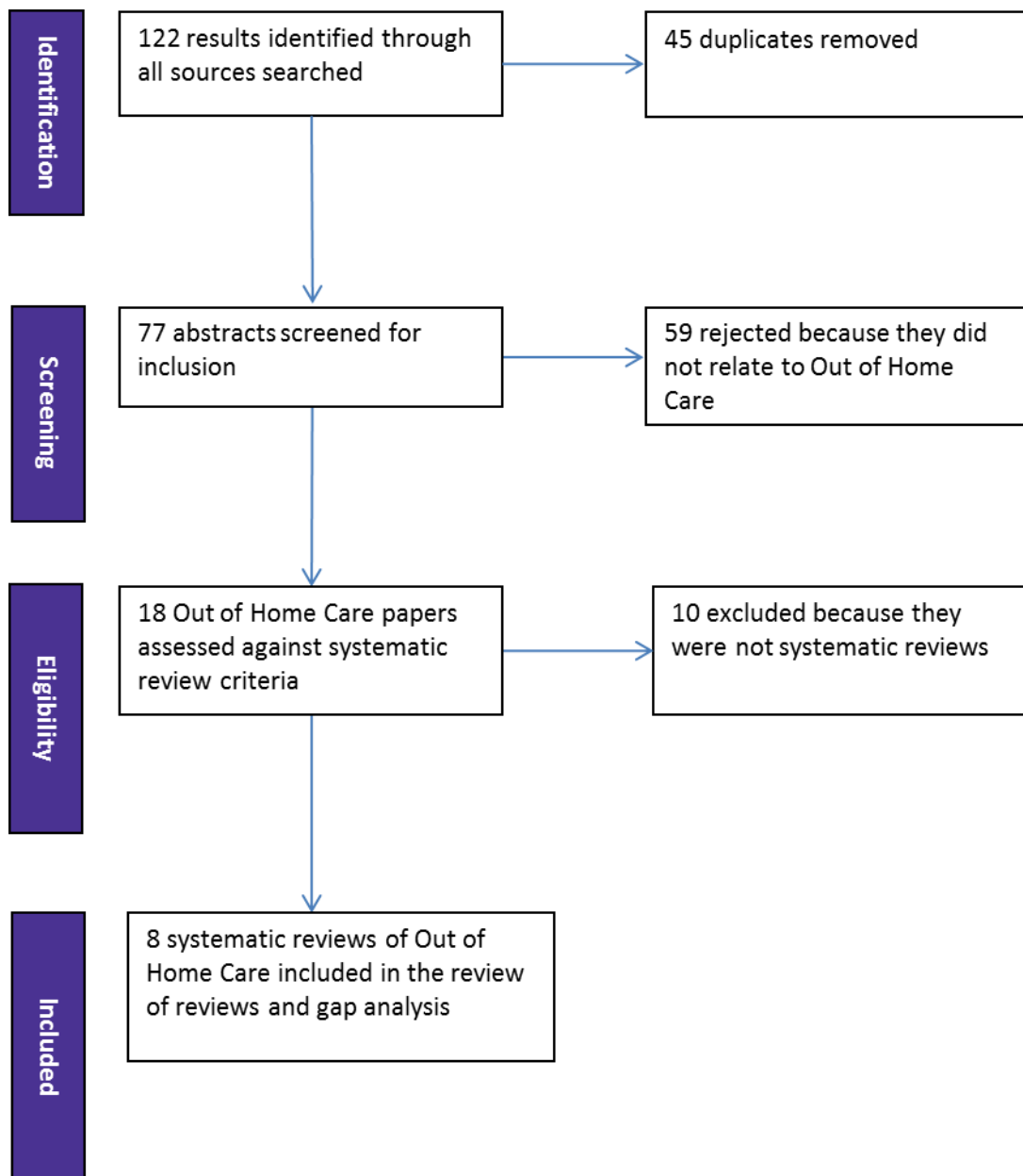


Table 1: Out of Home Care reviews that were excluded from the review of reviews and gap analysis because they did not meet the selection criteria

