

**Are Therapeutic Foster Care Programs Effective in Reducing Violent  
Crimes among Adolescents, ages 12-18 with a History of  
Delinquency?**

**By**

**Latoria C. Sweet**

**A thesis submitted in fulfillment  
Of the requirements for the degree of  
Master of Science  
Criminal Justice  
Florida Metropolitan University**

**April 2007**

**Professor: Dr. Hal Campbell**

## EPIGRAPH

Children,  
once bright-eyed representatives of societies wonders  
now, lost causes, the undying screams of societies blunders  
as sanguine expressions of the days struggle become darker and darker  
the shackles that suppress' them becomes smaller and smaller  
Why?  
Because little boys become little men when their mother only drinks a little gin  
What's morality when you're poor and hungry?  
Crime, or simply desperation, how can you define that thin line  
in a constant state of depravation; as degradation  
causes a little girl to whore herself because the negative connotations of the  
words of mother  
makes it hard for her to believe anyone could love her  
Trust her, as her actions echoes the words of Mr. X  
by any means necessary, her brother mantra as he mixes his drink with X-to see  
happiness, a sordid humor spoken by those who don't know better  
or worse, a system filled with the victims of a boring suburbia?!?!?!?  
Leaves the world with horrible stigmas of those who had no choice  
those who had bad lawyers, and NO VOICE  
silently screaming contradiction into the ears of a dysfunctional judicial system  
there innocence stripped away from them, as they are raped by their persecutors  
as they fuck them over, with no remorse  
as the media quickly rushes over to capture their incarceration beautifully  
as the tears of a lost childhood falls into a undulating pool of contempt; ruefully  
Ruthlessly, tearing their only means of support away from them  
no wonder the structure of a family body is in disarray, its been ripped apart  
limb by limb  
and as the frequency of delinquency rings through me  
the songs of the wronged sings truthfully  
feverishly, attempt to be heard and not casually thrown to the depths of  
tomorrow  
tossed to the flames of misery, crushed by the pages of history  
Children,  
once bright-eyed representatives of societies wonders  
now, lost causes, the undying screams of societies blunders  
as sanguine expressions of the days struggle become darker and darker  
the shackles that suppress' them becomes smaller and smaller  
Why?

Written By,  
Javell Dailey Age 15

## ABSTRACT

This thesis will examine different Foster Care Programs, Juvenile Delinquency, different behavior types, and risk factors associated with adolescents. The purpose of this paper is to show that Therapeutic Foster Care Programs are effective in reducing violent crimes in adolescents ages 12-18, with a history of delinquency. This thesis will focus primarily on the Foster Care system, juvenile violence, and the risk factors associated with adolescents. In addition this thesis will address the future of Therapeutic Foster Care Programs, reducing juvenile violence, and the need for more programs for adolescents.

## ACKNOWLEDGEMENTS

I would like to thank God who created me and for being my true confidant throughout these trying times. Along the way there were a couple of cheerleaders in my corner to help me get through. First and far most to my beautiful son, Jermaine who served as my greatest inspiration, my forever loving and supportive grandmother, who could never ever be replaced, to my loving fiancé' Travis, who really had to deal with my mood swings throughout this. To his mother Ollie and my aunt Debra, for lending a hand to care for my son while I was in class, to Evelyn my sole listening ear, to Dr. George Ackerman for his positive motivations, and last but not least the youth in the Handy, Inc. Life and Transitional Program, I would like to thank each and every one of you from the bottom of my heart.

## TABLE OF CONTENTS

EPIGRAPH

ABSTRACT

ACKNOWLEDGEMENTS

TABLE OF CONTENTS

CHAPTER

I. INTRODUCTION

II. NEED FOR STUDY

A. Purpose

B. Problem Statement

C. Definition of Terms used

D. Research Questions

E. Interview Questions

III. LITERATURE REVIEW

A. Juvenile Violence

B. Risk Factors

C. Therapeutic Foster Care Programs

IV. RESEARCH METHODOLOGY

A. Design

B. Samples

C. Tables and Graphs

V. CONCLUSION

VI. RECOMMENDATIONS

VII. REFERENCES

## INTRODUCTION

The term Therapeutic Foster Care represents a system of care that is provided by foster care families to youth with a history of delinquency. "Therapeutic Foster Care is also known by other names as well. Therapy Foster care, Multidimensional Treatment Foster Care, Specialist Foster Care Treatment-Foster Family Care, and Parent Therapist Programs are to name a few." (Thacker, 2004). As an alternative to incarceration, hospitalization, and institutionalization, these programs are offered to these adolescents who are dealing with chronic anti-social behavior, delinquency, or emotional disturbance. According to Thacker, (2004), "Adolescents that are chosen to be a part of Therapeutic Foster Care Programs are placed with families for several months in a structured environment. In some programs, the adolescents are separated from their usual peer environment and closely supervised in school, work, home and the community." (Thacker, 2004). Violence caused by juveniles is a very serious problem in today's society. It is indeed a very substantial problem in the United States. What causes these juveniles to commit violent acts? The reasons are truly unknown. Each case presents different reasons to contribute to each individual act of violence. Juvenile violence is very brutal and should not be tolerated. "While every adolescent is different and every situation is unique, research on violent juveniles has shown that there are some common characteristics displayed." (Thacker, 2004).

## PURPOSE

The purpose of this research thesis is to show that Therapeutic Foster Care Programs are effective in reducing violent crimes in adolescents ages 12-18 with a history of delinquency. The researcher will focus its attention to several foster care programs. The researcher will identify what is juvenile violence, why juveniles commit violent criminal acts, and how we as a society can help reduce juvenile violence. The researcher will attempt to examine the need for more programs to assist these adolescents as well. The researcher would also like to examine the risk factors that exist in these adolescents lives which lead to a life of violence.



