

**Intervention Name:** Family Centered Treatment®

**Brief Description of the Intervention:** Family Centered Treatment® (FCT) is designed to find simple, practical, and common sense solutions for families faced with disruption or dissolution of their family. All types of families where stabilization is needed are candidates for FCT. Factors placing the family at high risk of dissolution can be due to external and/or internal stressors, circumstances, or forced removal of their children from the home due to the youth's delinquent behavior or parent's harmful behaviors. A foundational belief influencing the development of FCT is that the recipients of service are great people with tremendous internal strengths and resources. This core value is demonstrated via the use of individual family goals that are developed from strengths as opposed to deficits. Obtaining highly successful engagement rates is a primary goal of FCT. FCT is provided with families of specialty populations of all ages involved with agencies that specialize in child welfare, adult services, mental health, substance abuse, developmental disabilities, juvenile justice and crossover youth. Critical components of FCT are derivatives of Eco-Structural Family Therapy and Emotionally Focused Therapy which were enhanced with components added based on experience with clients. Sustainable change is the goal with every family in treatment and the Valuing our Changes phase of FCT is designed for this purpose.

**Please select the primary categories that relate to the intervention:** (Please highlight applicable categories)

- Academic performance/functioning and achievement
- Adult behavior problems (violence/aggression)
- Adult mental health
- Alcohol and drug use
- Assessment and Measurement Instruments for Target Populations
- Attachment Interventions
- Basic Needs
- Behavioral Management and Treatment
- Child Mental Health – externalizing
- Child Mental Health - internalizing
- Child Mentoring Programs
- Child Supports and community connections
- Child Welfare Practice and Service Models
- Crisis Intervention

- Delinquency and Criminal Behavior
- Educational Support Interventions
- Family Functioning (communication, bonding, interactions and relationships)
- Family Support and Placement Stabilization Programs
- Independent living and career readiness
- Marriage and Relationship Support
- Parental Mentoring Programs
- Parent Engagement
- Parental Supports and community connections
- Parenting Skills - Training and Enhancement
- Peer associations/relationships
- Resource Parent Training Programs
- Sexual Behavior Problems in Adolescents and Children
- Social/emotional functioning (social competence/prosocial behaviors, conflict management, problem solving, coping-stress management, decision making and self -esteem)
- Trauma Treatment

**3. Describe the intervention’s current use with one or both of the QIC-AG’s target population:**

- Children with challenging mental health, emotional or behavioral issues who are awaiting an adoptive or guardianship placement as well as children in an identified adoptive or guardianship home but the placement has not resulted in finalization for a significant period of time.

The trauma-genic effects affecting pre-adoptive children and youth are treated within the identified adoptive or guardianship home via FCT. In all phases of FCT the integration of empowering the family to address the functions of behaviors rather than using a strict behavioral change approach provides insight for the caregivers needed in order to respond to the needs and not become inducted into negative losing battles to extinguish hard to handle behaviors.

FCT Phase I (Joining and Assessment) components permit the child / youth to begin to make sense of their world. The adaptation of FCT’s Structural Family Assessment to include the Child Placement Genogram assists the adoptive family in understanding the “ghosts” of past placements(often multiple) that the child /youth brings with them into their new home. Integral to the FCT trauma treatment process is the emotionally focused therapy designed to assist the child and family to circumvent the emotional blockages that have precluded their ability integrate changes. The use of Jan Hindman’s definitive work

on scrapbooking is designed to enable the child/ youth to attach new meaning (rewrite) to the narrative of their childhood; their life losses and experiences are not the definition of who they are and are not about the child they were born as. This process of sensory based treatment scrapbooking permits the transition necessary to consider that permitting others to parent them does not require a separation of them from their core self. The integral goal of the restructuring process of FCT (Phase 2) is to enable via experienced based treatment approaches (enactments) the child /youth to get past the conflicting paradigm often facing pre-adoptive youth; “I want what you have to offer me but I don’t want it from you.

- Children and families who have already finalized the adoption or guardianship. This group includes children who have obtained permanency through private guardianship and domestic private or international adoptions.

When the specialty population of QIC-AG is provided FCT, the adaptations described above are also relevant for those families for whom the adoption has been finalized including the trauma treatment and child/youth specialty assessments. However the basic FCT components utilized for treating families of origin that are seeking to prevent dissolution are also needed by families that have finalized adoption. The traditional Family Centered Evaluation inclusive of the Structural Family Assessment permits the adoptive family to closely examine their own areas of functioning most in need of change and come to the realization that this treatment need is not about the adoptive child but about all of them as a family system. This paradigm shift is the operant function of FCT Phase 1 – Joining and Assessment. While adaptations are made to integrate the child/youth and the “ghosts” of their past, the focus of FCT is the same for families, whether adoptive, relative placement or biological; developing effective skills and systems for functioning as a family unit that is balanced and attentive to all members needs regardless of the difficult to handle behaviors of any individual family member. The experiential process of “practicing” new methods for handling the area of family functioning most in need of change is the FCT methodology rather than didactic cognitive processing.