Excluded OOHC reviews
1. Everson-Hock, E., Jones, R., Guillaume, L., Clapton, J., Goyder, E., Chilcott, J., . . . Swann, C. (2012). The effectiveness of training and support for carers and other professionals on the physical and emotional health and well-being of looked-after children and young people: A systematic review. <i>Child: Care, Health and Development</i> , 38(2), 162-174.
2. Hahn, R. A., Bilukha, O., Lowy, J., Crosby, A., Fullilove, M. T., Liberman, A., . . . Schofield, A. (2005). The Effectiveness of Therapeutic Foster Care for the Prevention of Violence: A Systematic Review. <i>American Journal of Preventive Medicine</i> , 28(2,Suppl1), 72-90.
3. Jones, R., Everson-Hock, E., Papaioannou, D., Guillaume, L., Goyder, E., Chilcott, J., . . . Swann, C. (2011). Factors associated with outcomes for looked-after children and young people: A correlates review of the literature. <i>Child: Care, Health and Development</i> , 37(5), 613-622.
4. Naccarato, T., & DeLorenzo, E. (2008). Transitional youth services: Practice implications from a systematic review. <i>Child & Adolescent Social Work Journal</i> , 25(4), 287-308.
5. Oosterman, M., Schuengel, C., Slot, N., Bullens, R. A., & Doreleijers, T. A. (2007). Disruptions in foster care: A review and meta-analysis. <i>Children and Youth Services Review</i> , 29(1), 53-76.
6. Zlotnick, C., Tam, T., & Zerger, S. (2012). Common needs but divergent interventions for U.S. homeless and foster care children: Results from a systematic review. <i>Health & Social Care in the Community</i> , 20(5), 449-476.
7. Ziviani, J., Feeney, R., Cuskelly, M., Meredith, P., & Hunt, K. (2012). Effectiveness of support services for children and young people with challenging behaviours related to or secondary to disability, who are in out-of-home care: A systematic review. <i>Children and Youth Services Review</i> , 34(4), 758-770.
8. Reddy, L. A., & Pfeiffer, S. I. (1997). Effectiveness of treatment foster care with children and adolescents: A review of outcome studies. [Meta-Analysis]. <i>Journal of the American Academy of Child & Adolescent Psychiatry</i> , 36(5), 581-588.
9. Ager, A., Zimmerman, C., Unlu, K., Rinehart, R., Nyberg, B., Zeanah, C., . . . Strottman, K. (2012). What strategies are appropriate for monitoring children outside of family care and evaluating the impact of the programs intended to serve them? <i>Child Abuse & Neglect</i> , 36(10), 732-742.
10. Braciszewski, J. M., & Stout, R. L. (2012). Substance use among current and former foster youth: A systematic review. <i>Children and Youth Services Review</i> , 34(12), 2337-2344.

Summary of High Quality Systematic Reviews

The eight systematic reviews of Out of Home Care identified are listed in Table 2 (at end of document), in order of where they sit on the Out of Home Care service continuum:

- Placement prevention – no reviews
- Entry into care- no reviews
- Out of Home Care service models - 4 reviews covering: residential care, kinship care, treatment (therapeutic) foster care and cognitive-behavioural training interventions for foster carers caring for children
- Reunification / Restoration - 1 review covering: reunification (restoration) and re-entry into care
- Adoption - 2 reviews covering: benefits of adoption
- Transition from care - 1 review covering: independent living programmes for young people leaving care

Similarly to individual studies, these systematic reviews vary in quality but provide some useful information. Findings from this gap analysis must be integrated with REA findings as the project progresses, filling in some detail that these more focused systematic reviews do not address. In summary they tell us the following:

- Children placed in Kinship Care show better behavioural development, mental health functioning, and placement stability than their counterparts placed in non-related foster care. This cross-listed Cochrane and Campbell systematic review is of very high quality and, despite the fact that the included studies are overwhelmingly non-experimental, the bias is controlled for in a rigorous manner.

These are major findings since the debate around the benefits of kinship care in child protection has progressed for more than 25 years. In particular, the debate has focused on whether placing a child back with the family of origin subjects that child to further exposure to unhealthy family functioning. At the end of the day, if children placed with kin are no more likely, or even less likely, than children placed with non-kin to develop behavioural and mental health problems, child protection systems can focus on enhancing each type of placement rather than trying to decide their relative merit. Further, the recent trend in governmental preferences to use kinship care as a placement of first choice appears to be a good idea on this dimension. In addition, the findings of greater placement stability and a generally better likelihood of permanence lend further support for this placement type.

While the support for kinship care is relatively strong in this review, there are some cautions. Children in non-related foster care appear to utilize more mental health services. This is likely a result of two processes: children in non-related foster care may

have more mental health issues upon entry to care; and kinship caregivers may be less likely to utilize mental health services even when needed. Thus, the two placement types may have different challenges. In addition children placed with kin, while more likely to achieve permanence in terms of a long-term, stable placement, are less likely to be adopted. Two caveats to this finding: rates of kin adoption have been increasing substantially over the last few years, including years not covered by this review; and legal guardianship / legal custody has similar positive outcomes as adoption. Nonetheless, these differences are present and, if adoption promotion is the aim, special efforts should be made to foster kinship adoptions.