## PROBLEM STATEMENT

Violence caused by juveniles is a very serious problem in today's society. On the basis of reports done by Thacker, (2004), "juvenile perpetrators committed violence at a higher rate than persons of any other age group." There are several risk factors that are present and play a major role in juvenile violence; they are low socioeconomic status, no parental supervision, harsh discipline, anti-social behavior, family conflicts and delinquent peers. Youth violence then, like so much else in public health has its root, modifiable causes. "Numerous of studies have been conducted on the effectiveness of Therapeutic Foster Care Treatment Programs. Researchers found out that these youths prior to coming in for treatment were seriously disturbed, delinquent, and uncontrollable." (Thacker, 2004). They also found out that there were very few programs to help these youth. These youth were exposed to several risk factors which were previously noted. "Other risks factors included youth with mental disorders, cognitive and neurological deficits, low Intelligence Quotient, delinquent beliefs, and early onset of aggression and or violence. There were also family risk factors which played a major role. There were history of violence, parent criminality, poor parental supervision, patterns of high family conflict, and family management problems." (Thacker, 2004). All of these present issues made a greater need and want for programs to help these adolescents who were not already dealt a fair chance

## DEFINITION OF TERMS

- 1. Therapeutic Foster Care Programs:** “Programs that are designed for youth who can not live at home and who are placed in homes with foster care parents who are trained to provide a structured environment that supports their learning, social, and emotional skills.” (Thacker, 2004).
- 2. Multi Dimensional Treatment Foster Care:** A behavioral treatment alternative to residential placement for adolescents who have problems with chronic antisocial behavior, emotional disturbance, and delinquency. (Hahn, 2004).
- 3. Adolescent:** A youth between the ages of 12-18 for the basis of this thesis project.
- 4. Therapy:** Any of the measures taken to treat a disease. Unproven therapy is any therapy that has not been scientifically tested and approved. Use of an unproven therapy instead of standard (proven) therapy is called alternative therapy. Some alternative therapies have dangerous or even life-threatening side effects. For others, the main danger is that a patient may lose the opportunity to benefit from standard therapy. ([www.mesotheloma-settlement-information.org](http://www.mesotheloma-settlement-information.org))

5. **Severe Emotional Disturbance:** “A mental or emotional disturbance listed in the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM IV).” ([www.en.wikipedia.org](http://www.en.wikipedia.org)).
  
6. **Violence:** “Violence is a general term to describe actions, usually deliberate, that cause or intend to cause injury to people, animals, or non-living objects.” ([www.en.wikipedia.org](http://www.en.wikipedia.org)).
  
7. **Juvenile:** Person under the age of 21 years, or as defined in the local jurisdiction as under the age of majority.

## RESEARCH QUESTIONS

1. What is considered a violent crime?
2. What are Therapeutic Foster Care Programs?
3. How can we implement more programs to help youth?
4. What are some risk factors associated with these youth?
5. Is there a trend in juvenile violence?
6. What are some of the causes of juvenile violence?
7. What programs are not effective when treating adolescents?

## INTERVIEW QUESTIONS

1. Do you consider yourself to be a delinquent adolescent?
2. Are you in a Therapeutic Foster Care Treatment Program?
3. Have you ever been arrested?
4. Are you aware of any programs that help youth?
5. Have your mom or dad ever been arrested?
6. Do you feel like Therapeutic Foster Care Programs really help youth?
7. How has this program helped youth?
8. How long have you been in Foster Care?
9. What is the most violent act you've committed?
10. What is therapy?
11. How old are you?
12. Are you a male or female?
13. What is the name of your program?
14. Are your parent's married?
15. Should more programs be established to help youth?

## LITERATURE REVIEW

### JUVENILE VIOLENCE OVERVIEW

According to a study conducted by Dawson and Reiter, (1998) "Recent high profile cases involving violence in our schools and communities have heightened awareness and interest in the literature that deals with juvenile violence. This article is intended to provide an introduction and overview on the subject that is increasingly arousing public and governmental concern and attention." Dawson and Reiter, (1998), stated that "the level of violent crime committed by juveniles increased from 1985 to 1994 and then declined from 1994 to 1996. The rate of adolescent homicides has more than doubled since 1988 with the major increase attributable to the use of handguns by our youth. While the overall frequency of juvenile violence has not substantially changed, the lethality has increased." (Dawson & Reiter, 1998). Juveniles have been committing criminal acts for quite a while now. It is a growing problem in today's society. "The proportion of juveniles committing acts of violence has risen only five to ten percent." (Dawson & Reiter, 1998). Juveniles have committed all types of criminal acts but recently there has been a rise in school shootings, which according to Dawson and Reiter, 1998, that the recently highly publicized school shootings represent a minor percentage of that total. The rate of violence against youth aged twelve to fifteen, however, has increased substantially since 1988." (Dawson and Reiter, 1998).

