Quasi-experimental study of Functional Family Therapy effectiveness for juvenile justice aftercare in a racially and ethnically diverse community sample

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Functional Family Therapy (FFT) is an intensive community-based treatment program designed to reduce youth behavior problems such as violence, drug use, and other delinquency. Although there is evidence of FFT efficacy and effectiveness with predominantly White samples, there is very little evidence with racial/ethnic minority samples. In light of the over-representation of African American and Latino youth in the juvenile justice system, this study examined the effectiveness of FFT and an adaptation of FFT to probation supervision, called Functional Family Probation (FFP), among a predominantly Latino and African American sample of youth returning home from court-ordered out-of-home placements (OHPs). Propensity score weighting was used to compare the likelihood of subsequent OHPs among youth receiving standard probation (Comparison group), and youth receiving FFT (with standard probation), youth receiving FFP (instead of standard probation), and youth receiving FFT in combination with FFP. Results indicated that youth receiving FFT (both with standard probation and FFP), relative to Comparison youth receiving standard probation only, had significantly lower likelihood of OHP during the first two months following release, but this advantage disappeared in later months. Youth receiving only FFP also had lower likelihood of OHP than Comparison youth in the first two months, though not significantly. These findings provide encouraging evidence of positive effects of FFT, in combination with FFP or standard probation, among a diverse sample of juvenile justice system-involved youth.

1. Introduction

Functional Family Therapy (FFT; Alexander & Parsons, 1982) is an intensive community-based treatment program designed to reduce youth behavior problems such as violence, drug use, and other delinquency. FFT focuses on family dysfunction as the root of delinquent behavior, and seeks to establish and maintain new patterns of family behavior and communication that reinforce more adaptive youth behavior (Alexander & Parsons, 1973). In recent years, FFT has become one of the most widely transported evidence-based family interventions (Henggeler & Sheidow, 2011), implemented in over 300 sites and serving over 20,000 families annually (Functional Family Therapy, LLC, 2012). In the present study we examine the effectiveness of both FFT, and an adapted version of FFT known as Functional Family Probation (FFP), as implemented as an aftercare service by a juvenile justice department in a large U.S. city serving a predominantly racial/ethnic minority population.

1.1. Evidence for FFT and FFP efficacy and effectiveness

Taking an ecological perspective on determinants of behavior problems among youth, previous research has identified a consistent set of risk and protective factors at individual, family, peer network, school, and neighborhood levels of analysis. At the family level, characteristics such as discipline practices, maternal substance use, and parental stress have been linked to youth behavior problems including substance abuse, conduct disorder, and criminality (see Henggeler & Sheidow, 2011). FFT is one of a number of family-based interventions that have been developed to address these familial roots of youth problem behavior. In FFT, the family’s focus is shifted away from the youth’s problem behavior and onto the patterns of behavior between family members, with the aim of establishing more positive familial interaction patterns. FFT interventionists guide families through five stages (Engagement, Motivation, Relational Assessment, Behavior Change, and Generalization) and incorporate other evidence-based behavior change techniques, such as cognitive–behavioral therapy. FFT is commonly utilized by child-serving systems such as juvenile justice and child welfare, to prevent serious youth delinquency and out-of-home placement.

FFT is currently rated as “supported by research evidence” by the California Evidence-Based Clearinghouse for Child Welfare (2014),
as a “model” program by Blueprints, and as “effective” by both the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the Office of Justice Programs (Center for the Study Prevention of Violence, 2014). Two early efficacy studies employing randomized designs demonstrated significant improvements in recidivism for youth receiving FFT as compared to youth in a client-centered family group program, a church-based psychodynamic program, or a no-treatment condition (Alexander & Parsons, 1973; Klein, Alexander & Parsons, 1977). Gordon et al. (1988) found significantly decreased re-offending for youth receiving FFT compared to unmatched comparison youth, and these benefits persisted over long term follow-up (Gordon, Graves, & Arbuthnot, 1995). However, the most recent efficacy study using an experimental design, which focused on marijuana use, internalizing and externalizing behavior, and family conflict as outcomes, did not demonstrate significantly greater improvements from FFT as compared to cognitive-behavioral therapy or a psycho-educational group intervention (Waldron, Slesnick, Brody, Turner, & Peterson, 2001).

In addition to efficacy trials, several FFT effectiveness trials have also been conducted. Slesnick and Prestopnik (2009) found that FFT for treatment of runaway youths’ substance use was significantly more effective than conventional shelter-based substance use services. Other effectiveness trials have failed to demonstrate significantly greater improvements from FFT with respect to externalizing behaviors and substance use when compared to a group intervention for parents (Friedman, 1989), and with respect to criminal recidivism when compared to standard probation services (Sexton & Turner, 2011). The most recent effectiveness studies have begun to address fidelity, and have demonstrated that therapist adherence to the FFT model is positively related to outcomes (Sexton & Turner, 2011). When the FFT group was stratified by therapist adherence, youth in the high adherence group had significantly better outcomes than youth in the low adherence group. This effect was moderated by family risk such that adherence had a stronger effect for higher risk families (Sexton & Turner). Overall, Henggeler and Shidow (2011) describe the efficacy results for FFT as promising, though effectiveness in community settings distal to intervention developers has not been demonstrated.

