

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

Appendix 6

June 2013

Parenting Research Centre and the
University of Melbourne

Commissioned by the Community Services
Directorate of the ACT Government



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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.

June 2013

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APPENDIX 6: DATA EXTRACTED REGARDING THE SUPPORTED INTERVENTIONS

Attachment and Biobehavioral Catch-up (ABC)

Study ID (first surname + year)	Initials of person extracting data:	
Dozier et al. (2006) and Dozier et al. (2009)	MK	
	Date 23.05.13	
Full citation		
Dozier, M., Peloso, E., Lindhiem, O., Gordon, M. K., Manni, M., Sepulveda, S., & Ackerman, J. (2006). Developing evidence based interventions for foster children: An example of a randomized clinical trial with infants and toddlers. <i>Journal of Social Issues</i> , 62, 767-785.		
Dozier, M., Lindhiem, O., Lewis, E., Bick, J., Bernard, K., Peloso, E. (2009) Effects of a Foster Parent Training Program on Young Children's Attachment Behaviors: Preliminary Evidence from a Randomized Clinical Trial. <i>Child Adolesc Soc Work J</i> , 26, 321–332.		
Eligible papers cited/referenced in this paper that were not found in the database search		
Country in which study was conducted		
United States		
Study design: (check one) √		
Systematic review		
Meta-analysis		
Cluster RCT		
RCT		√
Quasi-exp (non-random allocation into treatment and control)		
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)		
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)		
Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)		

Other (describe in a few words)		
Unknown / unsure		

Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented):

Foster Care

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

Children in the foster care system. In order for children to participate, both foster parent and birth parent (or proxy) consent were required.

Dozier 2009 - The primary sample included the first 46 children who completed the experimental or control intervention. Children from two mid-Atlantic states were included in this randomized clinical trial.

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Not indicated

Participant demographics

Dozier (2006)		Intervention	Comparison
Number assigned	Children	Whole sample size: 60	Whole sample size: 60
	Caregivers		
Age (mean, SD, range)	Children	M=19.01 months (SD=9.64)	M=16.30 months (SD=7.42)
	Caregivers		
Sex	Children	50% boys	50% boys
	Caregivers		
Ethnicity/indigenous	Children	Most (63%) of the children were African	Most (63%) of the children were African

		American, with 32% White, and 5% biracial.	American, with 32% White, and 5% biracial.
	Caregivers		
Length of stay in care			
Type of care			
Prior admissions			
Type of maltreatment			
Notes			
Participant demographics			
Dozier (2009)		Intervention	Comparison
Number assigned	Children	N= 46 (whole sample size)	N= 46 (whole sample size)
	Caregivers	N= 46 (whole sample size)	N= 46 (whole sample size)
Age (mean, SD, range)	Children	M = 18.9 months, range = 3.6 to 39.4 months N= 46 (figure for whole sample)	M = 18.9 months, range = 3.6 to 39.4 months(figure for whole sample)
	Caregivers		
Sex	Children	F= 50%	F=50%
	Caregivers	Female (N=42) Male (N=4) (figure for whole sample)	Female (N=42) Male)N=4) (figure for whole sample)

Ethnicity/indigenous	Children	African-American = 63% Non Hispanic White = 26% Hispanic= 3% Biracial = 7%	
	Caregivers		
Length of stay in care		Children entering foster care	
Type of care		Foster care	
Prior admissions			
Type of maltreatment			
Notes			

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	

Another type of OOHC	
Waitlist	
Alternative treatment	Yes
No intervention	

Description of intervention:

Attachment and Biobehavioral Catch-up Intervention (ABC): is designed to help children develop regulatory capabilities. It targets three specific issues: helping caregivers learn to re-interpret children's alienating behaviors, helping caregivers over-ride their own issues that interfere with providing nurturing care, and providing an environment that helps children develop regulatory capabilities. The intervention is manualized, with the same issues introduced across the ten sessions, regardless of child age. Intervention principles are held constant, but specific activities are varied to be appropriate for children of different ages or issues. Sessions took place in foster parent homes.

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

Control intervention: Developmental education for families (DEF). The Developmental Education for Families Intervention is of the same duration (10 hour long sessions) and frequency (weekly) as the Attachment and Biobehavioral Catch-up intervention.

The educational intervention was borrowed partly from the home visitation component of the early intervention program developed by Ramey and colleagues (Ramey et al. 1982, 1984). This intervention was designed to enhance cognitive, and especially linguistic, development. The intervention has been successful in improving intellectual functioning when provided intensively and for a long duration in day care settings (Brooks-Gunn et al. 1993). Components that involve parental sensitivity to child cues were excluded in our version of the intervention so as to keep the interventions distinct. Although the intervention is manualized, specific activities take into account child's developmental level. Sessions took place in foster parent homes.

Describe comparison group here:

Intervention and control delivery (Select as many as applicable)

		Intervention	Comparison
		Yes/no	Yes/no

Where on the Continuum of Care was it delivered?	OOHC / Looked after Children		
	Foster Care	Yes	Yes
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;		
	Restoration / Family Reunification		
	Transition from care / Leaving Care		
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster care		
	Cannot tell		
Setting of delivery	OOHC Home	Yes	Yes
	School		
	Clinic, medical or health		

	Community		
	Other		
	Cannot tell		

Results

Dozier et al. (2006)

Results

<u>Outcomes</u> Outcome reported in results (put all results for one outcome in one row. E.g., outcomes – placement stability, child behaviour intensity)	<u>Measures</u> How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using ‘+’ or ‘-’. If there is no significant effect, leave blank.			<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year) They have to
		<u>Control</u> Developmental Education for Families: DEF	<u>Treatment 1</u> ABC	<u>Alternative</u> Never in foster care children	
Cortisol level	Cortisol laboratory assay using saliva samples.	- (Higher levels compared to alternative)	+ (Lower levels of cortisol compared to control)		One month following completion of 10 ABC sessions
Problem behaviours	Parent-completed infant-toddler or the preschool version of the Parent’s Daily Report		+ (reported fewer behavioral problems for toddlers than infants, which was not the case for parents in the		One month following completion of 10 ABC sessions

