



IHFS HELPS CAREGIVERS by teaching them how to:

- Praise their children’s good behavior and reduce their problem behavior
- Prevent problem behaviors
- Keep their family calm
- Connect with helpful people and community resources
- Build on their strengths for lasting success

RESULTS FROM IHFS STUDIES have shown:

- Decreases in child behavior problems
- Improvements in school functioning
- Improvements in family functioning and resources
- Improvements in parenting practices, stress and strain
- Intact families at 6- and 12-month follow-ups

BOYS TOWN

IN-HOME FAMILY SERVICES

Boys Town In-Home Family Services® (IHFS) is a family-centered, skill-based intervention that takes Boys Town’s research-proven methods and strategies right into the homes of families to bring about lasting, positive changes.

The main goal of IHFS is to prevent out-of-home placement for children who are at high-risk for involvement in the child welfare system and/or to reunify children with their family if outside placement is necessary.

In any family situation, the top priority is making sure children receive proper care in a safe environment. Family Consultants work directly with family members to identify and build on existing strengths in order to solve problems. They also help to improve parenting skills, identify community resources and personal supports, and give families tools to solve problems on their own after services end.

The length and intensity of IHFS varies, depending on a family’s situation. On average, a Family Consultant may make one or two family visits weekly for a total of two to six hours. The average duration of services is 10 to 20 weeks.

In addition to making scheduled home visits, Family Consultants are available 24/7 to provide support and advice. They are required to have at least a bachelor’s degree in the behavioral sciences- or human services-related field. Some states or contracts require Family Consultants to have a master’s degree.

IHFS CORE PROGRAM COMPONENTS

- **PARENTING SKILLS/LIFE SKILL TEACHING**
Teaching parenting skills that help parents appropriately discipline their children and create a safe, loving home environment.
- **ENGAGEMENT AND BUILDING RELATIONSHIPS**
Providing practical solutions to problems and building solid relationships while supporting families.
- **OBTAINING PERSONAL AND FORMAL SUPPORTS**
Helping families connect with helpful community resources and people (relatives, friends, neighbors, etc.).
- **INDIVIDUAL SERVICE PLANNING**
Assessing families to create customized Service Plans that build on their strengths and promote self-determination.



OUR MISSION

Changing the way America
cares for children and families.

ABOUT THE BOYS TOWN CHILD AND FAMILY TRANSLATIONAL RESEARCH CENTER

The Center conducts and disseminates applied research and provides clinical data support to promote Boys Town's Mission and advance knowledge and practice in child and family science.

Our goals include guiding the development, evaluation and implementation of evidence-based interventions for preventing and reducing social and behavioral problems in children and families, as well as promoting their positive development on a large scale to promote public health.

What is translational research? Embedded within partnerships between researchers and practitioners, translational research draws from and informs practice. It involves multiple research activities, including basic research and the development, evaluation and scale-up of evidence-based interventions, for the benefit of children and families.

Visit us online at boystown.org/trc

CALL FOR MORE INFORMATION

531-355-1255

IHFS EVIDENCE-BASED PRACTICE STATUS

Boys Town In-Home Family Services® is rated as having "Promising Research Evidence" on the *California Evidence-Based Clearinghouse for Child Welfare*. For more information, go to: www.cebc4cw.org/program/boys-town-in-home-family-services/.

IHFS RESEARCH SUMMARY

At Boys Town, we continually measure the effectiveness of our child and family programs to ensure those we serve actually get better. The Boys Town Child and Family Translational Research Center conducts applied research to help understand the nature of problems children and their families face today and identify the most effective ways to help them.

Results from multiple studies of Boys Town IHFS indicate their potential to reduce the risk of out-of-home placement for children and substantially improve long-term child and family success. For more information about IHFS research, go to www.boystown.org/research/publications/Pages/Publications.aspx. Select the Bibliography and click "In-Home Family Services" in the table of contents.

- Two outcome studies have shown that improvements in children's behavior were maintained at both 3- and 12-month follow-ups after services ended.
- In a study that evaluated Florida families referred to Boys Town IHFS for abuse/neglect, families reported significant improvements in child behavior problems and intensity, school and family functioning, and parenting practices and stress, reaching levels of normal or near-normal functioning.
- A large-scale study of Florida families with high-risk youth who were referred by a school-based behavioral health program and enrolled in IHFS indicated significant improvements in child problem behavior and increased school functioning.
- Another study examined families enrolled in IHFS at Boys Town sites in Iowa, Louisiana, Nevada, California and South Florida. At 6-month follow-up, a large majority of families were intact and reported that their needs were met. Most youth were attending school or had graduated. Very few youth had been involved with law enforcement or had used alcohol or illegal substances. A 12-month follow-up study found similar results.
- A recent randomized controlled trial with 300 families (referred by a statewide helpline) of children with emotional and behavioral needs was conducted to examine the effectiveness of Boys Town IHFS. Results showed decreased caregiver strain and child behavior problems and improved parenting practices and family resources at the end of services, and improved parenting practices and decreased child behavior problems at one-year follow-up.