**4. If currently not being used with one or both of the QIC-AG’s target population, describe how the intervention could be adapted to respond to the needs of the QIC-AG’s target population:**

Family Centered Treatment is currently being utilized with both target populations in numerous sites across the country.

- Children with challenging mental health, emotional or behavioral issues who are awaiting an adoptive or guardianship placement as well as children in an identified adoptive or guardianship home but the placement has not resulted in finalization for a significant period of time.
- Children and families who have already finalized the adoption or guardianship. This group includes children who have obtained permanency through private guardianship and domestic private or international adoptions.

## **5. Intervention goals/outcomes:**

The goals of FCT are to:

- Enable family stability via preservation of or development of a family placement.
- Enable the necessary changes in the critical areas of family functioning that are the underlying causes for the risk of family dissolution.
- Bring a reduction in hurtful and harmful behaviors affecting family functioning.
- Develop an emotional and functioning balance in the family so that the family system can cope effectively with any individual member's intrinsic or unresolvable challenges.
- Enable changes in referred client behavior to include family system involvement so that changes are not dependent upon the therapist.
- Enable discovery and effective use of the intrinsic strengths necessary for sustaining the changes made and enabling stability.

## **6. Please name the sites and contact information where the intervention has been replicated/implemented:**

### **Florida**

National Mentor LLC/Institute for Family Centered Services  
Broward and Miami/Dade Counties  
4101 Ravenswood Rd Ste 323  
Dania Beach, FL 33312  
954-934-4152  
Jo-Jean Charles – Program Director

### **Indiana**

SCAN, Inc.  
500 W. Main Street  
Fort Wayne, IN, 46802  
Ph: 260-421-5000 ext. 2325  
Kris Wise, MSW-Clinical Manager

National Mentor LLC/Institute for Family Centered Services  
Indianapolis  
9001 Wesleyan Rd, Ste 205  
Indianapolis, IN 46268  
219-791-9253  
Deanna Szyndrowski-State Director  
National Mentor LLC/Institute for Family Centered Services

National Mentor LLC/Institute for Family Centered Services  
Lake County  
1579 E. 85<sup>th</sup> Avenue  
Merrillville, IN 46410  
219-791-9253  
Deanna Szyndrowski-State Director

National Mentor LLC/Institute for Family Centered Services  
South Bend  
105 Jefferson Blvd.  
South Bend, IN 46601  
219-791-9253  
Deanna Szyndrowski-State Director

Ireland Home Based Service  
Southeast 1/Evansville  
3231 N. Green River Road Suite 220  
Evansville , IN 47715  
Phone: (812) 479-1856  
Kris Mann-Clinical Director/Owner

Family Solutions Inc.  
Bloomington  
315 W Dodds St # 110  
Bloomington, IN 47403  
(812) 335-1926  
Nancy Hughs-Executive Director

Lifeline Youth and Family Services  
North/Central/Southeast  
7136 Gettysburg Pike  
Fort Wayne, IN 46804-5680  
(260) 745-3322  
Ruth Skeel-Clinical Director

Centerpointe  
Indianapolis  
320 North Tibbs Avenue  
Indianapolis, IN 46222  
855-360-8751  
Stanley Frank-CEO

## **Maryland**

National Mentor LLC/Institute for Family Centered Services  
Baltimore  
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3102 Lord Baltimore Dr, Ste 212  
Baltimore, MD 21244  
(301) 524-0977  
Cynthia Roberson – Area Director

National Mentor LLC/Institute for Family Centered Services  
South Mountain  
427 E. Patrick St, Ste B  
Frederick, MD 21701  
(301) 524-0977  
Robin McCrae-Area Director

National Mentor LLC/Institute for Family Centered Services  
Montgomery  
16220 S Frederick Ave Ste 312  
Gaithersburg, MD 20877  
Robin McCrae- Area Director

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4351 Garden City Dr, Ste 200  
Landover, MD 20785  
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Cynthia Roberson - Area Director

National Mentor LLC/Institute for Family Centered Services  
Tri County  
200 Kent Ave Ste 101  
La Plata, MD 20646  
(301) 524-0977  
Robin McRae – Area Director

### **Massachusetts**

National Mentor LLC/Institute for Family Centered Services  
Boston  
270 Bridge Street  
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(617) 874-6396  
Stephanie Judy – Regional Director

National Mentor LLC/Institute for Family Centered Services  
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(617) 874-6396  
Stephanie Judy – Regional Director

National Mentor LLC/Institute for Family Centered Services  
New Bedford  
259 Samuel Barnet Blvd  
New Bedford, MA 02745  
(617) 874-6396  
Stephanie Judy – Regional Director

National Mentor LLC/Institute for Family Centered Services  
Worcester  
350 Myles Standish Blvd  
Taunton, MA 02780  
(617) 874-6396  
Stephanie Judy – Regional Director