			Developmental Education for Families intervention.		
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Dozier et al. (2009)

Results				
<u>Outcomes</u>	<u>Measures</u>	<u>Effect: Post intervention results.</u> Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u>
Outcome reported in results (put all results for one outcome in one row. E.g., outcomes – placement stability, child behaviour intensity)	How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Control</u> Developmental Education for Families: DEF	<u>Treatment 1</u> ABC	Longest point of follow up (i.e., 6 months; 1 year) They have to
Avoidant attachment behaviour	Parent completed attachment diaries		+ (Less avoidance) compared to control	Post-intervention (1 month after completion)

Study ID (first surname + year)	Initials of person extracting data:																					
Lewis-Morrarty et al. (2012)	MK/JF																					
	Date 23.05.13																					
Full citation Lewis-Morrarty, E., Dozier, M., Bernard, K., Terracciano, S. M., & Moore, S. V. (2012). Cognitive flexibility and theory of mind outcomes among foster children: Preschool follow-up results of a randomized clinical trial. <i>Journal of Adolescent Health</i> , 51, S17-S22.																						
Eligible papers cited/referenced in this paper that were not found in the database search																						
Country in which study was conducted Not indicated																						
Study design: (check one) √ <table border="1"> <tr> <td>Systematic review</td> <td></td> </tr> <tr> <td>Meta-analysis</td> <td></td> </tr> <tr> <td>Cluster RCT</td> <td></td> </tr> <tr> <td>RCT</td> <td>√</td> </tr> <tr> <td>Quasi-exp (non-random allocation into treatment and control)</td> <td></td> </tr> <tr> <td>Entry Cohort (entry to exit – e.g., all children who entered care in 2008)</td> <td></td> </tr> <tr> <td>Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)</td> <td></td> </tr> <tr> <td>Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)</td> <td></td> </tr> <tr> <td>Other (describe in a few words)</td> <td></td> </tr> <tr> <td>Unknown / unsure</td> <td></td> </tr> </table>			Systematic review		Meta-analysis		Cluster RCT		RCT	√	Quasi-exp (non-random allocation into treatment and control)		Entry Cohort (entry to exit – e.g., all children who entered care in 2008)		Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)		Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)		Other (describe in a few words)		Unknown / unsure	
Systematic review																						
Meta-analysis																						
Cluster RCT																						
RCT	√																					
Quasi-exp (non-random allocation into treatment and control)																						
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)																						
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)																						
Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)																						
Other (describe in a few words)																						
Unknown / unsure																						
Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper. Children: Children in foster care Those children in sample who had histories of foster care placement before the age of 3 years																						

Comparison children (n=24), who had never been in foster care, were recruited through their previous participation in a separate research study.

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Not indicated

Participant demographics

		Intervention	Comparison	Alternative
Number assigned	Children	17	20	24
	Caregivers			
Age (mean, SD, range)	Children	4 - 6 years (mean [M]= 60.3 months; SD= 8.6 months)		
	Caregivers			
Sex	Children	50.8% male		
	Caregivers	100% female		
Ethnicity/indigenous	Children	57.4% of parents were European American, 39.3% were African American, and 3.3% were Asian American.		
	Caregivers	42.6% African American; 36.1% European American; 21.3% Hispanic, Asian American, or Biracial		
Length of stay in care		Most children had been initially placed into foster care within the first month of life (64.9%), with the remaining children having been placed into foster care between the ages of 1.5 and 12 months (24.3%) or between the ages of 15 and 36 months (10.8%)		
Type of care		21 children were placed with foster		
		Not in foster		

		parents who had adopted them (56.8%); 11 were placed with biological relatives who had adopted them (29.7%); three had been reunited with biological parents after a history of foster care (8.1%); and two were placed with foster parents who had not adopted them (5.4%).	care				
Prior admissions*		M age at first placement=4.2 months; SD =9.3 months. On average, children had been placed with their current caregivers when they were 7.5 months old (SD =10.9 months). More than half of the children had experienced a single stable placement (54.1%), with the remaining children having experienced two (27.0%) or three (18.9%) placement changes before the current placement.					
Type of maltreatment		Caregiver neglect, parental psychopathology, or parental incarceration.					
<p>Notes</p> <p>Demographics are for foster care children in intervention and control conditions (whole sample demographics reported for these conditions).</p> <p>* Most had been adopted or reunited with their birth parents (94.6%; n=35) at a mean age of 19.9 months (SD=13.2 months).</p>							
<p>Intervention and comparison conditions</p> <p>What type of approach was the <u>intervention</u>? (refer to definitions)</p> <table><tr><td>Approach type</td><td>Yes/no</td></tr><tr><td>Program</td><td>Yes</td></tr></table>				Approach type	Yes/no	Program	Yes
Approach type	Yes/no						
Program	Yes						

Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	Yes
Children not in OOHC	
Another type of OOHC	
Waitlist	
Alternative treatment	
No intervention	

Description of intervention:

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

Two comparison groups: one with a history of foster care placement (Described as Foster care control group – no further details) and the other who had not been in foster care.

Describe comparison group here:

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison 1 Yes/no	Comparison 2 Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children			

	Foster Care	Yes	Yes	Not in care
	Kinship Care			
	Residential care / children's homes			
	Reception services / Shelter care			
	Placement prevention			
	Placement preservation / Placement stability;			
	Restoration / Family Reunification			
	Transition from care / Leaving Care			
	Adoption and permanency			
	Short term care			
	Medium term care			
	Long term care			
	Therapeutic care / Treatment foster care			
	Cannot tell			
Setting of delivery	OOHC Home	Yes		
	School			
	Clinic, medical or health	Yes		

	Community			
	Other			
	Cannot tell			

Results

Lewis-Morrarty et al. (2012)

Results

<u>Outcomes</u>	<u>Measures</u>	<u>Effect: Post intervention results.</u> Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.			<u>Follow-up</u>
Outcome reported in results (put all results for one outcome in one row. E.g., outcomes – placement stability, child behaviour intensity)	How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Control</u> Children in foster care – (not clear if receiving DEF or anything at all)	<u>Treatment</u> 1 ABC	<u>Alternative</u> Non-foster care children	Longest point of follow up (i.e., 6 months; 1 year)
Cognitive flexibility	Dimensional Change Card Sort (DCCS) – researcher administered task		+ (Higher scores compared to control)		Approx 2 years post intervention
Theory of mind	Penny-hiding game - researcher administered task	- (Lower than non-foster care children)	+ (Better performance compared to control)		Approx 2 years post intervention

