SHAPING THE FUTURE
Connecting knowledge and evidence to child welfare practice

*Book of abstracts of the XIV EUSARF INTERNATIONAL CONFERENCE*

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Welcome to EUSARF 2016 in OVIEDO

**Bienvenidos a EUSARF 2016 en Oviedo**

From 13th to 16th September 2016 the city of Oviedo in Northern Spain will host the XIV EUSARF (European Scientific Association on Residential & Family Care for Children and Adolescents) International Conference that has become one of the most important meeting points in the world for researchers, practitioners and policy makers in the field of child welfare.

As the Chairman of the Committee of Organisation of this conference, and on behalf of all my colleagues of the Grupo de Investigación en Familia e Infancia-GIFI (Child and Family Research Group) preparing the conference and members of the EUSARF Committee Board, I would like to invite to all of those people interested in child welfare to share their knowledge, experiences and ideas in Oviedo next year.

Our city, Oviedo, is the capital of the Principality of Asturias, one of the Autonomous Communities in Spain, and it has become one of the most preferred venues for all kind of congresses and conferences, both national and international. Our visitors value the warm and friendly environment of our city, which has 200,000 inhabitants and one of the oldest Universities in Spain (from 1608). One of our main aims is that this conference could be an unforgettable time of social activities, meeting new international colleagues, and creating formal and informal spaces for meaningful shared experiences. The official language of the Conference will be English, although Spanish simultaneous translation will be available for plenary sessions and some symposia.

With respect to the scientific contents this conference has received contributions in all the fields of child welfare interventions, but special attention will be paid to key priorities and concerns in the current international arena: e.g., therapeutic residential care, decision making in child care interventions, transitions to adulthood from care, migration and cultural diversity, family intervention and others. Our final programme includes more than 400 contributions and we expect approximately 500 delegates from 32 different countries. These figures reveal the enormous interest that child welfare interventions have for researchers and practitioners.

With the main aim of organising a special time of scientific, practical and social experience set in a vibrant cultural context, we look forward to seeing you in Oviedo,

Best wishes

Jorge F. del Valle
Chairman of the Committee of Organisation EUSARF 2016
University of Oviedo (Spain)
Dear delegate,

Welcome to Oviedo, the beautiful and historical capital of Asturias, venue of our Fourteenth International EUSARF Conference.

What brings us here is our common concern to improve the lives of children and families facing chronic adversity and to make the world a better place for them to live in. It is our strong belief that through science we can help shaping the future of these children and families in need. To quote Stephen Hawking: ‘Science can lift people out of poverty and cure disease. That, in turn, will reduce civil unrest.’ We have a huge responsibility to make these words a reality, if we ever will. Let us try! And stay optimistic about the power of science and the enduring and positive change it may bring to our society. Let us also keep in mind that conducting scientific research in our modern Western world stands symbol for freedom from violence, fear and dictatorship, a far away dream for so many academics these days.

The interdisciplinary field of child welfare research is booming. Every day, somewhere in our digitized and open access world, at least one must-read article, book or report is published. If one is honest with oneself, one should admit that it is impossible to keep fully updated. Who does have an overview of the field? Who knows all the latest findings? Rhetorical questions.

International conferences bring moments of great privilege, as they are serving fresh results from research not yet published or still going on. A three-day market offering science in bud, one could say. With budding scientists playing a significant role, angry, young, gifted, open to learn and eager to initiate change.

This book of abstracts is a little gem, precious and colourful, reflecting what is going on in academia today and illustrating how complex and diverse our field of research actually is. It is edited by an outstanding and very experienced team that knows how to enthuse their colleagues and bring the best out of them.

Cutting-edge, eye opening, original, innovative, transforming, these words came to my mind when I was browsing through this book and reading the abstracts. Appetizers. One longs for more. I have no doubts that more will come, as during our conference you will see the faces of the people who wrote these triggering abstracts and hear them talk passionately about their research. You will also have many opportunities to meet your colleagues, young and old, from around the globe, to talk with them, to enter their worlds, and to share ideas and ideals. Lucky you, who will be surrounded here in the charming city of Oviedo by so many soul mates and hosted by such a wonderful team!

I wish you a ‘mind-blowing’ conference.

Hans Grietens
President of EUSARF
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# Table of Contents

What are we doing to improve health and wellbeing of children in residential care in the Spanish child protection system? .................................................. 1  
Dr. Jorge F. Del Valle  
Changing the way we think about kinship care .................................................. 2  
Ms. Carol Wassell, Mr. Robert Porter, Dr. Vicki Welch  
Families’ experience of kinship care in the North of France ...................................... 3  
Mrs. Sarah Mosca, Prof. Bernadette Tillard  
Young kinship carers - a hidden population? .................................................. 5  
Dr. Meredith Kiraly  
The role of short term kinship care in the overall trajectory of protective interventions: a study from Quebec .................................................. 6  
Dr. Poirier Marie Andree, Dr. Sonia Helie, Dr. Chantal Lavergne, Dr. Daniel Turcotte, Mrs. Geneviève Turcotte  
Kinship care in the North of France: a view of quantitative data in collaboration with local authorities .................................................. 8  
Prof. Bernadette Tillard, Mrs. Sarah Mosca  
Child Welfare workers perspectives on out-of-home placement in the Flemish social care system 10  
Mr. Tim Stroobants, Mrs. Benedikte Van Den Bruel, Mrs. Anne Vanden Berge, Prof. Johan Vanderfaellie  
Caseworkers’ Experiences One Year after the Family Group Conference: A Follow-up Study . 11  
Prof. Toril Synnove Jenssen, Dr. Merete Saus  
Children of God or children of white men?: Caregiver perceptions of children in their care and motivations for the care work in children’s homes in Ghana .................................................. 13  
Mr. Ernest Darkwah, Prof. Marguerite Daniel, Dr. Maxwell Asumeng  
Research: Identifying ‘Artistry’ in Therapeutic Residential Workers - Fact or Fiction? .............. 14  
Ms. Glenys Bristow, Mrs. Jeannie Jones  
Bullying and Victimization in Juvenile Justice Institution: Does the environment matter? .... 16  
Ms. Nazirah Hassan, Prof. Andrew Kendrick  
Forensic Foster Care: Alternative for incarceration for delinquent adolescents in the Netherlands?! .................................................. 17  
Ms. Ellen Eltink, Ms. Conny Zellestra, Mrs. Carolien Konijn, Prof. Geert Jan Stams  
Youth runaways from correctional institutions - reasons and possible consequences ............... 18  
Ms. Tena Zalović, Mrs. Gabrijela Ratkajec Gašević, Ms. Ivana Maurović  
Young People in Limbo: Perceptions of Self-Presentations when Being Assessed in Secure Accommodation .................................................. 19  
Dr. Sofia Enell  
Addressing the needs of disabled care leavers: a social justice perspective .................. 20  
Dr. Berni Kelly, Prof. John Pinkerton, Dr. Gavin Davidson  
Complex support needs in young people with cognitive disability in contact with the criminal justice system .................................................. 21  
Prof. Leanne Dowse  
‘What happens after leaving care? - The experience of young people with a disability - Selected findings from an Irish study.’ .................................................. 22  
Dr. Conor Mc Mahon, Prof. Robbie Gilligan  
Missing Voices: The views and experiences of disabled children and young people living in out-of-home care .................................................. 23  
Dr. Berni Kelly, Dr. Karen Winter, Dr. Sandra Dowling  
Effectiveness of Multisystemic Therapy for Antisocial and Delinquent Youth with Mild Intellectual Disabilities .................................................. 25
Ms. Annemarieke Blankstein, Dr. Rachel E.A. Van Der Rijken, Mrs. Katrien De Vuyst, Mr. Jac De Bruijn, Dr. Xavier Moonen, Prof. Robert Didden
Home or care? A comparison of educational experiences and outcomes for maltreated children
Dr. Linda Caswurth
Youth in care education: A comprehensive framework for dealing with its complexity
Mrs. Elodie Marion
An Empirical Test of a Model of Academic Expectations among Youth in Residential Care
Dr. Eran Mellman, Dr. Tehila Refaeli, Prof. Rami Benbenishty
New placement, new school. Change of schools for children in out-of home care
Prof. Ingrid Höjer, Dr. Helena Johansson, Ms. Helena Lindberg
Translational Research: A collaborative model for practitioners and researchers to improve
the quality of therapeutic care.
Prof. Jim Anglin
Implications of Translational Research for the field of Residential Child Care
Dr. Deborah Sellers, Dr. Michael Nunno
Agency and university partnership to analyze restraints levels and psychotropic medication
usage after the CARE program implementatio
Mr. William Martin, Ms. Susan Sullivan
From flirtation to inspirational translational partnership: Lessons learned from the Dutch
Stronger Together program
Dr. Hubert M Pijnenburg
Academic workplace: Lessons learned from state funded collaboration between clinical practice,
research, education, and policy
Prof. Ron H.J. Scholte
Translating practice into theory into practice (et cetera): A powerful cycle for change.
Prof. Jim Anglin
Addressing the Needs of Adults who Have Experienced Abuse in Care as Children
Prof. Andrew Kendrick
Supporting care-leavers to access their records
Dr. Suellen Murray
Contested Legacies: Funding Redress and The Politics of Apology in Ireland
Prof. Eoin O’sullivan
The role of memorials as one form of remedy to historic child abuse – an ongoing dialogue
Ms. Adrienne Reilly, Prof. Andrew Kendrick
A Human Rights Approach to Justice for Survivors of Abuse in Care: The Scottish Human
Rights Commission InterAction on Historic Abuse of Children in Care
Prof. Andrew Kendrick
The subjective well-being of vulnerable children
Dr. Carme Montserrat, Prof. Ferran Casas
Looked after children’s participation in the development of on-line surveys of their well-being
Prof. Julie Selwyn
The subjective wellbeing of children in public care
Mr. Joan Llosada Gistau, Dr. Carme Montserrat
Exploring the relationship between subjective well-being and emotional and behavioural dis-
orders in children in residential care
Ms. Carla González, Dr. Amaia Bravo, Dr. Ignacia Arruabarrena, Dr. Jorge F. Del Valle
Children’s co-production and use of trove (a digitally enhanced memory box) to better under-
stand their care histories
Dr. Debbie Watson
Children’s subjective well-being in disadvantaged situations
Prof. Ferran Casas
Setting the Scene for Openness and Transparency in Adoption from Care .......................... 52
Ms. Lynne Moggach, Ms. Elizabeth Cox
Where have I come from, who am I now? Pathways to identity development for young people adopted from care ......................................................... 53
Prof. Elisabeth Neil
Adoption in the context of child protection. Experience of the mothers and social workers who support them ................................................................. 54
Mrs. Carole Côté, Dr. Poirier Marie Andree, Dr. Geneviève Pagé, Dr. Anne Marie Piché, Mrs. Geneviève Turcotte, Ms. Sarah Auger
‘It would be nice for him to know the person he spent the first twelve months of his life with’:
Adopters’ views and experiences of the contact retained or lost between children and their foster carers ......................................................... 56
Dr. Sarah Meakings, Dr. Katherine Shelton, Dr. Julie Doughty, Dr. Heather Ottaway, Dr. Amanda Coffey
Adopter experiences of the linking and matching process in adoption ................................. 58
Dr. Heather Ottaway, Dr. Sarah Meakings, Dr. Katherine Shelton, Dr. Julie Doughty, Dr. Amanda Coffey
The ADHD explosion in Sweden and its consequences for child welfare .......................... 60
Prof. Tommy Lundström, Dr. Patrik Karlsson
EXPLORING THE RELATIONSHIP BETWEEN SYMPTOMS OF POSTTRAUMATIC STRESS DISORDER AND CHALLENGING BEHAVIOUR ......................................................... 62
Mrs. Rachel Webb, Mr. Dan Johnson
Child participation in Institutional Treatment for Children with Emotional and Behavioural Problems ................................................................. 63
Mrs. Ivana Jedud Boric, Mrs. Nivex Koller Trbović, Mrs. Anja Miroslavjević
Change Trajectories of Aggressive Behavior among Children in Long-Term Residential Care in Israel ................................................................. 64
Prof. Shalhevet Attar Schwartz, Prof. Rami Benbenishty, Dr. Ilan Roziner
Are care-givers interventions matched with the behaviour problems of youth in residential care in Croatia ................................................................. 65
Dr. Ivana Maurovic, Prof. Antonija žižak, Dr. Gabrijela Ražkajec Gašević, Dr. Ivana Jedud
Quality of life among adolescents living in residential youth care ........................................ 66
Dr. Nama Kayed, Dr. Thomas Jozefiak
A Longitudinal Study: Personal and Social Resources Contributing to Functioning and Well-Being Four Years after Aging out of Care in Israel ................................................................. 67
Dr. Tehila Refaeli, Prof. Rami Benbenishty, Prof. Anat Zeira
A process manual for the systemic-dialogical assessment of the well-being of the child ........ 69
Prof. Stefan Schurr, Prof. Kay Biesel
Re-defining subjective well-being with Looked-After Children in Scotland ...................... 70
Dr. Lucy Hanson
Promoting the growth and well-being of children through the dialogue with parents .......... 72
Dr. Cinzia Canali, Dr. Giulia Barbero Vignola
What helps in making successful transitions from care? .................................................. 74
Prof. Robbie Gilligan, Dr. Laura Arnau
The experiences of New Zealand care leavers who went to university ............................ 75
Dr. Iain Matheson
The role of carers and employers in promoting care leavers’ access and progress in work .... 77
Prof. Robbie Gilligan, Dr. Laura Arnau
Facilitating factors for educational success – Views from young people and carers .......... 78
Prof. Ingrid Höjer, Dr. Helena Johansson
What helps young people succeed in leaving care?: A Case Study from the Czech Republic . 79
Mrs. Hana Pazlarova, Prof. Oldrich Matousek
Exploring the interplay of factors that support ‘successful’ transitions through the lived experiences of care leavers. 80

Dr. Fidelma Hanrahan, Prof. Janet Boddy
International Responses to the Historic Abuse of Children in Care 81

Prof. Hans Grietens
Historical child abuse as a contemporary process: the Swedish inquiry and the Swedish redress process 82

Prof. Johanna Sköld
Factors motivating redress for survivors in Norway 83

Prof. Ingunn Stusdød
Experiences in care that make a difference to long-term outcomes of Australian care leavers 84

Prof. Elizabeth Fernandez, Dr. Jung Sook Lee
Immoral or liberated? How society ‘thinks’ about sexually abused children in residential care, in the Netherlands in the 20th century 85

Prof. Greetje Timmerman
The Case of Finland: Latecomer in the Nordic Context 86

Prof. Pirjo Markkola
(In) stability of Foster Care Placements 87

Prof. Thomas Gabriel
A dynamic model of interdependencies 88

Prof. Klaus Wolf
Perspective of the child 89

Mrs. Renate Stohler, Mrs. Clara Bombach, Prof. Thomas Gabriel
International perspectives 90

Prof. Claire Cameron, Ms. Hanan Hauari
Supporting stability for foster carer placements: emerging findings from a UK study to introduce social pedagogic practice into UK foster care 91

Mrs. Samantha Mc Dermid, Ms. Lisa Holmes
How young people in care deal with breakdowns in their relationships 92

Dr. Hélène Join Lambert, Prof. Janet Boddy
Multiple perspectives on improving practices in residential care 93

Dr. Annemiek T. Harder
The Social Climate in Residential Care; Views from residents and staff leaders 94

Ms. Torill Tjølflaat, Dr. Tormod Rimehaug
Measuring social climate in Norwegian residential youth care: A revision of the Community Oriented Programs Environment Scale 95

Mr. Jonathan Leipoldt, Dr. Tormod Rimehaug, Dr. Annemiek T. Harder, Dr. Nanna Kayed, Prof. Hans Grietens
Observations of one-on-one conversations between residential care workers and adolescents: A Motivational Interviewing based study 97

Ms. Annika Eenhuistra, Dr. Annemiek T. Harder, Prof. Erik J. Knorth
Learning disorders, combined problem load and educational adaptations as the baseline for adult careers after RYC 99

Dr. Tormod Rimehaug, Dr. Anne Mari Undheim, Dr. Jo Magne Ingul
Client centeredness within institutions and the Albanian juvenile justice system 100

Ms. Linda Rothman, Ms. Marsida Grami
Cognitive and educational development of very young and school-aged children in care 102

Dr. Robert Flynn
Understanding academic outcomes of young and school-aged children in care from an ecological perspective: A literature review 103
Dr. Connie Cheung, Dr. Robert Flynn
Literacy promotion by caregivers and the motor, social, and cognitive development of young children in care ..................................................... 105
Dr. Robert Flynn, Ms. Adrianna Côté, Dr. Connie Cheung
Nurture Group effects on social, emotional, behavioural, and cognitive development of children in care of primary-school age ............................................. 107
Dr. Karen Winter
Profile of young people in care in Ontario, Canada, on measures of executive functioning and reading and math achievement ............................................. 109
Mrs. Andrea Hickey, Dr. Robert Flynn, Ms. Joanna Losracco
Profile of young people in care in Denmark on measures of IQ, executive functioning and reading and math achievement ............................................. 110
Ms. Misja Eiberg
Transitions to adulthood from care: the empirical and theoretical context ............................................. 112
Prof. Mike Stein
Research on the Transition to Adulthood from Out-of-Home Care in the USA: Lessons for Practice and Policy ............................................. 113
Prof. Mark Courtney
Doing well, against what odds, with what inspiration?” How a sample of young adults with care experiences reflect on doing well at school and in life ............................................. 114
Prof. Elisabeth Backe Hansen
Ethically and emotionally challenging moments in substitute care work ............................................. 115
Dr. Tuja Eronen, Dr. Riitta Laakso
Evaluation of the KEEP Standard training for foster carers: A quasi-experimental approach . 116
Dr. Claudia Mollidor, Ms. Sarah Kubiits, Ms. Jo Warburton
Caring for traumatised children: Compassion fatigue in foster carers ............................................. 117
Dr. Heather Ottway
Traditional Versus Professional: Relative and non-relative foster care placements . 118
Prof. Waleria Stelmaszuk
Evaluation of a non-violent resistance intervention for foster parents ............................................. 120
Dr. Frank Van Holen, Prof. Johan Vanderfaeille, Dr. Femke Vanschoonlandt, Ms. Skrallan De Maeyer
Safety for children first: Focus on children in family focused case management? .......... 122
Ms. Inge Busschers, Dr. Boendelmake Leonieke
Legal representation in the Scottish Children’s Hearing System ............................................. 123
Mr. Robert Porter, Dr. Vicki Welch, Ms. Carol Wassell
Is the Decision in the Best Interest of the Child? A Socio-Legal Study of Care Order Decisions in Norway ............................................. 124
Ms. Line Marie Sørsdal
What do we know about linking and matching in permanency work? Learning from practitioner perspectives and experiences ............................................. 125
Dr. Danielle Turey
Ensuring high quality planning and provision for children in care: the role of independent reviewing officers in England ............................................. 127
Prof. Jonathan Dickens, Prof. Gillian Schofield, Dr. Chris Beckett, Dr. Georgia Philip, Ms. Julie Young
Implementation of therapeutic residential care: A multi-informant study. ............................................. 128
Mr. Kenny Kor
Therapeutic residential care in Spain. Treated profiles, mental health problems and therapeutic coverage ............................................. 129
Dr. Eduardo Martín, Dr. Jorge F. Del Valle, Dr. Amaia Bravo
Evidence informed Therapeutic Residential Care – using technology to improve outcomes for children in out-of-home care ................................................................. 130
Dr. Nick Halfpenny, Ms. Edith Loch
Therapeutic Residential Care: Australian Consensus Definition and Agenda ................................................................. 132
Dr. Sara McLean, Mr. Greg Wall, Ms. Raelene Mckenzie, Ms. Glenys Bristow, Ms. Laurel Downey, Ms. Lyn Millet, Ms. Kate Martin
Use of Therapeutic Residential Care in the U.S.: Shifting Away from Therapeutic Residential Services to Family-Based Services ................................................................. 133
Dr. Christopher Bellonci
Teachers and main contacts in residential youth care institutions’ report of mental health problems among adolescents ................................................................. 135
Dr. Anne Mari Undheim, Prof. Stian Lydersen, Dr. Nanna Kayed
The longitudinal reciprocal relations between parenting and foster children’s externalizing behaviors ................................................................. 137
Ms. Anouk Goemans, Dr. Mitch Van Geel, Prof. Paul Vedder
Risk and protective factors influencing educational success and suicidality for First Nations youth-in-care in Ontario, Canada ................................................................. 139
Dr. Barbara Greenberg, Ms. Meagan Miller, Mr. Erik Michael, Dr. Robert Flynn
The impact of a foster parent intervention for children with externalizing problems on traumatic stress problems ................................................................. 141
Prof. Johan Vanderfaellie, Dr. Femke Vanschoonlandt, Dr. Frank Van Holen, Ms. Skrallan De Maeyer
Do you love me? An empirical analysis of the feeling of being loved among children in out-of-home care in Denmark ................................................................. 142
Mrs. Mette Lausten, Mrs. Signe Frederiksen
Construction of self-representations in maltreated children and adolescents: parents’ influence within the The Looking-Glass Self Hypothesis ................................................................. 143
Ms. Carla Silva, Prof. Maria Calheiros
Executive function in children in residential care ................................................................. 145
Dr. Maria Gracia Peñarrubia, Prof. Jesus Palacios, Dr. Maite Roman, Dr. Carmen Moreno, Dr. Esperanza Leon
Socio-emotional development in children in residential care ................................................................. 146
Dr. Maite Roman, Prof. Jesus Palacios, Dr. Carmen Moreno, Dr. Esperanza Leon, Dr. Maria Gracia Peñarrubia
Entering the market - on the licensing of residential homes for children in Sweden ................................................................. 147
Mr. David Pålsson
Differences between public and private logics when giving support in transition to adulthood ................................................................. 148
Dr. Inger Oterholm
Extended childhood” and “extended parenthood” challenges in Norwegian Child welfare ................................................................. 150
Dr. Ingunn Barmen Tysnes, Dr. Riina Kiik
Transition from school-based training in VET ................................................................. 151
Dr. Marianne Drehlen
Dimensions and Functions of Care Leavers’ Social Support Networks: Linking Early Adversity and Adult Outcomes ................................................................. 152
Dr. Eran Mellman, Prof. Rami Benbenishty
International perspectives, practices and programmes on safeguarding very young children from abuse and neglect ................................................................. 153
Prof. Harriet Ward
Status At Birth, the Risk of Contact with Child Protection Services, and Developmental Trajectories ................................................................. 154
Dr. Fred Wulczyn, Dr. Lijun Chen, Ms. Kerry Price, Ms. Keunhye Park
Developmental trajectories of children who have experienced abuse in infancy: The Saint-Ex study .......................................................... 156
Dr. Rousseau Daniel
Preventing Maltreatment in Substance Dependent Parents of children under 2.5 years .... 158
Prof. Jane Barlow, Ms. Sukhi Sembi, Ms. Gwynne Rayns, Dr. Richard Cotmore, Prof. Sharon Dawe
Can a family drug and alcohol court in care proceedings help prevent substance misuse relapse and reunification breakdown? Lessons from a follow-up study ............................. 159
Prof. Judith Harwin, Dr. Bachar Alrouh, Dr. Lily Golding, Ms. Tricia Mcquarrie, Dr. Stephen Swift, Ms. Mary Ryan, Ms. Jo Tunnard, Prof. Karen Broadhurst
TEND: A New Group-Based Evidence-Informed Programme to Support Carers of Young Foster Children ......................................................... 161
Prof. Philip Fisher, Ms. Helen Jones
Cost-effectiveness and evidence-based youth policy ............................................... 163
Prof. Tom Van Yperen, Dr. Louise Morpeth
Literature review of the state of the art of cost-effectiveness research in youth care: the Dutch case .................................................................................. 164
Ms. Ingrid Kremer, Ms. Daphne Kann, Dr. Germie Vanden Berg, Prof. Carmen D DirkSEN, Dr. Mickael Hiligsmann, Prof. Sylvia M A A Evers
Cost-effectiveness and evidence-based youth policy: Steering on social impact ............. 166
Prof. Tom Van Yperen
Towards standardization of economic evaluations in the field of youth: setting a research agenda 167
Prof. Carmen D Dirksen, Prof. Sylvia M A A Evers
Evaluating the costs and benefits of services for children in the UK .............................. 168
Dr. Gretchen Bjornstad, Dr. Nick Axford, Dr. Louise Morpeth
Mapping expenditure in children’s services: a method and findings from one region ...... 170
Ms. Frances Kemp, Ms. Anam Raja, Ms. Cassandra Ohlson, Dr. Louise Morpeth, Dr. Nick Axford
Evaluation of a behavioural training program for foster parents ................................. 172
Dr. Frank Van Holen, Dr. Femke VanSchoonlandt, Prof. Johan Vanderfaellie, Ms. Skrallan De Maeyer
Characteristics of children placed in foster care, family-style group care and residential care: A cross-sectional study ............................................. 174
Mrs. Harmke Leloux Opmeer, Dr. Chris H.Z. Kutper, Prof. Evert M. Scholte
How can child research networks reach global audiences? – Policy makers, professionals and caregivers! An example ........................................... 175
Dr. Niels Peter Rygaard
The Influence of Macro Factors on Decision Making in Child and Youth Welfare Agencies. A Case Study from Switzerland ........................................ 177
Prof. Heinz Messmer, Mr. Lukas Fellmann, Mrs. Marina Wetzel
Support family service in children’s perspective ...................................................... 178
Mrs. Tiina Lehto Lundén
Informal learning of the families who foster a non-relative child based on daily experience ... 179
Mrs. Ramune Bagdonaité Stelmokienë, Prof. Vilma Zydziumaitė
“This is Your Pilot Speaking!” Establishing the methodology for a prospective longitudinal study of risk assessment and decision making, for short and long-term outcomes in child protection and welfare cases ......................................................... 180
Ms. Donna O’Leary, Prof. Alastair Christie, Prof. Ivan J Perry
Good assessments lead to good outcomes for youth in out of home care: A practice model in Ontario, Canada ......................................................... 182
Mr. Murray Davies, Mrs. Morag Demers
Professional intervention in foster care breakdown .................................................... 184
Dr. Jesús M. Jiménez Morago, Prof. Jesús Palacios, Prof. Carmen Paniagua
Foster care in Chile: initial adversity and psychological adjustment of children ........... 185

Dr. Jesús M. Jiménez Morago, Dr. Mª Isabel Zavala
Positive health in adopted, fostered, institutionalized and community adolescents: a comparative analysis .............................................................. 186

Prof. Carmen Paniagua, Dr. Carmen Moreno, Mr. Pablo Carrera, Dr. Pilar Ramos, Dr. Irene García Moya, Prof. Concepción Moreno Maldonado
Lifestyles: A comparison between adopted, fostered, institutionalized and community adolescents188

Prof. Carmen Paniagua, Dr. Francisco Rivera, Mr. Pablo Carrera, Dr. Inmaculada Sánchez Queija,
Dr. Antonia Jiménez Iglesias, Ms. Ana Villafuerte Díaz
Supporting Adoption through Structure .......................................................... 190

Ms. Lynne Moggach, Ms. Elizabeth Cox
Fairy godparents or fake family? Taking a look at non-familial kinship care ............... 191

Dr. Meredith Kiraly
Child as a victim of crime - Parent perspective on the practices of authorities ............. 192

Mrs. Essi Julin
Factors that determine the quality of child protection investigations - a literature review . 193

Dr. Svein Arild Vis
Decision-making in child protection: what is decided at the various services and levels of intervention? ................................................................. 194

Ms. Amaia Mosteiro, Ms. Emma Sobremonte, Ms. Arantzxa Rodríguez, Ms. Usue Beloki
The motivations for fostering and its connections with healthy family relationships in a sample of non parental foster families from Madrid. A qualitative study of 26 foster children and their foster families using a multi-instrument research. ........................................ 195

Dr. Teresa Díaz
Self-perception of psychological adjustment in adolescent adoptees .......................... 196

Mrs. Raquel Barroso, Ms. Vanessa Coelho, Mrs. Isabel Costa, Prof. Maria Barbosa Ducharme
Analysis of professionals and family foster care on advantages and difficulties of visits between foster children and their biological families ........................................ 197

Dr. María D. Salas, Dr. Isabel M. Bernedo, Dr. María J. Fuentes, Dr. Miguel A. García Martín
Alignment of perspectives, skills and attitudes through video reflection: The role of team managers in a Youth care Protection Agency ........................................ 198

Mr. Arnout Bunders, Mr. Marc Dinkgreve, Prof. Jacqueline Broerse, Dr. Barbara Regeer
Future teachers’ expectations of parental participation in children’s school education according to family structure ......................................................... 200

Dr. Beatriz Triana Pérez, Ms. Lorena María Pérez Marrero
The expectations of future teachers regarding the adaptation of children from diverse adoptive family structures ......................................................... 201

Dr. Beatriz Triana Pérez, Dr. Juan Antonio Rodríguez Hernández, Ms. Lorena María Pérez Marrero
Parental satisfaction and stress in adoption ...................................................... 202

Mrs. Isabel Costa, Prof. Maria Barbosa Ducharme
Adoption social disclosure and its implications in the school context ............................ 203

Mrs. Joana Lara Soares, Prof. Maria Barbosa Ducharme, Ms. Silvia Monteiro Fonseca, Ms. Sofia Bessa Costa
Descriptive findings on learning and mental health from the Australian Early Childhood in Foster and Kinship Care study ............................................. 204

Dr. Sarah Wise
Messages for Policy and Practice from Kinship Carer Surveys in the UK, Australia and New Zealand ................................................................. 206