There are several known factors that contribute to juvenile violence, but according to Dawson and Reiter (1998), there are four. The researcher will focus on those four main areas: Community risk factors, Family risk factors, School risk factors, and Peer risk factors. These risk factors includes a variety of things that contribute to the increase in violence factors such as: being able to get your hands on guns, the availability of drugs, lack of knowing how to manage a family, no parental support, family conflicts, financial problems, parental attitudes, antisocial behavior, academic failures, peer pressure, poverty, behavior problems, and substance use. All these factors play a major role in regards to juveniles committing violent acts. According to Dawson and Reiter, (1998), "the adolescent who becomes involved in a violent lifestyle is denied many opportunities that facilitate a healthy maturation into an adult role which would serve to reduce violent offending. The violent juvenile is essentially trapped in a state of perpetual adolescence." There are many types of programs available to assist these youth; they have an array of services for these youth. According to Dawson and Reiter, (1994), "the treatment programs must integrate cognitive, affective and social interventions. They must also be community-based with a strong case advocacy component. Programs should also provide opportunities for the child's involvement and should demonstrate respect for the youth. In view of the fact that "most violent behavior is learned behavior," there is a great potential for successful intervention." (Dawson and Reiter, (1994). "The Center for the Study and Prevention of Violence has reviewed over 450 delinquency,

drug and violence prevention programs and has identified ten programs that meet a high standard. The duration of treatment was typically two to five years. The average cost for a stay in the Department of Corrections is \$40,000.00 per year, while residential treatment programs cost between \$20,000 and \$40,000 per youth per year, and mentoring and visitation programs cost \$1,000 and \$7,000 per year respectively. Four of the ten model programs saved more money than they cost in a three-year period. "Our most effective prevention programs achieve a thirty to forty percent reduction in onset or offending rates compared to control groups or average rates" (Dawson & Reiter, 1994).



## **RISK FACTORS ASSOCIATED WITH ADOLESCENTS**

### **Community and Neighborhood Factors**

There are several factors such as poverty, community dysfunction, drugs availability, being able to get guns, racial bias and prejudice, being exposed to violence, which plays a major role juvenile violence (Brewer et al., 1995).

**Neighborhood adults involved in crime.** Maguin and colleagues (1995) found that children who knew many adult criminals were more likely to engage in violent behavior by age 18.

**Being exposed to violence.** Being exposed to violence increases a child's risk for involvement in violent behavior later in life (Paschall, 1996). McCord and Ensminger (1995) also found that African American study participants who reported having experienced racial discrimination committed more violent acts.

### **Family Factors**

**Parents as criminals.** Baker and Mednick (1984) found that men ages 18-23 with criminal fathers were 3.8 times more likely to have committed violent criminal acts than those with non criminal fathers. Farrington (1989) also found that boys who had a parent arrested before their 10th birthday were 2.2 times more likely to commit violent crimes than those with non criminal parents.

**Mistreatment of the Child.** Studies have examined three forms of child mistreatment: physical abuse, sexual abuse, and neglect. Evidence suggests that children who have been physically abused or neglected are more likely than others to commit violent crimes later in life (Widom, 1989; Zingraff et al., 1993; Smith and Thornberry, 1995).

**Poor family management practices.** Family management practices such as failure to set clear expectations for children's behavior, poor monitoring and supervision and severe and inconsistent discipline consistently predict later delinquency and substance abuse (Capaldi and Patterson, 1996; Hawkins, Arthur, and Catalano, 1995). In a sample followed up on after 20 years, the McCords found that parents' poor supervision and aggressive discipline predicted their children's convictions for person crimes well into their forties (McCord, McCord, and Zola, 1959; McCord, 1979). Wells and Rankin (1988) found that boys with very strict parents reported the most violence. Boys with very permissive parents reported the second highest level of violence. Boys with parents who were neither too strict nor too lax reported the least violence. Also, boys whose parents punished them inconsistently, sometimes punishing and sometimes ignoring the same behavior, were more likely to commit an offense against other persons than boys whose parents punished them more consistently. Parental punitiveness or harshness in discipline also predicted later violence.

**Parental involvement.** Strong parental involvement can function as a protective factor against violence. Conversely, a lack of parental interaction and involvement with children may increase children's future risk for violence.

Williams (1994) found that parent-child communication and involvement at age 14 predicted less self-reported violent behavior at age 16. This relationship was weaker for females than for males. Similarly, Farrington (1989) found that sons whose fathers did not engage in leisure activities with them more often exhibited violent behavior as teenagers and adults and were more likely to be convicted for a violent offense.

**Parental involvement with substance use and violence.** Research indicates that parental attitudes favorable to behaviors such as alcohol use predict use of alcohol and drugs by youth (Peterson et al., 1994), but little research has examined the impact of parental attitudes to violence on children's behavior. One study showed that children who at age 10 had parents who were tolerant of violent behavior were more likely to report violent behavior by age 18 (Maguin et al., 1995).

**Parent-child separation.** Evidence indicates that disruptions of parent-child relationships predict later violent behavior in children. Parent-child separation before age 10 has been found to predict violence (Farrington, 1989; Wadsworth, 1978). Henry and colleagues (1996) found that having a single-parent family when boys were age 13 predicted their convictions for violence by age 18. An

association also has been found between leaving home at an early age and high levels of violence in both men and women (McCord and Ensminger, 1995).

However, many other factors that also predict violence can contribute to parent-child separations.

### **School Factors**

“Various aspects of school-related experiences, such as low educational achievement, low interest in education, dropping out of school, truancy, and poor-quality schools, have been hypothesized to contribute to criminal and violent behavior” (Hawkins, Farrington, and Catalano, 1998).

**Failing School.** “Poor academic achievement has consistently predicted later delinquency (Maguin and Loeber, 1996; Denno, 1990). Academic failure in the elementary grades also increases risk for later violent behavior” (Farrington, 1989; Maguin et al., 1995).

**Truancy.** Farrington (1989) found that “youth with high truancy rates at ages 12–14 were more likely to engage in violence as adolescents and adults; leaving school before the age of 15 also predicted later violence. Truancy and dropping out may be indicators of low school bonding, but children also may miss school or leave school early for other reasons” (Janosz et al., 1996).

