

### DID YOU know...?

From 2019-2020 Boys Town Youth Care had **57** publications and presented or co-presented **24** papers, posters, and symposia at conferences

Boys Town 2019-2020 Youth Care publications appeared in **37** journals and **10** books; presentations were given at **16** conferences

### RESEARCH notes

The TRC conducts research to support Boys Town staff in the development, implementation, and evaluation of **trauma-informed services**.

Recent efforts have included: 1) the design and use of a trauma symptom screening instrument; 2) evaluating how youth with trauma symptoms respond to Boys Town services; and 3) identifying strategies that help youth who have experienced trauma.

This research is translated into practice so that Boys Town staff can provide the most effective services. For more information on this research, please visit: [www.boystownhospital.org/research/translational-research/publications](http://www.boystownhospital.org/research/translational-research/publications)

## Translational Research Center Annual Report

IN 2018, THE NATIONAL RESEARCH Institute at Boys Town changed its name to the Child and Family Translational Research Center (TRC). The transformation to the TRC was guided by a Steering Committee made up of program experts from different Boys Town departments who helped us enhance our research focus and process. This change was intended to highlight how Boys Town is uniquely positioned to conduct youth care research within a service agency and transfer information from practice to research and back to practice in a timely manner. The purpose of the TRC is to 1) conduct and disseminate applied research and provide clinical data support and 2) advance knowledge and practice in child and family science. The significant role of the TRC is to be a scientific witness to the inspirational “Work” Fr. Flanagan started that is being carried out today by our Boys Town staff with youth and families.

To enhance the way the TRC provides research support to Youth Care programs and staff, we created a translational research framework, called **DO BETTER** (Determine the Problem, Ongoing data collection, Build a team, Explore solutions, Try it out, Test the program, Execute implementation, and Reach more youth and families). DO BETTER starts with practice, that is, the sharing

of ideas from staff, youth, and families based on needs and opportunities they have related to services. Research activities that surround practice are then used to address the needs and opportunities through practitioner-researcher partnerships. Finally, the results of research are translated back so that they are understandable and can be used to improve services. Thus, the research process starts, proceeds, and ends with the primary consumers of the research: those who are closest to practice (staff, youth, families).

Over the last couple of years,

*“The Work will continue, you see, whether I am there or not, because it is God’s work...”*

*~ Fr. Flanagan*

staff have provided several great research questions to put the DO BETTER framework to use. The miraculous efforts by Boys Town staff who continue to provide high quality services during COVID-19 highlight just a few examples. For instance, staff wanted to know how the youth in the Family Home Programs were handling social distancing. So, we surveyed the youth and found that (like most of us) youth reported higher levels of anxiety and stress due to social distancing. However, youth also reported feeling safe, and had high rates of adaptive coping skills (e.g., prayer), hopefulness, and confidence about their futures thanks to the support and modeling of their family-teachers, school teachers, coaches, clergy, etc.

“synchronous online” CSP to parents while they were in their own homes. The TRC was then asked to evaluate the classes to assure the same quality outcomes were being achieved by the online CSP classes. We were proud to report that parents were making the same positive gains in parenting practices in the online classes as they typically make in the traditional, face-to-face classes. These are just a couple of examples of how the TRC has been able to be a scientific witness to the “Work”.

As you read on, this annual update will provide information on other exciting research projects that are currently underway. If something “sparks” your interest, we hope you will share your “burning” research questions with us so we can continue to DO BETTER!



by **Patrick Tyler**  
Senior Director  
Translational Research Center

## Determine the Problem

*Identify program needs based on views from practitioners and consumers using surveys, focus groups, and interviews.*

**Study 1:** Prior research has shown that there are significant reductions in psychotropic medications for children during their stay in the Residential Treatment Center (RTC), a program designed to offer medically directed care for more seriously troubled youth who require supervision, safety, and therapy but do not require inpatient psychiatric care. This research examines factors that predict these reductions using a more nuanced measure of medication use than has been used in the past.