Study ID (first surname + year) Sprang (2009)	Initials of person extracting data: MK / JF Date 23.05.13
Full citation Sprang, G. (2009). The efficacy of a relational treatment for maltreated children and their families. <i>Child and Adolescent Mental Health</i> , 14, 81-88.	
Eligible papers cited/referenced in this paper that were not found in the database search	
Country in which study was conducted Not indicated	
Study design: (check one) √	
Systematic review	
Meta-analysis	
Cluster RCT	
RCT	√
Quasi-exp (non-random allocation into treatment and control)	
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)	
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)	
Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)	
Other (describe in a few words)	
Unknown / unsure	
Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper. Type of care (or, if prevention, type of care being prevented): Foster care Caregivers (if intervention targeted at caregivers): The adult caregivers were foster parents	

caring for children who had experienced severe maltreatment (resulting in termination of parental rights) and who had disruptions in their primary attachment relationships during their early years (0–5 years of age).

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen): All of these children had been diagnosed with attachment-related problems that threatened to disrupt their foster care placements. Caregiver-child dyads were eligible for participation in the study if the identified child was younger than six years of age, and if the neither the child or caregiver had begun taking prescribed psychotropic drugs within three months preceding pre-test data collection

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Exclusion criteria included the presence of active, severe mental illness as defined by active psychosis, mania, or if either party was imminently suicidal/homicidal, and/or suffering from mental retardation and could not provide informed consent.

Participant demographics

		Intervention	Comparison	Alternative
Number completed	Caregivers	26	27	
		26	27	
Age (mean, SD, range)	Children	42.5 months (approximately 3.5 years) (SD = 18.6 months)		
	Caregivers	39.7 years (SD = 6.45)		
Sex	Children	26 female; 27 male		
	Caregivers	45 female; 8 male		
Ethnicity/indigenous	Children			
	Caregivers	The majority of study participants (caregivers) were white (47), and six were African American.		

Length of stay in care				
Type of care				
Prior admissions				
Type of maltreatment				
Notes				

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	
Another type of OOHC	
Waitlist	Yes
Alternative treatment	
No intervention	

Description of intervention:

Attachment and Biobehavioural Catch up Intervention (ABC)

Description of comparison condition (type of OOHC, what was the alternative treatment, any

other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell).

The control group waited 10 weeks until the cessation of the treatment intervention to begin the intervention. During that time, the wait-list control participants received ongoing, biweekly support services (as did the treatment group).

Describe comparison group here:

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children		
	Foster Care	Yes	Yes
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;		
	Restoration / Family Reunification		

	Transition from care / Leaving Care		
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster care		
	Cannot tell		
Setting of delivery	OOHC Home		Yes
	School		
	Clinic, medical or health		
	Community		
	Other		
	Cannot tell		

Results

Sprang, G. (2009)

Results

<u>Outcomes</u>	<u>Measures</u>	<u>Effect:</u> Post intervention results.	<u>Follow-up</u>
Outcome reported in results (put all results for one outcome in one	How measured (name of measure, self-report etc). List all formal	Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.	Longest point of follow up (i.e., 6 months; 1 year) They have to

row. Eg outcomes – placement stability, child behaviour intensity)	measures or systems level outcomes.	<u>Control</u> Waitlist for ABC and bi-weekly support group	<u>Treatment 1</u> ABC	
Child abuse potential	Child abuse potential inventory - self report questionnaire		+ (Lower compared to control)	At completion of intervention
Internalising problems	Child Behaviour Checklist – caregiver reported		+ (Lower compared to control $p =$ 0.01 to $p =$ 0.05)	At completion of intervention
Externalising problems	Child Behaviour Checklist – caregiver reported		+ (Lower compared to control)	At completion of intervention
Parental Stress	Parenting Stress Index – Short form		+ (Less stress compared to control $p =$ 0.05)	At completion of intervention

Multidimensional Treatment Foster Care for Preschoolers (MTFC-P) (previously called Early Intervention Foster Care Program (EIFC))

Study ID Bruce, 2009	Initials of person extracting data: ZP Date 17.05.13
Full citation Bruce, J., McDermott, J. M., Fisher, P. A., & Fox, N. A. (2009). Using behavioral and electrophysiological measures to assess the effects of a preventive intervention: A preliminary study with preschool-aged foster children. [Research Support, N.I.H., Extramural]. <i>Prevention Science</i> , 10(2), 129-140.	
Eligible papers cited/referenced in this paper that were not found in the database search	
Country in which study was conducted Not indicated	
Study design: (check one)	
Systematic review	
Meta-analysis	
Cluster RCT	
RCT	
Quasi-exp (non-random allocation into treatment and control)	
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)	
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)	
Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)	

Other (describe in a few words) sample was recruited from a larger randomized efficacy trial	✓
Unknown / unsure	

Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented): Multidimensional Treatment Foster Care for Preschoolers, regular foster care

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen): The sample was drawn from a larger randomized efficacy trial of a preventive intervention for foster children. Foster children who received the intervention (Multidimensional Treatment Foster Care for Preschoolers [MTFC-P] group), foster children who received services as usual (regular foster care [RFC] group), and low-income, non-maltreated children who lived with their biological parents (community comparison [CC] group). The children were selected from the efficacy trial because they were within the targeted age range (4.87-6.99 years).

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

The children were selected from a larger efficacy trial because they were within the targeted age range. From the sample of 46 children, 5 children (2 MTFC-P, 2 RFC, and 1 CC) were excluded because of poor behavioral performance, 3 children (2 MTFC-P and 1 CC) were excluded because of technical issues during collection of the electroencephalogram (EEG) data, and 4 children (2 MTFC-P, 1 RFC, and 1 CC) were excluded because of excessive artifact in the EEG data or an inadequate number of ERP trials for certain trial types. The resulting analytical sample was 34 children (10 MTFC-P, 13 RFC, and 11 CC).