Dr. Meredith Kiraly
Children with Intellectual Disability in residential child care ..................................... 207
Ms. Alba Aguila, Ms. Carla González, Ms. Silvia Pérez, Dr. Jorge F. Del Valle
Testing a tool for improving life skills to independent living: The Umbrella program. .......... 208
Mr. Andre Tavares, Dr. Jorge F. Del Valle
Therapeutic Residential Care: Cross-National Challenges for Policy, Research and Practice. .. 209
Prof. Jim Whittaker
Promising Program Models in Therapeutic Residential Care .............................................. 210
Prof. Sigrid James
MultifunC: an example of evidence based program in therapeutic residential care ............. 211
Dr. Tore Andreassen
The prerequisites and practice of audit – a study on the monitoring of out-of-home care for children in Sweden .................................................................................................................. 212
Prof. Marie Sallnäs, Mr. David Pålsson, Dr. Stefan Wiklund
Building safe organisations with and for children and young people: recommendations from a participatory research project on safety in institutions .................................................. 214
Dr. Tim Moore, Prof. Morag Mc Arthur
The quality standards of the fostering process and its finalization: The intervention program Projet’Ar-te in analysis .............................................................................................................. 216
Prof. Maria Pinheiro, Dr. Carla Palaio, Dr. Cristina Velho, Dr. Laura Santos
Improving outcomes for children and staff in residential children’s homes: An evaluation of the RESUlt training programme .......................................................................................... 217
Dr. Claudia Mollidor, Ms. Sarah Knibbs
The home or care study: comparing outcomes for maltreated children ................................. 218
Prof. Nina Biehal, Ms. Helen Baldwin, Dr. Linda Cusworth, Mr. Jim Wade
« Romani children’s health care trajectories ». Loredana, a two years old romani girl, her family, volunteers and health professionals ................................................................. 220
Ms. Julie Montoya, Prof. Bernadette Tillard
Social work in indigenous communities in North-Norway and Montana – a comparative study 222
Ms. Reidunn Háøy Nygård, Dr. Merete Saus
The Nightingale programme: Preparing future child welfare workers for an increasingly diverse society ........................................................................................................................................ 224
Mrs. Hedvig Torvik Nilsen, Mrs. Nita Ormen
The framing of Sámi Child welfare ............................................................................................ 226
Dr. Marcela Douglas, Dr. Merete Saus
Who returns home? Study on placement outcomes of Flemish foster children .................... 227
Prof. Johan Vanderfaellie, Dr. Frank Van Holen, Ms. Skrallan De Maeyer, Ms. Laurence Belenger, Mrs. Laura Gypen
Outreach support for young people in care transitioning to independence or returning to live with their birth parents: experiences and outcomes ........................................................................... 229
Ms. Clare Lushay, Dr. Georgia Hyde Dryden, Ms. Lisa Holmes
Family reunification after short term out-of - home placement: mothers’ perspective .......... 230
Dr. Dalija Snieškienė, Mrs. Daiva Kepežinskienė
Reuniting children with their biological families after out-of-home care. A pilot project investigat- ing their everyday life and challenges .................................................................................... 231
Ms. Kirstine Karmsteen
Increasing the Impact of Research on Practice: Developing, Implementing and Evaluating a Reunification Practice Framework ..................................................................................... 232
Prof. Elaine Farmer, Ms. Mandy Wilkins
Identity construction among young women with experiences of residential care ............... 234
Dr. Mathilde Turcotte, Prof. Nadine Lanctôt
Promoting the Healthy Sexual Development of Children in Care ........................................ 236
Dr. Boendermaker Leonieke, Dr. Claire Bernaards, Dr. Gitte Riis Hansen, Mrs. Gwendi Moentjens,
Prof. Andrew Kendrick
Growing up LGBTQ in foster care in England: Young People’s perspectives ........................................... 238
Dr. Jeanette Cossar, Prof. Gillian Schofield, Dr. Julia Keenan, Dr. Birgit Larsson, Dr. Pippa Belderson, Dr. Emma Ward
Longer-term Contributions of Informal and Formal Supports: Experiences of Jordanian Care Leavers .............................................................. 240
Dr. Rawan W. Ibrahim
Caring for lesbian, gay, bisexual or transgender young people: the views and experiences of foster carers .............................................................. 241
Prof. Gillian Schofield, Dr. Jeanette Cossar, Dr. Emma Ward, Dr. Birgit Larsson, Dr. Pippa Belderson
How to do research in the real world: What is to know and who is to gain? ................................................. 243
Dr. Anne Marie Villumsen
Social pedagogy in children’s everyday life – supporting agency .............................................................. 245
Dr. Ida Schwartz
Selective quantitative writing on ADHD genetics in study books: a critical analysis ........................................ 246
Mr. Sanne Te Meerman, Dr. Laura Batstra, Dr. Rink Hoekstra, Prof. Hans Grietens
Perspectives on continuity of care of ‘hard-to-reach’ youngsters in vulnerable living conditions 248
Mr. Jan Naert
What transition concept is useful in the field of leaving care? A reflection on research interest and implication of language ......................................................... 250
Mr. Jan Stors
When things do not go as intended: adoption breakdown, its incidence and circumstances ................................ 251
Prof. Jesús Palacios, Prof. Julie Selwyn
A longitudinal examination of outcomes post adoption or guardianship in one U.S. State ................................ 252
Dr. Nancy Rolock
‘She was a foster mother who said she didn’t give cuddles’: The adverse early foster care experiences of children who later struggle with adoptive family life .............................................................. 254
Dr. Sarah Meakings
Postplacement but preadoption breakdown in Portugal ............................................................................. 255
Prof. Maria Barbosa Ducharme, Ms. Sylvie Marinho
Adoption breakdown in Andalusia, Spain: incidence and characteristics ................................................... 256
Prof. Jesús Palacios, Dr. Jesús M. Jiménez Morago, Prof. Carmen Paniagua
Adoption disruption of previously looked after children: the emergence of adolescent to parent violence .................................................................................. 257
Prof. Julie Selwyn
Children’s and parents’ participation in care order decision-making ......................................................... 258
Dr. Jill Berrick
Parents’ participation in child protection court cases ................................................................................. 259
Prof. Marit Skivenes
International perspectives on children’s participation in child protection agency decision making............. 260
Dr. Jill Berrick
International perspectives on parents’ participation in child protection agency decision making.............. 261
Prof. Tarja Pösö
International perspectives on children’s participation in child protection court cases ................................ 262
Prof. Jonathan Dickens
International perspectives on children’s participation in child protection court cases - The Children’s Court in Australia ........................................................................... 263
Prof. Morag Mc Arthur
Leaving care from a life course perspective ................................................................................................ 265
Mr. Samuel Keller
From a life course structured by society to independent adulthood .......................... 266
Mr. Mattias Bengtsson
Defining age. Perspectives on age and development among young people in vulnerable life situations ................................................................. 268
Ms. Anne Kirstine Mølholt
Transition from the moratorium of military service to independent living in the life stories of Care leavers in Israel ......................................................... 269
Dr. Tehila Refaeli
Using a life course approach to explore the educational pathways of care leavers: New dimensions in understanding .............................................. 271
Ms. Eavan Brady
How care experiences arise in critical turning points in life courses after care ........... 272
Mr. Samuel Keller, Mr. Benjamin Strahl
Decision-making processes in cases involving minority families: the incorporation of intercultural approaches with child protection mandates in daily practice ....................................................... 273
Mrs. Marie Joëlle Robichaud, Dr. Poirier Marie Andree
Child protection assessments in Norway - Experiences of workers and families ........ 275
Dr. Jim Lurie, Ms. Torill Tjelllaat
An alternative decision-making process and outcome to emergency placements of children ................................................................. 277
Dr. Anita Storhaug, Mrs. Berit Skauge, Dr. Bente Heggem Kojan
Dental health personal experiences with mandatory reporting to child welfare authorities ................................................................. 279
Prof. Anette Christine Iversen, Dr. Ragnhild Bjørknes, Ms. Silje Øverland Risøy
Emergency out-of-home placements: decision-making pathways, discourses and implications for social work practice ....................................................... 280
Mr. Arve Lerum
Youth care workers perspectives on and use of evidence-based practice ................... 282
Mr. Tim Stroobants, Prof. Johan Vanderfaellie, Dr. Frank Van Holen, Prof. Caroline Andries
User Defined Outcomes? Opportunities and challenges of Goal Attainment Scaling as a measure of outcomes in child and family social work ......................... 284
Ms. Amy Lynch, Ms. Fiona Newlands, Mr. David Westlake, Prof. Donald Forrester
Examining the Differences Between “Low” and “High” Research Evidence Users in Child Welfare Practice ................................................................. 286
Ms. Kristen Lwin, Ms. Julia Wedeles, Ms. Sarah Head, Mr. Aaron Turpin, Ms. Aurolie Fernandes
Evaluating treatment effectiveness: The power of single case designs .......................... 288
Dr. Marc J.M.H. Delsing
Identifying predictors of recorded child maltreatment and admission to care, using data from a birth cohort study ................................................................. 289
Ms. Helen Baldwin
“They’ve been thrown here”: residential care professionals’ discursive construction of the term “unaccompanied minors” ......................................................... 290
Dr. Marzia Saglietti, Prof. Laura Palareti
Returned asylum-seeking children: How are children who stayed in European host countries faring after return to their country of origin? ............................................. 292
Ms. Danielle Zevulun, Prof. Margrite Kalverboer, Dr. Elianne Zijlstra, Dr. Wendy Post, Prof. Erik J. Knorth
Unaccompanied minors in the Netherlands: in which type of care facility do they flourish best and what do we know about unaccompanied minors in foster families? .................. 294
Prof. Margrite Kalverboer, Ms. Jet Rip, Dr. Elianne Zijlstra, Dr. Wendy Post
The Best Interests of the Child assessment in asylum procedures of unaccompanied minor asylum seekers: A case study ................................................................. 296
Ms. Carla Van Os, Prof. Margrite Kalverboer, Dr. Elianne Zijlstra, Ms. Danielle Zevulun, Ms. Jet
Rip, Mr. Daan Beltman, Prof. Erik J. Knorth
Parent counseling in Child Welfare Services: A Norwegian study .......................... 298
Mr. Dag Skilbred, Dr. Karen J Skaale Havnen
Child outcomes of home visiting for families with complex and multiple problems: a systematic
review and meta-analysis .............................................................. 300
Mr. Arjen Van Assen, Mrs. Jana Knot Dickscheid, Dr. Wendy Post, Prof. Hans Grietens
Contribution of protective mechanisms for planning family-based interventions for youth with
behavior problems ........................................................................ 302
Mrs. Gabrijela Ratkajec Gašević, Prof. Antonija žižak, Prof. Martina Ferić, Ms. Ivana Maurović,
Ms. Josipa Mihić
Exploring work with Australian Aboriginal families to avoid care placements and to develop
culturally safe care services ............................................................ 303
Ms. Kerry Moore, Ms. Vivianne Freeman
Early family intervention: what is meant by Prevention? The case of French “parental centers” 305
Dr. Claire Ganne, Dr. Nathalie Thiry
Development, Feasibility, and Piloting of a Novel Natural Mentoring Intervention for Older
Youth in Foster Care in the USA .......................................................... 307
Dr. Johanna Greeson, Ms. Allison Thompson
Life goals, social capital and sex-affective relationships: a comparative study between young
women in foster care and young female undergraduates ........................................ 309
Ms. Foradada Villar Mireia, Dr. Josefina Sala
The House Project: putting young people in charge of their transitions from care .................. 310
Ms. Jade Ward, Ms. Jo Dixon, Ms. Heidi, Jade, Mia And Zoe Hp Young People
What are the profiles of the adolescents in care who will be assisted shortly by the Support to
Young People Under Guardianship or ex-Guardianship in Catalonia (Spain)? .................. 312
Mr. Joan Llosada Gistau, Mr. Francesc Xavier Balagüé Gea, Mr. Manel Lolo, Mr. Eduard
Hernandez
Programs and Services to help Foster Care Leavers during their Transition to Adulthood: A
Study Comparing Chicago to Barcelona .................................................................. 313
Dr. Laura Arnau, Dr. Josefina Sala, Prof. Mark Courtney, Mrs. Amy Dworsky
Working with families to achieve reunification after foster care: research and good practice ... 314
Dr. Nuria Fuentes Peláez
Promising practices to reconnecting families: case-studies in P.I.P.P.I. program in Italy ........ 315
Dr. Sara Serbati, Prof. Paola Milani, Dr. Ombretta Zanon, Dr. Chiara Sità, Dr. Marco Ius, Dr.
Diego Dimasi
The role of professional training when implementing “Walking as a family” program ............. 317
Dr. Nuria Fuentes Peláez, Dr. Crescencia Pastor, Dr. M.Angels Balsells
Working with Peer Mentors to Support Reunification .................................................. 319
Dr. Jill Berrick
Need to improve contact visits by developing intervention strategies targeted at birth family
to improve likelihood of the child return home ............................................... 320
Dr. Isabel M. Bernedo, Dr. Maria D. Salas, Dr. María J. Fuentes, Dr. Miguel A. García Martín
Improving practice in respect of children who return home from care in England ............... 321
Dr. Georgia Hyde Dryden, Ms. Lisa Holmes
The therapist-client alliance in youth care: predictors and impact on outcome .................. 323
Prof. Ron H.J. Scholte
Parent-professional alliance and outcomes of child and family care: A systematic review ...... 324
Ms. Marieke De Greef, Dr. Hubert M Pijnenburg, Dr. Marion Van Hattum, Dr. Bryce D. Mc Leod,
Prof. Ron H.J. Scholte
Alliance and therapist adherence: bidirectional associations in systemic therapy for antisocial
adolescents in the Netherlands ........................................................................... 326
Ms. Aurelie M.C. Lange, Dr. Rachel E.A. Van Der Rijken, Dr. Marc J.M.H. Delsing, Prof. Jan J.V. Busschbach, Dr. Joan E. Van Horn, Prof. Ron H.J. Scholte
Longitudinal associations between alliance and outcomes in family care in The Netherlands .......................... 328
Prof. Ron H.J. Scholte, Ms. Aurelie M.C. Lange, Dr. Rachel E.A. Van Der Rijken, Dr. Marc J.M.H. Delsing
The relation between children’s views on group climate and the therapeutic alliance with their
mentor in residential care ........................................................................................................................................... 329
Ms. Eefje Strijbosch, Prof. Geert Jan Stams, Dr. Peer Van Der Helm, Dr. Inge Wissink, Mrs. Mariëtte Van Brandenburg
Unpacking the helping relationship within the therapeutic context and beyond .............................................. 330
Dr. Charles Izzo
Researching Agency in Transitions from Out-of-Home Placements ............................................................... 331
Prof. Ute Karl
Agency as an implicit concept in research on care leavers ................................................................................. 332
Prof. Ute Karl, Prof. Ulla Peters
Experiences of turning points for young people in the process of leaving care ........................................ 333
Prof. Ingrid Höjer, Prof. Yvonne Sjöblom
Moving on, surviving and struggling: opportunities and obstacles to promoting the agency of
young people during transition ............................................................................................................................... 334
Prof. Mike Stein
Contracting ‘Autonomy’ of Young People: Ambivalences in Addressing Agency ........................................ 335
Dr. Aude Kerivel, Mrs. Marei Lunz, Ms. Anna Marie Herdtle
Helping others and Agency: The engagement of former care leavers ......................................................... 336
Dr. Katharina Mangold
Towards a comprehensive view of factors affecting decision-making and judgments in child
protection .................................................................................................................................................................. 337
Dr. Mónica López
Child Welfare Judgments and Decision Processes in Context ........................................................................ 338
Prof. Rami Benbenishty
Dr. John Fluke
Reflections of social behavioural diagnostic research on migrant children in judicial decision-
making .................................................................................................................................................................. 340
Mr. Daan Beltman, Prof. Margrite Kalverboer, Dr. Elianne Zijlstra, Ms. Carla Van Os, Ms.
Danielle Zevulun
Constructions of normality among care leavers in the context of societal conditions of differ-
ences and migration ................................................................................................................................................. 341
Mrs. Angela Rein
Psychological needs of unaccompanied asylum-seeking children in residential care in Spain ........ 343
Dr. Irina Santos González, Mrs. Susann Hesse, Dr. Amaia Bravo
Immigrant population in the Spanish child welfare system: needs assessment ........................................ 344
Mrs. Susann Hesse, Dr. Amaia Bravo
Fathers and the child welfare service: Self-conception and fathering practice ........................................ 345
Dr. Anita Storhaug
What mothers think about parenting? Cognitive representations of parenting in mothers
referred to child protection services .................................................................................................................. 346
Ms. Claudia Camilo, Prof. Margarida Vaz Garrido, Prof. Maria Calheiros
The role of parent efficacy in the relationship between child and parent mental health in the
first year post-adoption ........................................................................................................................................ 347
Dr. Katherine Shelton, Dr. Sarah Meakings, Mrs. Rebecca Anthony, Dr. Julie Doughty, Dr.
Heather Ottaway, Dr. Amanda Coffey
Parental Empowerment: Construct validity and reliability of a Dutch empowerment questionnaire (EMPO) .................................................. 349
Mr. Harm Damen, Prof. Jan Willem Veerman, Dr. Ad Vermulst, Ms. Rozemarijn Nieuwhoff, Dr. De Meyer Ronald, Prof. Ron H.J. Scholte
Benefits and challenges of promoting family leisure experiences during the visits in the Child Welfare System ........................................... 351
Mrs. Alicia Navajas, Dr. M. Angels Balsells
Family narratives on fostering a child with a history of sexual abuse .......................................................... 353
Ms. Dorijn Wubs, Prof. Hans Grietens, Dr. Laura Batstra
The needs of children in foster care: A Q-sort study on the differences between the psychosocial needs of foster children with and without a history of sexual abuse .......................................................... 354
Ms. Anne Steenbakkers, Dr. Steffie Van Der Steen, Dr. Ingunn T. Ellingsen, Prof. Hans Grietens
Psychotherapeutic care for sexually victimized children – does it meet the need? A multilevel analysis .................................................. 356
Dr. Andreas Jud, Mrs. Sabine Weber
Prevalence and Perpetrators of Child Maltreatment in Foster Care .................................................................................. 357
Dr. Eric Van Santen
The dialogical-systemic case laboratory - a method for the analysis of serious or fatal cases in child protection ........................................... 359
Prof. Kay Biesel, Prof. Reinhart Wolff
Using Social Network Analysis to compare traditional approaches to working with adolescents in and on the edge of care with a new multi-disciplinary model ........................................................................ 360
Ms. Katie Hollingworth, Dr. Emily Munro
Research in daily practice (how we) just do it! ............................................................................................................. 361
Mr. Marc Dinkgreve, Mrs. Sigrid Van De Poel, Ms. Inge Busschers, Dr. Barbara Regeer
The prevalence and characteristics of children growing up in kinship care in the UK: An analyses of the Census 2011 microdata .................................................................................. 362
Mrs. Dinithi Wijedasa
Youth “Aging out” of Foster Care in Poland .......................................................... 363
Dr. Malgorzata Goeman, Dr. Malgorzata Sarzynska, Prof. Paul Toro
A peer research study of care leavers in Argentina: an approach to the reality of youths and a contribution to the methodology .................................................................................. 364
Ms. Mariana Incarnato
Autonomy promotion in the foster care process of at risk youth: results of a personal and social competences programme ................................ 365
Dr. Laura Santos, Prof. Maria Pinheiro, Dr. Cristina Velho, Dr. Carla Palhao
Supporting adolescents on the edge of care - using short stays in residential units to prevent longer term care ........................................ 367
Ms. Jo Dixon, Ms. Jenny Lee, Ms. Sarah Ellison
Re-thinking support for adolescents on the edge of care in England .......................................................... 368
Prof. Emily Munro, Ms. Katie Hollingworth, Ms. Veena Meetoo
Supporting the physical and mental health of young people in care: Messages from research and practice ............................................................................. 369
Dr. Dominic Mc Sherry
The health experiences of children and young people in care in England .......................................................... 370
Ms. Áine Kelly
Improving the mental health and well-being of young people in care .................................................................................. 371
Dr. Nikki Luke
Supporting good mental health and wellbeing for looked after children through system change ........................................................................ 373
Ms. Louise Bazalgette
Supporting the Mental Health of Looked-After Children Across the Primary to Secondary School Transition ........................................... 375
Ms. Helen Drew
Mind your health: The physical and mental health of children and young people in care in Northern Ireland .................................................. 377
Dr. Dominic Mc Sherry, Dr. Montse Fargas Malet
Exploring Links between Child Welfare Outcomes and Poverty .................................................. 379
Dr. Cinzia Canali, Prof. Elizabeth Fernandez
Child poverty in the international context ........................................... 380
Prof. Elizabeth Fernandez
Chronic versus transient child poverty in the United States .................................................. 381
Dr. Jill Berrick, Dr. Sara Kimberlin
Childhood First: Responding to poverty and disadvantage in the early years .................................................. 382
Dr. Cinzia Canali, Dr. Tiziano Vecchietti, Dr. Marzia Sica
How can post-care services contribute to alleviating economic and social disadvantage for young people leaving care? .................................................. 384
Dr. Carme Montserrat, Mr. Joan Prat, Prof. Ferran Casas
Multiple Family Group Therapy with Poor Chinese Families of Children Placed in Out-of-home Care in Hong Kong .................................................. 385
Prof. Mooly Wong, Prof. Joyce Ma, Ms. Choi Lin Londy Chan
Measuring Outcomes .................................................. 386
Ms. Vânia S. Pinto
The child protection system’s response to abuse and neglect in Romania .................................................. 387
Ms. Gabriella Tonk
What Matters to Children, Transitions to Adulthood from Different Types of Care .................................................. 388
Mrs. Mariela Nesu
Going home from residential care: an exploratory study of separation and re-integration experiences of young people and their mothers in Moldova .................................................. 390
Ms. Irina Sirbu
EQAR by ARQUA-P: A nationwide assessment of Residential Care quality in Portugal through a comprehensive system .................................................. 392
Mrs. Sónia Rodrigues, Ms. Ana Catarina Martins, Prof. Maria Barbosa Ducharme, Dr. Jorge F. Del Valle
Different countries, different perspectives? A cross-country comparison of the factors that are associated with successful foster placements .................................................. 394
Ms. Vânia S. Pinto
Use of mental health services in children in residential care: factors associated with referral to therapeutic attention .................................................. 396
Ms. Carla González, Dr. Amaia Bravo, Ms. Alba Aguila, Ms. Silvia Pérez
It’s all or nothing! The trajectories of ‘everything but the kitchen sink’ through preventive programs and out-of-home care in Denmark .................................................. 397
Mrs. Mette Lausten, Mrs. Signe Frederiksen
Factors influencing the length of time care leavers spend on a housing program to promote autonomy .................................................. 398
Mr. Antonio Comasolivas, Dr. Josefina Sala
Factors influencing a positive evolution in teenagers being cared for in intensive education residential centres in Catalonia .................................................. 399
Ms. Marta Sabate, Dr. Laura Arnaú, Dr. Josefina Sala
Long-term outcomes of children who grew up in foster care: Literature Review .................................................. 401
Mrs. Laura Gypen, Prof. Johan Vanderfaellie, Ms. Skrallan De Maeyer, Ms. Laurence Belenger, Dr. Frank Van Holen
Social support and interdependency in transition to adulthood: preliminary findings
Ms. Veronika Paulsen

Self-representation questionnaire for youths in residential care
Prof. Maria Calheiros, Ms. Joana Patrício

On the edge of alternative care? Specialized residential child care in Finland
Mrs. Susanna Hoikkala

Interparental conflict, emotional insecurity and self-representations: the moderating role of parents-adolescent relationship
Ms. Carla Silva, Prof. Maria Calheiros

Preventing out-of-home placement: needs assessment, program design and evaluation in an at-risk community setting
Prof. Maria Calheiros, Dr. João Graça, Ms. Joana Patrício

Assessment of user-satisfaction of the care received from the specialized teams of childhood and family care
Mrs. Patricia González, Dr. Eduardo Martín

International Review on Family Group Conferencing (FGC)
Dr. Karen J Skaaås Havnen, Dr. Øivin Christiansen

Evaluation of an Evidence-informed Practice Training Program in Child Welfare: A Focus on Research
Ms. Kirsten Lwin, Ms. Sarah Head, Ms. Julia Wedes, Mr. Aaron Turpin

The relationship between Burnout and memories of educational parental practices of child and youth at risk care workers
Prof. Luiza Nobre Lima, Dr. Jessica Anciães, Dr. Alexandra Lino

‘What happens after leaving care?’ – Insights from interviews with a group of Irish Care Leavers.
Dr. Conor Mc Mahon, Prof. Robbie Gilligan

Involving young people in research
Ms. Jade Ward, Ms. Jo Dixon, Dr. Sarah Blower, Ms. Heidi, Jade, Mia And Zoe Hp Young People Adolescents’ psychological adjustment and quality in residential care
Mrs. Joana Campos, Mrs. Sónia Rodrigues, Prof. Maria Barbosa Ducharme, Prof. Pedro Dias

Effectiveness of a parent education program for at-risk families. The role of the implementation process
Dr. Lucía Jiménez, Dr. Victoria Hidalgo, Dr. Isabel López, Dr. Bárbara Lorence, Dr. José Sánchez

Economic evaluation in family preservation services. A comparative cost-consequences approach on three Spanish programs
Dr. Susana Lázaro Visa, Dr. Iriana Santos González, Dr. Amaia Bravo

Descriptive study on the emancipation of young people in foster care of SOS Children’s Villages
Dr. Lucía Jiménez, Dr. Victoria Hidalgo, Dr. Isabel López, Dr. Lucía Antolin Suárez, Dr. Bárbara Lorence

Academic situation of children and young people in residential care: a descriptive approximation.
Mrs. María Jesús Rodríguez Costa

Young carers – our care?!
Dr. Anne Marie Huygen, Mrs. Jana Knot Dickscheit

Use of Youth-designed Board Game to express youths’ concerns and voices towards group home care experiences
Mr. Tsz Chung Ng, Ms. Choi Lin Lonely Chan

The experiences of young people in family-oriented care through life course approach: Nigeria and Portugal perspectives
Ms. Temitayo Adeboye, Prof. Maria Da Dores Guerreiro, Prof. Ingrid Höjer

ARQUA system: a new tool for evaluating quality in residential child care
Ms. Silvia Pérez, Ms. Carla González, Ms. Alba Aguilà, Dr. Jorge F. Del Valle
Young people’s rights in care and psychological adjustment: the moderator role of educators’ social support .................................................. 430
Mrs. Enmice Magalhães, Prof. Maria Calheiros, Ms. Joana Patrício
The mentor of resilience in the child protection system .................................................. 432
Ms. Anna Ciurana, Dr. Nuria Fuentes Peláez, Dr. Crescia Pastor
Connecting research and evidence in child welfare practice ........................................... 433
Dr. Patricia Chamberlain
Implementation of evidence based programs in Child Protection Services in Gipuzkoa (Spain) .................................................. 434
Prof. Joaquín De Paúl
Help, I need somebody; help, not just anybody; help, you know I need someone; help...! About child and family services research that we could learn from .................................................. 436
Prof. Erik J. Knorth
The connection between young adults’ future expectations before leaving care and outcomes after leaving care .................................................. 438
Dr. Yafit Suliman Aidan
Evaluating an Intervention to Prevent Homelessness and Other Poor Outcomes among Youth Aging Out of Orphanages in Poland .................................................. 439
Dr. Małgorzata Szaryzyńska, Dr. Małgorzata Gocman, Prof. Paul Toro
The influence of informal social support on the lives of young people leaving state out-of-home care .................................................. 440
Ms. Jacinta Waugh
Getting ready for leaving: improving young people’s experiences of preparing to leave residential care .................................................. 441
Dr. Leslie Hicks, Ms. Jenny Dagg, Mr. Nat O’Brien
Preserving and memorialising relationships: Exploring young people’s experiences of foster care through the lens of social capital .................................................. 443
Dr. Justin Rogers
Which is the contact influence on foster care outcomes? Foster carers and professionals’ perspectives .................................................. 444
Ms. Vânia S. Pinto, Dr. Paulo Delgado, Dr. João M. S. Carvalho
Adversity and Adjustment in Children in Institutions, Family Foster Care, and Adoption .................................................. 445
Dr. Jesús M. Jiménez Morago, Dr. Esperanza León, Dr. Maite Román, Prof. Jesús Palacios
The backgrounds of children in out of home care in Wales .................................................. 446
Mr. Martin Elliott
The population’s confidence in the child protection system - a survey study of England, Finland, Norway and the U.S. (California) .................................................. 447
Ms. Ida Benedicte Juhasz, Prof. Mari Skivenes
A qualitative comparison of three child protection systems in three countries .................................................. 448
Dr. Laura Schwab Reese, Dr. Karen Albright, Dr. Richard Krugman
Traditional versus standardized approach in Norwegian Child Welfare: a comparison .................................................. 449
Mrs. Inger Kristin Heggdalsvik, Dr. Per Arne Rød
Child visibility in families and child protection work across welfare contexts .................................................. 451
Ms. Ida Bruheim Jensen, Dr. Ingunn T. Ellingsen, Prof. Ingunn Studsrød
Children’s Guardian in England and Child’s spokesperson in Norway: their objective and tasks in care order decisions .................................................. 453
Ms. Marie Folleide
Strengthening Communities one biography at a time .................................................. 454
Mr. Seamus Mannion, Ms. Dorienne Silva, Ms. Diana Matteson
IDE-AS in action. Participative practices of evaluation in the home-care intervention field .................................................. 456
Dr. Sara Serbati, Dr. Andrea Petrella, Prof. Paola Milani
Adapting a Promising Multi-Faceted Child Maltreatment Preventive Intervention - Grandparent Family Connections (GFC) .......................................................... 458
Dr. Pam Freeman, Dr. Diane Depanfilis, Dr. Fred Strieder
Availability of preventive measures before the out-of-home placement .................. 460
Dr. Tarja Heino
The art and science of implementing evidence-based child maltreatment preventive intervention in the real world .......................................................... 462
Prof. Diane De Panfilis
Using interrupted time series data to assess the efficacy of the CARE program model for residential care ................................................................. 463
Dr. Elliott G. Smith, Dr. Charles Izzo
Evaluation of therapeutic approaches to social work in residential child care settings .... 464
Prof. Geraldine Macdonald, Dr. Sharon Miller
Implementing Whole Home Training for Residential Children Homes in the UK context- RESuLT. 465
Ms. Cath Connolly
Residential care as a ‘permanence’ option: a case study ........................................ 466
Prof. June Thoburn, Prof. Gillian Schofield
Costs of child welfare interventions .................................................................. 467
Ms. Lisa Holmes
The role and use of cost effectiveness studies for child welfare decision making for both policy and practice ................................................................. 468
Ms. Jennifer Haight, Ms. Lisa Holmes
Attitudes and allocations: The relationship between workers’ perspectives about their jobs and time spent on casework activities ........................................ 470
Ms. Kerry Price, Dr. Sara Feldman, Dr. Fred Wulczyn, Dr. John Fluke, Dr. Dana Hollinshead
How child welfare workers spend their time: A comparison of two US child welfare systems 472
Dr. Sara Feldman, Ms. Kerry Price, Dr. Fred Wulczyn
The Cost of Implementing New Strategies (COINS): examples from the US and UK .... 473
Dr. Lisa Saldana, Mrs. Samantha Mc Dermid, Mr. Mark Campbell
Costing a child’s journey through the child welfare system from in home to out of home care 475
Ms. Lisa Holmes, Mrs. Samantha Mc Dermid, Ms. Clare Lushey
Understanding the complexity of the matching decision making in out-of-home care .......... 476
Ms. Kirti Zeijlman, Dr. Mónica López
Plans and surprises: matching children and substitute homes .................................. 477
Prof. Tarja Pusö, Dr. Rosi Enroos, Dr. Riitta Laakso
Factors influencing decision making about placement in out of home care: Development of the Child Placement Questionnaire ........................................... 478
Ms. Jenna Meiksans, Ms. Marie Iannos, Prof. Fiona Arney
Matching decision making in family foster care: Experiences of matching professionals in daily practice ................................................................. 479
Ms. Kirti Zeijlman, Dr. Mónica López, Prof. Hans Grietens, Prof. Erik J. Knorth
Matching in Flanders: research with the Assessment Questionnaire Foster care Situations -Revised .......................................................... 481
Ms. Skrallan De Maeyer, Prof. Johan Vanderfaellie, Dr. Frank Van Holen, Mrs. Laura Gypen, Ms. Laurence Belenger
Understanding the complexity of the matching decision making in out-of-home care-Gipuzkoaa’s framework for matching: family selection, knowledge of child’s characteristics and needs, and a good precition of the mutual impact and interaction if matched .................. 483
Mrs. Cristina Achúcarro, Mrs. Cristina Herce, Mrs. Ana Rivero
Developing autonomy and resilience in care leavers: practices and evaluation processes .... 485
Dr. Luisa Pandolfi
Hearing a different story? Expressing identities and continuities through music for young adults previously in care .......................................................... 487
Prof. Janet Boddy, Dr. Jeanette Østergaard
Perceptions of “doing well” among young adults formerly placed in care .......... 489
Dr. Elisiv Bakkevig, Dr. Tonje Gundersen
Care Leavers from Foster Care – Young People on their Way from Care to Adulthood ........ 490
Mrs. Carolin Ehlike
Foster care breakdown: The role of attachment, behavior difficulties and violence .......... 492
Prof. Carmen Panigagua, Prof. Jesús Palacios, Dr. Jesús M. Jiménez Morago
A meta-analysis on disruptions of foster care: directions for further development .......... 493
Mrs. Carolien Konijn
Children in Care in Ireland: factors associated with time in care, number and types of placement 494
Ms. Donna O’leary, Prof. Alastair Christie, Mr. Tony Fitzgerald
Managing endings in foster care placements – what happens when things ‘go wrong’? .......... 495
Mr. Jim Rose
Dignifying families at risk: How a change in caseworker approach changes user perspective, agency and perception of self .................................................. 497
Dr. Anne Marie Villumsen
Challenges in interagency cooperation – workforce and child welfare as different points of departure 499
Prof. Torunn Alise Ask, Dr. Solveig Sagatun
Collaboration experiences in multi-sectoral networks for vulnerable youth: A multiple case study 501
Dr. Sarah Dufour, Dr. Louise Lemay, Mrs. Catherine Jauzion Graverolle
A generative welfare is needed for shaping the new welfare ...................................... 502
Dr. Cinzia Canali, Dr. Tiziano Vecchiato
Interprofessional collaboration in Finnish residential child care; challenges for child protection and health care practitioners working together ........................................... 504
Mrs. Éva Timonen Kallio
Comparing the Effectiveness of Functional Family Therapy and Multisystemic Therapy Using
the Propensity Score Method .................................................................................. 505
Ms. Hester V. Eeren, Dr. Lucas M.A. Goossens, Ms. Aurelie M.C. Lange, Prof. Ron H.J. Scholte, Prof. Jan J.V. Busschbach, Dr. Rachel E.A. Van Der Rijken
Decision-making on preservation of families in multi-problem situations: Family-, parent-, and child-related factors. ................................................................. 506
Ms. Anne Fleur Vischer, Prof. Hans Grietens, Prof. Erik J. Knorth, Dr. Wendy Post
Targeting Supervisors to Create Child Welfare System Change: A State-Initiated Rollout of
the R3 Supervision Model ...................................................................................... 508
Dr. Lisa Saldana, Ms. Janet P. Davis, Dr. Patricia Chamberlain
Family complexity in child welfare - A comparative study on family intervention .......... 510
Dr. Ingum T. Ellingsen, Prof. Ingum Studsrud, Ms. Ida Bruheim Jensen
Success and failure in identifying abusive or neglectful parents who have the capacity to change 511
Prof. Harriet Ward, Dr. Georgia Hyde Dryden
The power issue on the negotiation process of discharge – perceptions of children in care, caregivers and social workers ......................................................... 513
Prof. Moody Wong
THE «COLLECTIVE LISTENING» AS A TOOL FOR THE EMERGENCE OF THE VOICE
OF THE CHILDREN IN OUT-OF-HOME CARE .................................................. 514
Dr. Silvio Premoli, Prof. Valerio Belotti
Outcomes in Kinship Care in Western Australia: what young people say. .................. 516
Mr. Murray Davies, Mrs. Judith Garred
Working with Foster Care and the use of Family Group Conferences. Children and adolescent’s experiences. ................................................................. 517
Mrs. Anne Kari Johnsen, Prof. Astrid Strandbu
Evidence-based positive parenting programs: A prevention strategy for at-risk families. . . . 518
Dr. María José Rodrigo
The Family Education and Support Program: A psycho-educational intervention to promote positive parenting with families at risk ................................................................. 519
Dr. Lucía Jiménez, Dr. Victoria Hidalgo, Dr. Bárbara Lorence, Dr. Susana Menéndez, Dr. José Sánchez
Evidence-Based Parenting Program to Develop Emotional Competences .......................... 520
Dr. Raquel Amaya Martínez González
The Moderating Role of Quality of Neighborhood on the Effectiveness of a Home- and Group-based Parenting Program. ................................................................. 521
Dr. María José Rodrigo, Dr. Miriam Alvarez, Dr. Sonia Padilla, Dr. Sonia Byrne
The Child Protection System: A Parental Competences Program during the process of Fostering and Family Reunification ................................................................. 522
Dr. M. Angels Balsells, Dr. Crescencia Pastor, Dr. Nuria Fuentes Peláez
Surveying positive parenting interventions in educational, health, child protection and social services: A Portuguese study ................................................................. 523
Prof. Ana Almeida, Prof. Orlando Cruz
Implementation Science and Decision Making in Child Welfare ......................................... 524
Dr. John Fluke, Dr. Matt Davis
The role of Decision Making in Implementation Science ................................................... 525
Dr. John Fluke
In-Depth Organizational Evaluation of Child Welfare Agencies ....................................... 526
Dr. Mary Armstrong
Implementing Evidence-Based Programs ........................................................................... 527
Ms. Melissa Johnson
Using Implementation Science and Continuous Quality Assurance to Increase Program Effectiveness ................................................................. 528
Dr. Matt Davis, Ms. Mindy Vanderloo
Using Technology to Develop Effective Continuous Quality Assurance Mechanisms .... 529
Mr. Michael Tanana
Challenges for ‘global’ thinking and practice in child welfare ............................................ 530
Prof. Tarja Pusö
Children in transnational families: Intersectional perspectives on serial migration and language brokering ................................................................. 531
Dr. Anne Phoenix
Asylum-seeking children in Spain: needs and intervention models ................................... 532
Dr. Amaia Bravo
Characteristics of children in foster care, family-style group care, and residential care: A scoping review ................................................................. 533
Mrs. Harmke Leloux Opmeer, Dr. Chris H.Z. Kuiper, Prof. Evert M. Scholte
Results of SOP, an intensive support program to improve collaboration between birth and foster parents ................................................................. 534
Ms. Laurence Belenger, Prof. Johan Vanderfaellie, Dr. Frank Van Holen, Ms. Skrallan De Maeyer, Mrs. Laura Gypen
A framework for moving children from long-term foster care to adoption ...................... 535
Dr. Susan Tregeagle, Ms. Lynne Moggach, Prof. Harriet Ward
Does foster children’s poor school performance cause later psychosocial problems? Evidence from national registry data ................................................................. 537
Ms. Hilma Forsman, Dr. Lars Brännström, Prof. Bo Vinnerljung, Prof. Anders Hjern
Family group conference in foster care: The role of the coordinator ................................. 538
XIV International Conference EUSARF 2016: Shaping the Future

Dr. Ketil Lenert Hansen, Prof. Astrid Strandbu, Dr. Renee Thørnblad
Judgments and Decisions in Foster Care – The Professionals at Stake .............................................. 540
Dr. João M. S. Carvalho, Dr. Paulo Delgado, Prof. Rami Benbenishty, Dr. Bihah Davidson Arad,
Ms. Vânia Pinto
What could be effective ways to improve decision-making in child maltreatment cases? ........ 541
Ms. Cora Bartelink
Making decisions in the child’s time frame: reforms of care proceedings in England and its
effects ........................................................................................................................................ 542
Prof. Judith Masson, Prof. Jonathan Dickens
Decision support in case management for high risk families ............................................................ 544
Ms. Mirte Forrer, Ms. Inge Busschers, Mr. Marc Dinkgreve
Decision maker perceptions of the optimal out of home placement ................................................. 545
Ms. Jenna Meiksans, Prof. Fiona Arney, Dr. Sara Mc Lean
Taking notice of children in child protection practice when assessing risk: An Australian example 546
Prof. Morag Mc Arthur, Dr. Tim Moore
Maternal Intellectual Disability and Infant Neglect: Child Welfare Risk Assessments in Norway,
England and the United States ........................................................................................................ 547
Mr. Øyvind Tefre
Prevalence and risk factors of child neglect in the general population ........................................... 549
Dr. Clement Marie Eve, Dr. Annie Berube, Mrs. Claire Chamberland
What makes an Expert in Risk Assessment in Child Protection? .................................................... 550
Prof. Mark Schrödter, Dr. Pascal Bastian
Understanding the evidence on the educational progress of young people in care .................. 551
Prof. Judy Sebba
Educational Progress of Looked After Children in England: Linking Care and Educational Data 552
Dr. Nikki Luke
Educational Progress of Looked After Children in England: Young People’s Perspectives . . 554
Prof. David Berridge
What risk and protective factors predict educational success among young people in care? . . 556
Dr. Nicholas Tessier, Dr. Robert Flynn, Mrs. Aoife O’higgins
Effects of a book gifting programme for foster children: RCT of The Letterbox Club in Northern
Ireland ............................................................................................................................................. 557
Dr. Karen Winter, Dr. Jennifer Mooney
Chairperson and discussant of symposium: Next steps in research in improving the education
of children in care .......................................................................................................................... 559
Prof. Judy Sebba
Child protection across borders: comparing policy and systems ..................................................... 561
Prof. Nina Biehal, Dr. Mónica López
Developments in child protection in England .................................................................................... 562
Ms. Helen Baldwin, Prof. Nina Biehal
The challenge of balancing the rights of parents, children and the state in Germany ............. 564
Dr. Susanne Witte
The role of the state in child protection in the Netherlands ............................................................. 565
Ms. Helen Bouma, Dr. Mónica López, Prof. Hans Grietens, Prof. Erik J. Knorth
Does Policy Variation Drive Child Welfare Outcomes: The Case of Adoption ....................... 567
Dr. Fred Wulczyn
Comparing child protection policy in three European countries .................................................. 568
Prof. Nina Biehal
Training principles in the child and youth care field: Implications for theory, practice and
research ....................................................................................................................................... 570
Prof. Shlomo Romi, Prof. Emmanuel Grupper
Three guiding principles structuring the field of Child and Youth Care and their application to training .................................................. 571
Prof. Shlomo Romi

Professional development and agency change: Lessons learned from training in agencies and academia .................................................. 573
Prof. Jim Anglin

The problematic of training child and youth care professionals capable of intervening with a large variety of people experiencing challenges ............................................. 575
Prof. Emmanuel Grupper

Practical training for social work students: Harnessing theoretical knowledge and practical experience ........................................................................ 577
Mrs. Clara Bombach
What are we doing to improve health and wellbeing of children in residential care in the Spanish child protection system?

Wednesday, 14th September - 09:30 - Plenary Session

Dr. Jorge F. Del Valle (University of Oviedo)

There is a unanimous consensus about the high prevalence of emotional and behavioural disorders in children and young people in care. Child residential care workers have to face in the everyday life difficult situations due to alarming increase of violent and noncompliant behaviour, as well as other internalizing disorders such as depression or suicide behaviour.

In this presentation we will try to describe the Spanish child protection system and its evolution in the last two decades. In that time the Spanish welfare system moved from a charitable model (in force during all the dictatorship after the civil war) to a social services public model guaranteed by the democratic Constitution in 1978. We will describe the current structure, functions and legal framework of the child protection system in our country.

In this context we will present preliminary data of a longitudinal research about mental health needs of children and young people in residential care in our country. We have assessed a sample of 1,225 children in terms of personal variables, family background and mental health needs. We used two criteria for mental health needs: the current use of mental health services and the objective assessment by means of CBCL and YSR of the ASEBA system. The design included a longitudinal assessment, repeating measurements every year during three years.

Results about profiles of children and young people, referrals to treatment and evolution in the longitudinal study will be presented.
Changing the way we think about kinship care

Wednesday, 14th September - 11:00 - Kinship Care

Ms. Carol Wassell (Centre for Excellence for Looked After Children in Scotland, (CELCIS) University of Strathclyde), Mr. Robert Porter (CELCIS, University of Strathclyde), Dr. Vicki Welch (CELCIS, University of Strathclyde)

There is growing formal recognition that children who are looked after away from home should be brought up in their family of origin wherever possible (Scottish Government 2007, 2009; Algate and McIntosh 2009). When children are at risk of abuse, or birth parents are unable to provide care, state authorities may intervene to remove the child and place them with other members of their family in ‘kinship care’. Children need carers who are able to meet their needs for life. There is concern in Scotland that the option of permanent kinship care is not always explored early enough, beginning after a child has been placed in local authority care, and resulting in additional, unnecessary placement moves and instability. Equally, there is concern that children are placed with kinship carers on an emergency basis and left too long with carers who are not able to meet their needs in the long term.

Objective: This paper describes a project working to improve systems and practice in decision making and assessment for kinship. The project seeks to refocus kinship as a proactive child care intervention when there is a risk to a child, or when they are unable to remain in their parents care. Quality Improvement methodology (Langley et al 2009) and Active Implementation theory (Fixen et al 2005) are being used to create sustainable changes that include avoiding unnecessarily placing children outside of their family of origin. The project also tackles disruption and delay resulting from spending too much time assessing unsuitable kinship carers.

Method: A number of strategies and methods are being used to bring about measurable improvement to the care experiences of children and promote their long-term stability. The project works in local areas to explore human behaviour, and understand and develop data and systems. This supports local managers and practitioners in developing a theory of change and identifying appropriate models to bring about positive changes.

Results: Successes have included identification of more potential kinship carers, quicker assessment of suitability, and shifts in managers’ and frontline staff’s thinking. Data have been produced indicating how long it takes for the local authority to make a decision to permanently place children in kinship care, or to rule out kinship options. Importantly the data also identifies those children who are still waiting, allowing drift to be addressed. The project is changing the way we think about early identification, and more timely assessments of carers. The aim is that this will reduce unnecessary placement moves for children and allow timelier placement with suitable carers.

Conclusion: The project seeks to build an evidence-base of good practice in the identification and assessment of kinship carers that can be used as a blueprint in other contexts.

This work is part of a wider project that delivers Permanence and Care Excellence (PACE) (an improvement project delivered jointly by CELCIS and the Scottish Government) to a number of Local Authority areas in Scotland. The PACE project seeks to demonstrate active delivery of work from a multi-agency group to improve outcomes for looked after children.
Families’ experience of kinship care in the North of France.

Wednesday, 14th September - 11:15 - Kinship Care

Mrs. Sarah Mosca (University Lille1), Prof. Bernadette Tillard (University Lille1)

Background

The paper is based on a PhD thesis in progress: “Children living in kinship care in the North of France”. A study currently ended was funded by ONED – Observatoire National de l’Enfance en Danger (National Observatory of Child Protection) on this topic.

In France, formal kinship care are rarely pronounced (7% of Out-of-home care). They represent a special figure of delegation to relatives or friends. When the judge uses this possibility, he gives the child custody to grandparent (mainly), uncle, aunt, or others relatives. In some cases, he requests an additional educational intervention at home - called AEMO (Aide Educative en Milieu Ouvet) - to establish the new relationship between the child, the kin-carer and the parents. Contrary to stranger foster carers, kin-carers do not receive wages, but they may ask and get an allowance for daily life (food, clothes, etc.).

The field ground is in the North of France. This area is specially concerned by child protection due to his young population and the greatest proportion of children in care in France.

Purpose

In this paper, we will focus on the families’ experience in kinship care.

- How the different members of the family contribute to the decision of kinship care?
- How the family perceives the social interventions?
- How relationships evolve within the family during kinship care?
- How birth parents take part in child bringing-up during kinship care?
- What do kin carers expect from this educational intervention?

Population and methodology:

Our qualitative methodology is inspired by ethnographic approach. The fieldwork began in a non-profit association that provides educative help at home at the judge request (AEMO). With the help of agency managers, we considered all the cases covered. From June 2014 to June 2015, we found 30 cases of educational intervention with formal or informal kinship care. Through the agency of social worker in charge of the case, we informed the family on our research and ask for their agreement to participate. Our work is based on interviews, as well as fieldwork observations at home (kin carers’ home, birth parents’ home).

In each situation, we tried to collect the points of view of social worker and members of family: kin-carers, parents and minors concerned. It was actually difficult to interview all the family members involved due to reasons in links with kinship care: family conflicts, missing parents, uncooperative relationship between social worker and family…

Data

For this communication we would focus on one case to show the main features of the first results and the new questions that come from these meetings. As a first step, we will describe the characteristics
of the family and the child in kinship care, the child life course before kinship care and the current situation.

Then, based on this case study, we will propose an analysis of family life in kinship care. In particular, we examine the role of kin-carer before and after the placement. We will study the interactions between kin-carers, birth parents and social worker, the supports provided and how they were perceived by the family.

Key references:


Young kinship carers - a hidden population?

Wednesday, 14th September - 11:30 - Kinship Care

Dr. Meredith Kiraly (University of Melbourne)

For many people, sibling relationships are the closest and longest lasting family relationships and as such, may provide social and emotional support across the life course for children who have experienced trauma. This presentation will describe ground-breaking Australian research in identifying the prevalence of young kinship carers, many of whom are siblings.