An adapted version of FFT, called Functional Family Parole (FFP), integrates the principles of FFT into probation supervision. FFP was originally implemented in Washington State in 2004, and subsequently in several other sites, and has been the subject of less research than FFT. The primary existing study of FFP employed a quasi-experimental design using propensity score methods and found favorable effects of FFP on recidivism and employment in comparison to a no-supervision condition (Lucenko, He, Mancuso, & Felver, 2011).

1.2. Evidence for FFT and FFP efficacy and effectiveness with racial/ethnic minorities

As evidence for an intervention accumulates, attention tends to shift from the basic question of whether the intervention works to more specific questions about how participant characteristics relate to intervention effectiveness and what intermediate changes occur that explain the mechanism of intervention effectiveness (La Greca, Silverman, & Lochman, 2009). The influence of participant race/ethnicity is an important consideration when assessing the evidence for an intervention. Interventions, such as FFT and FFP, that were developed without explicit consideration for race/ethnicity or other cultural diversity are referred to as mainstream interventions (Wilson, Lipsky, & Soydan, 2003), as distinguished from culturally-responsive interventions, which are designed specifically for relevance to a particular racial, ethnic, cultural or other group-based identity (Resnicow, Soler, Braithwaite, Amlawala, & Butler, 2000). When implementing mainstream interventions, it is important to evaluate effectiveness across diverse populations. This is particularly important for interventions delivered to youth involved in the juvenile justice system, where racial and ethnic minority youth are over-represented (Piquero, 2008).

Disproportionate contact with the juvenile justice system is well documented for African American youth. As described by Leiber et al. (2011), the Office of Juvenile Justice and Delinquency Prevention monitors states’ relative rate index (RII) at a number of decision points in the processing of juvenile cases (i.e., arrest, referral, diversion, detention, petition, adjudication, probation, placement, and waiver). RRIs compare the processing rates of racial/ethnic minority youth—defined as the number of minority youth at a given decision point as a percentage of their number in the general population—to processing rates of White youth. Values of 1 indicate proportionality, and values greater than 1 indicate disproportionate minority contact (DMC). The most recent RII values for African American youth at selected decision points are: arrest (RII = 2.1), detention (RII = 1.4), and placement (RII = 1.2; Puzzanchera & Hockenberry, 2013). Comparable values for Latino youth are not available from OJJDP. According to the National Council on Crime and Delinquency (2007), although there is evidence of Latino DMC, it is a relatively understudied topic because Latino ethnicity is not often identified separately from race in juvenile justice data systems. Nonetheless, the disproportionate involvement of racial/ethnic minorities in the juvenile justice system highlights the need for juvenile justice interventions demonstrated to be effective among minorities.

In their recent meta-analysis reviewing the evidence for mainstream intervention effectiveness among racial/ethnic minorities, Huey and Polo (2008) delineated three criteria for evidence with respect to racial/ethnic/discrimination: (1) whether the study was conducted among a sample comprising at least 75% racial/ethnic minorities (other meta-analyses have used lower thresholds for this criterion, e.g., Wilson et al. (2003) used 60%), (2) whether the study demonstrated effectiveness among a racial/ethnic minority subsample, and (3) whether tests of moderating treatment effectiveness comparing White and minority individuals were non-significant. In the present study, we address the first criterion by using extensive juvenile justice system administrative data to examine the effectiveness of FFT and FFP among a racially and ethnically diverse sample of youth (<10% White).

There have been few studies that have produced evidence of FFT efficacy or effectiveness with majority-non-White samples. The early efficacy studies (Alexander & Parsons, 1973; Klein, Alexander & Parsons, 1977) did not specify the racial/ethnic composition of their samples, though they were presumably White. Gordon et al. (1988) also did not report the race/ethnicity of participants, but described them as “lower and lower-middle class” and “residing in a culturally deprived rural area (Appalachia)”. The most recent efficacy study by Waldron et al. (2001) did not find any significant effects of FFT on drug use, internalizing and externalizing behavior, or family conflict in a 62% non-White sample. Existing effectiveness studies were largely conducted among majority White samples—Friedman’s (1989) sample was 89% White and Sexton and Turner’s (2011) sample was 78% White. In an unpublished dissertation, Dunham (2010) sampled predominantly Latino and African American youth (95% non-White) and found no evidence of greater effectiveness for FFT versus services as usual on recidivism or crime severity, yet did observe significantly greater treatment completion among the FFT group. The only existing study demonstrating FFT effectiveness with a majority non-White sample found that FFT significantly reduced substance use among a 71% non-White sample, primarily composed of Latino and American Indian youth (Slesnick & Prestopnik, 2009).

FFP has been the subject of much less research than FFT. The main existing FFP study was conducted among a 55% non-White sample primarily composed of Latino and African American youth and found favorable effects of FFP on recidivism and employment in comparison to a no parole condition (Lucenko et al., 2011).

1.3. The current study

Because FFT and FFP are increasingly popular interventions for youth involved in the juvenile justice system, where ethnic minority youth are
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