Participant demographics

		Intervention (MTFC)	Comparison (RFC)	Alternative (CC)
Number assigned	Children	10	13	11

	Caregivers			
Age (mean, SD, range)	Children	M=6.08 (SD=0.57)	M=5.92 (SD=0.68)	M=5.99 (SD=0.76)
	Caregivers			
Sex	Children	6 males	6 males	5 males
	Caregivers			
Ethnicity/indigenous	Children			
	Caregivers			
Length of stay in care		M=17.73 (SD=7.72) months	M=23.41 (SD=14.30) months	NA
Type of care			Regular foster care	
Prior admissions	(number transitions)	M=4.70 (SD=3.20)	M= 5.31 (SD=3.04)	
Type of maltreatment				
Notes				

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	
Service model	✓

System of care	
----------------	--

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	✓
Another type of OOHC	
Waitlist	
Alternative treatment	
No intervention	✓

Description of intervention:

The Multidimensional Treatment Foster Care for Preschoolers (MTFC-P) intervention is designed to reduce behavioural difficulties and increase regulatory abilities through the provision of a consistent, contingent environment (Fisher et al., 1999). MTFC-P is delivered via a multidisciplinary team (i.e., foster parents, foster parent consultants, behavioural specialists, and family therapists). Prior to placement, the foster parents are trained to provide high rates of reinforcement for positive behaviors and effective consequences for negative behaviors. After placement, the foster parents are given extensive support through 24h crisis intervention as needed, daily telephone contact, and weekly support groups. The children receive services from behavioural specialists in their homes and preschools and attend weekly therapeutic playgroup sessions that address developmental, behavioral, and social issues.

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

1. Regular foster care
2. Community comparison

Describe comparison group here:

1. Foster children who received services as usual
2. Low-income, non-maltreated children who lived with their biological parents

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children		
	Foster Care		Yes (and no OOHC group)
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;		
	Restoration / Family Reunification		
	Transition from care / Leaving Care		
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster care	Yes	
	Cannot tell		

Setting of delivery	OOHC Home	Yes	
	School	Yes	
	Clinic, medical or health		
	Community		
	Other	Yes	
	Cannot tell		Yes

Results

<u>Outcomes</u> Outcome reported in results (put all results for one outcome in one row. E.g., outcomes – placement stability, child behaviour intensity)	<u>Measures</u> How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Effect:</u> Post intervention results. Indicate if significant and the direction by using ‘+’ or ‘–’. If there is no significant effect, leave blank.			<u>Follow-up</u> Longest point of follow-up (i.e., 6 months; 1 year)
		<u>Treatment</u> (MTFC-P)	<u>Control</u> (Service as usual foster care children)	<u>Alternative</u> (Low-income, non-maltreated community children (CC))	
Feedback-locked event related potential (ERP): N1. Note: N1 was identified as the maximum negative peak at 50 to 150 ms	Responses measured using electrode during the flanker task	+ More pronounced N1 than RFC group		+ More pronounced N1 than RFC group	This is not specified in the paper
Feedback-locked ERP: P2. Note: P2 was	Responses measured using electrode	+ Amplitude of P2 significantly differed for		+ Amplitude of P2 significantly	This is not specified in the

identified as the maximum positive peak at 160 to 260 ms	during the flanker task	correct and incorrect trials for the MTFC-P and CC groups		differed for correct and incorrect trials for the MTFC-P and CC groups	paper
Feedback-locked ERP: feedback-related negativity (FRN). Note: FRN was identified as the maximum negative peak at 280 to 480 ms relative to the feedback	Responses measured using electrode during the flanker task	+ Amplitude of FRN significantly differed for correct and incorrect trials for all three groups, however this difference was more defined for the MTFC-P and CC groups	+ Amplitude of FRN significantly differed for correct and incorrect trials for all three groups, however this difference was more defined for the MTFC-P and CC groups	+ Amplitude of FRN significantly differed for correct and incorrect trials for all three groups, however this difference was more defined for the MTFC-P and CC groups	This is not specified in the paper
There were no group differences on the behavioral measures of cognitive control or response monitoring.					

Study ID (first surname + year) Fisher, 2005	Initials of person extracting data: ZP Date 22.05.13																				
Full citation Fisher, P. A., Burraston, B., & Pears, K. (2005). The early intervention foster care program: permanent placement outcomes from a randomized trial. [Clinical Trial Randomized Controlled Trial Research Support, U.S. Gov't, P.H.S.]. <i>Child Maltreatment</i> , 10(1), 61-71.																					
Eligible papers cited/referenced in this paper that were not found in the database search																					
Country in which study was conducted USA																					
Study design: (check one) <table border="1"> <tr> <td>Systematic review</td> <td></td> </tr> <tr> <td>Meta-analysis</td> <td></td> </tr> <tr> <td>Cluster RCT</td> <td></td> </tr> <tr> <td>RCT</td> <td>✓</td> </tr> <tr> <td>Quasi-exp (non-random allocation into treatment and control)</td> <td></td> </tr> <tr> <td>Entry Cohort (entry to exit – e.g., all children who entered care in 2008)</td> <td></td> </tr> <tr> <td>Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)</td> <td></td> </tr> <tr> <td>Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)</td> <td></td> </tr> <tr> <td>Other (describe in a few words)</td> <td></td> </tr> <tr> <td>Unknown / unsure</td> <td></td> </tr> </table>		Systematic review		Meta-analysis		Cluster RCT		RCT	✓	Quasi-exp (non-random allocation into treatment and control)		Entry Cohort (entry to exit – e.g., all children who entered care in 2008)		Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)		Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)		Other (describe in a few words)		Unknown / unsure	
Systematic review																					
Meta-analysis																					
Cluster RCT																					
RCT	✓																				
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Entry Cohort (entry to exit – e.g., all children who entered care in 2008)																					
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Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)																					
Other (describe in a few words)																					
Unknown / unsure																					
Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide																					

criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented):

Caregivers (if intervention targeted at caregivers):

Workers (if intervention targeted at workers):

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

In a collaborative process involving the research staff and the of the Oregon Department of Human Services (DHS) Child Welfare Division in Lane County, all 3- to 6-year-old foster children in need of a new foster placement who fell into the catchment area were identified. When deemed eligible for the study (i.e., expected to remain in care for more than 3 months), participants were randomly assigned to the intervention or regular foster care. Participants in the current study included children new to the foster care system, re-entering foster care, and moving between placements.