Numbers of children placed in kinship foster care continue to rise in many Western countries. Much greater numbers of children are living with extended family or friends in private care arrangements, although in some cases child protection have been involved prior to these arrangements being struck. A widespread assumption is that most kinship care is provided by grandparents; in fact, there is little data about the diversity of relationships between children and their kin carers. A surprising finding by Bristol University researchers in 2011 through census data analysis was the existence of large numbers of British young people raising younger siblings, apparently mostly in private arrangements. These young carers were identified as predominantly female and single, frequently living in poverty and forgoing education and employment opportunities. The researchers enjoined researchers to explore whether there may also be hidden populations of sibling carers in other countries, and if so, the circumstances under which they are living. Another English study in 2011 involved a survey and interviews with sibling carers. It identified these young carers struggling with their caring role, financial circumstances and social isolation, with limited casework or financial support from welfare services. These two studies may be the first in the Western world to have paid attention to a group of young kinship carers and children in their care.

An Australian study at the University of Melbourne was established in 2013 to determine the prevalence of sibling kinship carers and to explore their circumstances and support needs. The research project followed the Bristol project by starting with analysis of census data. However, it emerged that the carer-child relationship was difficult to identify this way. The study has therefore re-focused on young kinship carers, that is, carers aged 30 years or less who are raising young siblings, nephews, nieces and other relatives. Census analysis has identified the prevalence of two-generational kinship care households in Australia across the age spectrum. Challenging the view that almost all kinship carers are grandparents, a significant proportion of such households involve kinship carers age 30 or less. Clearly, there may be many more young kinship carers in three generational households. Interviews with both informal and formal young kinship carers have suggested that while children in the care of young relatives may be experiencing stability and security, the circumstances of their carers echo those of the British sibling care studies, including poverty and social isolation, and opportunity costs with regard to education and employment.

A second stage of research project currently in train involves a nationwide survey to explore the circumstances and support needs of young carers and children/youth in their care, and an action research component to trial an online support group for young carers. Research findings will be presented to policymakers, practitioners and the community in order to raise awareness and advocate for the support needs of what appears to be a hidden group of young carers and children/youth.

This article will describe the prevalence and support needs of young kinship care families in Australia based on Stage 1 of the research project. It is hoped that this work may also inspire efforts in other countries to identify the prevalence of young kinship carers, and to provide greater support to young carers and children/youth in their care.
The role of short term kinship care in the overall trajectory of protective interventions: a study from Quebec.

Wednesday, 14th September - 11:45 - Kinship Care

Dr. Poirier Marie-Andrée (University of Montreal, School of Social Work), Dr. Sonia Hélie (Research Center for Vulnerable Youth, Integrated University Health and Social Services Center for Central South Island of Montreal), Dr. Chantal Lavergne (Research Center for Vulnerable Youth, Integrated University Health and Social Services Center for Central South Island of Montreal), Dr. Daniel Turcotte (Laval University, School of Social work), Mrs. Geneviève Turcotte (Research Center for Vulnerable Youth, Integrated University Health and Social Services Center for Central South Island of Montreal)

In Quebec, since 2007, an increase in the use of kinship care in comparison with other forms of placement has been observed to the extent that now almost one in three children removed from their homes are placed in this type of foster family. Current research indicates that kinship care tends to be more stable than placement in regular foster families (Farmer 2010; Koh et Testa, 2008; O’Neill et al., 2008). Nevertheless, according to a recent Quebec study, Hélie, Turcotte and Turcotte (2015) observed that compared to children placed in family foster care, those who are placed in kinship care are more likely to have their placement taking place and terminating during the investigation process, before any further ongoing services be provided. This observation brings attention to an aspect of kinship care that, to this point, has received little scholarly consideration - its use as a short term rather than longer term resource for out-of-home placement. The aim of this presentation is to provide a portrait of children placed in kinship care in Quebec and to explore the role of short term kinship care within the overall trajectory of protective interventions.

Methodological aspects: The findings to be presented are drawn from an ongoing study involving a 170 children (0-12 years), who were placed in kinship care. The longitudinal follow up of these situations will allow for the documentation of the stability of the placement trajectory as well as of the particular characteristics of the child, his/her home environment, and those of his/her kinship environment. Research data is collected through a review of administrative records as well as through two short telephone interviews with the social workers responsible for each child. The first interview takes place at the beginning of the placement and the second at its termination. The collected data documents, amongst other things, the motives and circumstances surrounding the beginning and end of the placement; the support offered to the biological parents and the substitute carers; the frequency of contacts between the child and his/her biological parents and the the overall progress of the child throughout the placement. Preliminary descriptive analyses provide a detailed portrait of the children (N=170) involved in the study. For example, it has been noted that the majority of children (65%) were removed from their homes due to neglect; almost half (42%) have a brother or sister who was also placed in kinship care; in more than two thirds of the cases (69%), the placement was initiated during the period of investigation. At the time of initial placement, children were predominantly living in the care of their family of origin (75%). Of the remaining, children were residing in a formal out-of-home placement (14%); in another kinship family (6%) and 5% had been placed from hospital following their birth. Children were entrusted to a grandparent or a great grandparent (46%); to an uncle or an aunt (29%), to another member of family such as an adult brother or sister (9%), or to a member of the child’s family circle (15%). Later analyses will provide a detailed exploration of the role of kinship care within the trajectory of service for a subgroup of children for whom placement had ended at the moment of processing the data (24 months at least). After a 18 months follow up, 81 children had already left their kinship family to return to: their family of origin (n=51), to another kinship home (n=9), or to another out-of-home resource
(n=21). Analysis will enable the identification of variables associated with these different routes out of kinship care.
Kinship care in the North of France: a view of quantitative data in collaboration with local authorities.

Wednesday, 14th September - 12:00 - Kinship Care

Prof. Bernadette Tillard (University Lille1), Mrs. Sarah Mosca (University Lille1)

Context.

June Thoburn’s cross-national comparison of the main trends in child protection noted that in France there are less children who are fostered by family or friends than in most other countries (Thoburn J., 2007, p. 30). This paper examine the quantitative data available on formal kinship care in the North area (Département du Nord 59). This paper is a part of a study founded by ONED.

Aim

In France, children in kinship care are mostly living in their extended family. Sometimes the relatives close to the biological parents, are designated by the judge as “tiers digne de confiance” (reliable family). In some cases, the judge requests an additional educational intervention at home (EIAH)-called in French AEMO (Aide Educative en Milieu Ouvert) - to establish the new relationship between the child, the kin-carer and the parents. What are the main features of children in kinship care without educational intervention at home in comparison with children in kinship care with an additional educational intervention? Sarah Mosca’s PhD focuses on kinship care with EIAH. This paper allows to draw a wider frame for her qualitative research.

Method. In collaboration with the local authorities, we highlight the features of these two types of formal kinship care (Kinship with or without EIAH), thanks to the anonymous data base of children in formal kinship care, registered on December 31th, 2014.

Results and outcomes.

What are the data available on this topic in France? Have they changed since June Thoburn’s report?

The last national counting available on Decembre 31th, 2013 confirms this number: 6.8% of the children in care are in kinship care in France (Drees 2015, Serie stat 196, tab8.ase). In the two départements of our area Nord – Pas-de-Calais: among the 18 581 children in care, 8 900 children are in kinship care (6.6% in Nord, 4.4% in Pas-de-Calais).

Base on the 870 children in formal kinship care in the North department on December 31th, 2014, we show the differences between kinship care without EIAH and with EIAH regarding the sex of the child, the age of the child on December 31th, 2014., the age of the child at the first child protection intervention, the nature of the first intervention, the allowance received or not by the kin-carer.

A complementary information on the movements of children entering and leaving formal kinship care are compared to the incoming and outgoing flows of children followed by child protection in this area.

Conclusion.

In next months, we hope to compare more deeply the features of kinship care with those of all children in out-of-home care in the same area. Nevertheless this first collaboration gives us a clear view of the difference between kinship with or without EIAH.

References


Wednesday, 14th September - 11:00 - Child Welfare Workers

Mr. Tim Stroobants (Vrije Universiteit Brussel / Child and Family), Mrs. Benedikte Van den Bruel (Jongerenwelzijn), Mrs. Anne Vanden Berge (Child and Family), Prof. Johan Vanderfaellie (Vrije Universiteit Brussel)

Despite an ideological focus on prevention and a fair amount of universal services and family-based interventions for families and children at risk, a relatively high number of children is placed out of their home each year in Flanders (Belgium). This may be due to several reasons, such as a deficient care system, a normative foundation of the system and poor quality of services (Poso, Skivenes, & Hestbaek, 2014; Ward, 2009). Because of the intrusive nature of out-of-home placement for all involved, it is especially important to develop an up-to-date and comprehensive policy that takes into account the diversity of needs, UN Convention on the Rights of the Child, European Convention on Human Rights, and UN guidelines for the Alternative Care of Children. This also concerns the debate about foster care as the first option of choice and criticism of residential care.

This study examines the perspectives of Child Welfare workers on the out-of-home placement of young children (0-6 years). Their attitudes about and considerations on the current situation, strengths and weaknesses, and opportunities for improvement are explored. Four focus groups were organized. It concerned nine practitioners from residential care for children (0-12 years) funded by Child and Family (focus group 1), eleven practitioners from residential care for minors (0-18 years) funded by Jongerenwelzijn (focus group 2), six practitioners from residential care for families (focus group 3), and five practitioners from foster care agencies (focus group 4). Each meeting was structured with the same interview schedule and moderated by two persons. Four themes were addressed through twelve questions: prevention of out-of-home placement, decision-making, foster care and residential care. Each focus group resulted in a report with the main discussions and conclusions, validated by the participants. Next, the reports were thematically analysed by two persons.

Results will be presented concerning the four main themes. They give a nuanced representation of the daily practice in out-of-home care and opportunities for improvement. Some topics can be identified across the main themes. Practitioners emphasize the importance of clear and open communication to the children and parents at the start of and through the process. They also address some difficulties and opportunities in this process, especially concerning the young children. Also, the instability of placements is a well-known reality with many causes, but some solutions were identified. Next, the great potential of foster care on the one hand and challenges to make use of the full potential of it on the other hand is a major theme. Finally, the somewhat difficult position of residential care in the pursuit of deinstitutionalisation and as a last resort is discussed. These results will form the basis of policy guidelines and actions for improvement with regard to a better prevention of out-of-home-placement, cooperation between care providers, the realization of more and better foster care and the strengthening of and adjustments to residential care.
Caseworkers’ Experiences One Year after the Family Group Conference: A Follow-up Study

Wednesday, 14th September - 11:18 - Child Welfare Workers

Prof. Toril Synnøve Jenssen (UIT The Artic University of Tromsø), Dr. Merete Saus (Uit the Arctic University of Norway)

Objectives:
The present paper will describe a study within a larger project on the implementation of Family Group Conference (FGC) in foster care work. The theoretical basis is a democratization and empowerment approach in social work, allowing users of welfare services more authority in decisions, but also demanding new skills and attitudes in the field of practice. The study addresses why FGC is not widely spread as a decision making process despite the overwhelming enthusiasm for the method that is registered among child protection workers and families involved. Our research question: What can we learn from studying caseworkers’ experiences with follow-up work, in order to adjust FGC to become more widespread and applied?

Method:
The empirical data material for the analysis is 16 semi-structured interviews with caseworkers one year after the FGC. Eighteen similar questions were raised and discussed. Important topics such as what is the child’s current situation, is the plan of action made by the FGC participants realized, who in the extended family has contributed and in what way, and what is the quality of your working conditions for the follow-up process? All the interviews have been transcribed and analysis was done using Nvivo. The study was conducted in accordance with international standards for research ethics.

Results:
In FGC a plan of action is made and agreed upon after discussions done by the extended family/network without a child welfare caseworker present. This plan gives the family influence on the following social arrangements for the child. We found that almost every action plan was changed, often concerning significant aspects of care and custody. Many children had moved, and lived in new homes, with other caregivers than the family had agreed upon during their meeting. Very few of our informants payed attention to the action plan. In many cases new caseworkers had taken over the follow-up work, due to the organization of the child welfare office in different departments. We question if the follow-up of the action plan is adequate and if the child welfare system actually undermine the democratic value basis by ignoring the importance of the extended family’s plan of action for the child. Another finding is that arranging a follow-up FGC by inviting the same participants from the extended family is not always done. Ordinary network meetings are often preferred by caseworkers for practical reasons or for the reason to be in control of the discussion in the network.

Conclusions:
Child welfare work today is organized in a linear structure starting with a report of concern about a child’s situation, followed by investigation, intervention implemented or case dropped, and finally evaluation. The results are measured by mapping the effect of the intervention. However, in reality, the cases are moving in circles, rather than in a linear fashion, and more than formed by fixed decisions they are characterized by complex social processes. To carry out the democratic ambition and
facilitate empowerment practice for the family, child welfare work could benefit from implementing an organization that accounts for the processual character of the cases.

We argue that more emphasis must be placed on the follow-up work and the processual part of FGC. Thereby the method will be more consistent with the changing character of the cases, perhaps more wide spread, and used - in accordance with the registered enthusiasm.
Children of God or children of white men?: Caregiver perceptions of children in their care and motivations for the care work in children’s homes in Ghana.

Wednesday, 14th September - 11:36 - Child Welfare Workers

Mr. Ernest Darkwah (University of Bergen), Prof. Marguerite Daniel (University of Bergen), Dr. Maxwell Asumeng (University of Ghana)

The perceptions and motivations that workers have in their work and work environment are important determinants of the quality of work they do. For people who work in residential institutions where children who have lost the care of their parents receive care, these perceptions and motivations become a crucial part in determining the quality of services or care the children are given. This study set out to explore the perceptions and motivations of caregivers in the residential institutional context in Ghana. Adopting a qualitative, phenomenological approach, data were collected from 35 caregivers in two children’s homes in Ghana through participant observations, focus group discussions and in-depth interviews. It emerged that caregivers perceived the children in their care first as children of God and then as children of white men and were predominantly motivated by their religious convictions to keep doing ‘the work of God’. Other motivations included personal life situations and economic aspects of the job. Clashes between perceived religious duty and child rights restrictions seemed to frustrate caregivers as they struggled to see themselves as ‘good parents’ and therefore tended to perceive and treat the children not as their own.
Research: Identifying 'Artistry' in Therapeutic Residential Workers - Fact or Fiction?

Wednesday, 14th September - 11:54 - Child Welfare Workers

Ms. Glenys Bristow (Victoria University Melbourne Australia), Mrs. Jeannie Jones (Private Consultant)

Doctoral research: Identifying Artistry in Child & Youth Residential Workers: Fact or fiction?

Objective:
To understand the types of knowledge; ‘artistry’ and/or characteristics residential workers with high risk adolescents ‘bring’ to the field when they start.

Purpose:
To clearly articulate a theoretical model or framework to enable the identification of the ‘right people’ for the work of therapeutic residential care to provide consistent and stable care to young people - prioritising relationships with a significant and trusted adult.

This will
• correctly inform and target workforce promotion,
• have implications for recruitment,
• reduce both Work cover and sickness costs and;
• reduce the loss of trained and valued workers due to their inability to cope with the work, which will increase the safety, stability and consistency of care for children and young people.

To understand, celebrate and represent the richness; ‘artistry’, characteristics, values and ‘types of knowledge’ residential workers ‘bring with them’ to the field whilst doing justice to the life stories people have shared with me about where we all came from, who we are and how we ‘came to be’. This ongoing tension greatly emphasises the importance of recruiting the ‘right’ people to work with our most vulnerable children and young people.

Research Questions:
What are the characteristics (types of knowledge) residential youth workers with high-risk children and young people bring to the field of residential work?

• What are the characteristics, ethics and values that make a ‘good enough’ (Sharpe 2006) residential child and youth care worker?
• Are the multiplicities of theories demonstrated by residential youth workers in managing complex, crisis situations largely unconscious, due to life experience, intuition, spirituality or their lifelong learning?
• Is formal education / training the most effective way of informing conscious practice in residential youth workers; Can some competencies including ethics and values in residential care with high risk young people only be mentored?
• Can we prove that a balance of formal training; pedagogy and life education contributes to equipping workers to provide aspirational residential care to young people who exhibit complex, pain based behaviour?
Method

Mixed narrative inquiry (15 interviews) within a constructivist / interpretivist paradigm is utilised within a bricolage framework using the metaphor of ‘quilting’ as a framework for meaning making.

The Constant Comparative Method together with the creative analysis frameworks of the Listening Guide, and Crystallisation are utilised to ensure validity as well as to respect, understand and journey together with these fifteen workers and their life stories from an insider researcher’s perspective utilising and celebrating a strong practice framework.

Results & Conclusions

At the time of writing this research is in the final stages of analysis with some incredibly interesting findings answering the above questions, clearly articulating who chooses to undertake this incredibly difficult work and why; their values; spirituality, characteristics; their education and training and the history or life journeys and familial and community influences that led to their incredible commitment and ‘artistry’.

Jeannie Jones: one of the interviewees will also be part of the presentation; Jeannie has just published a book on her journey and learning from girlhood – The Daisy Chain
Bullying and Victimization in Juvenile Justice Institution: Does the environment matter?

Wednesday, 14th September - 11:00 - Juvenile Justice

Ms. Nazirah Hassan (University of Strathclyde), Prof. Andrew Kendrick (University of Strathclyde)

This study primarily seeks to investigate the extent of bullying and victimization in the juvenile justice institutions. It investigates the dimensions of institutional environments and explores which dimensions relate to bullying behaviors. The project focused on two hundred and eighty-nine male and female young offenders aged 12 to 21 years old, in eight juvenile institutions in Malaysia. The research collected quantitative and qualitative data using a mixed-method approach. All participants completed the scale version of Direct and Indirect Prisoner behavior Checklist (DIPC-SCALEd) and the Measuring the Quality of Prison life (MQPL). In addition, twenty-four interviews were carried out which involved sixteen young offenders and eight institutional staff. The findings showed that 95 per cent reported at least one behavior indicative of bullying others in the past month, and 99 per cent reported at least one behavior indicative of being bullied. The DIPC-SCALEd scored significantly higher on the verbal sub-scale. In addition, institutional dimensions such as respect, bureaucracy, fairness and family showed significant relation to the bullying behavior. In the interviews, the young offenders identified circumstances on how these dimensions reflect the choices and decisions in bullying others. It shows bullying behavior is induced by a sense of powerlessness and moral degradation, and the awareness of potential negative consequences of the behavior weakens the likelihood of bullying others. These findings are discussed within the context of delinquency theories, and their practical implications are considered.
Forensic Foster Care: Alternative for incarceration for delinquent adolescents in the Netherlands?! 

Wednesday, 14th September - 11:18 - Juvenile Justice

Ms. Ellen Eltink (Spirit Youth Care in Amsterdam), Ms. Conny Zeilstra (Spirit Youth Care in Amsterdam), Mrs. Carolien Konijn (Spirit Youth Care in Amsterdam), Prof. Geert Jan Stams (University of Amsterdam)

In 2012 Spirit, a youth mental health organization in the Amsterdam Area, started to investigate the possibilities of placing otherwise incarcerated adolescents in foster care. These adolescents are in conflict with the law, suspected of committing a crime. Forensic Foster Care is meant for vulnerable adolescents, between 12-16 years old, with mild cognitive disability or other psychic problems. There are worries regarding their development and family situation. Incarcerating them can harm these children further, through deviancy training but also for instance loss of schooling. Forensic Foster Care prevents these harmful effects and gives these adolescents the chance of experiencing structure and a warm family situation, while continuing their schooling and follow (family) treatment under strict conditions.

The 1989 UN Convention on the Rights of the Child that make clear that the principal aim of youth justice should be to act in the best interest of the child and to provide education, support and integration into society. Furthermore incarceration of children should be a last resort. Fostering offers a direct alternative, by providing an experience of safe care, nurturing relationships, boundaries and structures caregiving and prevent them from negative consequences of custody.

We would like to present the outcomes of our pilot study from 2015. The results of the first eight boys, placed for a period of three months in a special trained foster care family, are discussed. Main question is: “Is Forensic Foster Care Effective?” Important concepts are treatment-motivation, behavioral problems, aggression, cognitive distortions but also prosocial behavior, parenting problems, parental supervision and mind mindedness. The results are analysed as multiple single case study with repeated measurements, using the Reliable Change Index (RCI) to assess significant change in measured concepts. Results show a increase in treatment motivation, stabilisation of behavioral problems and aggression and ambivalent results in parenting problems. These and other results will be discussed. Also improvements of the forensic foster care and further implementation in different regions in the Netherlands will be presented. This study is a bottom up example of developing new interventions in (forensic) youth care and study its effectiveness.
Youth runaways from correctional institutions - reasons and possible consequences

Wednesday, 14th September - 11:36 - Juvenile Justice

Ms. Tena Zalović (Centre for Missing and Exploited Children, Osijek), Mrs. Gabrijela Ratkajec Gašević (University of Zagreb, Faculty of Educational and Rehabilitation Sciences)

Youth runaways from institutions are a frequent subject of many public expert debates, although very rarely some potential strategies for the prevention of this problem are proposed. Recognising this problem, Centre for Missing and Exploited Children in cooperation with the University of Zagreb, Faculty of Education and Rehabilitation Sciences, has conducted a research in 2015 focused on getting insight into the youths’ reasons of runaway behaviour from correctional institutions. The research covered all correctional institutions in the Republic of Croatia. In total, 201 participants, boys as well as girls, from 14 to 20 years of age participated in the research. The quantitative research approach was used and following instruments were applied: Resilience and Youth Development Module (WestEd & CDE, 2000); Treatment motivation scale; Questionnaire on frequency and circumstances of runaways from the institution; and finally Questionnaire on reasons for running away (created for the purposes of this research).

Goals of this presentation are gaining insight in frequency of youths’ runaways, reasons of runaways and factors that contribute more frequent runaway behaviour pattern.

Results show that 45.8% of young people included in the research ran away from institution at least once. In most cases it was a shorter absence from institution (35.9% of participants), and escape that lasted for two days (14.6% of participants). Long-term escapes (over a month) are present at 13.3% of participants. Considering last runaway, 67.8% of them just left the institution without informing caregivers, 24.4% of them stayed out longer then permitted and 7.8% of them did not came back from a weekend family visit. Through created Questionnaire on reasons for running away, youth could explain what was the main reason for their last runaway. The most common reasons were poor conditions in institutions and the desire to spend time with their family (which reported 30% of participants). Hedonistic and anti-social tendencies were present to a lesser extent. Regression analysis informs us on factors that contribute more frequent running away pattern. Three factors explain the regression model, and these are: lack of problem solving skills, lack of attachment to the institution, and presence of family belonging and meaningful activities with family members.

This presentation will emphasise the vulnerability of young people during the absence from the institution, and treatment possibilities will be discussed.
Young People in Limbo: Perceptions of Self-Presentations when Being Assessed in Secure Accommodation

Wednesday, 14th September - 11:54 - Juvenile Justice

Dr. Sofia Enell (Jönköping University)

In Sweden, young people are assessed in secure accommodations at the request of the social services. Although this kind of practice has a historical heritage in Sweden, research about their effectiveness and implications is lacking, especially from the assessed young people’s perspective. In this oral communication a study about how 16 Swedish adolescents perceived being assessed in a secure accommodation at time of the assessment and in retrospect is presented.

Being assessed can be regarded as being in limbo, a state of uncertainty. The assessed know a change, more or less extensive, is going to come but they do not know what kind of change it is going to be. Young people assessed in residential care, are in the hands of professionals; professionals that might have a profound impact on their lives, as decisions they make might influence the young people’s future. Further, being in the limbo of assessment processes could challenges people’s perceptions of themselves. Erving Goffman identified institutional processes in total institutions restricting the residents’ autonomy to act. Later research has demonstrated that Goffman’s concept is still relevant for life in institutions and the processes have been thoroughly described in modern institutions for children and young people. Given the features of assessment processes and of institutions, they both affect what Goffman named as presentations of self (self-presentations). By using Goffman’s concepts of self-presentation and institutional processes in total institutions, the aim of the study was to analyse young people’s perceptions of being assessed in secure accommodation.

The empirical material consists of three interviews each with 16 young people conducted over a two-year period. All interviews were semi-structured and an empirical and theoretical analysis was carried out with a focus on the young people’s perceptions of their experiences of being assessed in an institution.

Three situations were identified in which the young people felt that their self-presentations were in some way in or out of their control: the placement situation; the assessment situation; and the assessment-outcome situation. The youths perceived their self-presentations to be influenced by the setting (i.e., the institution). Moreover, three audiences for the young people’s self-presentations were identified: the present staff, the not present caseworkers at the social services and the peer group. This entire situation differs significantly from everyday life for youths. It also made the young people’s assessment limbo dual, they were involved in one assessment process in the institution and one in the social services realm. It made the time to be of overall and multidimensional uncertainty and consequently lack of control. The young persons’ perceptions of themselves were challenged by their perceived contradictory self-presentations that they felt were problematised. To manage, they distanced themselves from their self-presentations or searched for continuity in their self-presentations. The analysis of the youth’s perceptions raises questions about how vulnerable young people benefit from being assessed in institutions.
Addressing the needs of disabled care leavers: a social justice perspective

Wednesday, 14th September - 11:00 - Disabled Children and Young People

Dr. Berni Kelly (Queen’s University Belfast), Prof. John Pinkerton (Queen’s University Belfast), Dr. Gavin Davidson (Queen’s University Belfast)

This presentation is based on the qualitative phase of a three year study which examined the characteristics and experiences of care leavers with mental health and/or intellectual disabilities in Northern Ireland. This phase of the study involved case studies of 31 care leavers with mental health and/or intellectual disabilities which included reading their case files, interviewing care leavers up to three times over the course of a year and, where appropriate, interviewing their birth parents and/or carers and social workers. A peer research methodology was also employed for interviews with care leavers, whereby trained peer researchers led the interview.

The care leavers involved in the case studies (14 males and 17 females) were aged between 17 and 24 years old during the course of the study, and presented with a range of mental health and intellectual disabilities including some who had been given a clinical diagnosis and others who were considered to have a mild to moderate level of need. These young people had a range of leaving care experiences based on the care settings they left, the accommodation they moved to and the level of support they could avail of.

This paper will draw on Fraser’s (2000) social justice framework with a dual focus on distributive justice and recognition to present the findings from these case studies. Structural issues had a significant impact on the care leaving experience, including inadequate housing, limited health and social care services, strict criteria for access to services and rigid service boundaries which prevented disabled care leavers from accessing necessary support. In addition, unemployment, low income and poverty feature strongly. These findings indicate a need to address the distribution of resources for disabled care leavers and deeper issues of inequality and discrimination.

Connected with these structural and economic barriers to successful transitions from care, some young people were feeling devalued on a personal level and patronised by procedural or ‘child-friendly’ approaches to transition planning. Many were also feeling vulnerable in their local communities and personal or familial relationships with experiences of manipulation, bullying or abuse having a lasting impact well into young adult life. These findings highlight care leavers’ experiences of misrecognition and status subordination. It is within the context of these relational experiences that young people were also negotiating their own post-care identities, reframing past experiences, navigating their way through difficult family dynamics and making sense of their impairment related experiences.

Based on the findings of these case studies, the relevance of social justice to the experiences of disabled care leavers is clear. Addressing the redistribution of material supports and structural barriers to transition for these care leavers should be combined with efforts to promote recognition at both personal and cultural levels of society, with attention to relational aspects of the post-care lives of disabled care leavers. Adopting such a dual approach to care leaver policy and practice will help to address broader issues of stigma, inequality and exclusion through integrated, rights-based policy whilst also improving person-centred supports for disabled care leavers and their families at a more informal and relational level.
Complex support needs in young people with cognitive disability in contact with the criminal justice system

Wednesday, 14th September - 11:15 - Disabled Children and Young People

Prof. Leanne Dowse (UNSW Australia)

Objectives:
There is significant and growing concern that some young people, including those with cognitive and mental health disorders are becoming socially excluded and criminalized, resulting in their lifelong involvement in the criminal justice system. An emerging body of evidence suggests that as young people (and later as adults) this group figure significantly in policing, justice and correctional settings, both as victims and offenders. It appears that for a significant proportion of these individuals, their support needs are complex, their trajectory into the criminal justice system begins very early in life and is characterised by risk of harm and removal from their families in childhood and early contact with the youth justice system. The specificity of experiences for this vulnerable group with complex support needs is currently poorly understood. This paper presents a study investigating the early lives of this group in one Australian jurisdiction.

Method
The study reported utilises a linked administrative dataset to trace the trajectories of a cohort of 2731 individuals who have complex support needs and who have been in prison as adults in NSW Australia. Using quantitative analyses and case studies derived from the dataset, the paper interrogates the early life experiences of this group to identify points of potential prevention and optimal support approaches.

Results
Findings from the study indicate that vulnerabilities emerging early in life for this group may include dual or multiple impairments, histories of victimization, early and persistent social disadvantage, placement in out of home care, early educational disengagement, precarious housing and substance misuse.

Conclusions
The human service system has limited capacity to recognise and respond to these complex needs, with the result that management of needs is defrayed to the criminal justice system as the key system of response. The concept of complex needs is developed to capture the sense of multiple interlocking experiences and factors that span early life vulnerability, disability, health and mental health, behavioural and social issues and to suggest conceptual advances to address more effective prevention and intervention.
’What happens after leaving care? - The experience of young people with a disability - Selected findings from an Irish study.’

Wednesday, 14th September - 11:30 - Disabled Children and Young People

Dr. Conor Mc Mahon (Tusla - Child and Family Agency - Ireland), Prof. Robbie Gilligan (Trinity College Dublin)

The UN Convention on the Rights of Persons with Disabilities and other recent developments have raised awareness of the needs and rights of this group within society. There remains, however, gaps in knowledge about the experiences of significant minorities of people with disabilities. One example is the case of children with disabilities in the child welfare / care systems. This presentation is based on an exploratory study of the care and leaving care journeys of 8 young adults with disabilities in Ireland who had spent significant time living in the child welfare / care system (as opposed to the care of disability services). The study group consists of 6 young adults with an intellectual disability and 2 young adults with a physical disability. This small pilot study represents one of the first attempts to provide very preliminary evidence based on the in-care and post-care experiences of young adults with a disability.

Findings will be presented relating to the sample of 8 young adults and their experiences of education, training and work, as well as other aspects of their care and post-care experience. They come from a wider study of a cohort of care leavers of whom these 8 young adults are part - and some contextual / comparative data from the wider study will be included in the presentation. (Selected findings from the wider study were presented at EUSARF - 2014). Data was gathered by case file analysis and interviews with Aftercare workers/Disability Support staff approximately 5 years after the young adults had left care.

Findings will highlight the need for services to be more ‘disability aware’ as well as the necessity to provide a coordinated and consistent approach in meeting the needs of this group. It will be argued that the results of the study justifies the case for a fuller study of the needs, experiences and outcomes of young people with disabilities in the child welfare / care system.
Missing Voices: The views and experiences of disabled children and young people living in out-of-home care

Wednesday, 14th September - 11:45 - Disabled Children and Young People

Dr. Berni Kelly (Q), Dr. Karen Winter (Queen’s University Belfast), Dr. Sandra Dowling (University of Bristol)

This presentation is based on the qualitative phase of a three year study which examined the characteristics and experiences of disabled children and young people in out-of-home care in Northern Ireland. This phase of the study involved case studies of 15 disabled children and young people which included reading their case files, interviewing disabled children and young people and their birth parents, carers and social workers.

The disabled children and young people were (9 males and 6 females) were aged between 4 and 16 years old, and presented with a range of disabilities and placement experiences. Various creative methods were used to engage disabled children in the research interview, including written and pictorial activities, feelings cards, play and observation. The presentation will focus on four core themes emerging from the case study findings: placement experience, placement change, family contact and participation.

Disabled children and young people in family-based placements were either living with relatives in a kinship care arrangement or living in a non-relative foster care placement. Those who were in residential care were living in children’s homes, specialist residential homes for disabled people or hospital. Disabled children preferred living in family-based environments, however, social workers often struggled to identify such placements for disabled children with more complex needs. Mainstream children’s homes were often not well suited to the needs of disabled children, particularly those with autism. Specialist residential care was targeted at young people with more severe and complex needs, often presenting with more challenging or violent behaviours. Young people in these settings were accessing a range of care from multi-disciplinary professionals and high levels of supervision to meet their needs. However, there were challenges in terms of being placed far away from their home, contact with birth family and planning for the transition to adult life.

A major issue for children living in out-of-home care is the opportunity permanency. However, many of the disabled children and young people in this study experienced placement change, with some having multiple moves across a range of care settings. Such placement instability impacted on attachment to carers and relationships with birth family. Many of the participants had supervised or supported contact with their birth families due to ongoing issues related to risk or to ensure a positive experience for the child. Sibling contact was also emphasised by the participants as being an important part of staying connected to their birth families.

Participation was an important theme for all of the disabled children and young people interviewed. A few were actively involved in decisions affecting their lives, however, many felt that professionals should listen more to disabled children and incorporate their views in case plans and decisions. Professionals need to be enabled to spend more time with disabled children on their caseloads to develop a rapport and establish communication. More child-centred methods of reviewing placements and planning to meet care needs were also recommended.

This research is one of the first studies in the UK to examine the views and experiences of disabled children and young people living in out-of-home care. The findings have direct relevance to policy and practice and indicate an urgent need to address barriers to permanency for disabled children.
and to expand the range of family-based care options available for disabled children and young people. The views of disabled children in out-of-home care should also be sought to ensure robust child-centred reviews of their care experiences and more therapeutic work should be undertaken to address past trauma and ongoing personal and family identity issues.
Effectiveness of Multisystemic Therapy for Antisocial and Delinquent Youth with Mild Intellectual Disabilities

Wednesday, 14th September - 12:00 - Disabled Children and Young People

Ms. Annemarieke Blankestein (de Viersprong), Dr. Rachel E.A. Van Der Rijken (de Viersprong), Mrs. Katrien De Vuyst (Stichting Prisma), Mr. Jac De Bruijn (Stichting Prisma), Dr. Xavier Moonen (University of Amsterdam), Prof. Robert Didden (Radboud University Nijmegen)

Objectives

Despite new developments, there still is a lack of evidence-based interventions focusing on Borderline and Mild Intellectual Disabilities (BMID) in children and adolescents. This is especially alarming because research has found that youth with BMID are exposed to more risk factors, including social deprivation and mental health problems, than are youth without BMID. Furthermore, youth with BMID have consistently been found to be overrepresented in delinquent youth populations. Based on this knowledge the proven effective intervention Multisystemic Therapy (MST) was adapted to meet the needs of delinquent youth with BMID. MST is an intensive home- and community-based intervention known to reduce recidivism and prevent out-of-home placement of 12-to-18 year olds. In 2012, the adaptation MST-BMID was developed after research had shown that youths with BMID receiving standard MST were placed out of home more often than youths without BMID. MST-BMID targets delinquent youth with an intellectual quotient (IQ) between 50 and 85. The present study aims to determine whether MST-BMID is more effective than standard MST in treating antisocial and delinquent youth with BMID.

Method

A quasi-experimental design was used to compare background characteristics and treatment outcomes of youth with BMID (IQ < 85) treated with standard MST (N = 74) and those treated with MST-BMID (N = 64). It was hypothesised that, for youth with BMID, the treatment outcomes of MST-BMID would be significantly better than the outcomes of standard MST. The primary outcomes were: the youth is living at home (yes/no), the youth is attending school/work for a minimum of 20 hours a week (yes/no), and the youth has had no new arrests during MST (yes/no). The secondary outcomes were: parents show improved parenting skills (yes/no), there is evidence of improved family relations (yes/no), the family has improved their network of informal social support (yes/no), behavioural problems according to the Dutch versions of the Child Behaviour Checklist (CBCL) and Youth Self Report (YSR), parenting skills assessed with the Dutch Opvoedingsbelasting Vragenlijst (OBVL; Burden of Parenting Questionnaire in English), and parental contentment with treatment according to the Dutch Jeugdthermometer GGZ (Thermometer Youth Mental Health Care in English).

Results

Analyses of background characteristics at the start of treatment showed that the youths treated with MST-BMID had significantly lower levels of education than the youths who had received standard MST. These significant lower levels of education were also seen in the parents involved in MST-BMID, which was in contrast with the educational levels of the parents involved in standard MST. Additionally, 58% of the primary caregivers in the MST-BMID group had BMID themselves, as opposed to 22% of the primary caregivers in the standard MST group. No significant differences were found regarding age of the youths, gender of the youths, and ethnicity of the youths and the parents.
Despite the group differences in background characteristics, preliminary results showed that MST-BMID obtained the same results as standard MST on the primary outcomes. The families treated with MST-BMID, however, showed significantly more improved parenting skills, family relations, strengthening of their social networks, and more behavioural changes than the families treated with standard MST. With statistical analyses still in progress, definitive results will be presented during the conference.

Conclusions

The first results suggest that MST-BMID is an effective treatment for youth with BMID. We are currently analysing data on the other outcome measures and, in addition, aim to analyse how differences in background characteristics relate to treatment outcomes.
Home or care? A comparison of educational experiences and outcomes for maltreated children

Wednesday, 14th September - 11:00 - Education of Children in Care

Dr. Linda Cusworth (University of York)

Children who are, or who have been, in care are generally one of the lowest performing groups in terms of educational outcomes. They also have poorer longer-term outcomes known to be associated with low educational progress and attainment, including poorer employment prospects and health outcomes than the general population, and are over-represented in the homeless and prison populations. However, although the gap in attainment at age 16 has been documented, less attention has been paid to the education experience and attainment of younger children, on entry and during the first few years of formal school. In addition, most studies to date have been unable to disentangle the effects of being in care from the impact of the difficult experiences (in most cases, abuse or neglect) that led to their admission, and have instead tended to compare outcomes to those for the general population.

This longitudinal, mixed-methods study (2014-2016) was based on a large sample of children (n=390) who experienced abuse or neglect before the age of 8. The aim of the study was to investigate whether children who enter care do better or worse than children with similar backgrounds and histories who remain at home, and for which children, in which circumstances, care or support at home promotes positive outcomes, compensating for previous disadvantage. Children who became looked after (in foster care) due to concerns about maltreatment were compared to similar maltreated children who remained at home, monitored and supported by social workers (on a Child Protection Plan). The project linked data from a variety of sources: a local birth cohort; local authority administrative databases on children known to have experienced maltreatment and on those children admitted to care; follow-up interviews (at a mean of 4 years after first entry to care or child protection plan) with parents and foster carers (children’s current circumstances, progress and development); a survey of social workers (children’s histories and family circumstances, and standardised measures of the type, severity and timing of the maltreatment experienced). Data on educational experience and attainment were collected using a standardised measure of language and vocabulary development (the British Picture Vocabulary Scale) administered to the children at follow-up, and from the national pupil database (scores from national tests administered in all primary schools in England). This allows us to compare outcomes for children in foster care both to those for maltreated children supported at home and to those for the wider population.