**Changing schools.** Maguin and colleagues (1995) found that “youth who had changed schools often in the past year at ages 14 and 16 were more violent at age 18 than those who had not. Conclusions must be drawn carefully, however, because school transitions can be related to other factors that predict violence” (Maguin, 1995).

### **Individual Physical Factors**

**Pregnancy complications.** “Prenatal and delivery trauma are somewhat predictive of later violence, although findings vary with the research methods used. Kandel and Mednick (1991) found that 80 percent of violent offenders scored high in delivery complications, compared with 30 percent of property offenders and 47 percent of non offenders.”

**Aggressiveness.** “Aggressive behavior measured from ages 6 to 13 consistently predicts later violence among males. Many researchers have noted the continuity in antisocial behavior from early aggression to violent crime” (Loeber, 1990, 1996; Loeber and Hay, 1996; Olweus, 1979).

**Early signs of violent behavior.** “Research has shown that early onset of violence and delinquency is associated with more serious and chronic violence” (Farrington, 1991; Piper, 1985; Thornberry, Huizinga, and Loeber, 1995; Tolan and Thomas, 1995).

**Involvement in antisocial behavior.** “Involvement in antisocial behaviors, including stealing and destruction of property (Mitchell and Rosa, 1979); self-reported delinquency, smoking, and early sexual intercourse (Farrington, 1989); and drug selling (Maguin et al., 1995), is associated with a greater risk of violence among males.”

**Beliefs and attitudes favorable to deviant or antisocial behavior.** “Dishonesty, antisocial beliefs and attitudes, attitudes favorable to violence, and hostility toward police have been found to predict later violence among males. Relationships between these predictors and violence are less consistent for females” (Williams, 1994).

### **Peer-Related Factors**

**Delinquent brothers and sisters.** Farrington (1989) found that “having delinquent siblings by age 10 predicted later convictions for violence”. Maguin and colleagues (1995) found that “the association between having delinquent siblings and being convicted for violence was stronger when sibling delinquency occurred closer in time to the violent youth's offense and later in that youth's development, indicating that antisocial siblings have a stronger negative influence during their sibling's adolescence than earlier in the child's development” (Maguin, 1995).

**Delinquent peers.** “Delinquent peers also may have a greater influence on later violence during an individual's adolescence than they do earlier in development” (Moffitt, 1993).

## THERAPEUTIC FOSTER CARE TREATMENT PROGRAMS

### **Therapeutic Foster Care Home**

This section will describe several Therapeutic Foster Care Treatment Centers and the services that they offer to adolescents. These Centers are offered all across the United States. These particular programs are apart of Providence Service Corporation and provides an array of services to families everywhere. “Our Therapeutic Foster Home (TFH) Program is offered as a treatment option for severely troubled children who have been referred for out-of-home placement or who are in need of a "step-down" from a more intensive level of care. The goal of the Therapeutic Foster Home Program is to teach troubled children how to be successful in a family and community in order to facilitate the child's return to a more permanent placement” (Human Services, n.d.). “Our TFH program combines intensive in-home therapeutic services with a placement in a specially licensed and trained family that is dedicated to: Providing a nurturing, caring, and safe home atmosphere , understanding the child's developmental needs, providing parental interventions that will enable the child to overcome his/her developmental delays”( Human Services, n.d.). “Prior to joining their TFH team, prospective foster families are thoroughly screened and trained in accordance with all state and federal requirements and according to Providence's own stringent standards. This extensive training provides TFH parents with skills to work effectively with children placed in their home. Ongoing support is gained



through intensive case management and home-based counseling provided” (Human Services, n.d.). “These children are referred to our TFH program by the state's Department of Children and Families. These children may be in the foster care system or they may be in the custody of their parents. Some children will be reunited with their families after their course of treatment, while others will go on to be adopted or become involved in an independent living program. The typical length of stay for a child who has a discharge resource is 12 to 18 months. However, if a child has been severely abused, the length of stay is generally 24 to 30 months. And since the children who enter our TFH program have experienced much loss and disappointment in their lives, we ask that families make a commitment to a child for the length of the child's stay in the program” (Human Services, n.d.).

### **Therapeutic Foster Care**

This is another Therapeutic Foster Care Home and the researcher will focus on its services that they have to offer adolescents. “The Therapeutic Foster Care Program (TFCP) represents an alternative for children between the ages of three and 12 who might otherwise be placed in more restrictive settings such as institutional or residential treatment centers. These children are maintained in the community in supervised family settings with "parents" who have been

specifically trained to manage their problem behaviors” (Child and Family, n.d.).

“Therapeutic Foster Care children are children with severe social, emotional and behavioral problems” (Child and Family, n.d.). “These children are served in supervised home settings in the Therapeutic Foster Care Program (TFCP), a unit of Child & Family Services' Children's Services Department. All of the children have been placed by the court in the custody of the Erie County Department of Social Services (ECDSS) due to parental abuse or neglect” (Child and Family, n.d.). “Children in the TFCP reside with "professional parents" for a specific period of time. Individualized treatment plans, designed to teach alternative, healthy behavior and appropriate social skills, are implemented while the child is living in the TFCP home” (Child and Family, n.d.). “This program uses a treatment team approach in which the professional parents work closely with a family specialist, parent trainer, program supervisor and consulting psychiatrist” (Child and Family, n.d.) “In order to encourage healthy behaviors in children, the TFCP uses concrete behavior management and positive teaching skills. These families are provided with a stipend for helping out these families. Not everyone can become a successful professional parent. A mutual decision-making process will determine whether professional parenting is right for you and your family” (Child and Family, n.d.).