**Study 2:** Two prior research findings are the basis for this research. First, RTC youth experience significant

reductions in psychotropic medications during their stay in the RTC. Second, youth with weight challenges experience significant reductions in weight. This research examines the impact of psychotropic medication reductions on weight loss controlling for program factors.

For both studies, primary investigators: Jon Huefner (Research Scientist), research initiated by Doug Spellman (Medical Director).

## Ongoing Data Collection

*Create systems for ongoing data collection so program quality improvement is done routinely and efficiently.*

The TRC helps coordinate youth intake assessments (e.g., behavioral and emotional problems, substance use issues, and trauma exposure) and outcome assessments (e.g., strengths and difficulties) for the Residential Treatment Center and the Family

Home Program. The Family Home Program serves youth with serious behavioral or emotional problems in a family-style home where youth receive teaching and care from professionally trained married couples called Family-Teachers. The intake assessments are used to help guide treatment during care and the outcomes assessments describe progress at discharge from care.

Project leads: Beth Chmelka (Director of Data Support), Maciej Novak (Youth Orientation Coordinator).

## Build a Team

*Identify practitioners, consumers, and researchers who can collaborate to help solve the problem.*

**Study 1:** This pilot study will evaluate effects of Common Sense Parenting (CSP) training on parental and youth executive function. Common Sense Parenting (CSP) is a 6-session group workshop-based parent training program for parents of children ages 6-16. We hypothesize that CSP reduces child behavior problems by improving executive function in parents and children, which in turn contributes to decreases in child behavior problems. This research study will be recruiting parents from the participants enrolled into online CSP classes at Boys Town sites in Nebraska, Nevada, and South Florida.

Primary Investigator: Irina Patwardhan (Research Scientist), Anastasia Kerr-German (Research Scientist), Bridget Barnes (Director of CSP, Nebraska).

**Study 2:** Deficits in executive control (EC), a set of

cognitive abilities for directing attention and behavior, have been proposed as important and modifiable contributors to adolescent problem behaviors, including substance use as well as co-occurring externalizing and internalizing problems. This project addresses these issues by extending an ongoing study of young children and their parents followed during preschool and the elementary school years by collecting new data at ages 14, 15, 16, 17, and 18. The long-term goal is to guide the development and refinement of substance use preventive interventions that target EC as a modifiable risk factor at critical points in development.

Primary Investigators: Alex Mason (University of Tennessee), Timothy Nelson (University of Nebraska-Lincoln), and Irina Patwardhan (Research Scientist).

## Explore Solutions

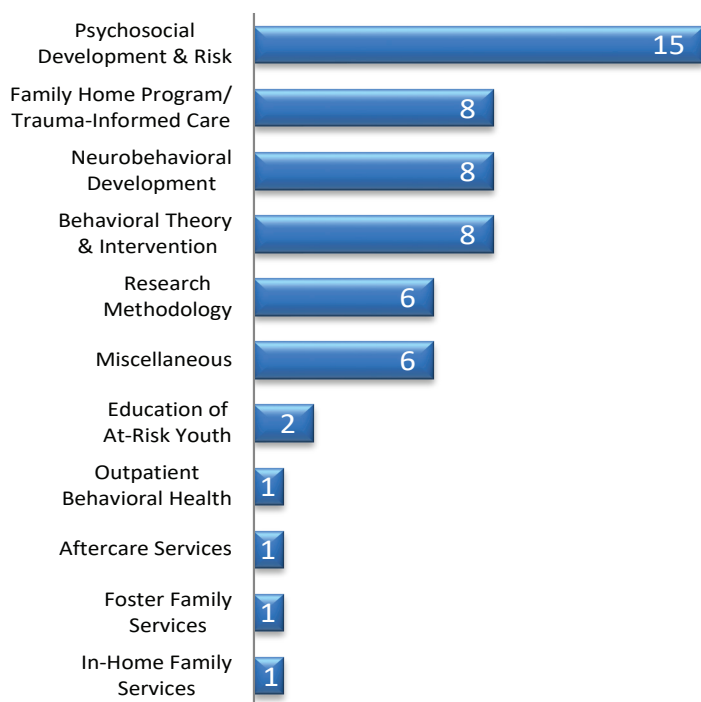
*Get different perspectives on the problem and potential solutions from the practitioners and consumers and merge this information with expert opinions and theories.*

**Study 1:** The purpose of this project is to design and implement an ongoing after-care survey for Family Home Program youth. Information from the follow-up survey will be used for program development and advocacy purposes.