This presentation will focus on whether and how educational experiences and outcomes vary for maltreated children who entered care compared to similar children who remained at home (on a child protection plan). In addition it will discuss the factors, such as age, ethnicity, special educational needs, experience of maltreatment, age at entry to care, placement stability, and the home learning environment that appear to moderate and mediate any relationship. It will provide important new evidence on the educational experiences and outcomes of maltreated children, and have relevance to policy and practice in social work and education.
Youth in care education: A comprehensive framework for dealing with its complexity

Wednesday, 14th September - 11:18 - Education of Children in Care

Mrs. Élodie Marion (École nationale d’administration publique)

CONTEXT. For several years education is known as an important factor of social integration. However, the gap is growing between general population and youth in out-of-home care at the end of care and during the following years (del Valle, 2011; Jackson & Cameron, 2012; Darmody & al., 2013). As youth in out-of-home care perform below the social standards, investigating their educational context is relevant to their successful transition to adulthood. As for studies on the subject, a systematic review was conducted. After conducting an analysis of 67 articles (1995-2015) results indicate that the majority of studies focus on youth characteristics and trajectories. However, the studies reviewed lack a comprehensive framework regarding the involvement of professionals, organizations, and context. Also, results suggest a focus on the developmental characteristics of youth rather than on the structural factors or on the interaction between individual and structure. Furthermore, the review found that most of the articles reviewed could benefit from a more elaborate conceptual section and an in-depth theoretical discussion that open up new questions about the understanding of education from a meta-perspective. OBJECTIVE. Given these elements, and the importance of a strong conceptual component, the goal of my work, and presentation, is to provide an analytical framework to study and understand education of youth in out-of-home care. The latter among others will offer a holistic and interactionist vision. METHOD. To achieve this goal I combined theoretical elements from life course perspective (Elder, 1998) and results from a systematic literature review content analysis. Life course perspective allows evaluation of public action operations and outcomes measurement while taking into account complexity (Fleury & Raiq, 2013). The five principles of life course analysis served as codes and formed the analytical framework for definitions and results of reviewed articles. Furthermore, to develop the framework, complementary literature reviews took place in order to mitigate various deficiencies. RESULTS AND DISCUSSION. This framework illustrates the complex issue that is education of youth in out-of-home care and provides a basis for understanding its operation as well as for evaluation. Combination of life course principles with results from education of youth in out-of-home care studies demonstrate the importance of an analytical framework including the following components: 1) individual as an actor; 2) continuum of care (temporality); 3) interrelation of trajectories; 4) networks and supports; and 5) personal and institutional contexts. This framework also highlights the importance to combine individual and structural factors. Finally, it brings forth past studies, helps decision makers, and improves further understanding of the operations and results of public actions. BIBLIOGRAPHY. 1) DARMODY, M. & AL. (2013) Education of Children in Care in Ireland: An Exploratory Study, Dublin: Office of the Ombudsman for Children, 136p. 2) DEL VALLEE, J. F., & AL. (2011). Leaving family care: Transitions to adulthood from kinship care. Children and Youth Services Review, 33(12): 2475-2481. 3) ELDER, G.(1998). The Life Course as Developmental Theory, Child Development, 69 (1): 1-12. 4) FLEURY, C. & RAIQ, H. (2013). Sociological Innovations and Life Course, Sociologie et Sociétés, 45 (1) : 5-15 5) JACKSON, S. & C. CAMERON (2012). Leaving care: Looking ahead and aiming higher. Children and Youth Services Review, 34(6): 1107-1114.
An Empirical Test of a Model of Academic Expectations among Youth in Residential Care

Wednesday, 14th September - 11:36 - Education of Children in Care

Dr. Eran Melkman (University of Haifa), Dr. Tehila Refaeli (Hebrew University), Prof. Rami Benbenishty (Bar-Ilan University)

Background and Purpose: In the last decade accumulating evidence across many countries points to the poor outcomes of youth formerly placed in care. One of the issues receiving growing attention is the low academic achievements of such youth, both during and after leaving care. These achievements are known to impact negatively on the integration of care leavers into the labor market and thereby on the breaking of the ‘poverty cycle’. Academic educational expectations in late adolescence are considered a key marker for educational achievements in young adulthood. This important issue has seldom been studied among youth in substitute care, in particular, among those in residential placements. A better understanding of the underlying mechanism leading these youth to have academic aspirations is essential for shaping educational environments in residential facilities that would promote academic expectations.

The goal of the present research was to develop and test a model to predict academic expectations of Israeli adolescents placed in residential facilities.

Methods: All adolescents, between ages 16 to 21 from 34 youth villages in Israel were approached. Of them, 1360 adolescents (response rate = 31%) participated in the study, mean age 17.65 (SD = 0.91), 40.1% females. The youth responded to structured self-report questionnaires administered at the settings by the facilities’ staff, while ensuring anonymity of the youth. Measures included: youth and familial educational characteristics, parental belief of the importance of higher education, school grades, perceived educational involvement and support of teachers ( = 0.83) and facility’s staff ( = 0.91), and the academic expectations of youth ( = 0.80).

Results: Structural Equation Modeling provided support for the model tested (²(182) = 508.57***; CFI = .95; TLI = .94; RMSEA = .04; SRMR = .03). The main findings indicated that current academic achievements predicted academic expectations. Parental beliefs regarding the importance of higher education and facility’s staff educational support were also positively related to expectations. In addition, staff support moderated (weakened) the relationships between current achievements and academic expectations. Teacher support had indirect effect on academic expectations through the mediation of current academic achievements.

Conclusions and Implications: This research highlights the salient contribution residential facilities’ staff and teachers may have in shaping the academic expectations of youth in residential facilities. At the same time, despite being placed out of home, youth’s future academic plans are still considerably affected by their parents’ beliefs in the importance of education. The findings suggest the importance of an integrative approach in the efforts to promote educational expectations among adolescents in residential facilities. Such an approach, encompassing the multiple adult functions responsible for youth development within such settings, could be an important step in enhancing the chances for future academic success of this
New placement, new school. Change of schools for children in out-of-home care

Wednesday, 14th September - 11:54 - Education of Children in Care

Prof. Ingrid Höjer (department of social work, University of Gothenburg), Dr. Helena Johansson (department of social work, University of Gothenburg), Ms. Helena Lindberg (department of social work, University of Gothenburg)

A placement in care for children/young people, or a change of care placements, often involve a change of school. The aim of this presentation is to account for how schools and Child Welfare Services recognise this change, how they cooperate and plan for the child/young person’s education, and what impact change of schools may have on grades and academic identity for children and young people placed in care.

The aim of the project Educational Careers and School Achievement of Children and Young People Placed in Public Care is to improve knowledge about what factors cause the low level of educational achievements for children and young people placed in public care, as well as to find factors which can lead to positive educational achievements for this group. The project is an extension of the study Young People from a Public Care Background - pathways to education in Europe (YIPPEE), which was carried out 2008-2010 within the 7th framework program of the EU. In the project we use data from GOLD (Gothenburg Educational Longitudinal Database) which includes all individuals born 1972-1992, who lived in Sweden at 16 years of age (N=2 184 866) and UGU, part of GOLD. UGU includes samples of about 10% of nine cohorts born between 1948 and 1998, which have been followed from either grade 3 or grade 6. Students have responded to questionnaires about their school situation and leisure activities, and they have taken tests of cognitive ability. Additionally, we have also analysed social services case files from four time periods: children born 1967, 1977, 1987 and 1992. 40 case files were selected from each time period (in total 160 cases). In the case files we have focused on transcripts of collaboration between social services and schools concerning education for children in care, and also to the educational support given to children in care.

Results from the case files give at hand that about 70 percent of children/young people changed schools when they were placed in care, and 71 percent also moved to another local authority. In 10 percent of the files we found evidence that the “new” and the “old” school had been in contact before the child moved. Social services had informed the child’s “old” school in 26 percent of the cases, but it was possible to find any documented planning for the change of schools only in 9 percent of the files. Thus, it is evident that changes of schools seldom is given relevant attention. Results from GOLD and UGU- analyses show that changes of schools have a much stronger negative impact on grades for children/young people placed in care than for their peers.

When a child/young person is placed in care, social services has a responsibility to plan and take an interest in the future of the child/young person. This responsibility should include an interest in and a commitment to education. We know that educational success is one of the main factors for a successful future, and also for a successful transition from care to adulthood. Evidence from this project sends a strong message to social services and to research that changes of schools need to be given more attention and better planning, in order to give children/young people in care a fair chance to achieve well at school.
Translational Research: A collaborative model for practitioners and researchers to improve the quality of therapeutic care.

Wednesday, 14th September - 11:00 - Translational Research: A collaborative model for practitioners and researchers

Prof. Jim Anglin (School of Child and Youth Care, University of Victoria)

Translational research is a multisyllabic term for the straightforward idea that scientific methods and findings are relevant for professional wisdom and should be used to inform professional practice. Put simply, translational research is the science of putting science to use. Although translational research has been discussed in the field of medicine for many years, its application to practice and research in youth development is recent. One of its chief proponents in youth development of sees research and scientific inquiry revolving around and emanating from practice (Hamilton, 2014). Hamilton’s model has four important quadrants to consider: 1) What is happening to youth?, 2) What makes youths tick?, 3) What works with youth?, and 4) How do we use what works? In this way, practice informs science, and just as importantly, science informs practice.

In order for this model to be fruitful, the practitioner and the researcher must engage in a collaborative and reciprocal relationship where science and practice wisdom meet to answer basic and relevant questions, and thereby improve practice and further research. This symposium presents the efforts of Dutch, American and Canadian agency-university partnerships to improve the inter-actional quality of staff and youth in therapeutic residential care; thereby exemplifying the process, nature, complexity and utility of translational research in real-world settings.
Implications of Translational Research for the field of Residential Child Care

Wednesday, 14th September - 11:12 - Translational Research: A collaborative model for practitioners and researchers

Dr. Deborah Sellers (Cornell University), Dr. Michael Nunno (Cornell University)

The field of residential child care has been influenced by the emphasis on implementing evidence-based practice. Using evidence-based practices and programs require residential child care and the larger field of child welfare to assess its basic principles, its theories of change, and “what works” in practice. The growing field of implementation science acknowledges that the introduction of research and evidence-based programming can meet with skepticism and resistance from practitioners, especially when the program requires new skills and mindsets to adhere to the principles and the protocols of the program and/or on-going research and evaluation to ensure practitioner and programmatic effectiveness.

This presentation will summarize a new model of translational research (Hamilton, 2014) focused on youth development that engages professionals and the organization within which they work in the process of understanding the needs of the youth as well as developing, implementing, and utilizing evidence-based programs. The model helps to sharpen a practitioner’s understanding of human behavior through basic research, as well as, the need to find clinical and real world application for this basic research. A unique feature of the model is that it incorporates practitioners and researchers in a full partnership to find not only what works, but also how do we use and sustain “what works” in our real world engagements with children and families. We view both translational research and evidence-based programs through the lens of innovation, especially the introduction of innovation within organizational settings.

Translational research demands that researchers and practitioners forge relationships that are collaborative and reciprocal. Traditional applied research has typically viewed practitioners as product recipients and data sources rather than full partners in the generation of knowledge. Full partnerships call for stakeholder participation that is more than perfunctory and cosmetic, or simply subjects of work done by researchers. In the Hamilton model of translational research, practice is placed in the center of the model because it plays a central and active role in all of scientific inquiry, knowledge generation as well as researching what works in practice and how we use what works. All the elements of the model are reciprocally interconnected. In this way, practice informs science, and just as importantly, science informs practice.
Agency and university partnership to analyze restraints levels and psychotropic medication usage after the CARE program implementation

Wednesday, 14th September - 11:24 - Translational Research: A collaborative model for practitioners and researchers

Mr. William Martin (Waterford Country School), Ms. Susan Sullivan (Waterford Country School)

In this presentation the authors provide an example of Hamilton’s model of Translational Research in action at the agency level. We describe the efforts of the Waterford Country School and the Residential Child Care Project (RCCP) at Cornell University to improve the quality of the interactions between the Waterford staff and the youth in their care. This agency-university collaboration illustrates ways in which the expertise of both communities can contribute to improvements in the well-being of youth.

An important aspect of the presentation is how the Waterford agency and Cornell University came to engage in this practice-based research through the implementation of the Children and Residential Experiences (CARE) program model developed by the RCCP. The CARE program model is a principle-based system whose impact on therapeutic residential care has been reported in literature (Holden, Anglin, Nunno, & Izzo, 2014), as well as in previous EUSARF conferences. CARE is a research-informed, principle-based, multi-component model designed to transform the setting of residential care. This setting level model structures social sciences research findings into six basic practice principles that inform inter-personal interactions among adults and children. By incorporating the principles throughout all levels of the organization and into daily practice, an ethos develops that supports and expects reciprocal and consistent developmentally appropriate relationships in a trauma-sensitive environment. The model articulates a theory of change (TOC) which outlines the causal pathways CARE is expected to improve children’s socio-emotional and developmental (Holden, 2009; Holden, et al., 2014).

The paper will address the Waterford leadership’s commitment to collecting long-term (10 years or more) time series data on two measures that mattered to their organization, the levels of physical restraints and psychotropic medication usage. The frequency of physical restraints is an important barometer for safety. Restraints are high-risk interventions that can elicit more coercive responses on the part of staff and have harmful or fatal consequences if used without sufficient safeguards, training, and supervision. They also hamper future opportunities for therapeutic interactions. Monitoring psychotropic medication usage is critical since children in care have higher psychotropic medication rates as compared with children who are not in care. While this may be related to their emotional and mental health needs, many experts question the therapeutic value of these medications, especially when they may cause minor to severe adverse effects. When agencies commit to identifying measures that matter and collecting data consistently at regular intervals over extended periods, they can evaluate the impact of local changes using standard analysis tools that are readily available and easy to use. By applying scientifically rigorous quasi-experimental methods and interrupted time series analysis to this data, researchers can increase the practitioner’s confidence in its usefulness in reflection and learning in an evidence-based way. Examined in another manner, this presentation illustrates an excellent example of a dynamic relationship between the practitioner and the research and their use of data to strengthen an agency’s quality improvement process while contributing to the science and wisdom of change.
From flirtation to inspirational translational partnership: Lessons learned from the Dutch Stronger Together program

Wednesday, 14th September - 11:36 - Translational Research: A collaborative model for practitioners and researchers

Dr. Hubert M Pijnenburg (HAN University of Applied Sciences / Radboud University Nijmegen)

This presentation offers a brief overview of the Stronger Together Program (STP), as well as a clinical-theoretical reflection on its interrelated key factors. Which are they, and how do they relate to theoretical notions on translational research and emerging strategies at the crossroads of science-informed practice and practice-inspired science, in particular Evidence Based Practice (EBP) decision-making, a common elements/factors approach, practice driven use of routine client feedback, and utilization focused evaluation?

Initiated by practitioners in 2011, the STP has developed into a structural translational collaboration between practitioners, practitioner-researchers, researchers and policy makers with a shared commitment to improving the quality of youth and family care services and its workers. The STP brought together practitioners from six child/youth and family care provision centers in the province of North Brabant and three Dutch universities.

This practice-research collaboration was inspired by the Key Factors in Youth Care model. This conceptual KFYC model involves a range of interrelated factors at three levels (mico/meso/macro), all impacting eachother and the quality and outcome of child and family care and welfare services. The KFYC model was introduced by Pijnenburg in his inaugural address as professor Key Factors in Youth Care at the HAN University of Applied Sciences (2010), and subsequently presented at EUSARF 2012. Two years later EUSARF 2014 featured a mini-symposium entitled ‘Effective bonding: the Stronger Together research program on working alliances and youth care outcome’. This mini-symposium highlighted empirical findings from the ST Program, reflecting data from residential care as well as community based parenting support programs.

In the STP, one important factor from the KFYC model has taken center stage: the working alliance (and moderating variables, and its association with care outcome). Inspired by practitioner’ experience and expertise from all participating care centers and international research, the alliance concept was operationalized in three modalities: not only in terms of the ‘classical’ working relationship between professionals and clients (type 1), but also in terms of professional-client alliance with respect to social network approach (type 2), and in terms of professional-manager alliance (type 3). From day one, the program’s objectives and studies have been developed in close collaboration between professionals, service provision organisations, researchers and provincial policy makers Their collaboration has resulted in an inspirational community of practice and learning. Five years on, this community continues to thrive and innovate, in spite of the fact that provincial funding for the STP has meanwhile ceased as a result of a major shift in national youth care policy. Under the new Youth Law, funding and governance responsibilities have been transferred from a provincial to the local level. Each Dutch municipality is now responsible for developing, funding and monitoring its youth and family welfare and mental health policy, practice and governance.

In light of this political landslide, and the relevance of the lessons learned from the ST program for international dialogue on effective investment strategies for improving the outcome of child and family welfare and mental health, it is now time to reflect on central and more peripheral factors within the ST program and their interrelations. How can we validate and share findings, and boost the network connectivity of key factors within this complex dynamic system? And how can we
foster sustainable engagement of youth care practitioners, researchers, policy makers and teaching professionals in this collaborative process?
Academic workplace: Lessons learned from state funded collaboration between clinical practice, research, education, and policy

Wednesday, 14th September - 11:48 - Translational Research: A collaborative model for practitioners and researchers

Prof. Ron H.J. Scholte (Radboud University Nijmegen)

In 2010 the Dutch government decided that decisive actions needed to be taken to bridge the gap between clinical practice and science, and to ultimately improve the quality of care to children and adolescence. As a result, substantial funds were distributed over regional collaborations (called ‘Academic Workplaces’) between care agencies, research institutes, education, and local policy. In the presentation we will describe the Academic Workplace Youth Nijmegen (see www.insideout.nl). We started our academic workplace in 2010, comprising eight youth care and mental health care agencies, two universities, client organizations, and policy makers. Our goal was to improve the quality of care for children and adolescents suffering from internalizing problems such as depression and anxiety. To reach this goal, we developed three lines of action. The first was to set up high quality PhD research projects addressing key issues in relation to emotional problems of children and adolescents. These PhD projects were carried out by professionals in their care agencies, and included RCT studies on new prevention and intervention programs, studies focusing on non-specific factors in care, and studies focusing on processes such as routine outcome monitoring.

The second line of action was to improve knowledge transfer. We noticed that there were high levels of implicit and explicit knowledge within care agencies but that there was absolutely no transfer of knowledge between the agencies, nor between any of the other stakeholders of the workplace. So we improved transfer processes, including organizing collaborative workshops and symposia, professionals and clients giving lectures at the universities, and scientist supporting practitioners setting up small scale research projects in their agencies.

The third line of action was setting up a ‘focused routine care monitoring’ (frcm) database. The rationale behind the frcm was that although all care agencies routinely monitor their clients, the data are limited to a certain extent, for example because data only include assessments at the start and ending of care, but do not include follow-up data, nor do they assess non-specific factors such as the alliance between client and professional. So our goal was to collect longitudinal data of 600 clients from all participating agencies, both covering care and follow-up. In the presentation we will briefly describe each of these lines of action, and will also discuss do’s and don’ts as we learned them from this exciting collaborative enterprise.
Translating practice into theory into practice (et cetera): A powerful cycle for change.

Wednesday, 14th September - 12:00 - Translational Research: A collaborative model for practitioners and researchers

Prof. Jim Anglin (School of Child and Youth Care, University of Victoria)

Translational research moves beyond the applied research approach by placing practitioners at the centre of the research enterprise and by creating reciprocal relationships of learning, knowing and doing between academics and practitioners. In this form of praxis, traditional roles and identities are re-understood and re-defined. To accomplish this, a high degree of mutuality, trust and respect must be developed amongst all participants.

This presentation draws upon an evolving practice-centered research process, beginning with the creation of theory through the involvement of practitioners, agencies, youth, families and academics. Using a grounded theory methodology, the initial project drew upon the life-space experiences of youth, workers and parents in 10 residential programs in order to create a theory grounded in practice of what makes effective residential group care. The resulting theoretical framework was then utilized by a university-based group partnering with practitioners in a different jurisdiction to construct a residential program model that is currently being implemented and maintained by practitioners with technical support to improve the quality of practice in dozens of agency programs across five countries.

Continuing the practice-theory-practice learning cycle, the process of implementation in a sample of these agencies was then studied in order to develop a “mini” grounded theory of implementation and agency change. In turn, the resulting theoretical frameworks have been shared with all agencies utilizing the program model in order to enhance their ongoing developmental processes, as well as now forming part of the orientation of agencies new to this quality improvement process.

This practice-to-theory-to-practice-to theory-to-practice cycle is proving to have powerful impacts on staff, agencies, clients and the academics involved. A central construct emerging from the initial theory development, namely congruence, is proving to have staying power throughout subsequent practice-theory-practice cycles. Not only do the line staff need to be congruent with the needs of the young residents and their families, the program managers need to be congruent with the needs of line-staff, the policy-makers need to be congruent with the needs of the program managers and line-staff, and the academics need to act in congruence with the needs of all the various components of the residential care system. In order for such congruence to be possible, a common set of principles and values have to be articulated and committed to by all parties. A separate presentation in this symposium will make reference to this process and some of the innovative outcomes at an agency level.

It is proposed that such a practice-theory-practice cycle could be established in any context where academics are open to engaging with practitioners, and vice-versa, in a collaborative, reciprocal and sustained manner. Such relationships appear highly beneficial for both the academic teams and community practice agencies, resulting in ongoing improvements and professional growth at all levels for all participating partners. For example, on the one hand, some of the practitioners begin to engage in and even generate research, while academics, on the other hand, begin to engage practice concerns and even innovate new forms of practice. The result can be a highly stimulating cycle of change that is sustained and evolves in unanticipated directions, building on the creativity and initiative brought to the fore in active partnerships.
Addressing the Needs of Adults who Have Experienced Abuse in Care as Children

Wednesday, 14th September - 11:00 - Addressing the Needs of Adults who Have Experienced Abuse in Care as Children

Prof. Andrew Kendrick (University of Strathclyde)

This symposium will address various ways in which the needs of those who have experienced historic abuse in care are being addressed. It is important that the needs of survivors of abuse are acknowledged and that those who are responsible are held accountable. There is a range of different remedies to historic abuse and these address different aspects of survivors’ needs. These include acknowledgement of abuse through national inquiries or confidential fora/committees, and memorialization or commemoration of abuse. Accountability of those responsible for abuse can involve both civil and criminal justice routes. It also involves reparation and compensation, and the provision of remedial services addressing mental and physical health needs of survivors, as well as education, housing, employment, legal and social needs.

Presentations in this symposium will address key issues in addressing the needs of adults who have experienced abuse in care, and explore the policy and practice issues in achieving justice for survivors of abuse.
Supporting care-leavers to access their records

Wednesday, 14th September - 11:12 - Addressing the Needs of Adults who Have Experienced Abuse in Care as Children

Dr. Suellen Murray (RMIT University)

A coherent account of our life that connects the past to the present is important to our sense of self and identity. When there are gaps in this narrative it is experienced as a disruption to our sense of self, as evident in the accounts of care-leavers. Many children who grew up in care in previous decades did not know their family nor where they came from. Others were placed in care and separated from family members and over time lost contact with them. Others again had some contact with their family but never understood why they were placed in care or how decisions had been made about their lives. The process of institutionalisation facilitated this loss of identity and family, and lack of knowledge about childhood experiences. When children had lived part of their childhood with their family and were placed into care, in some circumstances, parents could be advised not to keep in contact to facilitate a ‘clean start’ for their children. Among children in care, separation of family members could occur in a number of ways, including by age and sex. Personal records created by agencies that had statutory responsibility for children in care and the organisations that provided the care are sources of information about care-leavers’ family and childhood experiences. This paper will first identify the needs of this group of people in relation to access to their personal records, and then outline policy and practice issues. A key issue is that those working in the area of records release understand the significance of the records and that this knowledge then informs the way they work with care-leavers. When practitioners appreciate the importance of the records, it changes their practice from an administrative task to supported release, and the paper concludes by highlighting key elements of a process of supported release of records to care-leavers. The paper is informed by research with care-leavers who accessed their records and with staff from record-holding organisations and support services in the UK, New Zealand, Ireland and Australia.
Contested Legacies: Funding Redress and The Politics of Apology in Ireland

Wednesday, 14th September - 11:24 - Addressing the Needs of Adults who Have Experienced Abuse in Care as Children

Prof. Eoin O’Sullivan (Trinity College Dublin)

In October 2000, the Irish Government agreed in principle to establish a compensation scheme for those adults, who as children resided in certain institutions, where the State had a supervisory or regulatory role, where financial compensation would be paid on an ex gratia basis, where the claimant could establish that they had experienced abuse. A Residential Institutions Redress Board was established in December 2002 to make awards to former residents of what eventually became 141 separate institutions. An agreement was reached between the State and the Religious Congregations that managed the majority of the institutions that were to be covered by the compensation scheme, that they contribute to the fund in the amount of €128m. This agreement gave an indemnity in respect of all civil actions arising from acts of abuse against those who were eligible to make an application to the compensation scheme. Following the publication of Commission to Inquire into Child Abuse in May 2009, the Government sought a further contribution from the 18 Religious Congregations, arguing that in light of the Report that the Congregations increase their share to 50 percent of the total redress costs, which would amount to approximately €725m. Following negotiations, in addition to the €128m agreed in 2002, an additional sum of €348.5 was contributed to the cost of redress.

By the end of August 2015, the Board had completed the process in 16,631 cases, with awards made in 15,562 cases, and the average value of awards to date being €62,240. The total value of the awards at the end of 2013 was €941.3m. In addition, the Board has paid legal costs in the amount of €198.3m and the Boards own administrative costs were €68.5m, giving a total cost of €1.2bn to the end of 2013 (Residential Institutions Redress Board, 2014).

The paper will explore the process of decision making that established the particular remedies for addressing historical abuse, arguing that the specific configuration of redress and inquiry was flawed, resulting in a restricted and limited understanding of the historical context, positioning former residents as avaricious, and exposing to State to open-ended liability. The paper will conclude with lessons from other jurisdictions attempting to address similar issues.
The role of memorials as one form of remedy to historic child abuse – an ongoing dialogue

Wednesday, 14th September - 11:36 - Addressing the Needs of Adults who Have Experienced Abuse in Care as Children

Ms. Adrienne Reilly (University of Strathclyde), Prof. Andrew Kendrick (University of Strathclyde)

This presentation will consider the memorialisation of the historic abuse of children in care and discuss this in the wider context of transitional justice and commemoration and memorialisation of past injustices.

After protracted lobbying for an inquiry into alleged historic child abuse in various institutional settings in Northern Ireland, the Historical Institutional Abuse Inquiry (HIAI) was set up in 2012 and given legislative effect under the Historical Institutional Abuse (Northern Ireland) Act 2013. This inquiry and investigation into institutional child abuse was established to examine if there were systemic failings by institutions or the state in their duties towards those children in their care.

Under the terms of reference a final report scheduled for January 2017 will make recommendations and findings, and this will include consideration of “recommendations as to an appropriate memorial or tribute to those who suffered abuse”.

This presentation will discuss the experiences of applicants to the Inquiry in relation to their testimony about a memorial or tribute. It will focus, in particular, on the experiences of 50 individuals who were child migrants and who applied to give evidence to the Inquiry. These individuals were in institutions in Northern Ireland from which they were sent to Australia, mostly in the years after the Second World War. The transcripts of the testimonies of these individuals were analysed with regard to their consideration of a state memorial as posed to them during their oral evidence sessions.

This paper has its theoretical basis in transitional justice and memory. In recent years, memorialisation and memory projects are viewed as part of the package of mechanisms for addressing wide scale humanitarian abuses, and have more recently been applied to the historic abuse of children in care. This presentation will develop these ideas based on the first-hand experiences of survivors of abuse giving evidence to a national inquiry.
A Human Rights Approach to Justice for Survivors of Abuse in Care: The Scottish Human Rights Commission InterAction on Historic Abuse of Children in Care

Wednesday, 14th September - 11:48 - Addressing the Needs of Adults who Have Experienced Abuse in Care as Children

Prof. Andrew Kendrick (University of Strathclyde)

In 2004, following calls for justice from victims/survivors of historic abuse, the First Minister for Scotland gave an apology on behalf of the people of Scotland which acknowledged that some children in residential care had suffered physical, emotional and sexual abuse, and that they deserved ‘full recognition by us of what happened to them’. A range of activity took place to address issues of historic abuse of children in care but this was not comprehensive. In 2010, the Scottish Human Rights Commission (SHRC) carried out work to develop a human rights framework to secure remedies for historic child abuse in Scotland.

In order to take forward the recommendations of the Human Rights Framework, SHRC proposed an InterAction, a facilitated dialogue involving key stakeholders, including survivors of historic abuse, service providers, professional organisations, Scottish Government and academics. The purpose of the InterAction was to agree an Action Plan to implement the recommendations of the Human Rights Framework.

The Centre of Excellence for Looked After Children in Scotland facilitated the 2 year programme of events for the InterAction, and this culminated in December 2014 with the Scottish Government making a number of commitment to take forward different elements in the Action Plan, including a National Inquiry on Abuse of Children in Care, a Survivor Support Fund, work on memorial and commemoration, an Apology Law, and work on civil and criminal justice.

This paper will present the findings of an evaluation of the InterAction process. It will discuss the stages in the InterAction process and the role of the various participants in different aspects of the InterAction, and present the experiences of the different participants in the InterAction.

The research involved:

- documentary analysis of a range of InterAction documents: minutes of meetings; material produced for InterAction events and the reports of the events;

- Semi-structured interviews with key individuals in the InterAction process; and.

- An online questionnaire for a wider group of InterAction participants.

Participants in the InterAction were largely positive about the process and outcomes of the InterAction. There were clearly tensions that arose throughout the process, and these impacted on the way in which some participants were able to engage with the InterAction, and their views on the effectiveness of the process. The InterAction took much longer than originally intended which underlines the need to have realistic expectations about the length of time that such a project will take and the level of resources required to support the process and the participants in the process. A significant amount of preparation was needed to introduce the model of the InterAction and to enable stakeholders to engage fully with the InterAction process.
The model of the InterAction on Historic Abuse of Children in Care, a facilitated dialogue involving key stakeholders, has shown that a participatory approach based on a human rights framework can produce positive outcomes even when addressing contentious and sensitive issues. It is to be hoped that the learning from this process can inform the development of policy and practice in a wide range of areas, and take forward justice for survivors of historic abuse in care.
The subjective well-being of vulnerable children

Wednesday, 14th September - 11:00 - The subjective well-being of vulnerable children

Dr. Carme Montserrat (University of Girona), Prof. Ferran Casas (Universitat de Girona)

The interest in studying children’s subjective well-being (SWB) has increased over the past decade. It is now recognised in the literature that children’s subjective opinions, understandings and perceptions of their lives are necessary to assess their quality of life. However, little is known regarding the SWB of vulnerable children and particularly those in public care, both in residential centres and in kinship or non-kinship foster care. Proceeding with child-centred research, in this symposium five papers are presented regarding the subjective well-being of vulnerable children, focusing mainly on those who are in care in different countries. In the first presentation, Selwyn presents a development of indicators to capture the subjective well-being of looked after children in England and also the early results from six pilot Local Authority-led surveys. Then, Llosada-Gistau and Montserrat present findings from their study on the subjective well-being of children in residential and foster care in Catalonia. The main objective of the presentation by Gonzalez, Bravo, Arrubarrena and Del Valle is to describe the relationship between emotional and behavioural problems and subjective well-being in a sample of adolescents in residential care in Spain. Watson describes the co-design of a prototype of a digitally enhanced memory box for children in care, called ‘trove’, and also some results from one Local Authority in England. The symposium is concluded by Casas and Moura with a study that explores differences in subjective well-being (SWB) between adolescents living in disadvantaged situations through different dimensions of poverty (education, satisfaction with home, subjective poverty and material conditions) and the general population of the same age in Spain. Underlying all the presentations, the discussion on which factors influence subjective well-being has important implications for policy, research and practice.
Looked after children’s participation in the development of on-line surveys of their well-being

Wednesday, 14th September - 11:12 - The subjective well-being of vulnerable children

Prof. Julie Selwyn (University of Bristol, Hadley Centre for Adoption and Foster Care Studies)

This presentation will describe the:

a) Development of indicators to capture the subjective well-being of children in care in England. Subjective well-being is defined as the way children feel about their lives and how they are functioning.

b) Piloting of the surveys with 700 children and young people (age 4-18 yrs) in six Local Authorities (LAs) and early results from the pilots.

In England, about 69,000 children and young people are looked after, primarily because of abuse and neglect. The impact of maltreatment can be long lasting and the quality of substitute care the child receives has a significant impact on children’s developmental recovery. Yet little is known about how looked after children and young people feel about their own well-being. Do they identify the same elements as important to their well-being as those selected by children in the general population and how might their well-being be measured? In this presentation I will describe the development of online surveys to measure the subjective well-being of children in care. The work has been conducted by a partnership between the Hadley Centre for Adoption and Fostering Studies, University of Bristol (www.bristol.ac.uk/hadley) and CoramVoice, a children’s rights charity (www.coramvoice.org.uk).

Fourteen focus groups were held involving 140 children and young people to understand their perceptions of what was important to their well-being. Four key themes emerged: relationships, rights, resilience and recovery. Although there were domains of well-being, such as the importance of relationships that were held in common with children in the general population, looked after children identified other domains and their emphasis differed. Children emphasised the importance of relationships with foster carers, social workers and siblings and of being able to trust the adults in their lives. Unlike children in the general population, looked after children thought that having a coherent account of their histories and knowing the reason for being in care was crucial to their well-being.

Three on-line surveys were created for ages 4-7 yrs, 8-11 yrs and 11 yrs+ and taken back to three children and young people’s focus groups for comment. Questions were revised and reduced. A web designer developed the ‘look’ of the survey using best practice guidelines and with input from young people. The online survey has been piloted with over 600 children and is demonstrating that children as young as four years old are able to provide meaningful responses about their well-being. Children have found the survey easy to complete and survey findings have led to changes in practice. Work is on-going developing visualisations of survey data for social work managers (http://www.coramvoice.org.uk/professional-zone/bright-spots)
The subjective wellbeing of children in public care

Wednesday, 14th September - 11:24 - The subjective well-being of vulnerable children

Mr. Joan Llosada-Gistau (Child Protection Department, Catalan Government), Dr. Carme Montserrat (University of Girona)

Background and purpose: There are very few studies on the subjective well-being (SWB) of children in care and it is only in recent years that studies have begun to appear which include the perspective of children in vulnerable situations. Children’s subjective well-being constitutes an important component in understanding their quality of life. However, little is known about children in public care regarding their perceptions and satisfaction with life.

The purpose of this study is to explore SWB among adolescents in residential care, kinship care and family foster care (no relatives) in Catalonia.

Design: Cross-sectional study. The study used data from the care population in Catalonia born between 1998 and 2000 (N=700) (response rate=58%)

The questionnaire used was the International Survey of Children’s Well-Being (ISCWeB), which includes three psychometric scales: Overall Life Satisfaction (OLS), Students’ Life Satisfaction Scale (SLSS) and the Personal Well-Being Index (PWI), which was adapted for adolescents living in residential care. The psychometric scales are used as indicators of SWB.

The independent variables included are related to the personal characteristics of adolescents in care, reflecting their perceptions and evaluations of different aspects of their life. In addition, we also included some variables related to how some aspects of the protection system affect the SWB of adolescents in care.

The Student’s t-test, ANOVA and linear regression were used. We have constructed multiple linear regression models, with type of placement as a stratifying variable (aggregate group, foster family group and residential care group).

Results: Adolescents living in kinship and non-kinship foster care reported better SWB in all life domains than those in residential care. The means for those in family foster care are very close to that of adolescents in the general population.

Adolescents in care who like going to school, feel safe at school, have good relationships with classmates, are in the school year corresponding to their age or who achieve better marks, all display significantly higher SWB scores, regardless of the type of placement. Moreover, adolescents in care who do leisure time activities display higher SWB scores than those who do not. Those adolescents in care who had had the same carers in the previous year had a greater SWB than those who had changed carer. Among adolescents in care, going out with friends every day or one/twice a week increases SWB compared to going out not often or never.

With regard to variables related to the protection system, we found that adolescents who spend more time in the same placement and those who have not suffered a family breakdown have greater SWB. Among adolescents in residential care, those who live in smaller centres and those who have never run away from a centre also display greater SWB.

Conclusions: These findings highlight the need to address the participation of children in any decision that affects their lives, the key role of education, and the importance of stability, having friends and what children do with their leisure time. Attention must be paid to the fact that determining factors in how the protection system is run affect SWB among these children. Efforts must be made to
avoid unnecessary changes, increase support for family foster care to avoid ruptures and promote smaller residential centres, which more resemble a family unit, wherever possible. In addition, there is a need to review residential care as a whole, further promote family foster care and pay greater attention to the positive results of kinship care.
Exploring the relationship between subjective well-being and emotional and behavioural disorders in children in residential care

Wednesday, 14th September - 11:36 - The subjective well-being of vulnerable children

Ms. Carla González (University of Oviedo), Dr. Amaia Bravo (University of Oviedo), Dr. Ignacia Arruabarrena (Universidad del País Vasco), Dr. Jorge F. Del Valle (University of Oviedo)

Children who live in residential care have suffered experiences of abuse and neglect. Furthermore, many of them have grown in families characterized by family problems such as poverty, mental health problems, drug abuse, etc. As a consequence, research has shown the higher frequency of mental health problems in this group. There are several international evidences that suggest the high prevalence of mental health problems in children in residential care, but there has been very little research in this issue in Spain. Likewise, the research has shown low levels of well-being in these samples.

Our main objective is to describe the relationship between emotional and behavioural problems and subjective well-being in a sample of 719 adolescents aged 11 to 18 in residential care. Another objective of this presentation is to explore other variables associated with different levels of well-being in these samples such as age, gender or aspects related to protective intervention process. The research was designed as follows: a) Basic descriptive information about children was collected by key-social educator b) in order to identify mental health problems we applied two version of the ASEBA System: the Child Behavior Checklist (CBCL) and the Youth Self-Report (YSR). The CBCL is the version for parents and was completed by key-social educator for each child in this study c) In order to analyse the well-being Personal Well-Being Index (PWI) was applied. PWI included 7 items which evaluate the satisfaction with different life domains (Cummins et al., 2003). We applied the Spanish version published by Casas (Casa et al., 2013). Furthermore, we have added five items associated with specific life aspects of the children in residential care.

Some of the results obtained show a high incidence of clinical problems on the screening. Furthermore, the values of well-being were lower than general population with lowest scores in future and residential resource. Results showed gender and age differences: girls show lower scores in almost all areas than boys and older age is related with less satisfaction in all areas. Another significant result was that children who had been in residential care for several years reported less satisfaction with family and more satisfaction with residential resource. Finally, the analysis shows significant differences between cases with mental health problems and cases without problems according to screening. These differences are more significant when the information is given by the own adolescent.

These results confirmed the prevalence of emotional and behavioural problems according to the screening criteria and their impact on the well-being in children in residential care. Our finding provided important implications in this field of intervention.
Children’s co-production and use of trove (a digitally enhanced memory box) to better understand their care histories

Wednesday, 14th September - 11:48 - The subjective well-being of vulnerable children

Dr. Debbie Watson (University of Bristol, Hadley Centre for Adoption and Foster Care Studies)

This presentation will describe:

a) the co-design of a prototype of a digitally enhanced memory box for children in care- called ‘trove’;

b) the results of a small trial of trove used by children over a 4 week period in one Local Authority in England and the importance that children afforded to understanding the reasons for their being in care and having some ownership over their life story.

Children in the care system often struggle to comprehend the reasons for their being placed in care and to make sense of the experiences in birth families which may be extremely traumatic. Many have gaps in biographical memory and these have been linked to poor mental health outcomes in adolescence. Having a coherent narrative of adverse experiences has been associated with recovery from trauma and PTSD (Adshead, 2012). The way coherent narratives are created for children in care in the UK and in other parts of the world is through life story work and the development of a life story book- which, it is argued, contributes to identity construction (Cook-Cottone & Beck, 2007; Loxterkamp, 2009). In earlier work I have interviewed children about their experiences of their life storybooks (Watson et al, 2015) which revealed a number of challenges and areas of poor practice in the production and use of this intervention which often left children with questions unanswered, additional confusion, and a lack of ownership over the story of their life. Moreover, it became apparent in interviews and in reviewing the literature that memories for children in care, are also constructed through interaction with tangible birth objects which life storybooks do not ordinarily accommodate; such as toys, baby clothes and blankets, mementoes and other familial gifts.

