

Interventions Relevant to Children and Families Being Served with Family First Funding that Have Been Shown to be Effective with Families of Color

Research Brief Executive Summary

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Overview

The Family First Prevention Services Act (FFPSA) was passed and signed into law in February 2018 under the Bipartisan Budget Act of 2018, Division E, Title VII.¹ The FFPSA reorganized federal funding for child welfare to improve supports that strengthen families and reduce inappropriate foster care and group home placements. The services to be reimbursed under the law must meet certain criteria to show evidence of effectiveness.² The full Research Brief provides information about three areas:

- (1) Evidence standards set by the FFPSA of 2018;
- (2) How certain interventions have been rated by the FFPSA Prevention Clearinghouse; and
- (3) Which interventions rated as Promising, Supported or Well-Supported by the Prevention Clearinghouse have been shown to be effective with children and families of color.

Cultural issues

Issues of race and ethnicity must be considered when choosing an intervention, in addition to factors such as treatment needs, economic class, gender, and sexual identity. Yet further clarification is needed to highlight which child welfare interventions are effective, and with respect to which outcomes, across racial and ethnic groups. Many child welfare interventions have been created by white developers and researchers using participant samples that are largely composed of white people. There is a clear need to rigorously evaluate culturally specific interventions to build up their evidence base (e.g., Positive Indian Parenting Program, Culturally Modified Trauma-Focused Treatment [CM-TFT] for Latino children, Community Outreach Program Esperanza [COPE]).

Fortunately, many of the current interventions with a strong evidence base “travel well” across different racial and ethnic groups because of the core components of their intervention model (e.g., being family-centered, carefully listening to family perspectives, building upon family social support networks, and incorporating a strengths-oriented assessment). But many interventions have needed modifications, such as Incredible Years, where the developers revised their video material to make it more relevant for different family situations. So, the need for modification depends on the intervention, which populations are to be served, characteristics of the interventionists and their relationship to the population, and where the intervention takes place.

Effectiveness of FFPSA relevant interventions with families of color

While there is evidence of culturally and linguistically competent child welfare, home visiting, parent training, and mental health services, more interventions need to be evaluated with children and families of color in child welfare and community-based family support.³

Table 1 presents each intervention listed in the FFPSA Clearinghouse alongside its overall evidence rating, and whether research has found the intervention to be effective with particular racial and/or ethnic groups. Note that the interventions vary in terms of how widely they have been used in child welfare,

available information on their use with families of color, and the degree to which the effects with families served by child welfare have been measured.

Appendix A in the full Research Brief contains more detailed information about each intervention, including target groups (e.g., ages 12-17), issues addressed (e.g., substance use), treatment duration (e.g., 12 weeks), treatment dosage (e.g., weekly meetings), and known levels of support for different racial and ethnic groups.

Table 1. Interventions rated by the FFPSA Clearinghouse for which we have information about their effectiveness with children and families of color

*Promising, ** Supported, ***Well-Supported

Intervention	American Indian or Alaska Native	Asian	Bi-Racial or Multi-Racial	African American	Latino	Native Hawaiian or Pacific Islander	Other
Adolescent Community Reinforcement Approach				X	X		
Brief Strategic Family Therapy (BFST) ***				X	X		
Child First ** (formerly Child and Family Interagency Resource, Support, and Training)					X		
Child-Parent Psychotherapy *			X	X	X		
Eye Movement Desensitization and Reprocessing – Standard Protocol **							X
Family Check-up ***				X	X		
Family Spirit *	X						
Functional Family Therapy (FFT) ***				X	X		
Healthy Families America ***	X	X	X	X	X	X	
Homebuilders - Intensive Family Preservation and Reunification Services ***	X			X	X	X	
Incredible Years – School Age Basic Program *		X		X			X
Intercept ®** (formerly Youth Villages Intercept)				X			
Interpersonal Psychotherapy (Weissman et al. Manual) **				X			X

Intervention	American Indian or Alaska Native	Asian	Bi-Racial or Multi-Racial	African American	Latino	Native Hawaiian or Pacific Islander	Other
Interpersonal Psychotherapy for Depressed Adolescents*					X		
Iowa Parent Partner Approach*					X		
Methadone Maintenance Therapy**				X	X		
Motivational Interviewing***	X		X	X	X		
Multidimensional Family Therapy (MDFT)**				X	X		X
Multisystemic Therapy (MST)**				X	X		
Nurse-Family Partnership (NFP)***				X	X		
Parent-Child Interaction Therapy (PCIT)***		X		X			X
Parents Anonymous®**				X	X		
Parents as Teachers***				X	X		
Prolonged Exposure Therapy for Adolescents with PTSD*				X			
Prolonged Exposure Therapy for PTSD (adults)*				X			
SafeCare**	X			X	X		
Sobriety Treatment and Recovery Teams*				X			
TBRI® 101* (Trust-Based Relational Interview)				X			
Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)*	X	X	X	X	X		
Triple P – Positive Parenting Program – Group (Level 4)*		X		X			X
Triple P – Positive Parenting Program – Online (Level 4)**				X	X		
Trust-Based Relational Intervention-Caregiver Training*				X			

