

"3- year Iatrogenic Effects Associated with Aggregating High - Risk Adolescents in Cognitive Behavioral Preventive Interventions," by Francois Poulin, Thomas Dishion and Bert Burraston, Applied Developmental Science, 2001.

Despite the off putting title, this is an interesting and valuable article which takes research on the development of adolescent anti - social behavior and applies it to "prevention science". The authors note that "the central role of deviant peers in the emergence of substance abuse and delinquency in early to middle adolescence" is well established. "Studies of friendship interactions reveal that deviant talk embedded in positive affect defines a process of "deviancy training" which is found to be longitudinally associated with escalations in drug use, serious delinquency and violent behavior..."

These authors report on the findings of a study which compared 3 year delinquency outcomes for 158 youth, age 11 -14, voluntarily enrolled by parents in the Adolescent Transitions Program (ATP). Participating youth and their parents were randomly assigned to one of four conditions: (a) parent only (b) youth only (c) parent and youth (d) self directed change. Most of the families enrolled in this study were low income European American; nevertheless, the families were moderately well educated "with more than 50% of the mothers and 45% of the fathers having some college education."

The ATP curriculum for parents is based on four key family management skills: monitoring, positive reinforcement, limit setting and problem solving. This is a cognitive - behavioral parenting skills based curriculum delivered in a group setting.

The teen focused curriculum seeks to enhance teenagers' regulation of their prosocial and disruptive behavior with both parents and peers. Teenagers are responsible for defining their behavior change goals; 75% chose to improve some aspect of their school performance. "Other goals included abstinence from drug experimentation and improved family relations."

The self directed change group received six newsletters and five brief videotapes; this group of parents and youth did not meet in groups or with therapists.

There was also a quasi - experimental control group which received no intervention.

The most interesting finding in this study is that "One year after the termination assessment, youth who participated in the peer intervention group actually showed a statistically significant increase in delinquency, compared with the controls." "This trend persisted at 2 - year follow - up ... and at 3 - year follow - up..." Of great concern was that "The increased growth in delinquency that resulted from peer intervention was more

pronounced for the youth who presented a low level of delinquency prior to the intervention."

The authors comment that "These analyses suggest that there was a statistically reliable iatrogenic (harmful) effect on self reported smoking and teacher - reported delinquency that extended to 3 years following the peer intervention." According to the authors, the teachers doing the delinquency ratings were unaware of the youths' intervention conditions, "ruling out the possibility that the iatrogenic effects simply reflect changes or bias in the youth reports."

The authors comment that these findings are not an anomaly. "In a meta - analysis of treatment studies with juvenile delinquents, Lipsey (1992) reported that 29% of reviewed experiments resulted in negative effects (i.e., better outcomes for the control condition). In the same vein, a review of studies evaluating the effectiveness of rehabilitation strategies with delinquents by Lab and Whitehead (1988) showed that over half of the experiments resulted in no effect or in negative findings." The authors raise the possibility that bringing delinquent youth together in groups for therapeutic purposes may partially account for the poor treatment outcomes discovered by intervention research. "Longitudinal studies repeatedly show that association with deviant peers is the strongest correlate of escalation in problem behaviors in adolescence," according to these authors.

The authors describe "deviancy training" as a process in which anti- social dyads "react positively to rule - breaking discussions." Deviancy training is associated with increases in delinquency, violence and substance abuse in longitudinal studies of youth, the authors state.

"The evidence reported here is sufficiently alarming to warrant reconsideration of any grouping of high - risk youth in clinical, educational or correctional settings," a comment with obvious implications for residential care programs. The authors believe that peer based interventions have positive effects only when these groups contain prosocial youth. "In designing interventions targeting high - risk adolescents ... minimizing the deleterious contacts with other high - risk children is imperative."

"The key principle when thinking about such interventions is to mobilize caregiving adults." "Essential are interventions that provide for the leadership role of caregivers in providing the guidance, support, and structure necessary to reduce problem behavior during the critical adolescent transition," these authors state.

One of these authors worked for the Oregon Social Learning Center at the time this article was published. A key feature of the Oregon Social Learning Center's multi-dimensional foster care model (one of the few evidence based foster care programs in the country) is that a foster home can have only one behaviorally troubled youth at a time.