This paper presents an innovative project that enabled me to work with a creative designer to rapidly develop a prototype product to start to address some of these challenges in a co-produced design process with children and young people, including children both in long term authority care and adoptive placements. ‘trove’ is a digitally enhanced memory box that utilises raspberry pi and RFID technologies to enable children to record their own birth and care memories and to attach these to their precious birth objects; as well as providing a safe ‘container’ for their mementoes and memories. The prototype was developed in a rapid co-design process with children and tested with a number of target groups as we iterated the design over time. The paper will describe the process and the benefits of children’s engagements in this development and what they brought to the overall design.

Secondly, the paper will present data collected as part of a small trial with 10 children aged 5-15 years where the children have had a trove to use and customise for a period of 4 weeks. Data to be presented includes children’s design feedback, the stories and pictures of their objects that they decided to include, real time data downloads on frequency and time of use through Wifi dongles that were incorporated into the prototype and carers pre and post accounts of the children’s interest and ability to discuss and raise questions about their care journey and reasons for being in care. The paper will conclude with a consideration of the contribution of trove in enabling more positive
wellbeing outcomes, long term memory retention through interaction with birth objects and enabling children to achieve a stronger sense of narrative identity, that is the: ‘internalized, evolving story of the self that each person crafts to provide his or her life with a sense of purpose and unity’ (Adler, 2012, p.367).
Children’s subjective well-being in disadvantaged situations

Wednesday, 14th September - 12:00 - The subjective well-being of vulnerable children

Prof. Ferran Casas (University of Girona)

This study explores the differences in subjective well-being (SWB) between young adolescents living in disadvantaged situations and the general population of the same age, using data from a large representative sample (N= 5381) of Spanish 1st year secondary students (mean age 12.08) Self-administered questionnaires were used at (randomly selected) schools to measure the Domains Satisfaction General Index (DSGI), calculated using the arithmetic mean of 8 indices for life domains. Different dimensions of poverty (education, satisfaction with home, subjective poverty and material conditions) from a multidimensional perspective using the fuzzy method have been calculated. All of the analysed dimensions are negative predictors for the DSGI and a MANOVA reveals significant differences between the means of those children who consider themselves poorer and those of children who perceive themselves wealthier than others, for all of the dimensions studied. The discussion on which contextual factors influence subjective well-being and how this varies between sub-groups of children has important implications for policy, research and practice.
Setting the Scene for Openness and Transparency in Adoption from Care

Wednesday, 14th September - 12:30 - Adoption

Ms. Lynne Moggach (Barnardos Australia), Ms. Elizabeth Cox (Barnardos Australia)

The Find-a-Family program of Barnardos Australia has been finalising open adoptions for children in out-of-home care in New South Wales, Australia (NSW) since becoming an adoption agency in 1985. Since this time, the program has secured adoption orders for over 260 children.

Underpinning this commitment to adoption is a strong belief in adoption as providing secure family placements for children where the court has determined it is not safe for the child to return home. Adoption provides a child with a family for life; however the work required to achieve this is complex and detailed.

Our experience in the area of open adoption has shown us that the early work undertaken by the case manager and the agency can significantly impact on the way the relationships between the child, their birth family and their adoptive parent/s develop and which, in turn, will influence the nature and quality of openness in future years. Therefore our objective in this context is to facilitate the development of relationships and lay the foundations for a successful working relationship necessary for open adoption.

The method we use to achieve this objective is to provide case managers with the level of skill required to undertake the complexities of adoption work. Significant challenges are likely when working with birth families, but our experience is that birth parents are most likely to make decisions to benefit their children if they receive honest and complete information from the very beginning.

Recent amendments to NSW child protection legislation require the court to give priority to the child’s return to birth family if safe, followed by guardianship (usually with kin). If neither of these placement options is viable, the court must consider the option of open adoption for non-Aboriginal or Torres Strait Islander children, prior to making an order that will place a child in long-term care. This legislation obliges child protection workers to have early and honest discussions with a child’s birth family about the option of adoption if the child cannot be placed with family or kin.

Case managers need to assist birth parents and adoptive parents to work together to achieve stability and security for the child as it is this that will support the child through life. Case managers are exposed to a wide range of situations, encountering birth parents who have had their child removed at birth as well as parents who may have spent some years caring for their child. Additionally the birth parents will have had trauma of their own and may have ongoing drug dependency, volatile and abusive relationships and ongoing experience of poverty. This presentation will outline the framework within which our case managers operate, highlighting that by providing clear and transparent practices, processes and timeframes, appropriate and workable relationships between birth parents and adoptive parents can be achieved.

The presentation will report on the success of early work in achieving ongoing workable relationships between birth parents and adoptive parents, despite the pressure of the adoption process. We will highlight both contested and uncontested matters and demonstrate that, while many of our adoption applications do not have the consent of the birth parent, positive relationships can be maintained. The conclusions from our experience can assist case managers in facilitating healthy relationships between birth and adoptive families, based on honesty and trust.
Where have I come from, who am I now? Pathways to identity development for young people adopted from care

Wednesday, 14th September - 12:42 - Adoption

Prof. Elsbeth Neil (University of East Anglia)

Finding answers to the common identity questions “where have I come from” and “who am I now” can be complicated for adopted young people because of the discontinuity of their family membership across time. For young people adopted from the care system, answering these questions often entails considering their own history of adversity, and a range of difficulties presented and encountered by their birth parents. Ongoing contact with birth family members as well as openness of communication within the adoptive family are potential ways of helping adopted young people construct their sense of identity. This presentation will draw on interview data with 32 adopted young people to explore pathways to adoptive identity development in late adolescence. It will explore the factors that can help young people achieve a cohesive sense of self as an adopted person, and the reasons why other young people experience frustration and confusion about their identity.

The presentation draws on data from a longitudinal study of children domestically adopted in the UK when under the age of four. The study has involved three waves of data collection - in early childhood, middle childhood and late adolescence. The focus of the study was the experience and impact of birth family contact arrangements on adopted children/young people and their birth and adoptive parents, and children who were planned to have either letter or face-to-face contact with adult birth relatives were included. The young people had been placed for adoption at an average age of 21 months old, and the majority of the sample had been adopted from the care system and had experienced, or been at risk of experiencing, significant harm in their birth families.

In wave three of the study, 32 adopted young people (age 14 to 22, mean age 18; 16 male, 16 female) took part in in-depth semi-structured interviews which explored their experiences and perceptions of adoption and of the openness they had experienced within their adoptive family and with their birth family. The stage that young people had reached in their adoptive identity development was explored qualitatively using the whole interview, drawing on Grofman & Von Korff’s (2011) work on narrative identity; and four patterns of identity formation were identified: cohesive identity; developing identity; unexplored identity; and fragmented identity (Neil, Beek and Ward 2015). Young people in the cohesive identity group had experienced the highest levels of openness in their adoption, both in terms of ongoing contact with birth relatives and the adoption communication openness of their parents, but these factors alone were insufficient to explain the all individual variations in identity formation.

This presentation will focus on the findings from further thematic analysis of adoptive young people’s interviews. The aim of this analysis was to explore factors that had helped young people move towards identity coherence, and factors that created barriers in building identity. This analysis offers a nuanced view from the perspective of adopted young people themselves of how their identity development was shaped by openness practices, particularly in the context of parent-child relationships. It also reveals a wide range of other factors influencing identity development. These included factors within the individual (e.g. age, interest in family heritage, emotional sensitivity), the peer group (e.g. confiding relationships, bullying, meeting adopted peers, sibling interactions) and professional support systems (e.g. life story work, counselling, support with contact). An ecological model of adoptive identity development will be proposed and implications for practice with young people separated from their birth families though adoption and other permanent placements will be discussed.
Adoption in the context of child protection. Experience of
the mothers and social workers who support them.

Wednesday, 14th September - 12:54 - Adoption

Mrs. Carole Côté (Centre d’expertise en maltraitance du Centre intégré universitaire de santé et
de services sociaux du Centre-Sud-de-l’Île-de-Montréal), Dr. Poirier Marie-Andree (École de travail
social, Université de Montréal), Dr. Geneviève Pagé (Université du Québec en Outaouais), Dr.
Anne Marie Piché (École de travail social, Université du Québec à Montréal), Mrs. Geneviève
Turcotte (Centre de recherche jeunes en difficulté du Centre intégré universitaire de santé et
de services sociaux du Centre-Sud-de-l’Île-de-Montréal), Ms. Sarah Auger (École de travail social,
Université de Montréal)

The majority of youth protection systems rely on a fundamental principle: all efforts should be
deployed to enable the children to stay within their family environment. However, in Quebec as
everywhere else around the world, an important number of children do not grow up with their
biological family due to situations compromising their safety or their development. Foster care
occupies an important place on the continuum of services offered to young people and families
facing difficulties. As of March 31st 2015, nearly 11 000 children were placed in substitute care for
their own protection (ACIQ, 2015). All efforts have to be deployed so that the children reintegrate
their biological family as soon as possible. Nevertheless, some placements will lead to permanency,
either as a long-term placement or through adoption. In Quebec, on average a little more than
300 children are adopted each year (ACIQ, 2013). The majority are adopted through a program
called « Banque-mixte » (BM) (Pagé et Poirier, 2015), which allows children considered at high
risk of abandonment to be placed in a foster family with a possibility for adoption. This family is
committed to adopting the child if he becomes freed for adoption. The adoption can be done with
or without the consent of the birth parents and it is a definitive and irreversible solution. Indeed,
adoption in Quebec exists only in its plenary form, meaning that a judgment for adoption severs
the original filiation in a definitive way. The social and judicial intervention process leading to
adoption represents an extremely difficult ordeal for the child’s biological mothers (Jackson, 2000,
Smeeton et coll., 2010). The support provided by social workers demands much knowledge and social
skills. As underlined by Lamour (2010), in such an impossible parenting context, social workers are
confronted to much suffering: the child’s, the mother’s and their own, thus hampering their ability to
intervene (Lamour, 2010). Despite these findings, the realities of the parents and the social worker,
in this unusual context of having to remove children from their biological family in preparation
for adoption, remain largely unknown. The main objective of this communication is to present
the results from two complementary studies which aim to shed light on this experience from the
standpoint of social workers and biological mothers. The first study, done with 15 social workers,
aimed at describing their intervention experience with mothers presenting signs of relinquishment
that could lead to adoption in some cases. During semi-directed interviews, they testified on the
signs of relinquishment observed during the mother’s support, the importance of describing and
voicing things in a perspective of transparency, the respect of the mother’s pace of progress, the
demonstration of kindness and avoiding to make a judgment against the mother’s situation. Finally,
they illustrated a few obstacles while supporting these mothers, belonging either to the mothers, to
the life experience and weaknesses of the social worker or else, linked to the intervention context of
youth protection and it’s legal framework. The second study was conducted amongst 10 mothers
whose child was freed for adoption following the intervention of youth protection agency. These
mothers participated in two individual interviews where they addressed their history, their role as
a mother, their experience with youth protection services and the judicial system. Their discourse
will be paralleled with the discourse of the social workers to identify the most promising practices to support mothers living a placement context leading to the adoption of their child.
‘It would be nice for him to know the person he spent the first twelve months of his life with’: Adopters’ views and experiences of the contact retained or lost between children and their foster carers.

Wednesday, 14th September - 13:06 - Adoption

Dr. Sarah Meakings (Cardiff University), Dr. Katherine Shelton (Cardiff University), Dr. Julie Doughty (Cardiff University), Dr. Heather Ottaway (University of Bristol, Hadley Centre for Adoption and Foster Care Studies), Dr. Amanda Coffey (Cardiff University)

Objective: Nearly all children placed for adoption in the UK will have spent time in foster care before moving into their adoptive home. Most will have been removed from birth family following abuse and/or neglect. For many of these children, the attention shown to them whilst in their foster placement represents their first experience of safe, nurturing care. The importance of considering how best to manage the relationship between a child and their foster carer following the child’s move into their adoptive home has been the focus of recent attention. In particular, emphasis has been placed on recognising the benefits of continued foster carer contact with children post placement. Historically, social work practice has tended to support the notion of a ‘clean break’ between foster carers and children, in the belief that this will give a child the best chance to settle with their new family. However, for some children, it seems possible that this may engender feelings of confusion, powerlessness, loss and rejection. This presentation, drawing on a national sample of children recently placed for adoption, contributes to what is known about the decisions made (or not made) regarding children’s contact with their foster carer post adoptive placement. We report on adoptive parents’ views and experiences of the contact (or lack of contact) during the first few months of the adoptive placement.

Method: The Wales Adoption Study used a mixed-methods approach to examine the characteristics and experiences of a national sample of children recently placed for adoption in Wales, to consider the early support needs of adoptive families into which the children were placed, and to better understand what helps these families to flourish. The case file records of all children placed for adoption in Wales over a 13 month period were scrutinised (n=374), 96 questionnaires were completed by adopters into which a representative sample of these children were placed and a subsample of 40 adoptive parents were interviewed in depth. Questionnaires were completed between 3-5 months post placement, with the interviews typically taking place about 6 months thereafter. This presentation is based largely on material drawn from the interview work with the adoptive parents, in which they talked in detail about the child’s transition to their adoptive home and their experience of the subsequent contact (or cessation of contact) with the child’s foster carer.

Results: For just under a third of the children in the questionnaire sample, plans were made for continued direct contact with the foster carer once the child moved into their adoptive home. Ten percent of families planned to have postal contact with foster carers. Analysis of the interview data is underway and will be presented in full at conference. Initial orientations suggest that a range of factors influence whether continued contact occurs between foster carers and children, once the child moves on for adoption. These include:

- The involvement of social workers in decision making.
- The quality of the relationship between adoptive parents and foster carers
- The commitment by the involved adults in maintaining contact
- The preparation of children in their understanding of adoption
- The foster carer’s ability to maintain contact in a way that prioritises children’s needs
- The importance attached by adopters to the continuing involvement of the foster carer in their child’s life.
- Adopters’ views about the quality of the care shown to children in their foster care placement.

Conclusion: This presentation contains novel material about adoptive parents’ views and experiences of the contact maintained or lost between children and foster carers, once children move on for adoption. Implications for social work practice will be discussed.
Adopter experiences of the linking and matching process in adoption

Wednesday, 14th September - 13:18 - Adoption

Dr. Heather Ottaway (University of Bristol, Hadley Centre for Adoption and Foster Care Studies), Dr. Sarah Meakings (Cardiff University), Dr. Katherine Shelton (Cardiff University), Dr. Julie Doughty (Cardiff University), Dr. Amanda Coffey (Cardiff University)

Objective: Public policy in the UK is currently focused on tackling delays in achieving permanence for children in public care. It is argued that timely permanence is linked to better developmental outcomes. For those children awaiting adoption as their route to permanence, that focus has included how the process of linking and matching children to their adoptive families is working in practice. There is a growing body of evidence on the impact of organisational processes and social worker attitudes on delays in linking and matching. However, there is little research about adoptive parents’ experiences of the linking and matching process. This study aimed to explore those experiences in-depth, including the potential impact of failed previous matches on adoptive parents’ approach to the match for their adopted child.

Method: The Wales Adoption Study is a national research study that used a mixed-methods approach to examine the characteristics and experiences of a sample of children recently placed for adoption in Wales. The experiences of their adoptive families in the first year of placement were also explored in order to better understand what helps adoptive families flourish. These included adoptive parents’ expectations of adoption, their experience of the assessment process and linking/matching, and the early support needs of the whole family. Ethical permission for the study was granted by the ethics committee at Cardiff University, School of Social Sciences. Data for the present paper is based on parent reports of the linking and matching process for 96 Welsh children, where the child was placed for adoption between July 1st 2014 and June 30th 2015, and in-depth qualitative interviews with a sub-sample of up to forty adoptive parents. Questionnaires were sent to parents between 3-5 months post-placement. Ninety six adoptive families completed a questionnaire around four months after the start of their adoptive placement. Forty adoptive parent were, or will be, interviewed at home approximately nine months after the start of the adoptive placement. Parental experiences of the linking and matching process were explored in-depth as part of the interview. The characteristics of the 96 children whose families participated in the study were compared to all Welsh children placed for adoption during the study period (n=374). Our sample is representative of Welsh children placed during the study window for age, gender, primary reason for placement and past experiences of abuse/neglect.

Results: We will present data on adoptive parents’ experiences of the linking and matching process for their child. Analysis is on-going, and will be presented in full at the conference. Early themes emerging from the data include:

- The impact of failed previous links/matches. Questionnaire data indicated that 30% (n=29) of adoptive families in the sample had experienced a failed link/match previously. 79% reported they had found this ‘difficult’ or ‘somewhat difficult’ to deal with. The reasons for this, and adoptive parents’ subsequent practical and emotional approach to matching with the child they adopted will be reported.
- The flexibility of adoptive parents towards finding a suitable match
- The dominance of social worker led matching in the study population, and the feelings of powerlessness, competitiveness and ‘playing the waiting game’ this engendered in some adoptive parents.
• The central role of medical advisors in advising and/or reassuring potential adoptive parents about health problems and potential developmental uncertainty at matching stage.

• The impact of information gaps and possible inaccuracies in assessments of the child’s background and experiences prior to adoption.

Conclusions: Implications for policy and practice around the linking and matching process in adoption will be discussed in the light of evidence presented from this study.
The ADHD explosion in Sweden and its consequences for child welfare

Wednesday, 14th September - 12:30 - Emotional and Behavioral Problems of Children in Care

Prof. Tommy Lundström (Department of social work, Stockholm University), Dr. Patrik Karlsson (Department of social work, Stockholm University)

ADHD (Attention deficit hyperactivity disorder) is the fastest growing psychiatric diagnosis among young people in Sweden and probably in the world. Drug treatment is common among those with a diagnosis, but little is known about the long term effects, positive and negative of such a treatment. Large geographic differences in prevalence of diagnoses and drug prescription on national and international level is a well-known phenomenon. Children within the child welfare system are however heavily over-represented, both with regard to diagnoses and drug treatment.

Objectives: The aim of the presentation is (1) to discuss geographic patterns in Swedish drug prescription for adhd and analyze factors that explain differences in this respect, (2) to present data on prescription rates among the child welfare population and to discuss the significance of these findings for social work with children and youth.

Method: Data on prescription rates in the Swedish municipalities (n=289) from the Swedish National Register of Prescribed Drugs and municipal data on child/youth factors, structural factors and economic factors are used in the analysis of geographic patterns (linear regression models). Data from the Swedish Board of Health and Welfare are deployed to discuss differences in description rates between children in different types of out of home care and the Swedish population (< 18 years). Findings from international research are used to place the Swedish case in context.

Results: The ADHD explosion (i.e. a fast growth of diagnoses as well as drug prescriptions) is an international phenomenon in the general population as well as in the child welfare population. Disadvantaged children (i.e. children to lonely mothers, children in poor families etc) are more affected than others. As for geographic differences in Sweden, results from regression analysis shows that factors on the local municipal/level can explain some of the variance, but the most important factor seems to be diverse types of professional practices on the regional level (Swedish health care is organized on the regional level). As for the differences between children in out of home care compared to the other children in Sweden differences are huge. For example, for girls in foster care the odds of being prescribed medicine for ADHD is six times as high compared to girls in the normal population. For boys in secure units (locked residential care units) the odds are ten times as high compared to children in the normal population.

Conclusion: The ADHD explosion might be understood as a case of medicalization of social problems. ADHD is not a stable and clear-cut diagnosis and social systems such as schools, the pharmaceutical industry, pressure groups and (in Sweden particularly) health care seems to be of great importance in explaining differences on international, national, regional and local level. This calls for more social science research on how the differences can be understood. Furthermore, there is an urgent need for more research on what diagnoses and medicalization means for children in general and for children in the child welfare system in particular. As for social work a number of ethical as well as practice oriented questions are raised, for example: To what degree and in what manner should social workers act when they identify children that might be diagnosed (this is of special importance as diagnoses often are made when children are in out of home care)? From an ethical perspective questions on different actors (children, parents schools etc) interests can be raised. From a practical
perspective: how shall prescription drugs be handled in residential care units where up to 30 percent of the children use ADHD medicine.
EXPLORING THE RELATIONSHIP BETWEEN SYMPTOMS OF POSTTRAUMATIC STRESS DISORDER AND CHALLENGING BEHAVIOUR

Wednesday, 14th September - 12:42 - Emotional and Behavioral Problems of Children in Care

Mrs. Rachel Webb (Glasgow Caledonian University), Mr. Dan Johnson (Kibble Education and Care Centre)

Objective - Research has suggested an association between exposure to traumatic events and later difficulties. In this respect, young people in residential and secure care pose a unique group as early intervention is hoped to enhance quality of life and minimise any potential adverse behaviour in the long term. It is suspected that this population have often experienced traumatic events prior to entering the care system. Furthermore, challenging behaviour such as aggression is not uncommon amongst this population. However there is little research examining the role of acute trauma symptomology amongst this population and as such, its association with the challenging behaviours exhibited. Therefore, the purpose of this study was to examine the role of acute trauma symptomology (PTSD) and its association with challenging behaviour.

Method - The research was conducted at an education and care centre located in the West of Scotland. The study used a mixed method, retrospective design. A trauma screening measure, which assessed trauma exposure and symptoms of PTSD, was researcher-administered to a sample of keyworkers (n = 49) of looked after children accommodated in either residential or secure care. The outcome measure was challenging behaviour, which was measured through the number of episodes of offending, verbal aggression, physical aggression and physical restraints. This data was derived from files only and the retrospective follow-up time was 28 days.

Results - Results indicated that 100% of the sample had experienced a traumatic event. The sample had experienced an average of four different types of traumatic events. Regression analyses showed that symptoms of PTSD were associated with physical and verbal aggression directed towards both members of staff and the young persons peers. There was no association between symptoms and PTSD and episodes of offending or physical restraints. The results also indicated that those with higher PTSD symptomatology scores tended to be more aggressive. The severity of PTSD scores was not related to the number of traumatic events experienced.

Conclusion - The results of this study provide a unique insight into a vulnerable and understudied population. These results have significant implications for clinical practice highlighting the need for both trauma assessment and interventions. Ultimately, this study provided a crucial insight into further clinical issues. Further research is required to ascertain the effects of trauma on young people and it’s role in terms of service provision. The study suffered from numerous limitations, these will be explored in detail.
Child participation in Institutional Treatment for Children with Emotional and Behavioural Problems

Wednesday, 14th September - 12:54 - Emotional and Behavioral Problems of Children in Care

Mrs. Ivana Jedulić Boric (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Mrs. Nivex Koller-Trbović (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Mrs. Anja Miroslavljević (University of Zagreb, Faculty of Educational and Rehabilitation Sciences)

The awareness on the importance of child participation in various aspects of child’s life has risen during the last decade among the academics and professionals in Croatia. The child participation became widely recognised within many national laws (e.g. Family Law Act, Law on Education in Primary and Secondary Schools, Child Ombudsman Law, Social Welfare Act, Foster Care Law, The Youth Councils Law, etc.) and policies as well. The National Strategy for Child Right in Republic of Croatia 2014 - 2020, specifically recognizes child participation as one of its four strategic goals (Enabling active participation of children), as well as specific measures within all other strategic goals. Since 1999, there have been several researches on the rights of the child, including participatory rights. Data from research conducted in 1999 (Žižak and Koller-Trbović), showed that most of the children believed that adults do not listen to them and that they don’t have opportunity to express their views. Later researches showed no improvement in that sense. Child perspective and participation has become prominent in public discourse but not so present in everyday practise, especially when it comes to children in alternative care. Main aim of this research is to gain insight in level and forms of child participation in institutional treatment with special focus on children with emotional and behavioural problems due to increased risk of low level of participation. Research will be conducted in 10 correctional institutions in Croatia, using questionnaires and focus group discussion to investigate children’s and professionals’ perspective. Research questions focus on context and form of participation in institutional care, specific characteristics of children with emotional and behaviour problems and their potential and willingness to participate and role of professionals in realization of participatory rights.

Preliminary results concerning professional’s perspective show that when it comes to a practical level, adults are sceptical and do not really support child participation. One of the reasons for this lies in a lack of real understanding of child participation. Child participation is still in general perceived as some sort of decoration or formal fulfilment of certain policies and laws or as fulfilment of children’s wishes. Besides that professionals that work with children are most often not properly trained to support child participation.
Change Trajectories of Aggressive Behavior among Children in Long-Term Residential Care in Israel

Wednesday, 14th September - 13:06 - Emotional and Behavioral Problems of Children in Care

Prof. Shalhevet Attar-Schwartz (The Hebrew University), Prof. Rami Benbenishty (Bar-Ilan University), Dr. Ilan Roziner (Tel-Aviv University)

There are very few studies examining patterns of behavioral change in the functioning of children at-risk while in out-of-home care and their predictors. The aim of this study is to examine change trajectories of aggressive behaviors among children in long-term residential care in Israel and to identify various child, family, and placement-related predictors of the different trajectories. Records of 799 children (average age = 10.4, 33.1% female) in their first four-consecutive-years in care in a period of 4-year-stay were analyzed, using the CBCL aggressive behavior subscale (Achenbach, 1991) to measure the outcome variable. Characteristics of the children, parents and placement-related factors were used to explain variance in change trajectories. Latent Class Growth Analyses identified four aggressive behavior trajectories: ‘stable-low’ levels of aggressiveness over time (45% of the children), ‘stable-high’ levels (13%), ‘improvement’ (20%), and ‘deterioration’ (22%). Predictors of less resilient trajectories (enduring-stable or increasing aggressiveness) included mother’s difficulties and disabilities, special education needs, post-hospitalization type of care, and immigration status. The main findings of the study are explained by General Strain Theory. Special resources should be directed towards at-risk subgroups of children who fare worse or keep on high stable level of aggression over the years. Understanding the clinical benefits of residential treatment is a critical component for ensuring that children and adolescents receive the type of care they need to maximize healthy development.
Are care-givers interventions matched with the behaviour problems of youth in residential care in Croatia

Wednesday, 14th September - 13:18 - Emotional and Behavioral Problems of Children in Care

Dr. Ivana Maurovic (University of Zagreb), Prof. Antonija žičak (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Dr. Gabriela Ratkajec Gašević (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Dr. Ivana Jedud (University of Oviedo)

According to the Convention on the Rights of the Child, those children and youth that are “temporarily or permanently deprived of their family environment, or in whose own best interests cannot be allowed to remain in that environment, shall be entitled to special protection and assistance provided by the State” (article 20). The “special treatment” in the most direct sense provide care-givers in residential care. How that special treatment is provided, is it matched with needs of children and youth is very important question.

Therefore, the purpose of this paper is to examine differences in relationship of care-giver interventions and behaviour problems of youth when self-assessment and caregiver assessment of problems is taken into account.

The research was conducted with convenience sample of youth (age 14 – 21) placed in 14 children’s homes in Croatia (N=253). Regarding gender, 55.7% of them were female and 44.3% male.


Methods of descriptive statistics and correlation analysis were used. The results of applied t-test indicate statistically significant differences in the assessment and self-assessment of youth internalising and externalising behavioural problems. Namely, youth perceive that they are dealing with more internalising and externalising behaviour problems then care-givers do assess. On the other hand, correlation analysis suggests stronger association between care-givers interventions and youth behaviour problems when problems are assessed by caregivers. Namely, caregivers assessment of youth internalising behavioural problems is positively correlated with all three measured care-givers intervention (controlling, warmth/support, autonomy granting). None of interventions was significantly correlated with self-assessed internalising problems.

Similar results are found when externalising behavioural problems are taken into account. There is a positive correlation between the care-giver assessment of externalizing problems and controlling (.54) and warmth/support (.25). Only significant correlation between care-givers intervention (controlling) and self-assessed youth behavioural problems was found when analysing externalising problems. However, this connection was of law values (.15).

These data show a concerning fact that youth assess to have more internalising and externalising behavioural problems then their caregiver perceive, and that those problems are not addressed with appropriate interventions. In order word, on the bases of these results it is not possible to confirm that those children are receiving 'special treatment’, matched with their intervention needs and Convention principles.

The results indicate the importance of taking into account youth perspective on their behaviour when planning and implementing interventions.

Key words: care-givers interventions, behavioural problems, youth, residential care
Quality of life among adolescents living in residential youth care.

Dr. Nanna Kayed (Norwegian University of science and technology), Dr. Thomas Jozefiak
(Norwegian University of science and technology)

Objectives: Quality of Life (QoL) should be an important outcome measure in Residential Youth Care (RYC) institutions, as Child welfare services are aimed at providing care and protection, fostering well-being and prosocial behavior. QoL is defined as subjectively perceived well-being and satisfaction that can be best evaluated by the child itself, according to his/her own experiences across several life domains. The dearth of research in this area gives rise to serious concern. The present study is to our knowledge the first large scale, nationwide study assessing QoL among adolescents living in RYC. For a comparison, adolescent self- and primary contact proxy reports were compared to the general population and to adolescent outpatients in Child and Adolescent Mental Health Service (CAMHS). Also, we investigated the association between self-report of QoL in adolescents living in RYC and proxy reports of their primary contacts at the institution.

Methods: All residents between the ages of 12-20 years living in RYC in Norway were invited to participate. Eighty-six RYC institutions (with 601 eligible youths) were included, 201 youths/parents did not give their consent. Finally, 400 youths aged 12-20 years participated, yielding a response rate of 67%. As a reference frame for comparison, a general population (N=1444) and an outpatient sample of adolescents in CAMHS (N=68) were available. We used the Questionnaire for Measuring Health-related Quality of Life in Children and Adolescents (KINDL-R). General Linear Model analyses (ANCOVA) were conducted with five KINDL life domains as dependent variables and group as independent variable.

Results: Results showed that self- and proxy reports of QoL in adolescents living in RYC were significantly (p<0.001) poorer QoL compared to the general population on the life domains physical- and emotional well-being, self-esteem, and relationship with friends. Adolescents evaluated their physical well-being as worse compared to adolescents in CAHMS. Self- and proxy reports in RYC differed significantly on two of five life domains, but correlated low to moderate with each other.

Conclusions: The results in this study raise major concerns about the poor QoL of the adolescents living in RYC, thereby challenging the child welfare system and decision makers to take action to improve the QoL of this group. The use of QoL as outcome measures is highly recommended.
A Longitudinal Study: Personal and Social Resources Contributing to Functioning and Well-Being Four Years after Aging out of Care in Israel

Wednesday, 14th September - 12:42 - Children Wellbeing and Quality of Life

Dr. Tehila Refaeli (Ben-Gurion University), Prof. Rami Benbenishty (Bar-Ilan University), Prof. Anat Zeira (The Hebrew University)

Background and Purpose:
Studies around the world report that young people aging out of residential facilities (care leavers) experience difficulties in multiple life domains. Previous studies also explored some of the background characteristics and social resources as contributors to the young people's resilience in the years after leaving care. The presented study followed Israeli adolescents from their last year in residential facilities through their military service, up to about four year after leaving care. The study tests a comprehensive model that examines how personal resources (optimism, self-esteem, self-efficacy and future orientation) and support resources (parents and peer support) at multiple points in time are associated with functioning and well-being four years after leaving care.

Methods:
The sample included 276 adolescents who answered a questionnaire during their last year in care institutions (T1), 234 of them were interviewed one year later (T2) and 220 were interviewed again four years after leaving care (T3). The response rate was 79.7%. Structured and validated questionnaires examined social support from parents and friends as well as use of social services (T1-T3) and personal resources while in care (optimism, self-esteem, self-efficacy and future orientation; T1). In T2, instruments measured adaptation to work/school/military service and well-being (including life satisfaction and mental distress). In T3, instruments assess accommodation, employment, income and economic situation, education, use of alcohol and drugs and well-being. Structural Equation Modeling (SEM) with autoregressive paths was conducted to examine the theoretical model (n=208).

Results:
Results indicate that, although struggling with difficulties in multiple domains, Israeli care leavers were experiencing better life situations than described in much of the European and American literature. Only a few reported homelessness, a low percentage experienced unemployment and poverty and a high percentage obtained a full matriculation diploma.

The SEM model had reasonable fit to the data $2(552, N=208)=724.33, p=.00, TLI=.921, CFI=.934, SRMR=.068, RMSEA=.039 (90% CI=.030; .046)$. It indicated that personal and social resources were associated with current functioning and well-being in a complex pattern: Higher personal resources were associated with lower economic and lower mental distress and higher work stability. Support from parents was associated with lower economic and lower mental distress, but also with fewer activities toward higher education. Support from friends was a predictor of multiple variables including: lower economic and lower emotional distress, higher work stability and life satisfaction. In contrast to findings from other countries, adaptation soon after leaving care had a minor contribution to the functioning and well-being four year after leaving care.

Conclusions and Implications:
The results suggest the importance of combining personal and social resources to improve young people’s resilience when facing the challenges of transition to independent life. Hence, the recommendations to prepare the young people for the transition from care and to accompany them after they leave. In addition, the results indicated the significance and the contribution of the relationship with parents. These results highlighted the need for working with parents to improve the relationships while in care and in follow-up programs. Limitations include a response rate of 80%, and a limited sample size.
A process manual for the systemic-dialogical assessment of the well-being of the child

Wednesday, 14th September - 12:54 - Children Wellbeing and Quality of Life

Prof. Stefan Schnurr (University of Applied Sciences Northwestern Switzerland, School of Social Work, Institute for Studies in Children and Youth Services), Prof. Kay Biesel (University of Applied Sciences Northwestern Switzerland, School of Social Work, Institute for Studies in Children and Youth Services)

It is widely accepted that assessments of a child and their family in situations where there are concerns about a child’s welfare have to be well-structured, knowledge-based and applied by a skilled and experienced workforce. In Switzerland professional decision-making in statutory child protection was only established in 2013. As a consequence, knowledge-based approaches to the assessment of a child’s well-being have been lacking for a long period of time and today’s practice of undertaking assessments is dominated by a diversity of local models. Little is known about how systematic these models are and how they are used by service workers. This paper reports on a cooperative research and development project, in which researchers and practice organisations have been working together in order to build a research-based process manual for the assessment of the well-being of the child. The presentation provides information on the project and on its outcome: the “Process manual for systemic-dialogical assessment of the well-being of the child”, which combines three key features: (1) Rather than suggesting a dichotomy between a child-protection focused and a needs-focused assessment, it conceptualises assessment of suspected significant harm and assessment of needs as two of six key processes. It helps professionals to prioritise and decide what issues should be addressed next according to the contextual conditions and circumstances of a particular case. (2) Instead of trying to determine action using step-by-step instructions, the process manual is designed to support professionals in making sound decisions about how to move on in a particular key process of an assessment. (3) Proposals and reflections about how to engage the child’s and the parents’ participation in the assessments, as well as in the process of drawing conclusions about appropriate measures / services are integrated in each of the six key processes. In addition to introducing the structure and design of the processmanual, the presentation draws on research findings on assessments in child care and child protection that underpin it.
Re-defining subjective well-being with Looked-After Children in Scotland

Wednesday, 14th September - 13:06 - Children Wellbeing and Quality of Life

Dr. Lucy Hanson (Liverpool Hope University)

Introduction

In Scotland, there are a number of measures used to collect how well the country ‘performs’ in relation to children and young people. The Scottish Government publishes its own performance indicators with the aim of making “Scotland to be the best place in the world for children to grow up in”. A number of national surveys are used to support this framework, but all are aimed at the general child and adolescent population. When it comes to the outcomes of Looked-After Children, data is only available through annual statistics provided by Local Authorities through their management information. This focuses on educational grades and additional educational needs, placement types and moves, and child protection registrations. This ‘official statistics’ approach to capturing the complex and meaningful lives of Looked-After Children is questionable (Holligan et al. 2014).

Objectives

Due to the lack of data available to examining the well-being of Looked-After Children it was proposed that a new subjective well-being survey be developed. The survey itself would be designed with the input of children and young people with care experience. It is the aim of this paper to discuss the process of developing such a survey, and significantly, the young people’s views as to how to approach the domains of well-being for young people who were in care, or on the ‘cusp’ of care.

Methodology

The research used four focus groups with young people with care experience to discuss the desirability and relevancy of specific survey questions about well-being. This follows the approach of other subjective well-being surveys that include children and young people in some aspect of survey design or reflection, and children’s engagement with the research process itself (Navarro et al. 2015, Casas et al. 2013, Hanson et al. 2016).

The 19 young people who participated in the research were aged between fourteen and twenty-three. The researcher engaged with four different organisations to include young people with different care pathways. Those who agreed to take part did so via one residential school, one secure unit and two different community based charities. The role of the focus groups in this research were to debate and refine questions previously used by the Children’s Society in the Good Childhood reports.

Findings

The broad domains used within Scottish Policy in relation to children and young peoples’ outcomes were presented to the groups. The overarching themes of Safety, Healthy, Achieving, Nurtured, Active, Responsible, Respected and Included as set out in the Children and Young Peoples (Scotland) Act 2014 were not objected to. However, specific survey questions were debated considerably. Some questions were analysed as to how ‘well’ they captured children and young people’s lives in general, for example, as to whether ‘often feeling tired’ was a reflection on smoking too much cannabis or working too hard. Others were specifically refined in order to address the needs of the Looked-After community such as, would being responsible in terms of babysitting a younger sibling actually be raising some fundamental child protection concerns?

Conclusion

70
This paper will add to the debate about using subjective well-being measures with children and young people, as well as the role they should play in designing questions themselves – how far can they be included in the development of such specific measures. The paper will also highlight some of the key issues that they raised about orientating a well-being survey specifically in relation to Looked-After children.
Promoting the growth and well-being of children through the dialogue with parents

Wednesday, 14th September - 13:18 - Children Wellbeing and Quality of Life

Dr. Cinzia Canali (Fondazione Zancan), Dr. Giulia Barbero Vignola (Fondazione Zancan)

Objectives:
CRESCERE (‘growing up’ in Italian) is a longitudinal study coordinated by Fondazione Zancan. It involves a sample of children and families in the North-East of Italy, starting from 11 y.o. up to 18 y.o. The main goal is to understand how adolescents grow up and develop in the critical transition to adulthood. In this presentation, data from the first wave are analysed, focusing on child well-being, with indicators to assess family support, attachment to parents and friends, self-esteem and happiness.

Method:
The sample is selected through a stratified random sampling from the municipal list of residents born in 2001. The data presented refer to 490 children (50.8% male) 11-12 years old, who joined the first wave. The information is collected through a structured questionnaire. In the first wave, children were interviewed in their own homes or in other places with their parents and answered questions using a tablet, autonomously and in full respect of privacy. Data were sent directly to the server and analysed using SPSS 22.0.

We asked the children to characterize the relationship with parents and peers through the short version of IPPA - Inventory of Parent and Peer Attachment. The instrument includes 12 items concerning communication, trust and alienation. To assess the support of the family we used the Multidimensional Scale of Perceived Social Support, in particular the subscale referring to family. To investigate their conception of themselves we used the Rosenberg Self-Esteem Scale, widely used in social-science research. Finally, to assess how they feel in their own lives, we use the Faces scale, a 7-point non-verbal scale.

Results:
The responses of children paint a positive picture. In general 11-12 years old children feel good about themselves, have confidence in their abilities, feel supported by their family and are able to communicate quite easily with both parents and peers.

The data confirm the importance of family relationships: good communication with father and mother, a perceived sense of trust and security, being accepted as they are, are all fundamental factors that help children to strengthen their self-esteem. Also the relationships with peers are important, because they help children to understand themselves better and to test their skills. All this has a direct impact on the well-being of children: they are happy when they feel accepted, supported and valued by their parents. And the higher their self-esteem and self-confidence is, the more children can be well.

Conclusions
The longitudinal study represents an important tool for local planning. Its results were discussed in a public meeting with local municipalities, families, teachers and other stakeholders involved in the growth of children.
For children the study is important because it promotes reflective attitude and dialogue. Asking questions about some important issues, such as bullying, relationships with parents, trust in themselves, help children to become “actors” of their lives and “agent” of change.

