An underlying assumption of MST is that family-directed change across the youth’s social ecology is most likely to lead to sustainable outcomes. Therefore, consistent with the theory of social ecology and research on the correlates of antisocial behavior in youth, MST aims to decrease youth antisocial behavior by addressing those variables that are most strongly linked with problem behaviors (see MST theory of change depicted in Figure 1). Critically, however, the family is seen as the most important link in the treatment process. The MST therapist works to enhance the caregivers’ parenting skills (i.e., monitoring, supervision, affective relations) and then leverages these improvements in family functioning to facilitate key changes in the youth’s social network with the ultimate of goal of surrounding the youth with a context that now supports prosocial behavior. Caregivers are often coached in how to disengage youth from antisocial peers and develop their relationships with more prosocial peers. Similarly, caregivers are often helped to develop collaborative relations with teachers and other community professionals (e.g., probation officers).

**Figure 1. MST Logic Model**

Importantly, the MST theory of change has been supported in mediational studies (Henggeler et al., 2009; Huey, Henggeler, Brondino, & Pickrel, 2000) that examined clinical trials with serious juvenile offenders (Henggeler, Melton, Brondino, Scherer, & Hanley, 1997), substance abusing juvenile offenders (Henggeler, Pickrel, & Brondino, 1999), and juvenile sexual offenders (Henggeler, Letourneau et al., 2009). Across these studies, MST (or adherence to MST) altered key family and peer risk factors for criminal behavior, and these changes in risk factors resulted in decreased adolescent antisocial behavior.