Project manager: Jon Huefner (Research Scientist); project oversight by Tony Jones (Vice President, Successful Futures).

**Study 2:** The TRC is assisting Boys Town's Successful Futures program in determining the supports graduating

2019-2020 Publications by Category (n=57)



seniors need as they transition from the Family Home Program to adulthood. The project is focused on developing a model to determine the additional supports needed by each senior in one or more of three areas (i.e., Independent Life Skills, External Social Support, and Personal Motivation) and facilitate the development of an individualized aftercare plan.

Project managers: Chanelle Gordon (Research Scientist), Patrick Tyler (Sr Director of TRC), Tony Jones (Vice President, Successful Futures).

### Try it Out

*Design and pilot the program and make adaptations based on practitioner and consumer feedback.*

**Study 1:** This study compared attendance, class completion, and changes in parenting practices of 190 parents who received an online adaptation of Common

Sense Parenting (CSP) during COVID-19 to 383 parents who received traditional, face-to-face CSP prior to COVID-19. Participants in online classes had significantly higher rates of attendance and class completion and reported increases in parenting practices from pretest to posttest. This study demonstrated that an online adaptation of CSP was a beneficial alternative to face-to-face CSP for parents during COVID-19.

Primary investigator: Patrick Tyler (Sr Director of TRC); Contributors: Bridget Barnes (Director of CSP); Jasney Cogua (Director of Community Initiative).

**Study 2:** LIFT Together with Boys Town is a community service array that includes parenting education, family consultations, and school intervention. Currently, LIFT Together with Boys Town is being implemented in Nebraska, Nevada, and Rhode Island.

This study is examining the role of the LIFT School Support Specialists as they work with students, staff, and families to ensure wrap-around support and consistency for at-risk students. Given that this program is still in its infancy, we are in the process of using program data to define the specialist's daily activities (e.g., individual time with students, parent contacts, small group activities). The next step will be to connect program activities to outcomes (e.g., grades, attendance). Preliminary outcome data from a small sample in Nebraska suggest that this program is making a positive impact on students.

Project leads: Jay Ringle (Research Supervisor), Regina Costello (Director of Community Support Services – Nebraska), Jessica Sasso (Sr Director of Program Operations – Nevada), Eli Escrogin (Sr Director of Program Operations – Rhode Island).

### Test the Program

*Conduct a rigorous evaluation of the program using randomized controlled trials or high quality quasi-experimental designs to determine program effectiveness with practitioners and consumers in real-world settings.*

**Study 1:** The TRC partnered with Iowa State University to conduct a randomized controlled trial of the Well-Managed Schools (WMS) program. WMS is a universal classroom management program designed to help teachers build positive relationships, teach and reinforce school success skills, and respond to inappropriate behavior in their interactions with students. In this study, teachers of students in grades 1-5 in school districts across the USA are being recruited and randomly assigned to either a WMS program condition or a no-intervention (usual classroom

## 2019-2020 Conference Presentations (n=24)



practices) control condition. Both teachers and students are completing assessments on classroom climate, teaching skills, and student behavior and performance. The first group of teachers has been recruited, half of whom have received WMS training. Additional recruitment will occur in subsequent years to reach the targeted total sample size. If results from the trial are positive, then WMS could be designated as an evidence-based program with the potential for expanded dissemination.

Primary Investigators: Tricia Nepl (Iowa State University), Alex Mason (University of Tennessee), and Patrick Tyler (Sr Director of TRC).