This is a starting point for building a society more oriented to prevention, as indicated by one of the parents involved in the study: “It is a good initiative because it helps us to better understand the needs of our children as they grow ... and I think that problems and/or needs that children have the courage to tell you without embarrassment can emerge.”
What helps in making successful transitions from care?

Wednesday, 14th September - 12:30 - What helps in making successful transitions from care?

Prof. Robbie Gilligan (Trinity College Dublin), Dr. Laura Arna (Universitat Autònoma de Barcelona)

There is increasing recognition of the importance of transition processes experienced by young people as they leave the care system and face into life away from formal ‘care’, and as they move from adolescence to young adulthood.

While it is broadly accepted that positive experience in education and work are very important elements in successful transitions, a lot of investigation is still required to understand better the detail of what supports positive transitions – the ‘how’ of successful transitions.

This symposium draws on studies from six countries that address this issue from a number of perspectives – those of young people and their supporters (carers and other well-disposed adults).

The distinctive focus of the symposium will be on what has contributed to successful outcomes or positive progress as seen by the young people or concerned adults. This will include attention to the efforts of the young person, as well as informal and formal support efforts by concerned adults. The symposium will highlight, in particular, key elements in successful progress in education and on the pathway from care to work.

Collectively, the work presented will provide insights relevant to policy and practice in the area, and will help to stimulate ideas for further research and theory building.
The experiences of New Zealand care leavers who went to university

Wednesday, 14th September - 12:42 - What helps in making successful transitions from care?

Dr. Iain Matheson (Massey University)

“As events are about to show, it is also possible to slither down a snake and climb to triumph on the venom of a snake” (Rushdie, 1981, p. 161).

Over recent years, there has been growing international recognition, by practitioners, managers, researchers and policymakers, of the importance of the transitioning from residential and foster care to adulthood process. Across public services, including child welfare, many governments have also been promoting a conceptual shift from outputs to outcomes and, with it, a stated wish to ensure better value from public expenditure. However, despite these two developments, we still know very little about positive outcomes for care leavers. What little we do know from the limited number of research studies in this area, along with administrative data matching undertaken by some governments, historical reviews into the abuse of children in care, and professional and organisational experience, tends to be framed around negative outcomes such as, for example, homelessness, imprisonment, and suicide, or their absence, rather than positive outcomes per se.

In this paper I will initially briefly explore the notion of positive outcomes in the context of transitioning from care to adulthood. I will then present, supported by slides, some of the key findings from a qualitative doctoral study ‘Climbing up Snakes, and Slipping down Ladders’, undertaken with seven New Zealand care leavers who went to university. Using informal conversational interviewing and thematic analysis, the study explores their experiences of foster care, leaving care, schooling, university, interpersonal relationships, as well as their feelings, motivations, views and attitudes.

While these individuals experienced many of the same barriers as other care leavers, a number of ‘success factors’ are identified including positive or very positive experiences of schooling, educational stability for their final year or years at secondary school, attending a local university and being close to their existing support networks, having experienced at least one high quality and valued foster care placement, education being valued by families and partners, having a supportive circle of friends, being able to access a high quality transitioning to independence support service, wanting a different kind of future for themselves, having a sense of (educational) resilience, feeling cared for and cared about by at least one adult, having a strong identity as a student or a professional, and completing their degrees.

An understanding of such ‘success factors’, and indeed their ‘obstacles’, may well be transferable to some other university students with a care background and others in care in New Zealand and overseas, and contribute towards our broader understanding around supporting transitions from care to adulthood.

However, the paper also draws upon another of the study’s key findings; that being in foster care, and transitioning to adulthood, is a highly complex process. As such, ‘success factors’ and ‘obstacles’ may in practice take different forms with different individuals, and depending upon their own particular context may also be experienced, and responded to, in very different ways. Such factors also interact with each other, while some may also have unintended consequences, both negative and positive. Furthermore, this study also suggests that acts of enormous generosity, and serendipity, may also have an important role to play in positive outcomes for those transitioning from care to adulthood. Using illustrative audio clips as well as slides, some of these complexities, tensions, contradictions, and their implications, are also explored.
As well as policymakers, managers and researchers, the findings will also be of interest to practitioners and managers who are supporting young people in care or care leavers, as they try to navigate their way towards adulthood.
The role of carers and employers in promoting care leavers’ access and progress in work

Wednesday, 14th September - 12:54 - What helps in making successful transitions from care?

Prof. Robbie Gilligan (Trinity College Dublin), Dr. Laura Arna (Universitat Autònoma de Barcelona)

This presentation highlights the potential role of carers and employers in supporting care leavers in their efforts to access and sustain work opportunities. Findings presented draw from a wider cross-national study (Ireland and Catalonia) aimed at exploring the key influences that young people reported as helping them to succeed in the world of work.

A total of 22 care leavers (10 in Ireland and 12 in Catalonia) were recruited on the basis of substantial employment experience since leaving care. An open-ended interview was conducted in both locations to explore, among other things, the role that carers and other significant people played in their successful work trajectories before and since leaving care.

Across both countries, formal carers (social educators, foster families) were reported to play an important role in supporting the work progress of young people in care. The intensity of such support varied across cases, depending on the characteristics/qualities of the placement. The findings of the study suggest that carers’ support needs to be considered on at least two levels: i) creating a positive climate in the care setting (for example values about education, placement stability, carers’ expectations, etc.) and, ii) giving practical guidance or support to access and progress in the world of work (for example, lifts to or from work, helping young people prepare themselves for work tasks and skills, etc.)

Across both countries, some employers and managers were reported as very influential in care leavers’ progress in the world of work. Participants recalled examples in which some employers seemed to have been acting spontaneously as informal ‘carers’ by mentoring young people in the acquisition of many daily skills, building trust, giving advice, etc.

The presentation will conclude by reviewing some implications of the findings for recruitment, training and support strategies for carers (formal and informal) in the area of work support.
Facilitating factors for educational success – Views from young people and carers

Wednesday, 14th September - 13:06 - What helps in making successful transitions from care?

Prof. Ingrid Höjer (department of social work, University of Gothenburg), Dr. Helena Johansson (department of social work, University of Gothenburg)

Education and employment are the two most important factors for a successful transition from a placement in out-of-home care to adulthood. Therefore, it is of great importance to identify facilitators for educational success for this group. The aim of the project Young People from a Public Care Background: Pathways to Education in Europe (2008 – 2010) was to investigate post-compulsory educational pathways among young people who spent at least one of their childhood years in out-of-home care. The project was funded by the European Commission (EC) as part of its Seventh Framework Programme, and coordinated by Sonia Jackson and Claire Cameron. Five European countries participated – UK (Coordinators) Sweden, Spain, Hungary and Denmark. Results from the project are still analysed and published.

In the Swedish part of the project, we interviewed 33 young people twice. They were also asked to appoint one ”nominated adult” to be interviewed – someone who had helped and supported them in their educational achievements. 25 adults (3 biological mothers, 13 foster carers, 6 teachers, 1 counselor, 2 residential staff) were appointed.

The aim of this presentation is to focus on what the young people and the nominated adults identified as facilitating and motivating factors for educational success. The main facilitating factors for young people were ”a learning identity”, a strong motivation to do better than their parents, support and encouragement from teachers, carers and family, having ”a second chance” – for example to retake a year at school - and continued support after leaving care. The nominated adults emphasised the importance of high expectations on educational achievement and support from school. The 13 foster carers claimed that neither social services nor schools had sufficient focus on support for young people placed in care. The young people interviewed and their foster carers agreed that schools, carers and young people need to work together, with a well elaborated strategy, aiming at educational success. Those young people who had received such support had also managed to move on to further education or to find a job. Thus, educational support and achievement are both vital for a successful transition from care to adulthood. This information needs to reach social services and schools, responsible for the educational achievements of children and young people placed in care.
What helps young people succeed in leaving care?: A Case Study from the Czech Republic

Wednesday, 14th September - 13:18 - What helps in making successful transitions from care?

Mrs. Hana Pazlarova (Charles University in Prague), Prof. Oldrich Matousek (Charles University in Prague)

Successful participation in the labor market is a key factor for promoting social integration into society for young people in general, but especially those youth from vulnerable populations such as youth in care. However, little is known about the “how” of the work experiences, the support young people receive and how work experience is related to other life events. Yet for young people who have left care, it is difficult to find and keep a job. The main focus of this study is addressed at understanding the following: What are the work experiences of these young people when they leave care? what are their ways of support into employment and other life areas? And how does work influence other aspects of life?

This study focuses on 12 cases in the Czech Republic that succeed after leaving care and it is aimed at describing the care leavers’ work experiences since they left care and analyzing the support they received and the influences that their work history played in their life. The study is a follow-up/replication in Czech Republic of the work previously done by Arnau and Gilligan (2015) based on research in Ireland and Catalonia about care leavers’ successful experiences in the world of work (Care to Work Pathways Study)

A qualitative methodology (semi-structured interview) was used to collect and analyze the data. The criteria used to select participants were: being aged between 25-35 years old, had spent a significant part of adolescence in care, being at work and having extensive work experience.

The study analyzes care leavers successful trajectories in the world of work, functional supports and other influences. For young people leaving care, work can be an important stabilizing factor and could have positive ripple effects in education, in developing soft and hard skills and in building up their own social support network. Thus, findings to be presented focus especially on the influences supporting positive progress on work pathways.

Based on the findings of this study some insights on supports that youth have encountered in their work experiences are highlighted, in order to help inform work with young people leaving care within the system in the Czech Republic and to promote reflection on the role that carers play in young care leavers’ progress in the world of work.
Exploring the interplay of factors that support ‘successful’ transitions through the lived experiences of care leavers.

Wednesday, 14th September - 13:30 - What helps in making successful transitions from care?

Dr. Fidelma Hanrahan (University of Sussex), Prof. Janet Boddy (University of Sussex)

Lifecourse experiences of young people leaving care and care leavers are characterised as being marked by ‘abrupt’ transitions to adulthood when formal ‘care’ is left. These transitions are commonly associated with the loss of emotional, practical and financial networks of support, and ultimately with poor outcomes. However, crucially, there has been little focus on the diverse ways in which young people in care and care leavers successfully navigate transitions to adulthood despite social and institutional barriers. We present early findings from the English component of a three-country international study (Against All Odds?, led by Elisabeth Backe-Hansen) which seeks to address this lack of knowledge by building a more complex understanding of what factors contribute to positive outcomes for young people leaving the care system. Specifically, qualitative longitudinal research from England, involving creative interviewing methods with young people and adults (aged 16-30 years) with care experience and who were (or had recently been) in education, employment or training, sheds new light on the role and interplay of opportunity, environmental expectations, official and unofficial support, continuity, and individual meaning, for the ‘success’ of transitions from care. Taken together our findings highlight the complexity of intersecting transitions and enrich our understanding of the importance of continuity and control over changes for young people making transitions from care.
International Responses to the Historic Abuse of Children in Care

Wednesday, 14th September - 12:30 - International Responses to the Historic Abuse of Children in Care

Prof. Hans Grietens (University of Groningen)

This symposium will address the varying responses that have been taken by countries around the world to the issue of historic abuse of children in care. The symposium will identify differences in the nature of abuse that has been studied; for example, in some countries the focus has been on child sexual abuse while in others the inquiries included all forms of abuse. The symposium will identify difference in the scope of the settings that have been looked at: in some countries inquiries have looked solely at residential care while in others other care settings such as foster care have been included. Presentations will look at the political and sociocultural factors, which have driven the particular responses to historic abuse.
Historical child abuse as a contemporary process: the Swedish inquiry and the Swedish redress process

Prof. Johanna Sköld (Child Studies, Linköping University)

Since the 1990s, historical institutional child abuse has received political attention in many established democracies (Daly 2014; Sköld & Swain 2015; Sköld 2013; Winter 2014). Alongside inquiries, several states have implemented official apologies and financial compensation in an attempt to offer redress to the victims. The design of these redress processes depends on present-day assumptions about the reality of past childhoods. Investigating historical abuse of children in out-of-home care and aiming at reconciliation are processes that relates to the broad and interdisciplinary field of transitional justice.

In this presentation I treat transitional justice as a process rather than a goal, a view which otherwise is often adopted by governments. Governments want to resolve the problem of a haunting past and move on, but in the words of James McAdams, transitional justice is “the issue that won’t go away” (McAdams 2011). I use the case of Sweden to illustrate this process. The Swedish inquiry into abuse and neglect of children in foster homes and institutions was operating 2006-2011, and interviewed a total of 866 care leavers. The shocking results of the inquiry eventually lead to a redress process comprising an official apology and economic compensation to the victims. However, the redress scheme was designed to exclude certain groups. The redress board which operates the scheme, has been criticized for using a very narrow concept of abuse when deciding on which care leavers that deserve the economic redress and whom do not. Only 46 % of those who apply for financial compensation as a means for redress, have been awarded which is a very low figure in comparison to international counterparts. The reason for this low proportion is yet to be explored by research. However, a preliminary explanation is to be found in the genealogy of the Swedish redress process, which is accounted for in this presentation.

References
Factors motivating redress for survivors in Norway

Wednesday, 14th September - 12:54 - International Responses to the Historic Abuse of Children in Care

Prof. Ingunn Stadsrød (University of Stavanger)

Since the 1990s, the media, authorities and researchers, have documented gross failures to protect and safeguard children in out-of-home ‘care’ under the child welfare services. Internationally, physical, psychological as well as sexual abuse, of children in out-of-home care has been revealed, as well as neglect. In Norway, the first stories about gross abuse of children in residential care, came forward to the public press already in the 1880s, when the children’s home ‘Toftes Gave’ were criticized for gross abuse of children. Some years later (in 1907), an employee, and a teacher at Bastøy reform school for underprivileged boys, anonymously, published a book telling about harsh abusive ‘care’ where he worked. Although the book attracted attention, and raised discussions about the brutality of the care of children, years passed before the authorities really acknowledged the suffering of survivors of institutional abuse, and responded accordingly. First in 2005, the Norwegian parliament passed on an expanded and adapted gratia payment scheme for survivors. Since then, many municipalities have also responded to the historical abuse of children in out-of-home care, and have implemented local redress processes and schemes. However, what factors motivated the schemes? And what kind of responses was implemented? These are the questions explored in this presentation.

The objective of this presentation is twofold. First, I will present the Norwegian factors that motivated/pushed forward the Norwegian responses to historic child abuse in the 1990s to early 2000s, whereas Norwegian authorities finally entered the pulpit and asked care leavers for an apology for abusive out-of-home care. I will explore how the schemes resonate with the needs of the survivors. The second aim is therefore to describe and discuss the content of the redress schemes.

The empirical study used a qualitative methodological approach. The data is based on qualitative in-depth interviews with previous ‘care’ leavers (n=12) and professionals (n=12) working with the redress schemes. Documents describing the statues of the schemes also constitute the data.

Results revealed that the push for, and development of redress schemes in Norway happened within a transnational, global, justice movement. Besides, several interconnected factors motivated the redress processes, whereas survivor testimonies and pressure from the media played an important role. Moreover, when examining the content of the schemes, findings reveal that the contents of the local redress schemes carried similar ‘quasi-legal’ procedural. They all offered financial compensation and an apology to survivors who were placed in abusive and neglected care under the responsibility of the child welfare services.

Conclusions. A number of interconnected factors, including a shift in the understanding of children and childhood, which underpin the United Nations Convention on the Rights of the Child (UNCRC), may better secure and protect children in care today. However, central in safeguarding children in out-of-home care, and in developing effective responses on institutional abuse of children, is a broad professional and political support in learning, acknowledging, respecting and not at least, monitoring children’s rights. Last, but not least, it is important to encourage ongoing discussions on quality demands in out-of-home care, and to implement effective responses to all kinds of abuse and neglect in care.
Experiences in care that make a difference to long-term outcomes of Australian care leavers

Wednesday, 14th September - 13:06 - International Responses to the Historic Abuse of Children in Care

Prof. Elizabeth Fernandez (The University of New South Wales), Dr. Jung-Sook Lee (The University of New South Wales)

People who have lived in child welfare institutions and other substitute care as children are known to have suffered significant abuse and disadvantage in their life course. There is international concern about the trauma and victimisation many of them experienced while in care and the significant and lifelong impacts of abuse in care. There has been significant attention internationally towards identifying the impact of historical institutional abuse of children and young people and efforts towards investigation and redress of such abuse. This presentation will provide an overview of the landscape of inquiries and major justice mechanisms used to address the problem of abuse in out-of-home care in the Australian context. The care leavers’ lived experience of the conditions of their care and their current outcomes will be profiled through a national research study conducted in Australia. Using a mixed methods approach this national research undertaken by the authors explores the range of experiences and outcomes for those who experienced residential and foster care, and transitioned out of care. The study comprises surveys, interviews and focus groups. The survey sample includes survey respondents and participants in interviews and focus group across Australia.

This paper will discuss the research findings on the relationship between experiences in care and adult careleavers’ current wellbeing with respect to physical health, mental health, financial wellbeing, and social and emotional wellbeing. The extent to which wellbeing outcomes differ by age at entry into care, types of care experienced, length of time in care, number of placements in care, contact maintained with family while in care, abuse and maltreatment experienced in care, and experiences of transitioning from care will be discussed. Given the fact that care systems underwent significant changes in past decades, the outcomes for younger and older care leavers will be differentiated. For example, results indicate that people who experienced instability and maltreatment in care had generally worse outcomes in various domains of current wellbeing outcomes. Compared to their counter parts, they experienced higher levels of financial hardship, housing difficulties and lower levels of psychological wellbeing, educational achievement and employment outcomes. These trends from survey data are complemented with findings from qualitative interviews and focus groups which identify critical points in care leavers’ lives, and events that have contributed to the development of both positive and negative life outcomes, and their perceptions of mechanisms of redress.

The implications of the findings for the development of responsive interventions to enhance current and future well-being of this population and for responding to children who are currently in care, and will transition out of care in the future, will be elaborated. Findings will enhance national and international understanding of the needs of those who are growing up and have grown up in care.
Immoral or liberated? How society ‘thinks’ about sexually abused children in residential care, in the Netherlands in the 20th century

Wednesday, 14th September - 13:18 - International Responses to the Historic Abuse of Children in Care

Prof. Greetje Timmerman (University of G)

Since their introduction in the beginning of the 20th century, policies of placing children and youth in residential or foster care in the Netherlands, have been influenced by discourses and debates on the causes or consequences of the sexual behaviour of girls and boys. As Carol Smart (2000) explained for the UK, medical, political, legal and psycho-analytical debates sought to define/and or deny the actuality and harm of child sexual abuse in the first half of the twentieth century. It appeared that the debate was not silenced at all, but what was denied was the abusive or the sexual character of child sexual abuse.

After the second world war and based on the psychological and sexological theories that addressed the existence of children’s sexuality, the sexuality debate became to dominate societal views on child sexual abuse. A quantitative and qualitative content analysis of all Dutch child protection and other youth (welfare) journals revealed prevailing views on sexual contacts between adults and children and among young people, and showed how the changing sexuality views also permeated the residential youth care institutions creating an open and liberated sexual atmosphere. Until the 1990’s it was very difficult for young residents to address sexual contacts or initiatives by care workers or peers as unpleasant or unwanted. As such, the sexuality discourses from the sixties on contributed to the silencing of child sexual abuse by denying the abusive character of child sexual abuse.

From the 1980’s on counter-discourses developed in a coalition between government and women’s movement. Many research projects were funded (sexual harassment in the workplace, educational institutions, incest in the family, prostitution, sex trade, domestic violence). The sexual abuse of children and youth in residential and foster care was the last theme to be taken seriously by society.

About the author: full professor in Youth Studies with a PhD in the Social Sciences. Between 2010-2012 I was projectleader of a research project studying the prevalence, types and consequences of the sexual abuse of children and youth in residential care in the Netherlands 1945-2010. This research project was funded by the Dutch government.
The Case of Finland: Latecomer in the Nordic Context

Wednesday, 14th September - 13:30 - International Responses to the Historic Abuse of Children in Care

Prof. Pirjo Markkola (University of Tampere)

This paper will present findings of a historical inquiry into child abuse and neglect in child protection institutions and foster homes in Finland. The project was initiated by the Finnish Ministry of Social Affairs and Health in 2013, and completed in April 2016. Ca 300 oral, qualitative interviews were conducted in 2014-15 collecting memories and experiences of the victims and eye witnesses.

Historical perspectives of neglect and abuse impacted the scope of the inquiry. The inquiry focused on the years 1937-83, i.e. the period of the first Finnish Child Welfare Act. The scope of the inquiry was based on the main forms of child protection measures defined in the Act: foster homes and institutional care. An important aim was to recognize and make visible all forms of neglect, abuse and violence taken place in the past. A leading principle of the project was to take interviewees’ memories and experiences as real and valuable without comparing them with historical “facts”, but also to locate them firmly in a specific historical context of the Finnish society and its child protection system. One of the outspoken aims was to learn from the past and to find solutions to prevent and intervene more effectively into such misconduct in the future.

This paper will discuss how historic abuse was framed in the Finnish inquiry and present the main findings. The Finnish case, among others, reveals the silence and personal shame connected to the childhood not only in children’s homes and other institutions but also in foster homes. As e.g. the Swedish inquiry has demonstrated, foster homes have sometimes been even more abusive than institutions. During the project, many of the interviewees spoke about their traumatic childhood for the first time in their life. However, many of the interviewees wanted to participate not only to help themselves to cope with the trauma, but also because they wanted to help children in the present day.

About the author: I am Professor of History at the School of Social Sciences and Humanities, University of Tampere. In 2014-2016 I was in charge of the Finnish Inquiry into Child Abuse and Neglect in Institutions and Foster Homes (Department of History and Ethnology, University of Jyväskylä). My research concerns gender history and the history of childhood and youth. I am a member of The International Network on Studies of Inquiries into Child Abuse, Politics of Apology and Historical Representations of Children in Out-of-Home Care coordinated by Dr Johanna Sköld. E-mail: pirjo.markkola@uta.fi
Family-based solutions for children in care are the preferred option in European nations on the grounds of both cost and quality (EveryChild 2011). When summarising national policies, the European Directorate-General for Employment, Social Affairs and Equal Opportunities recommended a transition from institutional care to family-based and community-based alternatives (European Commission Directorate-General for Employment 2009). Yet, far too often, foster care placements intended to be long-term terminate unexpectedly early for (some of) those involved (Kindler et al. 2011; Wilson et al. 2000). In current studies these “placement changes” are often referred to as “breakdown”, “disruption” or “instability” of placements. Unexpected foster care placement terminations are not to be considered as the “antithesis of stability” (Backe-Hansen 2010), but there is a wide consensus that unexpected termination of foster care placement often has an impact on the vulnerability of the affected child or young adult. Often placement instability is a process that takes place over time characterised by multiple contributing factors. The symposium aims to explore these factors from different international perspectives. Aim of the Symposium is to initialise and maximise international learning by sharing different findings and theoretical concepts from different countries on the subject of (In) stability of Foster Care Placements.

Starting point is an international study (2014-2017) titled “Foster Care Placement Breakdown” (financed by the Jacobs Foundation) realised by Universities in Switzerland (Thomas Gabriel, Renate Stohler, Clara Bombach), England (Claire Cameron) and Germany (Klaus Wolf). The aim of the study is to identify factors for (in)stability of foster care placements to draw conclusions for professional impact. Three contributions are connected to the project. Klaus Wolf will give a contribution on the theoretical framework “A dynamic model of interdependencies”, Renate Stohler, Thomas Gabriel and Clara Bombach will show first findings from Switzerland: “Patterns of (in)stability in foster placements – perspective of the child” and Claire Cameron and Hanan Hauari will give a paper on “Perspectives on foster care placement disruption in two English local authorities”.

Consequently, two additional contributions are connected to the subject: Lisa Holmes and Samantha McDermid discuss findings from a UK study on “Supporting stability for foster carer placements: emerging findings from a UK study to introduce social pedagogy practice into UK foster care”. And second: Hélène Join-Lambert will present French findings on “How young people in care deal with breakdowns in their relationships”.

(Prof. Thomas Gabriel (ZHAW Zurich University of Applied Sciences))

(In) stability of Foster Care Placements

Wednesday, 14th September - 12:30 - (In) stability of Foster Care Placements
A dynamic model of interdependencies

Wednesday, 14th September - 12:42 - (In) stability of Foster Care Placements

Prof. Klaus Wolf (Universität Siegen)

Overall, the theoretical framework is one of conceptualizing foster care as up bringing on behalf of society within an environment characterized by meaningful relationships, and in a wider context of a complex interplay of processes and factors that might be called interdependence (Elias; Smith). Rather than a dyadic child-foster carer model, we need a multi-faceted ecological model of supporting young people in relation to their everyday life, cultural education and meaningful relationships. Developments which end up with a break down in foster care have certain characteristics:

• They are influenced by the interplay (interdependence) of characteristics in the foster child, characteristics of the foster family (including their environment) and its members as well as characteristics of social services which organize and accompany foster care.

• All members of the foster family are actors who can influence stabilizing and de-stabilizing processes. Hence, their respective experiences and their difficulties – including those which result from their living together and everyday life – are important.

• Factors which are not directly related to the foster family or the role of the adults as foster carers might be relevant as well (diseases, separation, economic difficulties, etc.).

• The result „break down“ (defined as: unplanned sudden completion of foster care) is not predetermined by a single group of courses, but in the complex interplay of different factors.

• The dramaturgy of these processes must be understood in order to determine points where through specific support by social services de-escalation might be instigated and new option for capability might be disclosed (e.g. counseling for foster parents, parents and children; access for children to socialization partners beyond the foster family etc.)

• To reach this goal, the necessary knowledge can be acquired by a multiperspective reconstruction of break down processes.

• In doing so, we need a dynamic model of interdependencies (Elias; Gabriel & Mennell; Wolf): acceleration – deceleration; stages of increased vulnerability; construal of meaning.

Theoretical models influence the point of view of professionals and the course of action of the social services. For this reason they are not only relevant for research but also for practice.
Family-based solutions for children in care are the preferred option in European nations on the grounds of both cost and quality (EveryChild 2011). Yet, far too often, foster care placements intended to be long-term terminate unexpectedly early for (some of) those involved (Kindler et al. 2011; Wilson et al. 2000). In current studies these “placement changes” are often referred to as “breakdown”, “disruption” or “instability” of placements. This presentation shows preliminary results from an ongoing international study (2014-2017) titled Foster Care Placement Breakdown (financed by the Jacobs Foundation) realised by Universities in Switzerland, England and Germany. The design of the study is based on the assumption that unexpected foster care placement terminations are not to be considered as the “antithesis of stability” (Backe-Hansen 2010) and therefore the centre of the study aims at the reconstruction of the “breakdown” processes in its interactive dimension as well as the identification of factors for (in)stability of foster care placements in order to draw conclusions for professional impact. In the study the following questions will be answered: What are the influences on different levels that increase or reduce the risk of foster care “breakdown”? What are the different typologies of “breakdown” processes? What are the turning points for interventions in the processes of “breakdowns”?

In the presentation we will outline preliminary results from the current research in Switzerland only, including quantitative case file analysis and qualitative interviews. Via triangulation of different perspectives we aim at answering and discussing the following preliminary results:

Based on case file analysis conducted in the research project we will outline the complexity of different patterns of instability in foster care leading to placement change. This includes the history of the child prior to placement, the matching, and the stay in the foster family, placement change and situation of the child after placement change. The outlined patterns serve as a basis of discussion about actors and factors influencing the stability or instability of foster care placements.

First results show, there is a great variation in the involvement of the child in the matching situation, during placement and when it comes to placement change, that can be shown by case file analysis on the level of description as well as interviews with foster children on the level of lived experiences. Examples from the case file analysis as well as the interviews will be outlined in order to show this variation of involvement during matching process and the decision-making during placement in general. It appears that this sheds light on a particular understanding of child protection from the professional’s perspective, e.g. arguing that intransparency of the provision of information aims at protecting the child. Due to preliminary results of the research there seems to be a lack of a representative interpretation for the child.

This is resulting in effects for the child, who will be shown by introducing the child’s perspective and explore their experiences and the question about how to integrate the experience of placement change in their biographical trajectories.
International perspectives

Wednesday, 14th September - 13:06 - (In) stability of Foster Care Placements

Prof. Claire Cameron (UCL Institute of Education), Ms. Hanan Hauari (UCL Institute of Education)

While we know from Harriet Ward’s work that children in local authority care in England move too frequently, often as part of planned transitions, and often with adverse consequences for children’s continuous connections to school, health services, friendships and carers, we do not have a comprehensive picture of the factors that precede and follow on from placement change. This presentation will use data from the English part of a Swiss-German-English study to examine multiple perspectives on the process of placement disruption. We interviewed young people and foster carers in a rural and an urban area using a narrative approach, and conducted focus groups with social workers supervising foster carers, aiming to build up a detailed analysis of rationales for, and interpretations of the consequences of, changed placements. These will be preliminary findings.
Supporting stability for foster carer placements: emerging findings from a UK study to introduce social pedagogic practice into UK foster care

Wednesday, 14th September - 13:18 - (In) stability of Foster Care Placements

Mrs. Samantha McDermid (Loughborough University), Ms. Lisa Holmes (Loughborough University)

While social pedagogy is common across continental Europe, social care in the UK is relatively unfamiliar with the approach. Interest in social pedagogy has, however, increased in recent years with more organisations exploring the potential for the approach to make a difference to children, families and the professionals and systems that support them. “Head, Heart, Hands” is a programme of work being led by the Fostering Network to introduce social pedagogy into seven fostering services in England and Scotland. The four year programme, includes the employment of social pedagogues within the fostering services, and training provided to up to 40 foster carers, and staff in key social pedagogic principles and practices. The programme is being evaluated by a team of researchers led by The Centre for Children and Family Research, Loughborough University (UK), in partnership with the Colebrooke Centre for Evidence and Implementation.

The overall aim of the Head, Heart, Hands programme is to improve the care experiences and outcomes achieved by children placed in foster care in the UK. One of the key outcome measures for the programme is placement stability. This presentation will explore the emerging findings from the evaluation of Head Heart Hands on the impact that the programme has had on placement stability, and whether the social pedagogic principles introduced by the programme has influenced how foster carers, and those social care staff who support them address potential disruptions and conflicts which may lead to unplanned placement changes.

Emerging findings suggest that the adoption of social pedagogic principles have enabled foster carers who have participated in Head, Heart, Hands to change the way that they deal with large and small conflicts in the fostering household, develop new strategies for strengthening their relationship with the young person, and feel more confident to maintain placements through challenging periods. Moreover, those foster carers who attended the Head, Heart, Hands training with their supervising social worker have reported improved relationships which have been invaluable during such challenging periods.

Drawing on data gathered from surveys, interviews with foster carers who have participated in Head, Heart, Hands and the children and young people placed with them, along with focus groups and interviews with social care front line staff and managers, the session will explore how the changes in practice experienced by the foster carers and their supervising social workers may influence placement stability. A comparative analysis of the placement patterns of those children placed with foster carers who have participated in Head, Heart, Hands, compared with those in the same fostering service who have not will be presented. The impact of the programme on placement stability, including planned and unplanned moves will be explored. The implications of the Head, Heart, Hands evaluation on how services support foster carers to support stable placements will also be examined.
How young people in care deal with breakdowns in their relationships

Wednesday, 14th September - 13:30 - (In) stability of Foster Care Placements

Dr. Hélène Join-Lambert (Université Paris Ouest Nanterre la Défense), Prof. Janet Boddy (University of Sussex)

This paper will relate everyday experiences of young people living in foster care in France and England, and who have faced disruptions in their care settings. Their descriptions of what is important in their own lives show how they deal with interruptions of relationships which have been decided for them.

Data has been collected in the frame of a Marie Curie-funded research at the University of Sussex in 2013-2014. This project included innovative qualitative methods designed to give young people in care the control over what they wished to talk about, the overall theme being their experiences of everyday life. 16 French and English young people aged 14 to 18 and living in foster and residential care, were interviewed up to three times in a span of three months. They were asked to draw maps of places important to them, to take the researcher on a guided walk, and to make pictures of things, places, and people important in their everyday lives. When young people agreed, their carers were interviewed as well. The data includes 76 interviews in French and English. This presentation will draw on data from five young people who have talked about interruptions in their previous foster placements, and from two who have just come into care.

Young people’s accounts highlight disruptions of relationships as a major topic they deal with in their everyday lives. This applies to relationships with parents, brothers and sisters, with friends, and in some cases, with foster carers as well. For adolescents, changing the family environment and the place where they go to school has significant consequences in terms of the energy and time they need to invest in making new relationships. But they also think a lot about previous relationships, and often find creative ways of maintaining those which seem valuable to them. Here the part played by digital technologies is crucial, because they give young people opportunities to manage their relationships as they wish, even at a distance. Social medias also allow teenagers to escape the control of adults – especially child protection practitioners. Maintaining contacts with valuable adults and peers, who have been important in their lives, appears to be a way of constructing or strengthening their social networks.

These results remind us that at the period of adolescence, it is not only the change of foster placement, but any change of environment, including coming into care, that causes deep instability. From the perspective of young people, the most problematic about changing places and environments is to maintain and reconstruct a social network that will help them build their own identities and give support when needed. Young people who live in care and have experienced recent changes in their life settings spend considerable time, energy, and emotions on relationships with adults and peers, be it in their birth family, in their foster families, or at school. In this regard, digital technologies and social medias appear to be extremely useful tools, maybe even more important for young people in care than for others.
Multiple perspectives on improving practices in residential care

Wednesday, 14th September - 12:30 - Multiple perspectives on improving practices in residential care

Dr. Annemiek T. Harder (University of Groningen)

Although it is difficult to achieve positive long-term outcomes with residential youth care, young people often show positive behavioral changes during their stay. It is unknown how these positive changes are achieved, because residential care can be considered a black-box. We know very little today about what works for whom in residential care. This symposium aims to provide more insight into this issue by addressing multiple perspectives that can improve practices in residential care.

First, we will address issues related to the social environment or climate of residential care. Perspectives from both young people and staff leaders will be presented on how they agree and differ in their experience of the living environment. However, the measurement of the social environment during residential care is still under debate. Therefore, we will also address issues related to assessment of social climate and present a refinement and short-version of a usable and validated instrument measuring social climate in residential care.

Second, we will address the treatment skills that group care workers apply during one-on-one conversations with adolescents during residential care. By analyzing audio recordings of these conversations, we will specifically assess Motivational Interviewing (MI) skills applied by care workers.

Third, we will present how prevalence rates of adolescents' learning disorders and combined problem load with other known problems can lead to an underestimation of the comorbidity pattern by clinicians. We will discuss how realistic educational plans can improve adolescents' education motivation, social situation and later success in adult life.

Fourth, we will discuss the effectiveness of client-centered approaches in residential care. We will present how elements of client-centered care, including the role of the professional, the environment and the empowerment of children and youth in residential care can be applied in the Albanian juvenile justice system to improve practice.
The Social Climate in Residential Care; Views from residents and staff leaders

Wednesday, 14th September - 12:42 - Multiple perspectives on improving practices in residential care

Ms. Torill Tjelflaat (Norwegian University of science and technology), Dr. Tormod Rimehaug (Norwegian University of science and technology)

EUSARF SYMPOSIUM:
Multiple perspectives on improving practices in residential care

Abstract:
The Social Climate in Residential Care

- Views from residents and staff leaders

Abstract:
The social climate in residential care can be understood as a comprehensive and complex domain; a kind of a puzzle with many pieces to be fitted together. The quality of the social climate is important for the well-being of children and young people in care, and for the outcome of treatment.

In a national study from Norway, finished in 2015, 397 residents (12 to 18 years old) and 142 leaders from 86 institutions completed a questionnaire (COPES – Community Oriented Programs Environment Scale) about how they perceived the social climate of their institution. We have used the form R (Real) which measures perceptions on current program environment. COPES measures the social climate on three dimensions: 1) Relationship, 2) Personal Growth and 3) System Maintenance; each consisting of underlying subscales (with a total of 10).

Data showed that the mean scores for residents as well as staff were positive, compared to norms derived from other studies. However, the leaders scored more positively on all dimensions compared to the residents. The biggest difference was on the relationship dimension. We will focus in the presentation on this dimension; because of the difference, but also because it is an important professional tool in social and therapeutic work with clients in different settings. The relationship dimension in COPES consists of the subscales: 1) Involvement, 2) Support and 3) Spontaneity. The leaders scored higher than the residents on all three subscales (significance p<.005 (leaders), p<.001 (residents)), however both informant groups scored highest on subscale “Support”, and lowest on “Involvement”.

Other research also shows similar differences. The following explanations will be discussed: Different expectations about the residential care setting (home – placement), the relational involvement of the staff (parent-substitute - professional), individual core values, and asymmetric and bureaucratic structure of the institution with respect to power and participation.

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Measuring social climate in Norwegian residential youth care: A revision of the Community Oriented Programs Environment Scale

Wednesday, 14th September - 12:54 - Multiple perspectives on improving practices in residential care

Mr. Jonathan Leipoldt (University of Groningen), Dr. Tormod Rimehaug (Norwegian University of science and technology), Dr. Annemiek T. Harder (University of Groningen), Dr. Nanna Kayed (Norwegian University of science and technology), Prof. Hans Grietens (University of Groningen)

Introduction and objectives: Social climate is an understudied factor in residential youth care (RYC) institutions. Already in the 1950’s, the World Health Organization stated that “atmosphere” is an important factor in psychiatric treatment, but a very difficult element to measure. Assessing the features of social climate is further complicated by the fact that residents are both effected by and contribute to it. Only a handful of studies have investigated social climate in RYC institutions, including youth prisons. Research reveals that for adolescents a positive social climate is associated with better coping strategies, less running away behavior, less peer victimization and less social and behavioral problems, while a negative social climate can lead to passive coping strategies, more running away behavior, and more peer victimization. Previous studies have used different instruments for measuring social climate. One of them is The Community Oriented Programs Environment Scale (COPES), a 100-item dimensional instrument that assesses ten features of social climate in residential care facilities. The COPES has never been validated in a RYC setting, because the original target group has been elderly residential care and adult psychiatric institutions. Moreover, psychometric qualities have been found questionable in studies following the original scale development. In addition, previous research has provided criticism on the fact that the 100-item instrument is too long and shows redundancy in content. Therefore, validating the COPES is important to formulate further generalizations and associations between social climate and important outcome variables (e.g. adolescent mental health and quality of life) in RYC.

The first objective of this paper was to validate the COPES on adolescents and staff leaders in a country-wide sample of Norwegian RYC institutions. If the COPES cannot be validated, the second aim was to revise the instrument by improving the psychometric quality and conceptual validity of the instrument. The third objective was to shorten the COPES by using both classical test theory and modern test theory techniques. The goal was to reduce the number of items while retaining acceptable psychometric properties and sufficient information to differentiate respondents at different levels of social climate.

Method: All adolescents between the ages of 12-23 living in residential youth care institutions in Norway were invited to participate in the study. The final sample consisted of 400 adolescents and 140 staff leaders that were recruited from 88% of all Norwegian RYC institutions. The COPES was administered to both adolescents and staff leaders.

Given that there was on average less than 5% missing data, estimation maximization was used to impute missing values on the COPES. In the initial analysis, the data was fitted to the original COPES structure by means of confirmatory factor analysis. Following this analysis, a step-based approach in scale improvement and scale shortening was carried out. First, items with almost zero variance were removed from the questionnaire. Second, items with low or non-significant factor loadings were removed. Third, items that show a redundancy on content were removed from the
questionnaire. Finally, item response theory was used to evaluate whether the remaining items provide sufficient differentiation on different levels of social climate.