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Not indicated

Participant demographics

		Intervention (EIFC)	Comparison (RFC)	Alternative
Number assigned	Children	47	43	
	Caregivers			
Age (mean, SD, range)	Children	4.50 (0.86)	4.22 (0.74)	
	Caregivers			
Sex	Children	66%	60%	
	Caregivers			
Ethnicity/indigenous	Children	79% White, 3% Native American, 18% Hispanic or	92% White, 4% Native American, 4% Hispanic or	

		Latino	Latino	
	Caregivers			
Length of stay in care				
Type of care		48, 28, 24	68, 20, 12	
Prior admissions				
Type of maltreatment		17, 24, 55, 5	8, 4, 84, 4	
<p>Notes:</p> <p>Type of permanent placement (type of care) is presented in percentages, in the following order: reunification, relative adoption, nonrelative adoption</p> <p>Type of maltreatment is presented in percentages, in the following order: sexual abuse, physical abuse, neglect, emotional abuse.</p>				

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	
Service model	Yes
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	

Another type of OOHC	
Waitlist	
Alternative treatment	
No intervention	Yes

Description of intervention:

The Early Intervention Foster Care Program (EIFC) targets the spectrum of challenges that preschool-aged foster children face via a team approach delivered in home and community settings. EIFC emphasizes the following: concrete encouragement for prosocial behavior; consistent, nonabusive limit setting to address disruptive behavior; and close supervision of the child. The EIFC intervention also follows a developmental framework in which the challenges of foster preschoolers are viewed from the perspective of delayed maturation, rather than as strictly behavioral and emotional problems

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

RFC was a services-as-usual condition in which children were placed in state foster homes and were provided services in accordance with standard policies and procedures. These services often involve individual mental health therapy and medical and/or dental treatment. Some of the children in RFC also received developmental screening and referral for services if found to be delayed. Birth families and relative or nonrelative adoptive families also typically receive social service support, substance abuse and/or mental health treatment, and parent training (although not through our center).

Describe comparison group here:

Eligible to take part and randomly assigned to control group.

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children		

	Foster Care	Yes	Yes
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;	Yes	
	Restoration / Family Reunification		
	Transition from care / Leaving Care		
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster care		
	Cannot tell		
Setting of delivery	OOHC Home	Yes	
	School		
	Clinic, medical or health		
	Community	Yes	
	Other		

	Cannot tell		Yes
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Results				
<u>Outcomes</u>	<u>Measures</u>	<u>Effect: Post intervention results.</u> Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u>
Outcome reported in results (put all results for one outcome in one row. Eg outcomes – placement stability, child behaviour intensity)	How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.			Longest point of followup (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u>	
Failure of a permanent placement.	Children's placement records were obtained from the Oregon DHS Child Welfare Division of Lane County	+ children in EIFC had significantly fewer failed permanent placements. Little difference in the permanent placements failure rates between the EIFC and RFC conditions across the first 8 months of placement. However, after this time, placement failures for children in RFC increased substantially, whereas placement failures for children in EIFC only increased slightly.		24 months post baseline. Children typically receive services 6 to 9 months

Study ID (first surname + year) Fisher, 2007 and Fisher, 2008 (same sample) Fisher, 2009 (subset from above sample)	Initials of person extracting data: ZP Date 24.05.13														
Full citation Fisher, P. A., & Kim, H. K. (2007). Intervention effects on foster preschoolers' attachment-related behaviors from a randomized trial. [Randomized Controlled Trial Research Support, N.I.H., Extramural]. <i>Prevention Science</i> , 8(2), 161-170. Fisher, P. A., & Stoolmiller, M. (2008). Intervention effects on foster parents stress: Associations with child cortisol levels. <i>Development and Psychopathology</i> , 20(3), 1003-1021. Fisher, P. A., Kim, H. K., & Pears, K. C. (2009). Effects of Multidimensional Treatment Foster Care for Preschoolers (MTFC-P) on reducing permanent placement failures among children with placement instability. <i>Children and Youth Services Review</i> , 31(5), 541-546. doi: 10.1016/j.childyouth.2008.10.012															
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Country in which study was conducted USA															
Study design: (check one) <table border="1"> <tr> <td>Systematic review</td> <td></td> </tr> <tr> <td>Meta-analysis</td> <td></td> </tr> <tr> <td>Cluster RCT</td> <td></td> </tr> <tr> <td>RCT</td> <td>✓</td> </tr> <tr> <td>Quasi-exp (non-random allocation into treatment and control)</td> <td></td> </tr> <tr> <td>Entry Cohort (entry to exit – e.g., all children who entered care in 2008)</td> <td></td> </tr> <tr> <td>Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)</td> <td></td> </tr> </table>		Systematic review		Meta-analysis		Cluster RCT		RCT	✓	Quasi-exp (non-random allocation into treatment and control)		Entry Cohort (entry to exit – e.g., all children who entered care in 2008)		Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)	
Systematic review															
Meta-analysis															
Cluster RCT															
RCT	✓														
Quasi-exp (non-random allocation into treatment and control)															
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)															
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)															

Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)	
Other (describe in a few words)	
Unknown / unsure	

Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented):

Caregivers (if intervention targeted at caregivers):

Workers (if intervention targeted at workers):

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

The sample consisted of 3- to 5-year-old foster pre-schoolers entering a new foster placement under the care of the Lane County Branch of the Oregon Department of Human Services, Child Welfare Division. This included children new to foster care, re-entering care, and moving between foster placements. To be eligible for the study, the current placement had to be expected to last for 3 or more months.