**Study 2:** In 2019, Boys Town and research partners from the University of Nebraska-Lincoln (UNL) published the results of a randomized controlled trial of Boys Town's In-Home Family Services (IHFS). To further meet research requirements under the Family First Prevention Services Act, the TRC is currently working to extend the research of IHFS through continued collaboration with UNL and the State of Florida. Existing data from the state of Florida will be used to determine the effectiveness of IHFS working with families who are at-risk of having their children removed from their homes due to safety concerns. The study will determine how IHFS, provided by three different Boys Town sites in Florida, does at keeping children safely in their homes compared to similar services in the state.

Project leads: Kristin Duppong-Hurley (University of Nebraska-Lincoln), Patrick Tyler (Sr Director of TRC).

## **Execute Implementation**

*Provide training, consultation, and data systems to practitioners so they can deliver the manualized program to consumers and the program can be evaluated based on fidelity and expected outcomes.*

**Project 1:** Boys Town has trained other agencies to use our In-Home Family Services (IHFS) model to help more children and families. We developed a system for these agencies to enter their consultant activity data to monitor IHFS intervention implementation, dosage, and outcomes. Agencies export data monthly to a secured SharePoint site where Boys Town trainers can review agency data to provide implementation feedback for the family consultants. Helping external agencies implement high quality services helps ensure families receive excellent care and achieve the best outcomes possible.

Collaboration: Patrick Tyler (Sr Director of TRC), Rob Oats (Sr Research Analyst), Jen Bell (Program Replication Manager), Lisa Batenhorst (Executive Director – Nebraska).

**Project 2:** To supplement our administrative database, an auxiliary database was created to track consultant activities with children and families using Boys Town's On the Way Home aftercare services. This database is currently being used by approximately 20 users, representing 211 youth and 89 families. Further, it houses supervisory reports which are used to monitor consultant activities and fidelity.

Collaboration: Jay Ringle (Research Supervisor), Scott Mitchell (Director of Program Quality); Iowa site: Pat Garcia

(Executive Director), Christopher Jackson (Sr Director Program Operations), Gina Bullard (Director of IHFS Program); Crystal Sumners (Director of IHFS Program, Nebraska), Jennifer Mitchell (Program Quality Manager, Washington, D.C.).

## **Reach More Youth and Families**

*Disseminate program information to promote scale-up and sustainability of the program so practitioners can help more youth and families in different locations and agencies.*

**Project 1:** The TRC publishes an annual Applied Research Bibliography summarizing Boys Town youth care publications to-date. The most recent version contains 547 citations and is categorized according to the major types of youth care service programs offered by Boys Town.

Project lead: Rob Oats (Sr Research Analyst).

**Project 2:** The TRC created #FactualFridays posts to disseminate frequent, concise, and vetted Boys Town youth care program and services research findings across social media platforms such as Facebook, Twitter, and Instagram. These findings primarily come from articles the TRC has published in peer-reviewed, scientific journals and occasionally come from technical reports compiled using the Boys Town National Database or follow-up survey data of former youth collected by the National Data Management Systems department and the TRC Clinical Data Support department.

Project leads: Patrick Tyler (Sr Director of TRC), Rob Oats (Sr Research Analyst).

## ABOUT THE **author**

**Patrick Tyler** has over twenty-five years of clinical, administrative, and research experience in residential and community-based treatment services for children and families. He earned his doctorate from the University of Nebraska at Lincoln in Education with an emphasis in emotional and behavioral disorders and is an Independently Licensed Mental Health Practitioner and Licensed Professional Counselor in the state of Nebraska. He began his career in 1995 in Arizona as a clinician and started at Boys Town in Nebraska in 2001. Prior to his research positions, Dr. Tyler served in several clinical roles at Boys Town, including Clinical Director in the Family Home Program and Director of the On the Way Home® aftercare program. His research experience includes both basic and applied research at Boys Town with a specific interest in translating research into practice to improve the design, implementation, and dissemination of effective treatment interventions for children and families.

## DATA NEWS **you can use!**

Is produced by the Translational Research Center. Our purpose is to conduct and disseminate applied research, provide clinical data support, and advance knowledge and practice in child and family services.

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