Reunification rates are a difficult construct to synthesize, and the work in this review is no different. While rates of reunification between children in kin and non-kin care were found to be similar, a closer examination of the data seems to point to a difference in time to reunification. That is, while children in kin and non-kin care tend to reunify at similar rates, children in kinship care tend to reunify more slowly. In addition, at least one study has found that children who reunify from kinship care tend to reenter care at lower rates than children who reunify from non-kin care.

While there are no cost data included in this review, information about cost will be included in the final report based on findings from the REA (there is at least one known cost study in this area).

- Treatment (Therapeutic) foster care may lead to slightly better outcomes for children in care on a wide range of outcomes. This finding is based on another very high quality review cross-listed in the Cochrane and Campbell Collaborations. Children with fairly severe psychological and behavioural problems are often placed in group or residential care settings. These settings rarely lead to better outcomes for children. Rather, they are associated with some of the worst outcomes seen in Out of Home Care. In addition, they tend to be the most expensive form of care, costing the child protection system enormous sums of money. If treatment foster care can be used as a preventive or 'step-down' strategy for less restrictive forms of care, outcomes for high-end children might improve while facilitating a substantial cost savings.
- There appears to be very little evidence that has been systematically reviewed on the effectiveness of reunification / restoration services and prevention of re-entry to care. This does not mean that evidence is not available, it just means that there has not been a systematic review conducted in this area. There are a few known studies that provide some evidence, and these will be included in the REA.
- Compared to institutionalized children, (early) adoption proves to be an effective intervention in the domain of attachment. Although this review is of lower quality than the previous reviews and uses studies that include populations very unlike those found in the ACT (i.e., large institutions located in less developed child welfare systems). The

review also found that children growing up in a family environment (including foster care and adoptive homes) fared better in terms of IQ than children growing up in institutional care. While limited in terms of method and applicability, the review provides some support for adoption as a permanent plan for children who cannot live with their birth parents or kin. However, there may be issues with identity in later years and there are often cultural barriers to adoption, particularly in Aboriginal communities.

- The use of independent living skills programs for youth in foster care who are ‘emancipating’ or ‘aging out’ of the system appears to have no empirical support in terms of this service’s capacity to facilitate successful ‘independence’. No studies meeting the threshold for effectiveness were found in this Campbell Collaboration review. In fact, there is one study that has yet to be published that uses randomized controlled trial methodology to test this very program, finding that there is little or no effect of such services. The implication is that if the ACT is interested in fostering independent living skills, simple training programs in money management and basic independent living skills are very unlikely to make a difference. While the REA is not yet complete, it is expected that the recommendation for successful transition to adulthood includes extended stays in foster and kinship care, which would more closely simulate the process and timing of leaving home for children who are part of the larger population.

Gap Analysis

The following areas identified for investigation were not covered by the systematic reviews identified.

1. Systems:
 - a) Key elements of effective Out of Home Care systems;
 - b) Key recommendations/learning from other jurisdictions’ reviews in Out of Home Care service provision;
 - c) Drivers of quality improvement;
 - d) Quality assurance; and
 - e) Regulation – accreditation, monitoring, oversight and impact.

While some elements of the systems were covered by the gap analysis (i.e., kinship care and adoption as key elements) and some key recommendations (i.e., use of kinship care, support for caregivers, use of TFC to reduce level of restrictiveness of setting), this section is better served using grey literature that focuses on regional and national reports to be obtained during the REA portion of the review.

2. Models/Service areas:

- a) Foster care – partial coverage
- b) Kinship care – substantial coverage
- c) Residential care – partial coverage
- d) Reception services – no coverage
- e) Placement prevention – no coverage
- f) Placement preservation – no coverage
- g) Restoration – partial coverage
- h) Transition from care – partial coverage
- i) Adoption and permanent care – partial coverage
- j) Short term care – no coverage
- k) Medium term care – no coverage
- l) Long term care – no coverage
- m) Therapeutic care – substantial coverage
- n) Different theoretical models of care – no coverage
- o) Other forms of care outside the scope – no coverage
already identified above

3. Workforce:

- a) Current carer demographics as identified in the literature;
- b) Current characteristics of carers as identified in the literature;
- c) Professional carers;
- d) Payments to carers;
- e) Recruitment of carers;
- f) Retention of carers;
- g) Assessment of carers;
- h) Training of carers; and
- i) Carer support services.