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Not indicated

Participant demographics

		Intervention	Comparison	Alternative (whole)
Number assigned	Children	57	60	117
	Caregivers			
Age (mean, SD, range)	Children	4.54 (SD = 0.86) 3-5 years	4.34 (SD = 0.83) 3-5 years	
	Caregivers			

Sex	Children	49% boys	58% boys	
	Caregivers			
Ethnicity/indigenous	Children			89% European American, 1% African American, 5% Latino, 5% Native American.
	Caregivers			
Length of stay in care				Average of 171 days in foster care prior to T1
Type of care				
Prior admissions				
Type of maltreatment				
Notes				

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	
Service model	Yes
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	
Another type of OOHC	
Waitlist	
Alternative treatment	
No intervention	Yes

Description of intervention:

MTFC-P has been specifically tailored to meet the developmental and social-emotional needs of foster preschoolers. As per MTFC-P protocol, the intervention was delivered via a team approach to the children, foster parents, and permanent placement resources (birthparent and adoptive relative/ nonrelative). The foster parent consultant worked with the foster parent to maintain a positive, responsive, and consistent environment through the use of concrete encouragement for positive behavior and clear limit setting for problem behavior. The children received services from a behavior specialist working in preschool/daycare and home-based settings. Additionally, the children attended weekly therapeutic playgroup sessions designed to facilitate school readiness in which behavioral, social, developmental progress was monitored and addressed.

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

The RFC children received routine services in state foster homes, which commonly involved individual psychotherapy. Some RFC children also received developmental screening and, if found to be delayed, referrals for services. The birth families and relative/nonrelative adoptive families in the RFC condition typically received social service support, substance abuse treatment, mental health treatment, and/or parent training (not through our center).

Describe comparison group here:

Eligible participants were randomly assigned to the MTFC-P experimental condition or to the regular foster care (RFC) comparison condition.

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children		
	Foster Care	Yes	Yes
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;		
	Restoration / Family Reunification		
	Transition from care / Leaving Care		
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster		

	care		
	Cannot tell		
Setting of delivery	OOHC Home		
	School		
	Clinic, medical or health		
	Community		
	Other		
	Cannot tell	Yes	Yes

Results

Fisher & Kim (2007)

<u>Outcomes</u>	<u>Measures</u>	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u>
Outcome reported in results (put all results for one outcome in one row. Eg outcomes – placement stability, child behaviour intensity)	How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.			Longest point of followup (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u>	
Secure attachment	Caregiver report diary	+ Treatment significantly predicted change in score over time compared with control. NOTE: Mean scores did not differ at		12 months post baseline (Children typically received services for

		12 months between treatment and control. This indicates that MTFC-P children tended to show more secure behaviour over time than RCF children.		9–12 months)
Avoidant behaviour trajectories	Caregiver report diary	+ Treatment significantly predicted change in score over time compared with control. NOTE: Mean scores did not differ at 12 months between treatment and control. This indicates that MTFC-P children tended to show more secure behaviour over time than RCF children.		12 months post baseline (Children typically received services for 9–12 months)

Fisher et al. (2008)

Results

<u>Outcomes</u>	<u>Measures</u>	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.			<u>Follow-up</u>
Outcome reported in results (put all results for one outcome in one row. Eg outcomes – placement stability, child behaviour)	How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.				Longest point of followup (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u> (Regular foster care children)	<u>Alternative</u> (Community comparison)	

intensity)					
Caregiver stress	Caregiver stress was computed from the Parent Daily Report (PDR; Chamberlain & Reid, 1987),	+ MTFC-P intervention appeared to be associated with an immediate and lasting decrease in mean-level and day to day variability of caregiver stress related to child problem behavior.			12 months post baseline (Children typically received services for 9–12 months)
Cortisol level in children	Monthly salivary cortisol samples were gathered on 2 consecutive days for 12 months		- In control group parental stress was associated with lower morning cortisol levels and blunting of HPA axis		12 months post baseline (Children typically received services for 9–12 months)

Fisher et al. (2009)

Participant subset of Fisher 2007 study:

Operationalized the concept of prior placement instability in the present study as a child having experienced four or more placements prior to study entry. This produced a sample of 52 children (27 boys and 25 girls; 23 RFC and 29 MTFC-P) for the present study. On average across the two study conditions, the children had experienced approximately six transitions ($M=5.79$, $SD=1.66$), and 12 children (23%) had experienced seven or more transitions prior to entering the study. Mean numbers of prior placement transitions were significantly higher for the MTFC-P children ($M=6.21$, $SD=1.59$) than for the RFC children ($M=5.26$, $SD=1.63$), $t=-2.11$, $df=50$, $p=.04$).

Results

<u>Outcomes</u> Outcome reported in results (put all results for one outcome in one row. E.g., outcomes – placement stability, child behaviour intensity)	<u>Measures</u> How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow-up (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u>	
Successful permanency attempts	The children's placement experiences and maltreatment histories were coded from official case records obtained from the county branch of the Oregon Department of Human Services Child Welfare Division and were updated every 6 months.	+ More successful permanency attempts compared with control		24 months post-study entry (Children typically received services for 9–12 months)
Overall permanency		+ Greater overall permanency compared with control		24 months post-study entry (Children typically received services for 9–12 months)

TAKE CHARGE

Study ID (first surname + year) Geenan, 2012	Initials of person extracting data: ZP Date 28.05.13
Full citation Geenen, S., Powers, L., Powers, J., Cunningham, M., McMahon, L., Nelson, M., . . . Fullerton, A. (2012). Experimental Study of a Self-Determination Intervention for Youth in Foster Care. <i>Career Development and Transition for Exceptional Individuals</i> . doi: 10.1177/2165143412455431	
Eligible papers cited/referenced in this paper that were not found in the database search	
Country in which study was conducted USA	
Study design: (check one)	
Systematic review	
Meta-analysis	
Cluster RCT (randomised clinical trial)	✓
RCT	
Quasi-exp (non-random allocation into treatment and control)	
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)	
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)	
Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)	
Other (describe in a few words)	

Unknown / unsure

Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented):

In foster care and receiving public special education services

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

The sampling frame from which the participants were selected included youth (a) receiving special education services within an urban school district, (b) in the guardianship of the state foster care system, (c) residing within the study's targeted geography, and (d) in the freshman, sophomore, or junior year of high school. Grade level was selected rather than age because many youth in foster care are behind in school and older than their same grade-level peers (e.g., Smithgall et al., 2004), and we wanted to maximize the likelihood that the participants would remain in high school throughout the study period, which crossed more than two school years. To identify participants for this panel study, the state foster care system generated a list of all youth who were in foster care who met the study's eligibility requirements. This list was then cross referenced with the corresponding school district to confirm the student receives special education services. Thus, a comprehensive list of all eligible youth was created.