Results and conclusions: Results from the confirmatory factor analysis indicated that the data did not fit the original structure. Furthermore, results revealed that a short-version of the COPES can improve the psychometric properties, as well as usability, and conceptual validity in RYC institutions. The revised short version of the COPES for measuring social climate in RYC institutions will be presented at the conference, illustrating improved predictive validity for measuring social climate in RYC institutions.
Observations of one-on-one conversations between residential care workers and adolescents: A Motivational Interviewing based study

Wednesday, 14th September - 13:06 - Multiple perspectives on improving practices in residential care

Ms. Annika Eenshuistra (University of Groningen, the Netherlands), Dr. Annemiek T. Harder (University of Groningen, the Netherlands), Prof. Erik J. Knorth (University of Groningen, the Netherlands)

Objectives

Care workers often face challenges in building good therapeutic alliances with adolescents in residential youth care. Important for a good therapeutic alliance are positive treatment skills of care workers like self-reflection, being supportive and understanding, and being able to make an accurate interpretation of what is said by the client (Ackerman, & Hilsenroth, 2003). A treatment method that is specifically designed for building good alliances with clients and explicitly focuses on applying positive treatment skills by care workers is Motivational Interviewing (MI). A care worker that applies MI shows MI-consistent behaviors in terms of among others reflective listening and seeking collaboration with the client, MI care workers abstain from MI-inconsistent behaviors, including confronting, directing and advising without permission of the client. By applying MI-skills, care workers can build effective, positive relationships with adolescents that aim to increase adolescent’s intrinsic motivation for change (cf. Henriksen, Degner, & Oscarsson, 2008). Despite its potential presently no studies have looked at the application of MI by care workers during individual conversations with adolescents in residential youth care.

Considering the importance of a good therapeutic alliance and the lack of knowledge about these alliances between care workers and adolescents in residential youth care, this study aims to identify how care workers try to build a good relationship with adolescents in residential care. In doing so, we specifically look at the (MI) treatment skills that the care workers apply. We also assess how the adolescents react upon the actions of care workers during these conversations, including behaviour indicating their motivation for change.

Method

We conducted a detailed conversation analysis of 27 one-on-one conversations between care workers and adolescents in residential care. There are two measurements, namely before care workers received a training in Motivational Interviewing (baseline), and after that training. In this presentation we will focus on baseline conversations. By means of detailed conversation analyses we will examine the micro-level of the primary process in residential youth care, i.e. the one-on-one conversations between adolescents and care workers. We use observation research because observations can provide objective information about the actual behaviour of both adolescents and care workers.

For the analysis, observations by means of audio recordings of one-on-one conversations are used. The observations are conducted to identify 1) applied treatment skills by care workers, 2) expressions of motivation for change by adolescents, and 3) the interaction patterns between the care worker and the adolescent. The application of MI-skills by care workers and the motivation for changes among adolescents are measured by existing encoding schemes for MI (MITI and MISC). We studied the interaction patterns between care workers and adolescents using dynamic systems’ analyses.

Results
Results show that care workers regularly show MI-inconsistent behaviour during conversations with young people (Eenshuistra et al., 2016). Further results will be presented at the congress.

Conclusions
Considering the lack of MI-consistent behaviour by the care workers, they might benefit from receiving a MI-related training. In that manner they can improve their treatment skills to build good alliances with the adolescents.

References
Learning disorders, combined problem load and educational adaptations as the baseline for adult careers after RYC.

Wednesday, 14th September - 13:18 - Multiple perspectives on improving practices in residential care

Dr. Tormod Rimehaug (Norwegian University of science and technology), Dr. Anne Mari Undheim (Norwegian University of), Dr. Jo Magne Ingul (RKBU-Midt-Norge)

A study of learning disorders and the combined problem load among adolescents in RYC in Norway is presented. Professionals in child protection, child psychiatry and educational services are faced with complex challenges in reaching multifaceted profiles of strengths and weaknesses to guide educational adaptations and avoid underachievement in education as an added burden for adolescents entering adult life from RYC's.

The study presents prevalence estimates that describe elevated levels of known learning disorders and an additional rate of undiscovered but indicated problems, suggesting a massive combined problem load among adolescent residents in RYC when combined with other categories of known problems; social problems in school, school dropout, psychiatric problems, hearing problems and somatic problems. Clinical evaluations seems to underestimate or misinterpret the situation when comorbidity is the general pattern and multiple problems seems to be very common.

A realistic educational plan should be based on understanding of these combined problems that might prevent learning. It is important that adolescents’ resources and motivations are stimulated to achieve their optimal educational goals to be fit for future adult life.
Client centeredness within institutions and the Albanian juvenile justice system

Wednesday, 14th September - 13:30 - Multiple perspectives on improving practices in residential care

Ms. Linda Rothman (HAN University of Applied Sciences/ Tilburg University),
Ms. Marsida Grami (University of Tirana)

In our presentation we will outline some central principles in safeguarding children’s rights in social work with children and youth, and discuss how these principles can be applied to Albanian juvenile justice system.

First, we will talk about the juvenile justice system in Albania. Many of the factors leading to conflict with the law are of a social nature. Children who offend often live in families facing difficulties such as poverty, substance abuse or separation; they may be excluded from school or be without a job; they may be involved in risky behaviors. As stated in Article 40 of the Convention on the Rights of the Child, every child in conflict with the law has the right to be treated in a manner that takes into account “the desirability of promoting his/her reintegration and his/her assuming a constructive role in society”. There is a need to increase knowledge and find best practices and methods for children who are today in a justice system where they face (suspended) sentences involving deprivation of liberty, albeit with the aim of ‘rehabilitation’ rather than punishment.

Second, we will focus on more human-rights based approaches to care for children and youth. Nowadays there are more human-rights based approaches to care for children and youth, and client centered care is a dominant concept in social work with clients in different settings, e.g. residential care. The UN Convention on Rights of the Child is also important in safeguarding children’s rights, and particularly article 12: the child’s right to be heard. Client participation, decision-making and empowerment have thus become increasingly important in the delivery of services to children and young people. Even if empowerment of children and parents is an important goal, it raises challenging questions about the appropriate role of professionals and organizations in the service delivery system. We will discuss how client-centered care in institutions can be accomplished in the following areas:

- Role of the professional
- Empowerment of children and youth
- Client centeredness and organizing client centered care
- Influence of the institutional environment within care

Our basis for this part of the presentation is theory and empirical qualitative research, mainly from a Dutch context of social work with children and youth. Based on a literature review a theoretical framework will be presented on client centered care from an organizational perspective. The main results are that there are several processes within an organization that can increase client-centered care and empowerment, but also increase for instance the viability of the organization, knowledge sharing etc.

In addition based on a ‘best practice’ case study, that included ten interviews with professionals who work with children and youth, we will present the view of these professionals on client-centered care and how to organize this. Besides that, we will also focus on how these profession-als interact with the institutional environment and what the effects of the institutional environment are on
client-centered care. The first results show that professionals make use of a combination of the demand led and the demand driven orientation to accomplish client-centered care combined with empowerment. It isn’t quite clear when they choose which orientation. Further research will be needed to further explore this. Second, results show that the institutional environment influences client-centered care in both positive and negative ways. Professionals state that the positive influence results from possibilities created by the institutional environment and the and the negative influence results from the way in which the institutional environment expects organizations to organize care. Third, we will discuss how the presented principles of client centered care can be integrated within the Albanian system.
Cognitive and educational development of very young and school-aged children in care

Wednesday, 14th September - 12:30 - Cognitive and educational development of very young and school-aged children in care

Dr. Robert Flynn (University of Ottawa)

Positive child development in very young children, including their cognitive, motor, behavioural, social, and emotional development, promotes their early learning and prepares them for later educational success in kindergarten and primary school. For young children who have been exposed to neglect or abuse, positive early development is especially important to overcoming risks, promoting protection, and laying the foundation for later resilience.

The present symposium has two main objectives. First, in the case of young children in out-of-home care, we will identify environmental factors that recent research suggests are important influences on the cognitive and other aspects of early child development. We will also present empirical data on the effect of caregivers’ literacy-promoting activities on positive child development.

Second, in the case of children in care of mainly primary-school age, we will present empirical data on the effects of Nurture Group provision on the children’s development. We will also present parallel profiles, from Canada and Denmark, respectively, that will allow us to compare the children on multiple dimensions, including executive functioning (e.g., working memory, organizational skills, attentional skills), academic achievement (e.g., reading and math skills), behaviour, and well-being. The profile data come from pretest assessments, in each country, from randomized controlled trials now in progress of the educational effects of tutoring and educationally-oriented interventions. The profiles will also allow us to compare the children’s educational and psychosocial needs and suggest appropriate interventions.
Understanding academic outcomes of young and school-aged children in care from an ecological perspective: A literature review

Wednesday, 14th September - 12:42 - Cognitive and educational development of very young and school-aged children in care

Dr. Connie Cheung (Child Welfare Institute, Children’s Aid Society of Toronto), Dr. Robert Flynn (University of Ottawa)

Background

Consistently documented in the child-welfare literature is the difficulty of young children in care in reaching key developmental milestones necessary for learning. When compared to preschool children in the general population, those receiving out-of-home care are more likely to display a lag in language, executive functioning and general cognitive development (e.g., Pears & Fisher, 2005; Kovan, Mishra, Susman-Stillman, Piescher, & LaLiberte, 2014). Unfortunately, these trends carry through to the school-aged years where children in-care are more likely than their community-based counterparts to score significantly lower on standardized tests, experience grade retention issues, expulsions, suspensions and absenteeism (Eckenrode, Laird, & Doris, 1993, Leiter & Johnson, 1994, for a review, see Stone, 2006). These observations are concerning because children in-care who are failing to meet appropriate academic milestones are also more vulnerable to lower levels of well-being and success in adulthood (e.g., Attar-Schartz, 2009; Schiff & Benbenishty, 2006; Taylor, Johnson, & Brownridge, 2008).

Interestingly, the extent to which children in-care experience academic success varies across individuals, with some demonstrating better outcomes than others. To date, certain foster placement and child-specific characteristics have been found to relate to educational outcomes. These patterns of results raise important questions concerning how foster placement and child-specific factors operate together to influence academic achievement. Perhaps this can be best understood through an ecological perspective, where development occurs within a multi-level framework (Bronfenbrenner, 1979). The ecological model theorizes that children are directly and indirectly influenced by various reciprocal factors that are embedded within multiple layers of influence. This suggests that to understand academic outcomes in children in-care, we need to consider the dynamic co-influence of the foster placement and children themselves.

Objective

The goal of the current literature review is to critically examine existing evidence in order to understand the extent to which academic outcomes can be understood as a function of the foster placement and children themselves.

Method

There will be three main components to the literature review. Following a brief overview of the ecological model, the first component will examine how differences across foster placements are associated with educational outcomes. Concepts similar to caregiver cognitive sensitivity, placement literacy environments and caregiver involvement will be explored. Component 2 will focus on understanding how differences between children can account for individual differences in academic achievement. Specifically, the literature review will focus on the effects of the child’s own cognitive ability (e.g., language, executive functioning) in predicting academic achievement. Lastly, the third component
will examine how these patterns can be interpreted within a multi-level framework. Specifically, the literature review will focus on examining how children cluster on academic achievement within foster placements. Mediation processes that can explain how foster placements indirectly impacts on children’s academic outcomes will also be explored.

Implications

The implications of the critical review of the literature for intervention will be discussed, especially with regard to preparing caregivers (e.g., foster or kinship parents) to maximize the developmental progress of the preschool-aged children in their charge.
Literacy promotion by caregivers and the motor, social, and cognitive development of young children in care

Wednesday, 14th September - 12:54 - Cognitive and educational development of very young and school-aged children in care

Dr. Robert Flynn (University of Ottawa), Ms. Adrianna Côté (University of Ottawa), Dr. Connie Cheung (Toronto Children’s Aid Society)

Objectives
Our immediate objective is to present the results from an exploratory, cross-sectional, hierarchical regression model in which we estimated the relative importance of caregivers’ literacy-promoting activities in encouraging the motor, social, and cognitive development of the preschool-aged children in their care. Our ultimate objective is to build an effective intervention that will strengthen caregivers’ literacy-promoting activities, thereby improving the motor, social, and cognitive skills of their in-care preschool children.

Method
Participants. The sample, drawn from year 2013-2014 data from the Ontario Looking After Children (OnLAC) project (Flynn, Vincent, & Miller, 2011), included 520 young children in care, 289 boys (56%) and 231 girls (44%). They were 12-47 months of age (M = 29.0, SD = 10.3), and 70% had been full-term at birth, 37% had a developmental delay, and 11% had a developmental disability.

Measures. The child’s standard score on the Motor and Social Development scale (MSD; US National Center for Health Statistics, 1981) measured his/her motor, social, and cognitive development. The caregiver’s literacy-promoting activities and the child’s general health and emotional and behavioural development were assessed with measures from the National Longitudinal Survey of Children and Youth (Statistics Canada, 1999).

Data analysis. A hierarchical regression model was estimated, with the child’s MSD score regressed, in three successive steps, on 2 control variables (child gender and age), two risk factors (child developmental delay and developmental disability), and four protective factors (child’s full-term status at birth, good versus poor general health, and emotional and behavioural development log, and caregiver’s literacy activities T-score).

Results
The mean standard score of the sample on the MSD scale (M = 88.67; Mdn = 89.0; SD = 15.7) was 0.76 SDs below the population mean (M = 100, SD = 15.0). A statistically significant increment (p < .001) in the amount of variance accounted for in the MSD scores was found at each step in the hierarchical regression, with the controls accounting for 3% of the total variance, the risk factors for 22%, and the protective factors for 7% (for a total of 32%). All of the predictors within each step were also significant (p < .05 to p < .001), a product of our exploratory model-building. At the final (third) step, however, neither gender nor age were any longer significant, suggesting mediation by the risk and protective factors.

At the final step in the model, the largest to smallest beta (i.e., partial standardized regression) coefficients were, in order of their absolute (±) values, as follows: child’s developmental delay: = - .30, p < .001; caregiver’s literacy-promoting activities: = .22, p < .001; and child’s developmental disability: = -.15, p < .001, emotional and behavioural development: = .09, p < .05, general
health: $= .08$, $p < .05$, full-term status at birth: $= .08$, $p < .05$, gender: $= .04$, ns, and age: $= -.03$, ns.

Implications

We intend to extend this initial exploratory model, using additional variables and years of data from the OnLAC project. Our ultimate goal is to produce an effective intervention to enhance caregivers’ literacy-promoting activities, thereby improving the motor, social, cognitive, emotional, literacy, and numeracy development of the young children in their care.
Nurture Group effects on social, emotional, behavioural, and cognitive development of children in care of primary-school age.

Wednesday, 14th September - 13:06 - Cognitive and educational development of very young and school-aged children in care

Dr. Karen Winter (Queen’s University Belfast)

Objectives

The objectives are: first, to inform the audience about Nurture Group provision, a short-term, focussed, early intervention to address barriers to learning arising from attachment-related social, emotional and/or behavioural difficulties (SEBD); second, to present the results from a quasi-experimental trial which assesses the effectiveness of this intervention, in particular in relation to young children in care.

Method

There were four stages to the research, and this paper largely reports on stages 1 and 2:

- Stage 1: an analysis of data for 529 children from 30 primary schools who had previously attended Nurture Groups to assess their progress;
- Stage 2: a quasi-experimental trial involving 384 children in total and comparing the progress of those currently attending Nurture Groups in the 30 primary schools (during the 2014/15 school year) with children in 14 matched schools with no Nurture Group provision;
- Stage 3: a cost-effectiveness analysis and economic review of Nurture Group provision;
- Stage 4: a qualitative process evaluation involving interviews as well as observations of the Nurture Groups in practice.

Measures

Social, emotional and behavioural development: The Boxall Profile (Bennathan & Boxall, 1998) and the Strength and Difficulties Questionnaire (Goodman, 1997) both teacher-rated, were used to measure pupils’ social, emotional and behavioural outcomes.

Enjoyment of School: Pupils self-reported their own enjoyment of 11 aspects of school. Pupils rated each aspect on a 5-point scale by pointing to or putting a circle around one of a set of 5 ‘smiley faces’.

Data analysis

At Stage 1 and to allow for direct comparability of the size of the changes experienced, the standardised mean difference between pre- and post-test scores was also calculated (Cohen’s d). Regression models were estimated for each of the main outcomes to identify factors which may impact on the amount of progress made. At Stage 2, baseline differences were explored between pupils in the intervention and control group (in terms of core characteristics and baseline scores on social, emotional and behavioural functioning, enjoyment of school, attendance, and academic attainment in literacy and numeracy). For the main analysis, data were analysed in a series of multi-level models for each outcome. Effect sizes (Hedges’ g) were calculated as the standardised mean difference in outcomes between the intervention and control groups, adjusted for any differences at pre-test.
Results

The presentation will present the results from Stage 1 and Stage 2, on the impact of nurture provision on social, emotional and behavioural development, and enjoyment of school. It will also discuss the findings in relation to particular subgroups of pupils, such as looked after children.

Implications

We intend to explore further the effectiveness of interventions for young primary school children in care in a context where we know that early intervention can make a difference to longer term outcomes.
Profile of young people in care in Ontario, Canada, on measures of executive functioning and reading and math achievement.

Wednesday, 14th September - 13:18 - Cognitive and educational development of very young and school-aged children in care

Mrs. Andrea Hickey (University of Ottawa), Dr. Robert Flynn (University of Ottawa), Ms. Joanna Lostracco (University of Ottawa)

BACKGROUND: Children in care are at risk of a variety of negative developmental outcomes. Of particular concern are their often poor academic skills. Previous research suggests that executive functioning skills (e.g., inhibitory control, attention, working memory) are core components of educational success for children in the general population. To date, however, little research has been conducted on the executive functioning and academic profiles of children in care.

OBJECTIVES: The objective of the present study is to assess the general executive functioning and specific math and reading skills of children in care in order to better understand their developmental profiles and academic needs.

METHODS: One hundred and eighty-six children in care (107 males and 78 females; age range = 5-17 years; mean age = 11.11 years; school grade range = 1-12; mean school grade = 6.25) were recruited from three Children’s Aid Societies located in Ontario, Canada. All participants were recruited as part of two randomized controlled trials that evaluated two different educational (i.e., tutoring) interventions. All of the children were assessed at baseline on their math and reading skills via the Woodcock-Johnson III (WJIII), while cognitive skills were assessed via caregiver-reported measures (the Conner’s Parent Rating Scale and the Comprehensive Executive Functions Inventory CEFI). Behaviour was assessed via the Strengths and Difficulties Questionnaire SDQ. Descriptive analyses were conducted to assess the academic and cognitive profile of these children at the pretests.

RESULTS: In terms of cognitive processes, results from the CEFI indicated that overall executive functioning skills were considerably below average (12th percentile), with the greatest difficulty observed on working memory and organizational skills (both at the 12th percentile). Data from the Conners showed that attentional skills were also below average. Overall behavioural difficulties were found to be above average (i.e., one standard deviation above the population mean). Results from the WJIII indicated that the young people’s academic skills were at the 16th percentile (i.e., one standard deviation below the population mean), with their performance in reading being relatively stronger than in mathematics. Oral language skills, listening comprehension, and short-term memory were average. In general, the boys tended to perform more poorly than the girls.

IMPLICATIONS: The results of this study provide insight into the areas of general and specific academic strength and weakness of children in care and thus can inform interventions to improve their academic outcomes.

Conference topics/themes:

1. Education and qualification improvement of young people in care.
2. Safeguarding children in the early years

Format – Oral communication (symposium)
Profile of young people in care in Denmark on measures of IQ, executive functioning and reading and math achievement

Wednesday, 14th September - 13:30 - Cognitive and educational development of very young and school-aged children in care

Ms. Misja Eiberg (SFI - The Danish National Centre for Social Research)

Speaker and author: Misja Eiberg, mei@sfi.dk, SFI – The Danish National Centre for Social Research (Denmark)

Background

In a randomized controlled trial (RCT) of educational support interventions for children in care, the cognitive abilities, executive functioning, scholastic achievement, behavior, wellbeing and self-image of 151 children (55 boys and 96 girls) in foster care were assessed at baseline in 2014. The children were 6-14 years of age and attending regular schooling.

Objectives

This is the first study in Denmark that has systematically assessed children in foster care in regard to academic performance as well as cognition, executive functioning, wellbeing and self-perception. The objectives of this presentation will be (a) to use the numerous sources of data available to provide new insight into aspects of the general mental health and cognitive and academic profiles of this particular group and (b) to enable investigation of the correlations among different aspects of development and aptitudes.

Method

The children were assessed with standardized instruments in reading and math. General cognitive abilities were measured with the WISC IV, and executive function was measured with the Behavior Rating Inventory of Executive Function (BRIEF), in both the teacher and parent versions. Cognitive flexibility, inhibition and working memory were furthermore assessed with the Contingency Naming Test (CNT). Other domains, such as perception, language comprehension, communication skills and acquisition of academic skills, were assessed using the 5-15 Questionnaire. Also, the Strengths and Difficulties Questionnaire (SDQ), the This is Me Questionnaire (originally ‘Sådan er jeg’), and survey data were employed.

Key results

The results indicated that the mean global IQ in the sample was within the normal range but in the lower region, and the distribution was negatively skewed. The highest global IQ score in the sample was 115 (1.0 SD above average), and the lowest score was 42 (3.87 SD below average). The working memory index score was particularly low, with a mean approximately 1.0 SD below average.

BRIEF scores were generally high, with almost two thirds of the children scoring in the 90th percentile or higher when rated by their foster mothers. Additionally, the results suggested that the risk of scoring in the 90th percentile or higher on the BRIEF increased as the global IQ scores decreased.

Both reading accuracy and reading speed were generally below average, but with large variation in scores. The math achievement test results were negatively skewed, and almost one in five children attained test scores indicating severe learning disabilities in math.
Additionally, the survey data showed that both foster parents and teachers generally had low educational expectations of the children. The expectations for the children with low IQ scores were particularly low; above-average IQ, on the other hand, did not raise expectations correspondingly.

Implications
The major findings of this study—selected mental health, cognitive, and academic profiles of the sample of children in care, together with correlations among their cognitive skills, executive functions, and academic achievement—will be used to identify key educational needs of the children and suggest feasible interventions to meet these needs.

Conference Topics/Themes:

1. Education and qualification of children and young people in care
2. Mental health of children and young people in care

Format
Oral communication (paper for a symposium)
Transitions to adulthood from care: the empirical and theoretical context

Prof. Mike Stein (University of York)

The aim of this introductory presentation is to provide an empirical and theoretical context for research on young people’s transitions to adulthood from care.

The empirical context will identify what we know about ‘success’ and ‘risk’ factors drawing on international evidence from quantitative and qualitative studies. Analysis of the quantitative data, including demographic studies and research reviews, will identify four recurring themes associated with young people ‘doing well’ in adulthood: stability in care; educational achievement; leaving care later; and, being supported through formal services and informal networks. The qualitative studies will be explored to contextualise these success factors.

The theoretical context will consider how the ‘success factors’ identified above have been explained. This will include: the contribution of attachment and developmental theory to understanding stability; how educational success can be understood with reference to social capital and social inclusion; the potential of focal theory to further knowledge of young people’s transitions from care; and, the relevance of a social justice approach to the way young people are supported and access services.

It will be suggested that the cumulative impact of ‘success factors’ contributes to well-being and maximises agency, whereas the converse – instability, educational underachievement, leaving care early and lacking support – are significant ‘risk factors’. In conclusion it will be proposed that different perspectives - resilience, life course and social identity theory - have the potential to understand young people’s lives from care to adulthood.
Research on the Transition to Adulthood from Out-of-Home Care in the USA: Lessons for Practice and Policy

Wednesday, 14th September - 15:25 - PLENARY SESSION: Transitions to Adulthood from Care: The Empirical and Theoretical Context

Prof. Mark Courtney (University Of Chicago)

This presentation will synthesize findings from a program of research conducted over the past 20 years on the transition to adulthood for young people in state care in the USA. The program of research includes (1) the Midwest Evaluation of the Adult Functioning of Former Foster Youth, which followed 732 youth transitioning from care in three US states, interviewing them five times between ages 17 and 26, (2) the Multi-Site Evaluation of Foster Youth Programs, a series of experimental evaluations of independent living programs for youth in care, and (3) the ongoing California Youth Transitions to Adulthood Study (CalYOUTH), which is following 727 young people transitioning to adulthood from care in California. The presentation will summarize what is known about outcomes for former foster youth during the transition to adulthood in the USA, risk and protective factors that research has shown to be associated with their outcomes, unique subgroups of youth in need of distinct forms of assistance, and the evidence base for policy and practice innovation.
Doing well, against what odds, with what inspiration?” How a sample of young adults with care experiences reflect on doing well at school and in life.

Wednesday, 14th September - 15:50 - PLENARY SESSION: Transitions to Adulthood from Care: The Empirical and Theoretical Context

Prof. Elisabeth Backe-Hansen (Norwegian Social Research, Oslo and Akershus University College of Applied Sciences)

Elisabeth Backe-Hansen’s presentation builds on the first analyses of in-depth interviews with 24 young women and men with experiences of public care, who have done well in relation to educational attainment and/or employment. They are the Norwegian part of a three-country longitudinal study, involving Denmark, England and Norway. The participants were aged between 16 and 32 at the time of the first interview. Around four out of ten have some kind of immigrant or refugee background. They had all been in public care for three years or more, with care experiences varying between stable foster care from infancy on, to more than ten different placements in residential and foster care.

Elisabeth Backe-Hansen will focus on two themes, first the young persons’ own conceptions and reflections on what doing well means. Here, one important message is the many nuances that emerge when we discuss the meaning of doing well, and how this points to a need for both comprehensive and differentiated services. At the same time, some commonalities between the young men and women as well as their social contexts are evident. The second theme concerns education and the participants’ reflections on prerequisites for their educational attainment. The analyses illuminate and qualify existing knowledge about these young adults in important ways, and raises the question of how best to theorize about these young adults’ lives.
Ethically and emotionally challenging moments in substitute care work

Wednesday, 14th September - 16:30 - Foster Carers

Dr. Tuija Eronen (University of Tampere), Dr. Riitta Laakso (University of Tampere)

This presentation is based on the ongoing research project, which examines emotionally and ethically challenging moments in substitute care work. The research project is carried out with social workers, residential care workers and foster parents in two Finnish municipalities.

Social work with children in care and substitute care work is human activity, which is encountered critical events, unpredictable twists and surprises. Working with children in care is emotionally and ethically challenging and stressful. Sometimes it may be also serious threat to the safety of children and staff.

Laura Steckley and Mark Smith (2011) have described the differences in work orientation between social work and substitute care work through Noddings’s (1984) conceptualization. The concept of care is divided in the two dimensions, “caring about” and “caring for” children. “Caring about” reflects a general predisposition to see that children are well treated but does not require the provision of direct care. “Caring about” is related social work, children’s rights and care assessment of the situation of children, while “caring for” refers to everyday life space shared with children and adults in foster care and institutions of care. Care relations in substitute care are also associated with institutional power relations and strong emotions. These challenges are related to the everyday life with children, the nature of surprises and the extensive duration of care work.

In this presentation we present preliminary findings of the differences in work orientation based on social workers’ and care workers’ narratives. We are interested in what they write about ethically and emotionally challenging situations.
Evaluation of the KEEP Standard training for foster carers: A quasi-experimental approach

Wednesday, 14th September - 16:42 - Foster Carers

Dr. Claudia Molitor (Ipsos MORI), Ms. Sarah Knibbs (Ipsos MORI), Ms. Jo Warburton (National Implementation Service)

Foster placement break-downs can have a range of adverse effects on children, foster carers, social workers and the wider system around the child. In order to improve placement stability, foster carers require not only support, but also knowledge and skills to positively manage difficult behaviour and give the foster child as well as themselves the best experience of fostering as possible.

This paper will present new research findings about the KEEP Standard training for foster and kinship carers. KEEP was developed by Dr Patricia Chamberlain and colleagues at the Oregon Social Learning Center in the USA and a randomised controlled trial of KEEP in the USA has demonstrated positive outcomes. The programme is currently being independently evaluated for the first time in England by Ipsos MORI in collaboration with Prof. David Berridge at the University of Bristol as part of the Department for Education (DfE) Innovation Programme.

Ten local authorities across England where the training was delivered between September 2015 and February 2016 participated in the evaluation. A mixed-methods approach was taken with a focus on a quasi-experimental methodology of propensity score matching at baseline and follow-up, enhanced by qualitative interviews with carers before and after receiving the training. Quantitative data gathered included the standardised and validated scales of the Strengths and Difficulties Questionnaire (SDQ), Parenting Scale (PS) and Warwick Edinburgh Mental Wellbeing Scale (WEMWBS). Data were collected from intervention group carers through KEEP intake forms administered by training facilitators, and from control group carers through paper and online versions of the intake form. For each scale, pre-and post difference scores will be calculated and mean change scores compared. Data are currently being collated and will be ready for presentation in September 2016.

Drawing on all data sources this presentation will discuss the implications of providing the KEEP Standard training, especially with regard to changes in SDQ, PS and WEMWBS before and after the training, compared with foster carers who did not receive the training. The findings from this evaluation will provide important evidence on the effectiveness of the KEEP training in the English context and will be of interest to training provision for foster carers more widely.
Caring for traumatised children: Compassion fatigue in foster carers

Dr. Heather Ottaway (University of Bristol, Hadley Centre for Adoption and Foster Care Studies)

Objective: The presentation will focus on findings from our study of foster carers’ experience of compassion fatigue (also known as ‘blocked care’) in their care of traumatised children, and what support they find most helpful. Compassion fatigue can occur in foster carers because of the demands of being a therapeutic parent to children who have experienced trauma. It is characterised by a developing lack of empathy and compassion as a result of experiencing physical and emotional exhaustion (or ‘burnout’) and/or symptoms of secondary traumatic stress, which affects the ability to work sensitively and effectively with those who are traumatised. A foster carer’s home is also their place of work, so respite from caring is difficult to achieve. Compassion fatigue has long been recognised as a condition affecting the performance of police and fire officers, hospital staff, mental health professionals and social workers, but it has received little attention in respect of foster carers. The overall aim of the paper is to present evidence about the presence and experience of compassion fatigue in foster carers, as well as compassion satisfaction. Support strategies which foster carers find helpful will also be highlighted.

Methods: The study has taken a mixed-methods approach to investigate the experience of compassion fatigue and compassion satisfaction in approved foster carers in England. This comprised a literature review, a national survey of foster carers in England and focus groups with a sub-sample of the survey respondents. The survey includes two measures, the Professional Quality of Life (ProQOL) and the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS). The ProQOL measures levels of compassion satisfaction, burnout and compassion fatigue/ secondary traumatic stress. The WEMWBS is a validated measure of mental well-being. Together, these measures provided detailed information about the presence of compassion fatigue and compassion satisfaction in foster carers, and their general mental well-being. The survey was widely publicised, including through social media (Facebook and Twitter). 546 approved foster carers in England completed the survey. Four focus groups, each with 8-12 participants, are providing in-depth information about foster carers’ day to day experience of caring for traumatised children. Specifically, the focus groups are examining the experience and impact of compassion fatigue in greater detail, the strategies to manage which foster carers have found helpful/unhelpful, and the support they received from other professionals.

Results: Data collection and analysis is on-going, and will be presented at the conference. The survey findings regarding the presence and experience of compassion fatigue in foster carers will be presented in full, alongside early themes emerging from the focus group data.

Conclusions: This study is one of the first to explore the presence and experience of compassion fatigue in foster carers. Policy and practice implications regarding the recognition of compassion fatigue and possible support strategies will be discussed in the light of the evidence presented from this study.
Traditional Versus Professional: Relative and non-relative foster care placements

Wednesday, 14th September - 17:06 - Foster Carers

Prof. Waleria Stelmaszuk (University of Warsaw)

This paper will present a summary of the findings of recent research examining current trends in foster care in Poland and their implications for the development of the most effective way of using this form of care. The findings highlight an ambivalence towards professional foster family care as opposed to traditional kinship placement.

Background information

Since the beginning of the 1990s, there has been a strong movement in Poland to close large children’s homes and replace them with professional foster family care. Another trend was the formalizing of kinship care, which has been the most common and traditional form of child care. The development of professional foster care was a priority. It was hoped that professional foster parents would meet the needs of children deprived of parental care and better prepare them for an independent life than institution or relatives involved in kinship care.

A law passed in 2004 and subsequent legislation provided new standards for foster care – training, salary and supervision. Professional foster parents are employed by local administration and receive a salary. A relative who cares for the child in formal care is not a licensed foster parent and cannot receive the same oversight and compensation as a professional family.

There are currently 57,651 children in foster family care: 9,356 of them are under the care of professional foster families, 19,697 are placed in residential care. Overall, 75% of children placed out of home are with a foster family and 25% are in residential care.

The further development of professional foster care has come to a halt and is now facing a serious crisis. This happened after the tragic death of two small children from the hands of their “professional” foster parents. Another horrifying fact was discovery of the sexual abuse and pregnancy of a young foster girl. This shocked public opinion and raised serious concerns about the quality of care in professional foster families.

Method/source of information

This presentation is based on several different sources:

- State-provided reports concerning out of home care in Poland;
- A qualitative (12 months) project with a group of professional foster caregivers, based on reflective group model;
- Interviews with kinship and professional foster caregivers;
- Case studies of children brought up by their grandparents and siblings.

Summary of findings

- Professional caregivers usually care for several children, while kinship care serves one child or a siblings group.
• Professional foster caregivers are most often young couples, with their own young children. Kinship foster caregivers are usually older (grandparents) or, on the contrary, quite young (siblings).

• Professional foster families usually offer crisis and short-term care; most or even all kinship placement are permanent.

• Professional foster caregivers often see biological family as a problem. They feel overwhelmed with the situation and unprepared to meet the complex needs of the children under their care.

• Professional families often consider themselves over controlled by professionals.

• Kinship caregivers are usually satisfied with the financial help and support received from professionals.

Policy and practice implications

This paper would argue that social and cultural factors, family and community traditions must be considered while planning child welfare services. Kinship care can be a valued option and an important component of the child welfare system. New strategies for recruitment of professional foster parents are needed to achieve better quality of specialized foster care.

Case studies will be presented to show different schemes of kinship care and the crucial role of professionals in making it a successful option for children.
Evaluation of a non-violent resistance intervention for foster parents

Dr. Frank Van Holen (Vrije Universiteit Brussel), Prof. Johan Vanderfaeille (Vrije Universiteit Brussel), Dr. Femke Vanschoonlandt (Vrije Universiteit Brussel), Ms. Skralan De Maeyer (Vrije Universiteit Brussel)

Objectives


Method

Using restricted randomization (minimization), 62 out of 87 eligible foster parents of foster children (ages 6 – 18) with externalizing problem behaviour were assigned to an intervention (n = 31) and a treatment as usual control group (n = 31).

The intervention was a manualized adaptation of the NVR program for regular families (Van Holen, Vanderfaeille, & Omer 2015). It includes ten home-sessions aimed at helping foster parents to prevent escalation, engage social support, use reconciliation gestures, and implement non-violent resistance to problem behaviors.

Foster mothers filled out a questionnaire prior to the start of the intervention (T0), immediately after the intervention (T1), and at follow-up three months later (T2).

Measures regarding behavioural problems (Child Behavior Checklist/6-18, Achenbach & Rescorla, 2001), parenting stress (Nijmeegse Vragenlijst voor de Opvoedingsituatie, Wels & Robbroeckx, 1996), parenting practices (Ghent Parental Behaviour Scale, Van Leeuwen & Vermulst, 2004), and the size of the supportive network were assessed.

Intention-to-treat and analysis of covariance were used to analyse outcomes.

Results

Regarding foster children’s behaviour problems, although comparison did not reach significance, small positive trends favouring the NVR group were reported on the total problems scale at treatment completion (d = .35) and on internalizing (d = .21), externalizing (d = .24) and total problems (d = .33) at follow-up. Regarding parenting stress small positive trends were found at treatment conclusion, increasing to medium sized effects at follow-up: foster mothers in the NVR group felt more able to cope (T1: d = .22; T2: d = .53), were more satisfied with the parenting situation (T1: d = .23; T2: d = .30), and reported less severe problems (T1: d = .35; T2: d = .70, p = .01). Regarding parenting practices, a significant small effect was found in parental monitoring at treatment conclusion (d = .28, p = .005) and a significant medium sized effect was found in inconsistent punishment at follow up (T1: d = .30; T2: d = .51, p = .03). Furthermore, small positive trends were found regarding positive parenting (d = .34) and setting rules (d = .29) at treatment conclusion and discipline at follow up (d = .29). Regarding support there were improvements both at treatment completion and at follow-up: foster mothers received more emotional support (T1: d = .31; T2: d = .72, p = .03), could count on more people to provide them with practical support (T1: d = .36; T2: d = .35, p = .09), and with information and advice (T1: d = 1.05; p = .01, T2: d = .72).
Conclusions
The intervention showed to be promising, leading to an increase in support and some changes in parenting stress and parenting practices. Further development of the intervention and future examination of the specific ingredients that might be important and effective are needed in order to increase its effectivity.

References
Safety for children first: Focus on children in family focused case management?

Wednesday, 14th September - 16:30 - Improving Legal and Professional Practice

Ms. Inge Busschers (Youth Protection Amsterdam Area & Amsterdam University of Applied Sciences), Dr. Boendermaker Leonieke (Amsterdam University of Applied Sciences)

When following a systems-based approach in child protection, caution is needed to stay focused on the safety of children. However, practice-oriented knowledge on how to succeed is lacking. To explore whether professionals were able to keep focus on child safety, research was carried out into the experiences of case managers applying an innovative, systems-based methodology in child protection and youth parole services in the Netherlands, named: Intensive Family Case Management (IFCM).

We monitored a sample of family meetings at the Youth Protection Amsterdam Area agency. Further, quality assurance instruments, case notes, and Family Plans filled out by case managers and their supervisors were examined on the use of children’s safety and needs tools.

The results show that family meetings were organised in half of the cases. In only 25% of these face-to-face contacts all the family members were present. In nearly all families, the tools for child safety (94%), children’s needs (81%), and safety and risk assessment (90%) were used.

Although the implementation of the IFCM methodology was still ongoing at the time of data collection, the analyses showed that case managers used the tools for almost all families. In contrast to this, they had difficulties in adequately applying the systems-based approach. The results suggest that ongoing monitoring and support in daily practice is essential for working in accordance with a systems-based approach.
Legal representation in the Scottish Children’s Hearing System

Wednesday, 14th September - 16:42 - Improving Legal and Professional Practice

Mr. Robert Porter (University of Strathclyde), Dr. Vicki Welch (University of Strathclyde), Ms. Carol Wassell (University of Strathclyde)

In 1968 the Kilbrandon report detailed a system of panels for dealing with ‘juvenile delinquency’ which became the foundation for the Scottish Children’s Hearings System (CHS) in Scotland. The CHS makes decisions and recommendations about children where professionals feel compulsory measures of supervision may be necessary for the child’s wellbeing. Compulsory measures of supervision may be a helpful response to many serious issues in a child’s life, including failure to attend school, parental abuse or neglect, or criminal behaviour. As a result, almost all criminal and care and protection cases for children in Scotland up to the age of 18 are heard by the CHS. The CHS has wide-ranging powers, including the ability to dismiss charges or allegations, remove children from their parents, and mandate compulsory measures of supervision. Each hearing is presided over by a panel of three lay people who have undergone relevant training, this panel makes decisions based on the principle of the best interests of the child.

Despite being a tribunal making legally enforceable decisions it has, until recently, been relatively uncommon for legal representation to be present in a hearing except in a minority of cases where there was a requirement that the child is represented by a lawyer (eg when secure care is being considered). Parents and relevant others have always been able to bring legal representation to a hearing, but following recent successful legal challenges regarding the right to representation, financial aid has been made available to parents and relevant other’s wishing to appoint a lawyer. This has led to an increase in legal representation in children’s hearings.