No systematic reviews directly addressed this area. Studies will be sought from the REA.

4. Children and young people:

- a) Current characteristics of children and young people coming into care as identified in the literature – no coverage
- b) Outcomes for children and young people in out of home care – education, health, social, mental health, juvenile and adult justice involvement, homelessness and employment – partial coverage
- c) What system types work for children from an Aboriginal and Torres Strait Islander background – no coverage
- d) System types that work for children and young people with additional needs – partial coverage
- e) System types that work for children and young people from culturally and linguistically diverse backgrounds – no coverage
- f) Placement of sibling groups – no coverage

While there was some coverage in these areas in the kinship, treatment foster care, and adoption reviews, the majority was not covered and a greater number of studies will be obtained as part of the REA.

Table 2: Details of the systematic reviews included in this review of reviews

Systematic Review	Place on the Continuum	Research Question	Population	Interventions	Outcomes	Findings of the Systematic Review	Our notes
van Ijzendoorn, M. H., Luijk, M. P., & Juffer, F. (2008). IQ of children growing up in children's homes: A meta-analysis on IQ delays in orphanages. <i>Merrill-Palmer Quarterly, 54</i> (3), 341-366	Out of Home Care service models – Residential Care	Comparison of intellectual development of children in children's homes compared with foster or birth families	Children in children's homes under 15 years in 19 different countries	Residential care	Intellectual development (assessed via IQ)	Children growing up in children's homes showed lower IQs than did children growing up in a family.	Further examination needed to determine relevance to ACT context.
Winokur, M., Holtan, A., & Valentine, D. (2009). Kinship Care for the Safety, Permanency, and Well-Being of Children Removed from the Home for Maltreatment: A Systematic Review. <i>Campbell Systematic Reviews, 1</i> .	Out of Home Care service models – Kinship Care	Evaluation of the effect of kinship care placement on the safety, permanency, and well-being of children removed from the home for maltreatment.	Children and youth under the age of 18 who were removed from the home for abuse, neglect, or other maltreatment and subsequently placed in kinship care.	Kinship Care	Behavioural Development, Mental health, placement stability, permanency, educational attainment, family relations, service utilization, re-abuse	Kinship care – better behavioural development, mental health functioning, and placement stability than foster care, more likely to be in guardianship Foster care – more likely to be adopted, more likely to use	Excellent study currently being updated.

Systematic Review	Place on the Continuum	Research Question	Population	Interventions	Outcomes	Findings of the Systematic Review	Our notes
						mental health services No difference in reunification rates	
Turner, W., & Macdonald, G. (2011). Treatment foster care for improving outcomes in children and young people: A systematic review. <i>Research on Social Work Practice, 21</i> (5), 501-527.	Out of Home Care service models – Treatment Foster care	The impact of treatment foster care (TFC) on psychosocial and behavioural outcomes, delinquency, placement stability, and discharge status	Children and adolescents up to the age of 18 who, for reasons of severe medical, social, psychological, and behavioural problems, are placed out of home. Any treatment foster care program included.	Treatment foster care - (a foster family-based intervention that aims to provide young people (and, where appropriate, their biological or adoptive families) with an individually tailored program designed to help bring about positive changes in their lives	A. <i>Child outcomes</i> Behavioural outcomes Psychological functioning Educational outcomes Interpersonal functioning Mental health Physical health B. <i>Treatment Foster carer(s) outcomes</i> Measures of skills Interpersonal functioning C. <i>TFC agency outcomes:</i> Placement stability Attainment of treatment goals Level of	TFC is a promising intervention but the evidence base is not robust.	Excellent review that includes only RCTs. The number of these is small, so results cannot be stated unequivocally. But, for children placed in care, outcomes may be marginally better if they receive TFC on a range of outcomes.

Systematic Review	Place on the Continuum	Research Question	Population	Interventions	Outcomes	Findings of the Systematic Review	Our notes
					restrictiveness Level of independent living skills <i>D. Costs</i>		
Turner, W., Dennis, J., & Macdonald, G. (2007). Behavioural and Cognitive Behavioural Training Interventions for Assisting Foster Carers in the Management of Difficult Behaviour: A Systematic Review. <i>Campbell Systematic Reviews</i> , 3.	Out of Home Care service models – training for foster carers	The effectiveness of cognitive-behavioural training interventions in improving: a) children's behavioural / relationship problems, b) foster carers' psychological well-being and functioning, c) foster family functioning, d) foster agency outcomes	Foster parents/carers looking after children and adolescents up to and including 18 years of age	Cognitive-behavioural training interventions	A. <i>Child outcomes</i> · Psychological functioning; · Behaviour problems (at foster home and/or at school; · Interpersonal functioning of the looked-after child. B. <i>Foster carer(s) outcomes</i> Measures of skills, knowledge, attitudes and behaviour change; Psychological functioning. C. <i>Foster family functioning</i> · Foster family	A. <i>Child outcomes</i> Little effect B. <i>Foster carer(s) outcomes</i> No evidence of effectiveness C. <i>Foster family functioning</i> No evidence of effectiveness D. <i>Fostering agency outcomes</i> No significant results.	Excellent review indicating that CBT and behavioural interventions may need to be targeted for specific behaviours and foster parents supported more closely.