## **HANDY, Inc. A Therapeutic Environment**

Handy, Inc. is a local Therapeutic Environment located in Fort Lauderdale, FL. It serves over 100 youth on a daily basis. I have the extreme pleasure of working with the youth of Handy, Inc. everyday. "Handy is a non profit organization founded in 1985 to meet the needs of Broward County's Foster Care Children. In recent years, in an effort to keep children in extended families, children were being placed in the care of relative care givers under protective supervision" (HANDY, Inc., n.d.). "Handy, Inc. extended its services and programs to include not only foster care children, delinquent youths, but also abused, neglected, and abandoned children" (HANDY, Inc., n.d.) These youth are court ordered to participate in the programs that are offered at HANDY, Inc. The facts regarding abused, delinquent, abandoned children in Broward County are disturbing. "Ranked number 2 in the state, Broward County receives almost 10,000 calls a year on the Broward County Abuse Hotline. More than 3,600 children are currently under court supervision in Broward County. Nearly 1,800 of these children live in foster homes or shelters. Approximately 40% will never return to their parents. Almost 90% of inmates in America's prison system were neglected or abused children" (HANDY, Inc., n.d.). "HANDY, Inc. Life Program is for youth ages 12-22, who are living with relative and non relative care givers under protective custody and those foster care youth who do not qualify for services through other agencies" (HANDY, Inc., n.d.). They also service youth

through an Independent Living Program. They provide an array of services: Life skills and social development training, daily living tasks, work and study skills, money management skills, housing and community resources, monthly bus passes, field trip experiences, summer camps, and weekly tutoring. They also offer emergency financial assistance to the youth in their subsidized housing apartments.

## RESEARCH METHODS

### DESIGN

“Researchers use different terminologies to denote interviews” (Hagan, 2006).

The researcher for this thesis conducted depth interviews of adolescents in a local Therapeutic Foster Care Program in Broward County. Depth interviews are more intensive and detailed. The researcher based this thesis on the research of past researchers. It involved numerous of studies on the effectiveness of Therapeutic Foster Care Programs. Research indicates that these Therapeutic Foster Care Programs are effective in reducing violence in adolescents with a history of delinquency. The researcher identified several studies and will include those studies in this thesis paper believing that they are accurate and proving to be a reliable source of information.

## SAMPLES

The Researcher provided samples of the in-dept interviews that were conducted by the youth in the HANDY, Inc. Life and Transitional Program.

1. Do you consider yourself to be a delinquent adolescent? yes
2. Are you in a Therapeutic Foster Care Treatment Program? yes
3. Have you ever been arrested? yes
4. Are you aware of any programs that help youth? yes
5. Have your mom or dad ever been arrested? yes
6. Do you feel like Therapeutic Foster Care Programs really help youth? yes
7. How has this program helped you? It helped me stop doing crime.
8. How long have you been in Foster Care? 5 years
9. What is the most violent act you've committed? Battery on another person
10. What is therapy? Talking
11. How old are you? 15
12. Are you a male or female? male
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? No
15. Should more programs be established to help youth? Yes

1. Do you consider yourself to be a delinquent adolescent? No
2. Are you in a Therapeutic Foster Care Treatment Program? Yes
3. Have you ever been arrested? Yes
4. Are you aware of any programs that help youth? Yes
5. Have your mom or dad ever been arrested? Yes
6. Do you feel like Therapeutic Foster Care Programs really help youth? Yes
7. How has this program helped you? A lot
8. How long have you been in Foster Care? 7 years
9. What is the most violent act you've committed? Grand theft/robbery
10. What is therapy? I don't know
11. How old are you? 17
12. Are you a male or female? male
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? no
15. Should more programs be established to help youth? Yes

1. Do you consider yourself to be a delinquent adolescent? No
2. Are you in a Therapeutic Foster Care Treatment Program? yes
3. Have you ever been arrested? No
4. Are you aware of any programs that help youth? Yes
5. Have your mom or dad ever been arrested? No
6. Do you feel like Therapeutic Foster Care Programs really help youth? Yes
7. How has this program helped you? I don't know.
8. How long have you been in Foster Care? 10 years
9. What is the most violent act you've committed? Beat up someone
10. What is therapy? When you go get counseling.
11. How old are you? 16
12. Are you a male or female? female
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? yes
15. Should more programs be established to help youth? yes



1. Do you consider yourself to be a delinquent adolescent? No
2. Are you in a Therapeutic Foster Care Treatment Program? Yes
3. Have you ever been arrested? No
4. Are you aware of any programs that help youth? yes
5. Have your mom or dad ever been arrested? Yes, my daddy
6. Do you feel like Therapeutic Foster Care Programs really help youth? yes
7. How has this program helped you? Gain independence and self worth.
8. How long have you been in Foster Care? 9 years
9. What is the most violent act you've committed? Stealing out of a person's purse.
10. What is therapy? When two people talk about something in a clinical setting.
11. How old are you? 19
12. Are you a male or female? Male
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? No
15. Should more programs be established to help youth? Yes

1. Do you consider yourself to be a delinquent adolescent? Yes
2. Are you in a Therapeutic Foster Care Treatment Program? yes
3. Have you ever been arrested? yes
4. Are you aware of any programs that help youth? yes
5. Have your mom or dad ever been arrested? yes
6. Do you feel like Therapeutic Foster Care Programs really help youth? yes
7. How has this program helped youth? Get jobs, GED, rent payment
8. How long have you been in Foster Care? 5 years
9. What is the most violent act you've committed? robbery
10. What is therapy? Seeking help
11. How old are you? 17
12. Are you a male or female? female
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? Yes
15. Should more programs be established to help youth? yes