## **North Carolina**

National Mentor LLC/Institute for Family Centered Services  
Mecklenburg  
8604 Cliff Cameron Dr, Ste 170  
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Tel: 919-607-0914  
Safi Martin-Area Director

National Mentor LLC/Institute for Family Centered Services  
Cleveland/Gaston West/Piedmont/West Piedmont  
1209 E. Garrison Blvd  
Gastonia, NC 28054  
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Safi Martin-Area Director

National Mentor LLC/Institute for Family Centered Services  
Alamance/Caswell/Southeastern Triad/Triad  
2 Centerview Dr, Ste 300  
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Tel: 919-607-0914  
Lisa Bracken-Area Director

National Mentor LLC/Institute for Family Centered Services  
5 County/Triangle  
3125 Poplarwood Ct, Ste 304  
Raleigh, NC 27604  
Tel: 919-607-0914  
Michelle Swigunski-Area Director

National Mentor LLC/Institute for Family Centered Services  
Winston  
4035 University Pkwy, Ste 101  
Winston-Salem, NC 27106  
Tel: 919-607-0914  
Lisa Bracken -Area Director

## **Ohio**

National Mentor LLC/Institute for Family Centered Services  
Dayton  
1129 Miamisburg-Centerville Rd. Ste. 201  
Dayton, OH 45449  
(216) 525-1885 x5205  
Vicki Ochoa-State Director

National Mentor LLC/Institute for Family Centered Services  
Independence  
6200 Rockside Woods Blvd. Ste. 305  
Independence, OH 44131  
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Vicki Ochoa-State Director

## **Rhode Island**

Child and Family  
Providence  
1268 Eddy St  
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Megan Boeher-Program Director

Communities for People  
Providence  
623 Atwells Avenue, 2nd Floor  
Providence, RI 02909  
(401) 273-7103



Nicole Concha-Program Director

## **Virginia**

First Home Care  
Richmond  
2235 Staples Mill Rd  
Richmond, VA 23230  
804-389-9369  
Brandi Hoy-Program Director

First Home Care  
Portsmouth  
1634 London Blvd  
Portsmouth, VA 23704  
804-389-9369  
Brandi Hoy-Program Director

First Home Care  
Tidewater East/Tidewater West  
1634 London Blvd  
Portsmouth, VA 23704  
804-389-9369  
Brandi Hoy-Program Director

### **7. Describe the evaluation or research that has been collected on this intervention:**

- The nonprofit Family Centered Treatment Foundation and Maryland Department of Juvenile Services produced a study <sup>1</sup> which examines outcomes from the first 4.5 years of the field implementation of FCT with the population of Maryland delinquent youth (described in the preceding paragraph). A quasi-experimental research design was used to compare FCT treatment outcomes (non exclusionary criteria) to those of the secure Group Homes and Therapeutic Group Homes from which youth receiving FCT were diverted. Because the cases referred are diversions from Group Homes and Therapeutic Group Homes, the two samples are similar in terms of the risk factors that affect treatment outcomes. Evaluation and outcomes were published in the Journal of Juvenile Justice, a semi-annual, peer-reviewed journal sponsored by the Office of Juvenile Justice and Delinquency Prevention (OJJDP).

<sup>1</sup> *Family Centered Treatment®-An Alternative to Residential Treatments for Adjudicated Youth: Outcomes and Cost-Effectiveness.* <http://www.journalofjuvjustice.org>

- U.S. Departments of Justice and Health and Human Services' *"Evidence-Based Practices for Children Exposed to Violence: A Selection from Federal Databases."* Family Centered Treatment is listed in the matrix of practices identified. [http://www.safestartcenter.org/pdf/Evidence-Based-Practices-Matrix\\_2011.pdf](http://www.safestartcenter.org/pdf/Evidence-Based-Practices-Matrix_2011.pdf)

- Family Centered Treatment (FCT) has been evaluated by, and is included in SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP).  
<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=363>
- Family Centered Treatment (FCT) has been evaluated by, and is included in The California Evidence-Based Clearinghouse for Child Welfare  
<http://www.cebc4cw.org/program/family-centered-treatment/>

**Please provide contact information Below:**

Contact Person/Purveyor: William Painter Jr.  
Agency/Affiliation: Family Centered Treatment Foundation, Board of Directors  
Contact Email: [info@familycenteredtreatment.org](mailto:info@familycenteredtreatment.org)  
Contact Phone: 704-308-0812  
Intervention Web Site/URL: [www.familycenteredtreatment.org](http://www.familycenteredtreatment.org)

Contact Person/Purveyor: Timothy J Wood  
Agency/Affiliation: Family Centered Treatment Foundation, Executive Director  
Contact Email: [tim.wood@familycenteredtreatment.org](mailto:tim.wood@familycenteredtreatment.org)  
Contact Phone: 704-787-6869  
Intervention Web Site/URL: [www.familycenteredtreatment.org](http://www.familycenteredtreatment.org)