Systematic Review	Place on the Continuum	Research Question	Population	Interventions	Outcomes	Findings of the Systematic Review	Our notes
					functioning; · Foster parent(s) - child relations. <i>D. Fostering agency outcomes</i> Placement stability / completion of allocated stay.		
Saunders-Adams, S. M. (2011). Reunification and reentry in child welfare: A systematic review and meta-analysis. <i>Dissertation Abstracts International Section A: Humanities and Social Sciences</i> , 72(6-A), 2158.	Reunification / Restoration	Effective interventions & factors related to reunification and to reduced re-entry into substitute care	Abused and neglected children who have been in substitute care as a result of the abuse or neglect, aged 0-18	All studies that report on any intervention that may achieve the outcomes of successful reunification or decreased re-entry to care	Successful reunification or decreased re-entry to care	The quality and quantity of rigorous research limit the ability to draw conclusions about service effectiveness. The only service-related finding that achieved significance was that families who receive supportive services are less likely to reunify.	Methodological problems with both the review and the studies it reviews. The resulting conclusions cannot be trusted, but the articles included in the study can be re-examined in light of this review.
Christoffersen, M. N. (2012). A study of	Adoption	Adoption as a protective factor for children and	Adopted children (adopted at any	Adoption known to the public	Developmental consequences of	Adopted children scored higher on	Methodological problems require

Systematic Review	Place on the Continuum	Research Question	Population	Interventions	Outcomes	Findings of the Systematic Review	Our notes
adopted children, their environment, and development: A systematic review. <i>Adoption Quarterly</i> , 15(3), 220-237.		adolescents who otherwise would grow up in care arrangements	age, tested at age 6+ years) Review includes children from India, Lebanon, England, Chile, France, Spain, Canada, New Zealand.	authorities, with or without consent, anonymous or with contact between the family of origin and the adoptive parents.	adoption, including physical growth, cognitive development, social and emotional development.	IQ, school-performance, and lack of behavioural problems than their non-adopted siblings or peers who stayed behind in orphanages or foster homes. The results from OECD countries were similar to those from studies in Chile, Lebanon, and India.	this review to be further examined prior to relying on its findings.
van den Dries, L., Juffer, F., van Ijzendoorn, M. H., & Bakermans-Kranenburg, M. J. (2009). Fostering security? A meta-analysis of attachment in	Adoption	Are adopted children less often securely attached to their adoptive parents than children reared by their biological parents?	Adopted children, foster children	Adoption	Attachment relationships of the adoptees with their adoptive parents	Compared to institutionalized children, (early) adoption proves to be an effective intervention in the domain of attachment.	

Systematic Review	Place on the Continuum	Research Question	Population	Interventions	Outcomes	Findings of the Systematic Review	Our notes
adopted children. <i>Children and Youth Services Review</i> , 31(3), 410-421.							
Donkoh, C., Montgomery, P., & Underhill, K. (2006). Independent Living Programmes for Improving Outcomes for Young People Leaving the Care System. <i>Campbell Systematic Reviews</i> , 8.	Transition from care	Evaluation of the effectiveness of independent living programmes (ILPs), a widespread and varied group of programmes intended to improve outcomes for foster care youth leaving the care system	Young people leaving the care system at their respective country's statutory ages of discharge from the care system	Independent living programmes - a widespread and varied group of programmes, designed to provide young people leaving care with skills that will limit their disadvantage and aid in their successful transition into adulthood.	Educational attainment, employment, health, housing, and other relevant life skills outcomes (coping skills, financial skills, knowledge of state belief systems, accessing community resources)	No study was found that met quality criteria. Some ILPs may improve educational, employment-related, and housing-related outcomes for young people leaving the care system. The strength of this evidence is insufficient to draw conclusions for policy or practice.	Good review but it is unable to establish any useful findings.



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