1. Do you consider yourself to be a delinquent adolescent? No
2. Are you in a Therapeutic Foster Care Treatment Program? Yes
3. Have you ever been arrested? No
4. Are you aware of any programs that help youth? Yes
5. Have your mom or dad ever been arrested? No
6. Do you feel like Therapeutic Foster Care Programs really help youth? Yes
7. How has this program helped youth? Establish their self
8. How long have you been in Foster Care? 12 years
9. What is the most violent act you've committed? none
10. What is therapy? counseling
11. How old are you? 15
12. Are you a male or female? male
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? Don't know my parents
15. Should more programs be established to help youth? yes

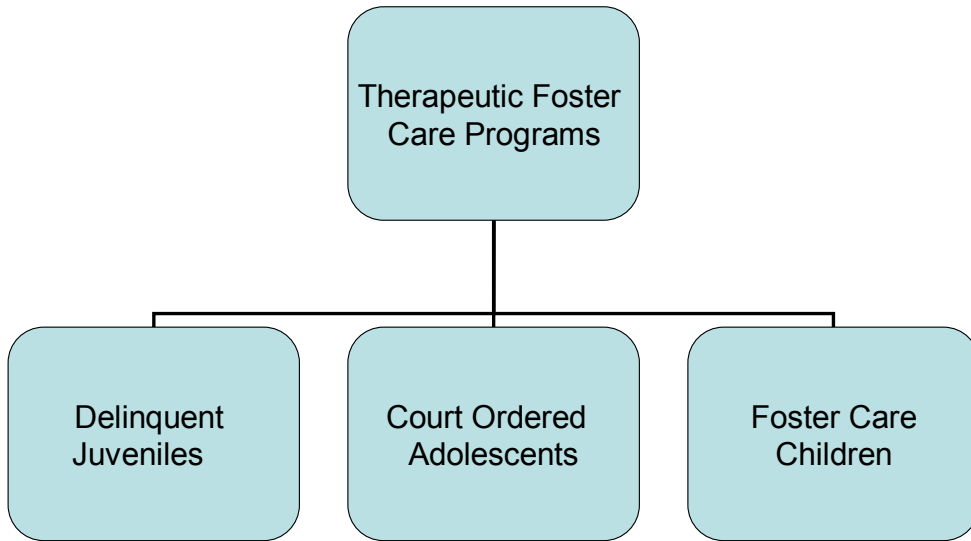
1. Do you consider yourself to be a delinquent adolescent? yes
2. Are you in a Therapeutic Foster Care Treatment Program? yes
3. Have you ever been arrested? yes
4. Are you aware of any programs that help youth? yes
5. Have your mom or dad ever been arrested? yes
6. Do you feel like Therapeutic Foster Care Programs really help youth? no
7. How has this program helped youth? It hasn't
8. How long have you been in Foster Care? I can't remember, about 4 years
9. What is the most violent act you've committed? Violation of probation
10. What is therapy? Therapy is talking out your problems
11. How old are you? 17
12. Are you a male or female? male
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? No
15. Should more programs be established to help youth? No

1. Do you consider yourself to be a delinquent adolescent? No
2. Are you in a Therapeutic Foster Care Treatment Program? Yes
3. Have you ever been arrested? no
4. Are you aware of any programs that help youth? yes
5. Have your mom or dad ever been arrested? no
6. Do you feel like Therapeutic Foster Care Programs really help youth? no
7. How has this program helped youth? Buy me clothes
8. How long have you been in Foster Care? 3 years
9. What is the most violent act you've committed? none
10. What is therapy? Talking to people
11. How old are you? 16
12. Are you a male or female? female
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? no
15. Should more programs be established to help youth? yes

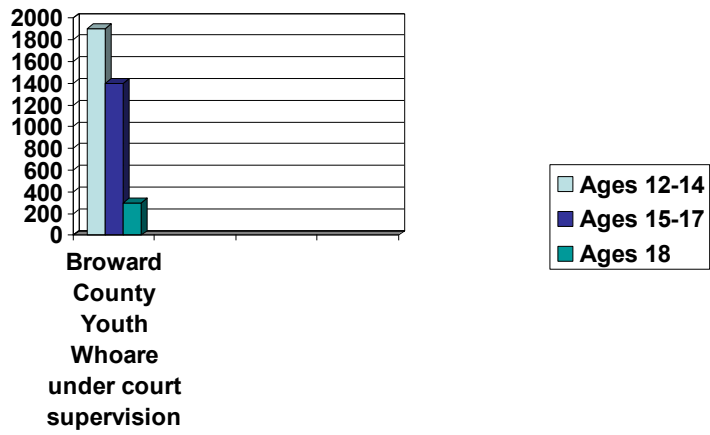
1. Do you consider yourself to be a delinquent adolescent? yes
2. Are you in a Therapeutic Foster Care Treatment Program? yes
3. Have you ever been arrested? yes
4. Are you aware of any programs that help youth? yes
5. Have your mom or dad ever been arrested? yes
6. Do you feel like Therapeutic Foster Care Programs really help youth? yes
7. How has this program helped youth? Build my self esteem
8. How long have you been in Foster Care? 6 years
9. What is the most violent act you've committed? none
10. What is therapy? Don't know
11. How old are you? 17
12. Are you a male or female? male
13. What is the name of your program? HANDY, Inc.
14. Are your parent's married? no
15. Should more programs be established to help youth? yes

TABLES AND GRAPHS

What TFC programs are comprised of:



# Broward County's Foster Care Youth





## Table

TABLE. Selected objectives related to therapeutic foster care programs — Healthy People 2010