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented):

Caregivers (if intervention targeted at caregivers):

Workers (if intervention targeted at workers)

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

All youth on the list were approached for participation except in rare instances when a caseworker expressed a concern (e.g., student non-English speaking, scheduled to move out of state).

Participant demographics

		Intervention	Comparison	Alternative (all participants)
Number assigned	Children	60	63	123

	Caregivers			
Age (mean, SD, range)	Children	M=15.79	M=15.24	
	Caregivers			
Sex	Children	40% female	52.4% female	
	Caregivers			
Ethnicity/indigenous	Children	5, 8.3, 0, 33.3, 46.7, 5, 1.7	7.9, 6.3, 1.6, 25.4, 52.4, 6.3, 0	
	Caregivers			
Length of stay in care		M=97.6 months	M=74.2 months	
Type of care		85, 11.7, 3.3	79.4, 14.3, 6.3	
Prior admissions				
Type of maltreatment		45, 26.7, 26.7, 1.6, 13.3, 1.7	31.7, 39.7, 28.6, 3.2, 11.1, 1.6	
Notes Ethnicity presented in percentages, in the following order: Hispanic, Native American, Asian, African American, Caucasian, Multiethnic. Other Placement type presented in percentages, in the following order: Foster care (nonrelative), Kinship care (including birth parent), Group home/residential treatment center. Type of maltreatment (nonexclusive) is presented in percentages, in the following order: Physical, sexual, neglect, emotional, threat or harm, other.				
<u>Intervention and comparison conditions</u> What type of approach was the <u>intervention</u>? (refer to definitions)				
Approach type				Yes/no
Program				Yes

Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	
Another type of OOHC	
Waitlist	
Alternative treatment	
No intervention	Yes

Description of intervention:

TAKE CHARGE, a self-determination enhancement intervention, for promoting the school performance of youth in special education and foster care. Received coaching in the application of self-determination skills to achieve their goals, as well as participating in group mentoring workshops with successful young adult alumni of foster care developed the *TAKE CHARGE* intervention, which combines coaching on the application of self-determination skills to achieve goals, mentoring from adults with disabilities, and parent support.

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

Youth participating in the control group received typical educational services (business as usual), including general and special education classes, related services, interaction with special education case managers, individualized educational planning, and extracurricular activities.

Describe comparison group here:

Eligible to take part and randomly assigned to control group.

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children		
	Foster Care	Yes	Yes
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;		
	Restoration / Family Reunification		
	Transition from care / Leaving Care		
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster care		
	Cannot tell		
Setting of delivery	OOHC Home		

	School	Yes	Yes
	Clinic, medical or health		
	Community		
	Other		
	Cannot tell		

Results

<u>Outcomes</u> Outcome reported in results (put all results for one outcome in one row. E.g., outcomes – placement stability, child behaviour intensity)	<u>Measures</u> How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Effect: Post intervention results.</u> Indicate if significant and the direction by using ‘+’ or ‘-’. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow-up (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u>	
Self-determination	1) AIR Self-Determination Scale – student, teacher, parent 2) Student Identification of academic goals and self-attribution of accomplishments (measure not clear)	1) Student or Teacher or Parent AIR: no effect 2) Student Identification of academic goals and self-attribution of accomplishments: +, significant effect		18 months Note – this is 9 months post intervention
Youth educational planning knowledge and	The Educational Planning Assessment has versions for	SEPA: +, significant effect PEPA: +, significant		18 months Note – this is 9 months post

engagement	completion by youth (Educational Planning Assessment: Student Version [SEPA]), foster parent (Educational Planning Assessment: Parent Version [PEPA]), and teacher (Educational Planning Assessment: Teacher Version [TEPA]).	effect TEPA: No effect		intervention
School attitude	School Attitude Measure (SAM) -a Youth Self-Report (YSR) measure -two subscales administered: Motivation for Schooling and the Student's Sense of Control Over Performance Scale.	No effect		18 months Note – this is 9 months post intervention
School performance	1) GPA; 2) Credits earned toward graduation; 3) Time spent on	1) GPA : no effect 2) Credits toward graduating: +, significant		18 months Note – this is 9 months post intervention

	<p>Homework;</p> <p>4) Postsecondary preparation;</p> <p>5) Career development.</p> <p>Note - (Data on GPA and credits earned came from school Transcripts)</p> <p>(Postsecondary preparation and career development were assessed with items created for this study, which were derived from previous findings)</p>	<p>difference</p> <p>3) Time spent on Homework: +, significant difference for homework hours</p> <p>4)Postsecondary preparation: no effect</p> <p>5) Career development: no effect</p>		
Youth emotional and behavior problems	<p>1) Teacher Report Form (TRF)</p> <p>2) Child Behavior Checklist (CBCL) - Anxiety-depressed subscales</p> <p>3) Child Behavior Checklist (CBCL) - Withdrawn-depressed subscale</p> <p>4) Child Behavior Checklist (CBCL) – Somatic complaints subscale</p>	<p>1)Teacher Report Form (TRF) ; no effect</p> <p>2) CBCL: Anxiety-depressed subscales: +, significantly different</p> <p>3) Child Behavior Checklist (CBCL) - Withdrawn-depressed subscale: +, significantly different</p> <p>4) Child Behavior Checklist (CBCL) –</p>		<p>18 months</p> <p>Note – this is 9 months post intervention</p>