Conclusions

Our review finds that 32 of the 36 interventions currently rated by the Prevention Clearinghouse as Promising, Supported or Well-Supported “travel well” across at least one other ethnic group because of some of their intervention model components (e.g., being family-centered, carefully listening to family perspectives, building upon family social support networks, incorporating a strengths-oriented assessment). However, there are many interventions that appear to need modifications and additional evaluation so they can be rated by the Clearinghouse.

Modifying a program with new examples to help it be more culturally relevant or competent is allowed by the Clearinghouse. But more significant changes mean that the modified program is viewed as a “new” intervention that must be evaluated separately. This requires a new line of evaluation research for each culturally modified intervention. **Because of this stance, the federal government should provide targeted support to Indian tribal nations and other communities of color to document and evaluate those interventions that have been culturally adapted.** This is all the more important because there has historically been significant systemic bias in funding research on interventions developed by white people.⁴ This includes initial funding to develop interventions, as well as funding to evaluate the interventions. Many advocates are calling for equity by funding evaluations for interventions developed for and by Black, Brown, Indigenous, and People of Color (BBIPOC) developers and researchers.

Outcome studies using rigorous evaluation designs and economic analyses would not only better establish the effectiveness of these interventions, but they would also measure whether these interventions produce any cost-savings.⁵ As jurisdictions optimize their array of interventions and consider innovative funding approaches such as pay for success and social impact bonds,⁶ studies of culturally competent interventions that go beyond frequency analyses of management information system data will be needed.

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¹The FFPSA law can be found here: <https://www.congress.gov/115/bills/hr1892/BILLS-115hr1892enr.pdf> The recent request for comments is located here and contains additional criteria about how the intervention studies will be reviewed and rated: <https://www.federalregister.gov/d/2018-13420>.

² The FFPSA Clearinghouse handbook can be found here: <https://preventionservices.abtsites.com/review-process>

³ See for example:

- Huey, S. J. & Polo, A. (2008). Evidence-based psychosocial treatments for ethnic minority youth. *Journal of Clinical Child & Adolescent Psychology*, 37(1), 262-301.

- Smith, A.C. (2020). Cultural sensitivity in mental health care: Getting to know your audience. *Psychology Today Blog*, Retrieved from <https://www.psychologytoday.com/us/blog/and-running/202009/cultural-sensitivity-in-mental-health-care>
- Substance Abuse and Mental Health Administration (SAMHSA) (2020). *CCBHCs and Cultural Competence*. Washington, D.C.: Author. Retrieved from <https://www.samhsa.gov/section-223/cultural-competency>

⁴ See for example:

- <https://www.ascb.org/science-policy/ending-racial-disparities-in-nih-funding/>
- <https://advances.sciencemag.org/content/5/10/eaaw7238>
- <https://www.npr.org/sections/health-shots/2019/10/18/768690216/whats-behind-the-research-funding-gap-for-black-scientists>

⁵ For articles discussing the need for more economic analyses, see:

- Karoly, L. A., Kilburn, M. R., Bigelow, J. H., Caulkins, J. P., & Cannon, J. S. (2001). *Assessing costs and benefits of early childhood intervention programs: Overview and applications to the Starting Early, Starting Smart Program*. Santa Monica, CA: RAND.
- Lee, S., & Aos, S. (2011). Using cost-benefit analysis to understand the value of social interventions. *Research on Social Work Practice*, 21(6), 682-688.
- Mullen, E. J., & Shuluk, J. (2010). Outcomes of social work intervention in the context of evidence-based practice. *Journal of Social Work*, 11(1), 49-63.
- Pecora, P. J., Sanders, D., Wilson, D., English, D., Puckett, A., & Rudlang-Perman, K. (2012). Addressing common forms of child maltreatment: Intervention strategies and gaps in our knowledge base. *Child and Family Social Work*, 19(3) 1-12, doi: 10.1111/cfs.12021.

⁶ Rudd, T., Nicoletti, E., Misner, K., & Bonsu, J. (2013). *Financing promising evidence-based programs: Early lessons from the New York City Social Impact Bond*. New York, NY: MDRC. Retrieved from http://www.mdrc.org/sites/default/files/Financing_Promising_evidence-Based_Programs_FR.pdf. Also see: <https://obamawhitehouse.archives.gov/omb/factsheet/paying-for-success>