Objective	Population	Rate	
		Baseline*	2010 target
<b>Injury prevention</b>			
Reduce nonfatal firearm-related injuries (15-5)	All ages	24.0 <sup>†</sup> (1997)	8.6 <sup>†</sup>
Reduce firearm-related deaths (15-3)	All ages	11.3 <sup>†</sup> (1998)	4.1 <sup>†</sup>
Reduce hospital emergency department visits (15-12)	All ages	131 <sup>§</sup> (1997)	126 <sup>§</sup>
Reduce hospitalization for nonfatal head injuries (15-1)	All ages	60.6 <sup>†</sup> (1998)	45.0 <sup>†</sup>
Reduce hospitalization for nonfatal spinal cord injuries (15-2)	All ages	4.5 <sup>†</sup> (1998)	2.4 <sup>†</sup>
<b>Violence and abuse prevention</b>			
Reduce physical assaults (15-37)	Persons aged $\geq 12$ years	31.1 <sup>§</sup> (1998)	13.6 <sup>§</sup>
Reduce physical fighting (15-38)	Persons aged 12–18 years	36% <sup>¶</sup> (1999)	32%
Reduce homicides (15-32)	All ages	6.5 <sup>†</sup> (1997)	3.0 <sup>†</sup>
Reduce maltreatment (15-33a)	Persons aged <18 years	12.9 <sup>§</sup> (1998)	10.3 <sup>§</sup>
Reduce child maltreatment fatalities (15-33b)	Persons aged <18 years	1.6 <sup>†</sup> (1998)	1.4 <sup>†</sup>
Reduce physical assault by current or former intimate partners (15-34)	Persons aged $\geq 12$ years	4.4 <sup>§</sup> (1998)	3.3 <sup>§</sup>
Reduce rape or attempted rape (15-35)	Persons aged $\geq 12$ years	0.8 <sup>§</sup> (1998)	0.7 <sup>§</sup>
Reduce sexual assault other than rape (15-36)	Persons aged $\geq 12$ years	0.6 <sup>§</sup> (1998)	0.4 <sup>§</sup>

Source: US Department of Health and Human Services. Healthy People 2010. 2<sup>nd</sup> ed. Washington, DC: US Government Printing Office, 2000.

\* Years indicate when data were analyzed to establish baseline estimates. Certain estimates were age-adjusted to the year 2000 standard population.

<sup>†</sup> Per 100,000 population.

<sup>§</sup> Per 1,000 population

<sup>¶</sup> Percentage of students in grades 9–12 who reported fighting during the previous 12 months.

Interview Results from the adolescents at Handy, INC.

65% reported being delinquent  
 20% reported being arrested  
 5% reported committing a violent act  
 3% reported non-married parents  
 2% reported that the programs don't help  
 5% reported they know of programs that help youth

## FINDINGS AND RESULTS

Three studies were conducted by an Independent Research Group out of the United States. They assessed the effects of Therapeutic Foster Care Programs on Juveniles in reducing violence with a history of delinquency. One study looked at the incarceration rates before and after treatment among juveniles ages 12-18 that were relocated from an institution to Foster Care. This study reported a decrease in the number of juveniles incarcerated after being in the program a year, "the effect declined 57% with in a year" (Hahn, 2001). Another study looked at the arrest of violent crimes before and after intervention from the programs in comparison to the year before. "The number of juveniles arrested for violent crimes after a year of intervention decreased 74% for Boys and 69% for girls" (Hahn, 2001). A third study examined the effects of Therapeutic Foster Care Programs on self reported felony assaults among adolescent males ages 12-17. When the data was collected and analyzed, they found out, "that 73% fewer felony assaults were committed after the interventions" (Hahn, 2001). The evidence that has been reviewed in these studies indicates that these Therapeutic Foster Care Programs are beneficial for the reduction of violence in Juveniles with a history of delinquency.

## THESIS ANSWERS

1. What is considered a violent crime? Any Crime that causes physical harm to an individual.
2. What are Therapeutic Foster Care Programs? Programs that are designed to help adolescents reduce the number of violent criminal acts performed.
3. How can we implement more programs to help youth? We can start by opening programs in every community and offering services to troubled teens.
4. What are some risk factors associated with these youth? These youth were faced with many risk factors; they ranged from low socioeconomic status to simply being raised by no parents.
5. Is there a trend in juvenile violence? There is a trend in Juvenile violence, but it can be stopped through the help of programs.
6. What are some of the causes of juvenile violence? Some juveniles committed crimes for different reasons. Money, peer influence, gang relations, are all examples of why they commit these crimes.
7. What programs are not effective when treating adolescents? Several programs are effective. Most of these Therapeutic Foster Care Treatment Programs were effective according to the research completed.

## RECOMMENDATIONS

Violence caused by juveniles is a very serious problem in today's society. The term Therapeutic Foster Care represents a system of care that is provided by foster care families to youth with a history of delinquency. "Therapeutic Foster Care is also known by other names as well. Therapy Foster care, Multidimensional Treatment Foster Care, Specialist Foster Care Treatment-Foster Family Care, and Parent Therapist Programs are to name a few." (Thacker, 2004). As an alternative to incarceration, hospitalization, and institutionalization, these programs are offered to these adolescents who are dealing with chronic anti-social behavior, delinquency, or emotional disturbance. The researcher recommends that further research should be done on the effectiveness of these Therapeutic Programs. There is a greater need for more programs to be established. It is necessary to conduct seminars and trainings to train more families to become foster families to effectively provide for these adolescents. These programs have been proven to be cost effective, so this shouldn't be an issue. The Government may have to up some more money to develop more programs to help put an end to this horrible trend of juvenile violence. We as citizens should provide more positive role models in communities where juvenile violence has risen and gotten out of control. If we don't do anything about this, then who would hold the key to our future?