	5) YRS Withdrawn-Depressed and Somatic Complaints Scale	<p>Somatic complaints subscale: +, significantly different</p> <p>5) YRS Withdrawn-Depressed and Somatic Complaints:</p> <p>No effect</p>		
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Study ID (first surname + year)	Initials of person extracting data:	
Powers, 2012	MK	
	Date 17.05.2013	
Full citation		
Powers, L. E., Geenen, S., Powers, J., Pommier-Satya, S., Turner, A., Dalton, L. D., et al. (2012). My life: Effects of a longitudinal, randomized study of self-determination enhancement on the transition outcomes of youth in foster care and special education. <i>Children and Youth Services Review</i> , 34(11), 2179-2187.		
Eligible papers cited/referenced in this paper that were not found in the database search		
Geenen, S., Powers, L. E., Powers, J., Cunningham, M., McMahon, L., Nelson, M., et al. (in press). Experimental study of a self-determination intervention for youth in foster care. <i>Career Development and Transition for Exceptional Individuals</i> , http://dx.doi.org/10.1177/0123456789123456 .		
Country in which study was conducted		
United States		
Study design: (check one) ✓		
Systematic review		
Meta-analysis		
Cluster RCT		
RCT		✓
Quasi-exp (non-random allocation into treatment and control)		
Entry Cohort (entry to exit – e.g., all children who entered care in 2008)		
Exit Cohort (exit then followed to some other event – e.g., children returning home followed to reentry)		
Case-control (ex. Children with a certain outcome compared to children without that outcome – not a quasi since it's retrospective)		
Other (describe in a few words)		
Unknown / unsure		

Inclusion criteria (what are the criteria for participant inclusion in the study? Only provide criteria clearly indicated in paper.

Type of care (or, if prevention, type of care being prevented): Foster care, Kinship Care (incl. birth parent), group home / RTC

Children (age range, status or location in the system for example in care, aging out; special needs – key information that defines why these children were chosen):

(a) receiving special education services,

(b) 16.5 to 17.5 years of age,

(c) under the guardianship of Oregon DHS (with at least 90 days in foster care) and

(d) attending a large school district in the study target area.

Exclusion criteria (what are the criteria for participant exclusion from the study? Only provide criteria clearly indicated in paper.

Not indicated

Participant demographics

		Intervention	Comparison	Alternative
Number assigned	Children	33	36	
	Caregivers			
Age (mean, SD, range)	Children	Mean 16.8 years	Mean 16.9 years	
	Caregivers			
Sex	Children	Female 41.4%	Female 40.6%	
	Caregivers			
Ethnicity/indigenous	Children	Hispanic 3.4 Native American 10.3 Asian 0 African American 17.3 Caucasian 41.4 Multi-ethnic 20.7	Hispanic 12.5 Native American 9.4 Asian 0 African American 15.6 Caucasian 59.4 Multi-ethnic 3.1	

		Other 6.9	Other 0	
	Caregivers			
Length of stay in care		mean 6.6 years	mean 4.8 years	
Type of care		Non-relative 75.8 Kinship* 13.8 Group home/RTC 10.3	Non-relative 75 Kinship* 9.4 Group home/RTC 15.6	
Prior admissions		Total number of placement moves in the past year 2.0	Total number of placement moves in the past year 2.8	
Type of maltreatment		Physical 17.2 % Sexual 37.9 Neglect 41.4 Emotional malt. 0 Threat of harm 37.9 Other 6.8	Physical 21.9 Sexual 18.7 Neglect 43.8 Emotional malt. 3.1 Threat of harm 25 Other 3.1	
Notes * Kinship care may include birth parent care				

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	Yes

Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
Children in OOHC	
Children not in OOHC	
Another type of OOHC	
Waitlist	
Alternative treatment	Yes
No intervention	

Description of intervention:
 12 months involvement in the intervention
 TAKE CHARGE
 The intervention included two elements: (a) individual, weekly coaching sessions for youth in the application of self-determination skills to achieve self identified goals and to carry out a youth-led transition planning meeting; and (b) quarterly workshops for youth with young adult mentors who were formerly in foster care.

- Much more detail on the intervention in article
- Coaches provided an intervention orientation to each foster parent and monthly updates on the youth's activities to the foster parent and foster care case worker.

Description of comparison condition (type of OOHC, what was the alternative treatment, any other details. Provide any other details available also. If you cannot tell or the information is not provided, please write – cannot tell)

The study comparison condition was the Foster Care Independent Living Program (ILP), funded through the John H. Chafee Foster Care Independence Program to provide independent living services to youth ages 16 and older in foster care. ILP services included classes on transition topics such as budgeting, cooking, and preparing a resume, support from an ILP case manager, drop-in peer support, and assistance to apply for resources such as Chafee housing, subsidy, and Educational Training Vouchers

Describe comparison group here:

From same sample as intervention group

Intervention and control delivery (Select as many as applicable)

		Intervention Yes/no	Comparison Yes/no
Where on the Continuum of Care was it delivered?	OOHC / Looked after Children	Yes	Yes
	Foster Care		
	Kinship Care		
	Residential care / children's homes		
	Reception services / Shelter care		
	Placement prevention		
	Placement preservation / Placement stability;		
	Restoration / Family Reunification		
	Transition from care / Leaving Care	Yes	Yes
	Adoption and permanency		
	Short term care		
	Medium term care		
	Long term care		
	Therapeutic care / Treatment foster care		

	Cannot tell		
Setting of delivery	OOHC Home		
	School	Yes	
	Clinic, medical or health		
	Community		
	Other		
	Cannot tell		Yes

Results

<u>Outcomes</u> Outcome reported in results (put all results for one outcome in one row. Eg outcomes – placement stability, child behaviour intensity)	<u>Measures</u> How measured (name of measure, self-report etc). List all formal measures or systems level outcomes.	<u>Effect: Post intervention results.</u> Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of followup (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u>	
Self-determination	ARC Self-determination Scale - self report	+		Follow-up at one year post intervention completion.
Youth-identified accomplishments	ARC Self-determination Scale - self report	+		Follow-up at one year post intervention completion.
Quality of life	Quality of Life Questionnaire (QofLQ)	+		Follow-up at one year post intervention

				completion.
Youth involvement in transition planning	Transition Planning Assessment	No effect		Follow-up at one year post intervention completion.
Use of transition services	The Outcome Survey – self report	+		Follow-up at one year post intervention completion.
Engagement in key independent living activities	The Outcome Survey – self report	+		Follow-up at one year post intervention completion.



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