## CONCLUSION

This thesis paper focused on the effectiveness of Therapeutic Foster Care Treatment Programs on Juveniles with a history of delinquency. There has been significant positive affects for the prevention of violence among these adolescents with a history of delinquency. The effects were made possible through a collaboration of Therapeutic Foster Care Programs, Therapists, Staff members, Parents, adolescents, and Counselors. In these Therapeutic Foster Care Treatment Programs, these youth were provided with several intervention methods to get them to change certain behaviors, and as a result of their participation in such programs, juvenile violence rates were decreased. These interventions were found to be very effective. This research paper and the other research projects, should serve as a powerful tool for policymakers, program implementers, and researchers in providing direction to want to do more to help these delinquent adolescents to become productive citizens in the future.

## REFERENCES

American Psychiatric Association. Diagnostic and statistical manual of mental disorders (DSM-IV). Washington, DC: American Psychiatric Association, 1994.

Carande-Kulis VG, Maciosek MV, Briss PA, et al. Methods for systematic reviews of economic evaluations for the Guide to Community Preventive Services. *Am J Prev Med* 2000;18(Suppl 1):75--91.

CDC. First reports evaluating the effectiveness of strategies for preventing violence: early childhood home visitation and firearm laws. Findings from the Task Force on Community Preventive Services. *MMWR* 2003;52(rr-14):1-20.

Chamberlain P, Reid JB. Differences in risk factors and adjustment for male and female delinquents in treatment foster care. *J Child Fam Stud* 1994;3:23--39.

Chamberlain P, Reid JB. Comparison of two community alternatives to incarceration for chronic juvenile offenders. *J Consult Clin Psychol* 1998;66:624--33.

Cocozza, Joseph J. Responding to the Mental Health Needs of Youth in the Juvenile Justice System. The National Coalition for the mentally ill in the Criminal Justice System, 1992.

Combating Violence and Delinquency: The National Juvenile Justice Action Plan. U.S. Department of Justice, 1996.

Dunford FW, Elliot DS. Identifying career offenders using self reported data, 1984.

Effective Psychiatric Work in Juvenile Justice. Juvenile Justice Committee workshop at The American Psychiatric Association, 1998.

Elliott, Delbert S. Guns set off Volatile mix of Problems. *Denver Post*, June 21, 1998.

Elliott, Delbert S. Prevention Programs that Work for Youth: Violence Prevention. Center for the Study and Prevention of Violence, 1998. (The Nurse Home Visitation Program-Dr. David Olds, The Bullying Prevention Program-Dr. Dan Olweus, Promoting Alternative Thinking Strategies (PATHS)-Dr. Mark Greenburg, Big Brothers Big sisters Mentoring Program-Ms. Dagmar McGill, Life

Skills Training-Dr. Gil Botvin, Midwestern Prevention Project-Dr. Mary Ann Pentz, Quantum Opportunities-Mr. Ben Lattimore, Multisystemic Therapy (MST)-Dr. Scott Henggeler, Functional Family Therapy (FFT)-Dr. James Alexander, Multidimensional Treatment Foster Care-Dr. Patricia Chamberlai

Elliott, Delbert S. Serious Violent Offenders: Onset, Developmental Course and Termination, *The American Society of Criminology 1993 Presidential Address*. *Crim*, 32:1, 1994.

Elliott, Delbert S. Youth Violence: an Overview. *The Center for the Study and Prevention of Violence*, March 1994

Hann DM, Borek N, eds. Taking stock of risk factors for child/youth externalizing behavior problems. Bethesda, MD: US Department of Health and Human Services, Public Health Service, National Institutes of Health, National Institute of Mental Health, 2001.

Hudson, J, Nutter R.W., Galaxay B. Treatment Foster family Care: development and current status. *Community Alternatives: International Journal of Family Care* 1994;6:1-24.

Juvenile Justice. *The American Psychiatric Association Annual Meeting*, 1998.

Juvenile Sexual Aggression. *Center for the Study and Prevention of Violence*.

OJJDP Juvenile Offenders and Victims: 1997 Update on Violence. *National Center for Juvenile Justice*, 1997.

Osofsky, Joy D. *Children in a Violent Society*. New York: Guilford Press, 1997.

Pastore AL, Maguire, K, eds. *Sourcebook of Criminal Justice statistics 2001*. Washington, DC: US Department of Justice, Office of Justice Programs, Bureau of Justice statistics, 2002.

Prothrow-Smith, Debra. Violence Prevention: a Public Health Mandate to Save our Children. *The American Psychiatric Association Annual Meeting*, 1998.

Snyder HN. Juvenile arrests 2001. Washington DC: US Department of Justice, Office of Justice Programs, *Juvenile Justice Bulletin*, December 1998.

US Department of Health and Human Services. *Healthy People 2010*. 2<sup>nd</sup> ed. With understanding and improving health and objectives for improving health (2 vols.). Washington, DC: US Department of Health and Human Services, 2000.

Zaza S, Wright-de Agüero L, Briss PA, et al. Data collection instrument and procedure for systematic reviews in the Guide to Community Preventive Services. Am J Prev Med 2000;18(Suppl 1):44--74.

Articles were retrieved from these different websites with no other information available:

[www.mesotheloma-settlement-information.org](http://www.mesotheloma-settlement-information.org)

[www.en.wikipedia.org](http://www.en.wikipedia.org)

[www.handy,inc.com](http://www.handy,inc.com)