Objective: This research was commissioned by the Scottish Legal Aid Board to examine the role of legal representatives in the children’s hearings process. In particular, in relation to the ethos of the hearings, the performance of lawyers/solicitors, monitoring and feedback mechanisms, and training needs of lawyers/solicitors to participate effectively in the hearings.

Methods: A mixed methods approach was utilised, in order to gather a wide range of information. This included surveys made available to all solicitors, social workers, reporters and panel members involved in CHS, focus groups with samples from these same populations, interviews with children, and representatives from outside of the formal CHS system.

Results: The introduction of financial aid and corresponding increase in the legal presence in the CHS has produced mixed results. While respondents were careful not to over-generalise regarding the performance of lawyers/solicitors, there were concerns regarding: the introduction of an adversarial style; a change in emphasis away from the best interests of the child and towards the rights of the parent(s); the introduction of delay into proceedings; a lack of understanding of child development, communication and attachment; and disruption of social workers’ relationships with the family.

Conclusion: Legal representation in lay-tribunals such as the CHS can present challenges. Training of solicitors in child development and other topics, the introduction of a compulsory scheme of pre-registration training, and ongoing inter-agency training to facilitate all parties’ understandings of different roles could be helpful.
Is the Decision in the Best Interest of the Child? A Socio-Legal Study of Care Order Decisions in Norway

Wednesday, 14th September - 16:54 - Improving Legal and Professional Practice

Ms. Line Marie Sørsdal (University of Bergen, Norway)

Objectives
The aim of this study is to establish a framework for evaluating the use of best interest principle in child protection cases in Norway. In Norway it is the County Social Welfare Board that has the formal decision-making power to remove a child from the care of his or her parents. When deciding care order cases, the decision-makers must follow article 3 of the Convention on the Rights of the Child of 1989 (CRC), which states that: “In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.” Decision-making grounded on the “best interest” have however in practice shown to be difficult to evaluate, due partly to the ambiguity of “what is best”(Elster, 1989, Skivenes, 2002, Archard and Skivenes, 2010). The first part of the study aims to provide a framework - as to how to make best interest decisions - by using the guidance provided in The Child Welfare Act (1992) to set up criteria that the Norwegian law has stated as considered that should be made when determining the best interest of the child. The second part of the study analyses whether these considerations are actually found in the reasoning provided by the County Social Welfare Board in care order cases.

Method
The empirical data is based on 31 care orders from 2013. The decisions were systematically read with attention to what kind sources, voices and information the decisions referenced, and then the arguments were analysed using thematic content analysis (Braun and Clarke, 2006). The reasoning in the decisions is seen as more than just simply “determining the facts of a case” - it is viewed as a “narrative construction” justifying the decision made (Travers and Banakar, 2005).

Results
The study shows the variety of references, voices and arguments used by the County Social Welfare Boards as justification for care order decisions. The findings further show that the decision-makers have a great deal of discretion in how they determine what they understand as the best interest of a child in a particular case.

Conclusions
The results of the study, in terms of both the length and type of arguments provided in some cases, raises the question of whether the decision-makers really have considered if, why and how the decision made is the best interest of the child.
What do we know about linking and matching in permanency work? Learning from practitioner perspectives and experiences

Wednesday, 14th September - 17:06 - Improving Legal and Professional Practice

Dr. Danielle Turney (University of Bristol)

Placing a child away from their family of origin – first identifying possible links and then matching them with the specific individual or couple who will, other things being equal, become their new parent(s) - is potentially one of the most far-reaching decisions that a social worker can make. Yet there is little research evidence about how linking and matching processes (in adoption or other forms of family placement) actually 'work' - and where there is information, it tends to come from situations where things have gone wrong. This paper discusses a piece of work aimed at developing our understanding of linking and matching practices within permanency work. A series of reflective learning sets were set up, to allow practitioners to share experiences and perceptions of linking and matching processes and to identify elements of good practice. The paper outlines the approach taken and presents some findings from this work. While the focus was on adoption work, it is suggested that the findings may have wider application and could contribute to practice in other forms of family placement.

Objectives
The paper discusses a project funded by the Department for Education in England, and delivered by British Association for Adoption and Fostering (now CoramBAAF) in partnership with the University of Bristol. The main project had a number of elements, including provision of a series of learning sets for practitioners involved in linking and matching work. The learning sets had the following objectives:

• To explore the perspectives, experiences and ideas of social workers engaged in linking and matching children for adoption
• To identify the specific contribution that social workers can make in facilitating the experiences of prospective adopters and children in linking and matching
• To explore linking and matching within the context of a learning experience for all the parties
• To explore the role that relating and relationships play in learning
• To identify the processes of learning and relating in the learning set and what facilitates or hinders them

Method
Participants were recruited in six regions across England, and all were involved in permanence work. Participation was voluntary, with local authorities and other relevant organisations nominating practitioners to attend. Each group had approx. 8 participants and was supported by an experienced facilitator. A primary aim was to encourage dialogue and learning across the group, whilst at the same time enhancing the project team’s understanding of linking and matching practices. Thirteen groups met across two years: six groups ran in 2013/14 and a further seven, drawing in different practitioners, met in 2014/15. Each learning set met for six sessions across a three month period.

Findings:
Participants identified a range of practice, emotional and organisational issues that threaded through their experiences of linking and matching. In addition, the learning sets provided insights into the:

- learning that practitioners identified as most significant
- factors they identified as most important, when considering linking and matching
- factors that contribute to a ‘successful’ match
- most common difficulties or challenges encountered

Overall, the learning sets provided a wealth of practice-based knowledge to inform a broader understanding of the dynamics of linking and matching a child with a new family. Some practice implications arising from the findings will be suggested.

Conclusions:

The reflective learning sets used the expertise in the group to build a picture of linking and matching whilst also providing participants with safe space to share experiences of this emotive area of work. Emotional, practice and organisational issues were highlighted through these discussions, and it is suggested that the knowledge gained may have application to other forms of family placement.
Ensuring high quality planning and provision for children in care: the role of independent reviewing officers in England

Wednesday, 14th September - 17:18 - Improving Legal and Professional Practice

Prof. Jonathan Dickens (University of East Anglia, Centre for Research on Children and Families), Prof. Gillian Schofield (University of East Anglia), Dr. Chris Beckett (University of East Anglia, Centre for Research on Children and Families), Dr. Georgia Philip (University of East Anglia, Centre for Research on Children and Families), Ms. Julie Young (University of East Anglia, Centre for Research on Children and Families)

Objectives

The aim of this paper is to describe and assess the system in England for making and reviewing plans for children in care, and in particular the role of ‘independent reviewing officers’ (IROs). Long standing professional, public and political concerns about the effectiveness of services for children in care and their families have led to a large and highly prescriptive set of legal requirements and government guidance about care planning and review. IROs are central figures in this system. They are social workers, employed by the local authority, but independent of the line management of the case. Their main tasks are to chair periodic review meetings, monitor the implementation of the plans and ensure that views of all concerned, particularly the child, are given proper consideration. It has been a statutory requirement since 2004 for every child in care to have an IRO, but ever since the beginning there have been doubts and disagreements about their effectiveness.

Method

This paper draws on research into care planning and the role of the IRO conducted by the authors in 2012-14. The research was a mixed methods study. There was a file survey of 122 children in care in four local authorities; interviews with social workers, IROs, parents and children; multi-professional focus groups; and a nationally-distributed questionnaire.

Results

The study found that IROs were undertaking their roles in ways that were often rather different to the requirements of the statutory guidance. There was evidence that IROs could exercise professional independence and raise formal challenges if they were unhappy with the progress of the case, but generally they preferred advice, discussion and negotiation, and sometimes direct intervention to help deal with a matter. Social workers and their managers often appreciated this more collaborative approach, although there could be resentment if IROs were perceived to have gone too far beyond their proper role. Some young people and parents expressed doubts and discontent about their IRO, but on the whole they did see them to be independent and effective.

Conclusions

There are frequent calls for IROs to be ‘more independent’ and ‘more challenging’, but the dangers of such an approach are that it does not pay proper regard to the complexities and challenges of deciding, implementing and reviewing plans for children in care. The children and their families often have very great needs, there are many different decision-making levels and processes, there are accountabilities for spending public money, other agencies are involved, circumstances can be uncertain and unstable, and resources are limited (money, services, personnel, time). In this context, the role of the IRO has evolved to intervene in more subtle and (usually) cooperative ways. The study has messages for inter-professional working, and the nature of ‘professional independence’ in public sector welfare bureaucracies.

Wednesday, 14th September - 16:30 - Therapeutic Residential Care

Mr. Kenny Kor (The University of New South Wales)

Abstract:
Recent reviews of therapeutic residential care models have revealed two key knowledge gaps. The first gap is concerned with the lack of descriptions of what therapeutic residential care exactly entails in practice (Knorth, Harder, Zandberg & Kendrick, 2008; Harder & Knorth, 2015). The second gap refers to the need to develop an in-depth understanding of how therapeutic care is implemented in the residential care service environment (James, Alemi & Zepeda, 2013; James, 2015). This study aims to address these knowledge gaps. Thirty residential care practitioners across different structural levels and young people in residential care were interviewed. Together, they provided a rich, varied and multi-dimensional account of their perspectives of therapeutic practice and experiences in residential care. This presentation will provide a snapshot of the key preliminary findings of this study and is intended to stimulate further discussion regarding future directions for therapeutic residential care practice.

Objectives: The objectives of this study are to contribute to the development and implementation of therapeutic residential care and to the improvement of outcomes for children and young people in residential care. This will be achieved through the examination of (1) how do residential care practitioners conceptualise therapeutic residential care? (2) what are the current practice elements of therapeutic residential care? (3) what factors facilitate and inhibit implementation of these practice elements? and (4) how do young people perceive their experience in residential care?

Method: A qualitative research design was used including semi-structured interviews of thirty young people and residential care practitioners across various organisational stratum including senior managers, team leaders, clinical staff, caseworkers and direct care workers of three leading residential care service providers in the Australian state of New South Wales. Themes emerged from the data set were synthesised, compared and contrasted across different sample groups and against existing theoretical and empirical literature.

Results: This study identified a number of key practice elements of therapeutic residential care. However, it also revealed a great degree of variability in implementation fidelity across different residential care placements. The results of this study suggest a need for a clear articulation of a therapeutic residential care framework and a paradigm shift in service culture across the sector.

Conclusions: The development of therapeutic residential care is inchoate and its implementation is a complex undertaking. This study identified some promising therapeutic practice elements and opportunities, however, it also revealed several systematic, organisational and individual barriers to implementation. Embedding a therapeutic care culture in service delivery across the sector and building a more integrated system of care with an overarching practice framework could pave the way for improving success of implementation and achieving more optimal outcomes for children and young people in residential care.
Therapeutic residential care in Spain. Treated profiles, mental health problems and therapeutic coverage

Wednesday, 14th September - 16:42 - Therapeutic Residential Care

Dr. Eduardo Martín (University of La Laguna), Dr. Jorge F. Del Valle (University of Oviedo), Dr. Amaia Bravo (University of Oviedo)

The scientific literature has been showing a high prevalence of mental health problems in the population of children and youth placed in supervised homes. For more complex cases, different specialized resources have been generated that can be encompassed under the term of therapeutic residential care. A recent international review (Whittaker, Del Valle & Homes, 2015) has shown a great diversity in the types of intervention carried out and in the referral criteria of cases to these specialized resources. The goal of this work is to describe the profile of the cases that are attended to in therapeutic residential resources in Spain, as well as their mental health problems and the therapeutic care they receive. The sample is made up of 215 youths, of whom 93 are in therapeutic resources and 122 in homes with autonomy programs for adolescents. The instruments used were the “Sistema de Evaluacion y Registro en Acogimiento Residencial” (SERAR; in English, System of Assessment and Registry in Residential Care; del Valle & Bravo, 2007) and the Child Behavioral Checklist (CBCL; Achenbach & Resola, 2001). Bivariate analysis and logistic regression were performed. The main results indicate that the cases referred to therapeutic resources had passed through a larger number of centers, although they had been placed in these resources for a shorter period of time than the comparison group. The group in therapeutic placement also showed greater substance consumption, and there was a greater percentage cases within the clinical range on the scale of Attentional and Aggressive Behavior Problems of the CBCL. The logistic regression shows that the variable that most modifies the probability of being referred to therapeutic resources is substance abuse. With regard to treatment received, there are no significant differences in the percentages of those receiving some kind of therapeutic treatment, although the group in therapeutic residential placement receives more psychiatric and pharmacological treatment. These results are discussed with regard to prior research and its practical applications.
Evidence informed Therapeutic Residential Care – using technology to improve outcomes for children in out-of-home care

Wednesday, 14th September - 16:54 - Therapeutic Residential Care

Dr. Nick Halfpenny (MacKillop Family Services), Ms. Edith Loch (MacKillop Family Services)

MacKillop Family Services (MacKillop) is a non-government organisation providing a wide range of community services across three states in Australia including out-of-home care, family services, education and disability services. MacKillop is a Sanctuary-certified organisation. The Sanctuary Model is an organisational framework that integrates trauma theory with the creation of therapeutic communities to promote safety for all.

This paper will outline the MacKillop Therapeutic Residential Care (TRC) Outcomes Monitoring Project that commenced in 2015 and which monitors client outcomes across our TRC program. The presentation will focus on the project aims, methodology, six months of client outcomes data and our learning.

MacKillop operates ten TRC homes in Victoria, Australia. The TRC homes are based on a program implemented by the Victorian Department of Health and Human Services in 2007 and associated with positive outcomes for young people across a range of indicators (McLean, Price-Robertson and Robinson, 2011; McNamara 2015). Residential homes typically accommodate 4 children or young people in houses in the community.

The key components of the TRC model include: Therapeutic specialists attached to each home, therapeutically trained staff, reflective practice, higher staffing levels with consistent rostering, therapeutic assessments, planned transitions, placement matching, a home-like physical environment and organisational congruence and commitment to the therapeutic model.

MacKillop is undertaking this project with Verso Consulting. Client outcomes are monitored and measured through regular daily observations from residential carers and therapeutic specialists using three psychometric tools: the Strengths and Difficulties Questionnaire (SDQ), the Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA) and the Brann Likert Scales.

These tools together enable positive and negative client outcomes to be measured covering key outcome domains. Use of App technology allows the innovative collection of the data at each shift change and particular data to be entered monthly by the therapeutic specialist and care staff.

Residential home staff and managers have real time access to the daily observations for all young people in the residential home. This also provides for the real time management of risk. Aggregated and trend data is used throughout the therapeutic intervention to inform better targeted and more responsive short and long term interventions.

Customised data reports can be used for discussion and reflection with the young person, use in reflective team meeting, staff handover, care planning, the development of therapeutic treatment plans and management of service improvements.

Using the data from the project, the outcomes for young people will be benchmarked against the findings of evaluations of other TRC programs.

The MacKillop TRC Outcomes Monitoring Project aims to support good practice, promote the effective implementation of the TRC model and ensure improved outcomes for children and young people in care.
References


Therapeutic Residential Care: Australian Consensus
Definition and Agenda

Wednesday, 14th September - 17:06 - Therapeutic Residential Care

Dr. Sara McLean (Therapeutic Residential Care Forum), Mr. Greg Wall (Therapeutic Residential Care Forum), Ms. Raeleen Mckenzie (Therapeutic Residential Care Forum), Ms. Glenys Bristow (Victoria University Melbourne Australia), Ms. Laurel Downey (Therapeutic Residential Care Forum), Ms. Lyn Millet (Therapeutic Residential Care Forum), Ms. Kate Martin (Therapeutic Residential Care Forum)

In 2012, the Australian National Therapeutic Residential Care Forum (TRC) was formed. The National Forum was established to share collective research and practice knowledge and to drive quality service provision at a time when models of Australian Therapeutic Residential Care were still emerging. The group is led by a reference group of policy and practice leaders and researchers from each Australian jurisdiction. This national representative group provides a coordinated and collaborative means by which the evidence based practice for therapeutic residential care can be developed in Australia. In this presentation, the new Australian consensus definition of Therapeutic Residential Care will be presented and the research, principles and practices that underpin it will be discussed. The definition reflects the unique parameters and qualities of residential care services in Australia. The definition provides the foundation for the future work of the group which will focus on national standards for the sector, including the development of standardised audit and evaluation tools tailored to Therapeutic Residential Care.
Use of Therapeutic Residential Care in the U.S.: Shifting Away from Therapeutic Residential Services to Family-Based Services

Wednesday, 14th September - 17:18 - Therapeutic Residential Care

Dr. Christopher Bellonej (Tufts University School of Medicine)

Objectives: This paper will review current public policy initiatives at the Federal and State levels as the use of “Congregate Care” continues to be questioned as a placement resource for youth involved with the Child Welfare System in the United States.

Method: The model for funding congregate care in the US will be reviewed and concerns about overutilization of group homes presented. Insight into proposed funding reforms will be discussed.

Results: In fiscal year 2013, the US spent 22.9 Billion US dollars on child welfare administrative costs and direct services. The largest amount, 24% was spent on administrative services; 23% on family support and independent living services; 21% on adoption and guardianship services; 17% of that amount or $3.8 Billion was spent on Congregate Care and 15% on family foster/kinship care. Since 2004, the percentage of youth placed in Congregate care settings has declined from 18% to 14% with approximately 80,000 youth being placed in congregate care in 2013 and 324,000 placed in foster/kinship homes (Open Minds, 2016).

Foster care in the US is the responsibility of states. However, the funding for foster care is supported by the Federal government. States get money allocated based on the number of youth they have in foster care. This has raised concerns that there is a perverse incentive for states to remove more children from their biological families in order to maximize the federal contribution to foster care even though the federal contribution to states has been dwindling since the mid-1990s and now amounts to an average of about 35% of the costs incurred by states.

Congregate care is the term being used by policy makers to include any “non-family based placement” and range from group homes and shelters with minimal or no on-site clinical services to Therapeutic Residential Care. The greatest concern from those opposed to the use of congregate care is in the group home and shelter models where there is a perception that children are merely “housed and forgotten”. This shift away from using congregate care settings to foster/kinship homes is likely to increase despite the limited availability of foster/kinship homes in most states and the concern that youth with significant behavioral health needs will be poorly served in family-based settings.

The prevailing argument is that youth should be in families. This is clearly preferable but ignores the significant mental health needs of this population. Most studies report between 50-80% of youth entering care have a diagnosed behavioral health disorder. While some youth could be helped in traditional outpatient settings, a significant proportion will need higher levels of care. Group homes typically will facilitate a youth receiving any indicated mental health service in the community. By removing this “intermediate level of care” from the service continuum, we may end up with two options: family/kinship care and Therapeutic Residential Care which can cost in excess of $150-200,000 per year.

Current finance reform proposals would require a clinical assessment be used to determine whether and how long a child could be placed in a Therapeutic Residential Program. There would be a federal definition of a “Qualified Residential Treatment Program (QRTP)” written into law for the first time. Periodic reassessment would be required to determine when the youth was ready to be placed in a family resource setting. Judges would be involved in approving placements in a QRTP.
Conclusions: An increasing focus on using family-based care has been and continues to be public policy in the US. It will be critically important to monitor the outcomes of this policy change for youth who would have previously been cared for in therapeutic residential settings.
Teachers and main contacts in residential youth care institutions’ report of mental health problems among adolescents.

Wednesday, 14th September - 16:30 - Emotional and Behavioral Problems of Children in Care

Dr. Anne Mari Undheim (Norwegian University of science and technology), Prof. Stian Lydersen (Norwegian University of science and technology), Dr. Nanna Kayed (Norwegian University of science and technology)

Objectives: Adolescents living in Residential Youth Care (RYC) institutions are generally less successful later in life than other children across a wide range of areas, including poor education. It is important to identify factors that increase healthy school adaption in order for these adolescents to accomplish school in a proper way since education is important for a successful adult life. They do not have parental educational support, and it is up to the institutional staff and teachers to fill this gap. Mental health problems are a serious hindrance for learning. How good are the main contact at the institutions and teachers at school at identifying the adolescents’ mental health problems? The aim of the present study was therefor to explore whether mental health problems, as assessed by a child and adolescent psychiatric diagnostic interview, among adolescents living in RYC institutions were detected by primary contacts at the institutions and teachers at school. The research question was whether the adolescents’ internalizing (affective and anxiety) disorders, externalizing (Conduct Disorder (CD)) and ADHD problems as reported by teachers and primary contacts were consistent with the diagnostic categories identified in the psychiatric diagnostic interview. As symptoms of externalizing (CD) problems and ADHD are more easily identified as disruptive, we hypothesized that teachers and primary contacts more easily detected these two categories than internalizing problems.

Method: All residents between the ages of 12-23 years living in RYC in Norway were invited to participate in the study. Of 601 available children, 201 refused participation, thus 400 children participated in the study, 230 girls, mean age=16.9, SD=1.2 and 170 boys, mean age=16.5, SD=1.5. The Child Behaviour Checklist (CBCL), Teacher’s Report Form (TRF) of the ASEBA and The Child and Adolescent Psychiatric Assessment (CAPA) were used. Sensitivity and specificity between these instruments are calculated. A ROC curve (receiver operating diagnostic curve) was constructed by connecting corresponding values of sensitivity and specificity for CBCL and TRF with the CAPA diagnostic standard.

Results: We observed that there is a significant gap between mental health problems diagnosed by the CAPA interviews and the problems reported by the main contact on CBCL and teachers on TRF. Main contacts showed higher sensitivity than teachers, while teachers showed higher specificity than main contacts. Both main contacts and teachers classify externalizing problems like ADHD fairly well in both genders, and also CD in girls. Both teachers and main contacts, however, have more problems detecting internalizing problems.

Teachers have a tendency to see most students as healthy and might underestimate the severity of their problems, while main contacts might overestimate the number of problems and see people as more sick than they really are, giving the adolescents less responsibility and fewer demands instead of encouraging them to do their best.

Conclusion: There is a problematic miss-match between real mental health problems (CAPA) and problems as reported by main contact and teachers. Especially is this the case for internalizing
problems. Many problems seem to be unrecognized by significant others in these adolescents’ life. CWS should revise their intake procedures so possible problems are detected early and necessary treatment introduced. It is important to identify factors that increase healthy school adaption among these adolescents.
The longitudinal reciprocal relations between parenting and foster children’s externalizing behaviors

Wednesday, 14th September - 16:42 - Emotional and Behavioral Problems of Children in Care

Ms. Anouk Goemans (Leiden University), Dr. Mitch Van Geel (Leiden University), Prof. Paul Vedder (Leiden University)

Objectives: Many children who enter foster care experience high levels of internalizing and externalizing behavior problems (Clausen et al., 1998; James, 2004), and it is worrisome that during a stay in a foster family these problems do not decrease (Goemans, Van Geel, & Vedder, 2015). Even more so because foster children’s problem behaviors, especially externalizing problems, are a major reason for placement breakdown (Oosterman et al., 2007). Parenting is one of the major influences on children’s externalizing behavior (Combs-Ronto, Olson, Lunkenheimer, & Sameroff, 2009). This is not a unidirectional process leading from parent to child; children also have an impact on their parents (Patterson, 1982). However scant research has tested reciprocal associations between externalizing behavior and parenting. The aim of the current study was therefore to examine in a three-wave longitudinal study the psychosocial functioning of foster children in a transactional perspective (Sameroff, 2009). In this presentation we will focus on the interplay between foster child (externalizing behaviors) and foster family (negative and positive parenting) factors over time. In addition, we examine the age dependence of this phenomenon.

Method: Preliminary analyses are presented about a group of 167 children in regular foster care. Participants in this three-wave longitudinal study were between 3 and 17 years old (M = 10.15, SD = 3.97), including 91 boys (54.5%) and 76 girls (45.5%). Mean time in the current foster placement was 58.18 months (SD = 46.11). Foster children were followed from October 2014 till October 2015, throughout their stay in the foster family. For each wave, foster parents were asked to complete an online questionnaire containing questions about the foster child, the foster family and the foster placement. To measure the psychosocial functioning of the foster children, de Dutch version of the Strengths and Difficulties Questionnaire (SDQ) for parents was used (Van Widtfelt, Goedhart, Treffers, & Goodman, 2003). Negative and positive parenting were measured using the Dutch version of the Alabama Parenting Questionnaire (Van Lier & Crijnen, 1999).

Results: Cross-lagged path analyses using EQS 6.2 were performed to investigate the longitudinal associations between parenting and children’s externalizing behavior problems. The first model on children’s externalizing behavior and negative parenting fit the data well \( \chi^2 (df=3) = 4.918, p = \) .178, RMSEA = 0.068, 90% CI .000, .170, CFI = .997, SRMR = .082. Children’s externalizing behaviors influenced negative parenting at a later time point, however negative parenting did not predict children’s externalizing problems later in time. The second model on children’s externalizing behavior and positive parenting showed good fit indexes as well, \( \chi^2 (df=3) = 0.476, p = .924, \text{ RMSEA = 0.000, 90\% CI .000, .047, CFI = 1.000, SRMR = .014.} \) In contrast to the first model, it seems that there is an interplay between foster child and foster family factors: externalizing behavior was both predictive of and predicted by positive parenting. Multigroup analyses for the first and the second model were performed to examine whether the interplay between externalizing behaviors and parenting was dependent of age (</> 10 years).

Conclusions: Foster parents’ negative parenting was affected by children’s externalizing problems, but these externalizing problems were not affected by negative parenting. Positive parenting on the other hand was affected by children’s externalizing problem behaviors, but also affected these behavior problems. The interplay between children’s externalizing behaviors and positive parenting
provides implications for research and practice. Family support services aimed at supporting foster parents in their positive parenting may be effective in reducing foster children’s externalizing behavior problems and thereby reduce the risk of breakdown.
Risk and protective factors influencing educational success and suicidality for First Nations youth-in-care in Ontario, Canada

Wednesday, 14th September - 16:54 - Emotional and Behavioral Problems of Children in Care

Dr. Barbara Greenberg (University of Ottawa), Ms. Meagan Miller (University of Ottawa), Mr. Erik Michael (University of Ottawa), Dr. Robert Flynn (University of Ottawa)

Background:
Colonialism and its ongoing effects (including residential schools and their multi-generational impact) have eroded First Nations cultures throughout Canada. First Nations children are over-represented in the child welfare system and are five times more likely to be admitted into out-of-home care. Success in the education system is negatively correlated to poverty rates, and 50% of First Nations children live in poverty. Across Canada, the secondary school graduation rate for First Nations people is 36% versus 72% for the general population. First Nations people are more likely to end up in jail than to graduate from high school.

Education is important not only for employment and income levels, but is also a protective factor for positive mental health (Kirmayer et al., 2007). Suicide and self-inflicted injuries are the leading cause of death of First Nations youth and adults to age 44. First Nations peoples are 5 to 6 times more likely to commit suicide than non-Indigenous populations. First Nations male rates of suicide are 126/100,000, compared to 24/100,000 for non-Indigenous populations. First Nations female rates of suicides are 35/100,000, compared to non-Indigenous populations of 5/100,000. However, First Nations females are more likely to have thought about attempting suicide than First Nations males (33% compared to 29%) and are more likely to have attempted suicide (19% compared to 13% of males). 21% of females aged 15 to 17 have reported attempting suicide, 3 times the rate of males in the same age group.

Objective:
The objective of this paper is exploratory in nature and its purpose is twofold, namely, to develop plausible predictive models for (1) educational success and (b) suicidality for First Nations youth in out-of-home care in Ontario by identifying and testing relevant risk and protective factors for each of these outcomes.

Method:
The cross-sectional sample was made up of 1,877 First Nations youth aged 12 to 17 living in out-of-home care in Ontario, Canada, who had participated in the completion of an Assessment and Action Record (AAR-C2-2010; Flynn, Miller, & Desjardins, 2010) between 2010 and 2014. The AAR-C2-2010 is the core tool used in the Ontario Looking After Children (OnLAC) needs-assessment and outcome-monitoring project. The AAR is completed annually via a conversational interview intended to facilitate dialogue among the child welfare worker, youth, and caregiver(s) in order to guide and monitor developmental outcomes. Multiple linear and logistic regression analyses were used to estimate the predictive models for educational success and suicidality, respectively.

Results:
The findings from our exploratory models indicated that, for educational success, soft drug use, learning-related difficulties, increased cultural assets, and total behavioural difficulties (Goodman,
1997) were risk factors for lower education scores, and developmental assets and positive life experiences were protective factors. For suicidality, predictive risk factors were gender, age, stress symptoms, and soft drug use, whereas positive mental health and family-based care were significant protective factors.

Conclusion and Implications:
These exploratory (as opposed to hypothesis-testing) models are a starting point for identifying the risk and protective factors influencing educational success and suicidality in the First Nations youth-in-care population in Ontario. These findings, if cross-validated in analyses of AAR data from future years of the OnLAC project, will be useful for practitioners and policy-makers in mitigating risk factors and promoting positive protective factors among First Nations youth in out-of-home care in Ontario and possibly elsewhere.
The impact of a foster parent intervention for children with externalizing problems on traumatic stress problems

Wednesday, 14th September - 17:06 - Emotional and Behavioral Problems of Children in Care

Prof. Johan Vanderfaellie (Vrije Universiteit Brussel), Dr. Femke Vanschoonlandt (Vrije Universiteit Brussel), Dr. Frank Van Holen (Vrije Universiteit Brussel), Ms. Skrallan De Maeyer (Vrije Universiteit Brussel)

Objectives:

About 60% of foster children experienced complex traumatic events before foster placement such as neglect, dysfunctional parents, emotional abuse etc. As a consequence a considerable number of foster children has traumatic stress symptoms such as disturbing recurring flashbacks, avoidance of events eliciting memories of the traumatic event and symptoms of hyperarousal. In this study, we examine whether a Flemish foster parent intervention, developed for foster children (aged 3 – 12) with externalizing problems, also reduces traumatic stress symptoms.

Methods:

The intervention studied was the SIM-module of “Pleegouders Versterken in Opvoeden”. This Flemish foster parents training program was originally developed for foster parents caring for children with externalizing behavioural problems and consists of 10 weekly sessions. The theoretical underpinning of the intervention is based on the social interactional model and on the model of Schofield and Beek (2005) on important parenting skills. A randomized controlled trial was set up to examine the efficacy of the foster parent intervention. 63 foster families were enrolled in the study: 30 foster families in the experimental group and 33 foster families in the control group. The latter families received care-as-usual. Foster children’s traumatic stress symptoms were measured before treatment, immediately after and at follow-up (3 months later), using the corresponding scale of the Child Behavior Checklist (filled in by the foster mother).

Results:

Traumatic symptoms of the foster children of both groups did not differ statistically at the end of the intervention ($F(1, 60) = 52.67, p = .38$). The short-term effects were small ($d = .35$). However, according to the foster parents, foster children out of the experimental group had three months after the ending of the treatment significantly less traumatic stress symptoms $F(1, 60) = 9.24, p = .004$).

The long-term effects on foster children’s traumatic stress problems were large ($d = .77$).

Conclusion:

The study shows that the SIM-module of “Pleegouders Versterken in Opvoeden “ has a positive effect on traumatic stress symptoms of foster children with externalizing behavioural problems. It can be assumed that the parenting skills trained during the intervention not only have a positive effect on the externalizing problems of the foster children but that they also result in a decrease of the traumatic stress symptoms of foster children with externalizing behavioural problems. The preliminary evidence for its efficacy on foster children’s traumatic stress problems calls for a further implementation and study of the intervention.

References:

Do you love me? An empirical analysis of the feeling of being loved among children in out-of-home care in Denmark

Wednesday, 14th September - 16:30 - Developmental Assessment of Children in Care

Mrs. Mette Lausten (SFI - The Danish National Centre for Social Research), Mrs. Signe Frederiksen (SFI - The Danish National Centre for Social Research)

Questions about whether love can be offered in residential child care units and whether it is possible to combine child protection and safeguarding in social work with loving care or care with love have raised long-standing issues. Is it possible for children and young people to feel recognized and loved by someone who is paid to care for them? Social pedagogy puts such questions at the core of its philosophy and practice, and has been a fundamental part of care in Denmark for many years. This paper draws on a Danish survey of 1,400 children in out-of-home care, and analyses whether there is a difference in the subjective feeling of being loved in children living in foster care, ordinary residential care, and socio-pedagogical homes. Our findings show that the majority of children and young people in Danish out-of-home care always feel loved by their caregivers. In terms of children’s feeling of love the main moderating factors are the feeling of security and social support, the tangible counterparts of Honneth’s concept of recognition.

Children’s emotional development and their ability to make social relations are strongly linked to the recognition, loving care, and social support they receive; which again are keystone elements of Danish Social pedagogy.

Keywords:
Child and youth care, social pedagogy, socio-pedagogical homes, caring relationship, recognition, social support
Construction of self-representations in maltreated children and adolescents: parents’ influence within the The Looking-Glass Self Hypothesis

Wednesday, 14th September - 16:42 - Developmental Assessment of Children in Care

Ms. Carla Silva (Instituto Universitário de Lisboa (ISCTE-IUL), Centro de Investigação e Intervenção Social (CIS-IUL)), Prof. Maria Calheiros (Instituto Universitário de Lisboa (ISCTE-IUL)), Centro de Investigação e Intervenção Social (CIS-IUL))

Several theorists have proposed that children develop their self-representations based on their experiences with caregivers (e.g., Bretherton, 1991, 1992; Cassidy, 1990). Thus, the origins of negative working models of self in maltreated populations can be viewed as emanating from harmful caregiving experiences. In fact, several studies have found that maltreated children have less positive self-concepts than non-maltreated children (e.g., Bolger, Patterson, & Kupersmidt, 1998; Toth, Manly, & Cicchetti, 1992). However, research on the construction process of children/adolescents’ self-representations (SR) in the context of maltreatment has been sparse. According to the Looking-Glass Self Hypothesis (LGSH; Cooley, 1902; Nurra & Pansu, 2009), individuals’ SR stem from interactions with significant others, reflecting associations between: what others think of them (i.e., significant others’ actual appraisals; SAA), individuals’ perception of others’ appraisals of them (i.e., significant others’ reflected appraisals; SRA), and SR. Yet, even though associations between SAA and SR, associations between SAA and SR and between SRA and SRA have not been consistently verified (Shrauger & Schoeneman, 1979). This study extends past work, by testing the mediating role of SRA in associations between SAA and SR (i.e., LGSH) in the context of child/adolescent maltreatment experiences.

Participants were 214 children and adolescents (51.6% boys), 6-16 year old (M=11.86), referred to the children and youth protection committees, and their parents. Maltreatment was evaluated by the committees’ professionals responsible for the participants’ files, through a questionnaire evaluating maltreatment experiences. Self-representations were measured through the Self-Representation Questionnaire (Martins, 2013), which was adapted do measure the other LGSH elements – SAA and SRA.

Structural equation modelling analyses showed that, controlling for maltreatment effects, significant mediation effects of SRA between SAA and youths’ SR were found for all the SR dimensions evaluated, supporting the LGSH. In addition, results showed significant negative indirect effects of total maltreatment on instrumental and social SR, through mothers’ reflected appraisals on those dimensions. Significant negative total effects of maltreatment on instrumental and social MRA and SR were also found.

Findings emphasize the importance of the role of SRA on maltreated youths’ SR construction process and provide useful clues to incorporate in prevention and intervention with vulnerable youth and their parents. From a pragmatic point of view, these results provide useful clues to incorporate in intervention with these vulnerable children and adolescents and their parents. Namely, the findings highlight the need to help children develop the capacity to enter into positive close relationships and to value themselves, and this goal would be advanced through therapeutic strategies designed to address their representational world. Interacting with caregivers who emphasize children’s and adolescents’ negative attributes may result in the consolidation of a self-negativity bias in them (Fischer & Ayoub, 1994). Therefore, parents should be aware not only of what they do and say to their children, but also of the way children understand, perceive and interpret those beliefs.
and behaviors as it affects their subsequent adjustment outcomes. In terms of positive outcomes, parents may promote positive reflected appraisals and self-appraisals, positive expectancies, and encouragement and thus contribute to their children’s positive adjustment outcomes.
Executive function in children in residential care

Wednesday, 14th September - 16:54 - Developmental Assessment of Children in Care

Dr. María Gracia Peñarrubia (University of Seville, Spain), Prof. Jesús Palacios (University of Seville, Spain), Dr. Maite Román (University of Seville, Spain), Dr. Carmen Moreno (University of Seville, Spain), Dr. Esperanza León (University of Seville, Spain)

The development of executive function (EF), which is responsible for goal-directed behavior and decision-making, may be affected by early experiences such as institutionalization. Previous studies indicate that early and prolonged institutionalization is related with serious neurobiological sequelae, in particular, metabolic deficits in areas of the brain involved in higher cognition, emotion and emotion regulation (Zeanah et al., 2003). Impaired EF has been found in older post-institutionalized children, suggesting long-term difficulties with EF (Pollak et al., 2010). Most of the existing evidence refers to post-institutionalized children, typically after institutional experiences in Easter Europe. In contrast, data to be reported in this presentation refer to children who were still in institutions at the time of study, and who were living in Spanish residential settings.

In this study, EF performance was examined in 9 to 13-years-old children who were institutionalized in foster centers in Seville (Spain), compared with a group of 38 children matched by age and with no experience of adversity or institutionalization. EF was assessed using four tasks of the Cambridge Neuropsychological Testing Automated Battery (CANTAB): Rapid Visual Information Processing (executive attention), Stockings of Cambridge (spatial planning), Stop Signal Task (response inhibition) and Spatial Working Memory (spatial working memory). These tests were always performed in the same order and lasted approximately 60 minutes.

Data showed that children in residential care had lower scores in planning and working memory, in comparison with the control group. However, institutionalized children obtained similar scores in executive attention and response inhibition. These results will be discussed considering the influence of early experiences on EF (age at institutional entrance, duration of institutionalization). These data imply that EF may be negatively influenced by institutional care, although the heterogeneity in outcomes suggests deficits in some EF areas and normative results in others.
Socio-emotional development in children in residential care

Wednesday, 14th September - 17:06 - Developmental Assessment of Children in Care

Dr. Maite Román (University of Seville), Prof. Jesús Palacios (University of Seville), Dr. Carmen Moreno (University of Seville), Dr. Esperanza León (University of Seville), Dr. María Gracia Peñarrubia (University of Seville)

Although residential care offers young children protection from family abuse and neglect, its negative consequences are well known. Institutional contexts do not promote children’s recovery from past experiences just like family alternatives do. The main goal of this longitudinal study was to analyze the continuity of mental representations of attachment and the social adjustment over time in children in Spanish residential units, comparing them with a control sample of children without adversity and institutionalization.

The sample consisted of 50 children who were living in residential settings in Spain and who were first studied when they were between 4 and 8 years of age. They were studied again at age 8-13 years. This group was compared with a group of 58 children living with their intact birth families and with no experience of maltreatment or separation (control group). The Story Stem Assessment Profile (SSAP; Hodges, Steele, Hillman & Henderson, 2003) was administered to explore children’s representations of attachment relationships. Social adjustment was analyzed with The Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997).

The findings indicated that the children in residential care showed less security and more insecurity, avoidance and disorganization than the control children. Moreover, they showed more behavioral problems than children from the control group. Four years later, many difficulties in the socio-emotional development of these children were still present and a good amount of differences with the control group remained significant. The socio-emotional difficulties of the children in residential care appear to be very static and the institutional context seems not to be adequate to promote a complete socio-emotional recovery after early adversity.
Entering the market - on the licensing of residential homes for children in Sweden

Wednesday, 14th September - 16:30 - Transitions to Adulthood from Care

Mr. David Pålsson (Department of social work, Stockholm University)

In Sweden, as in many other countries, residential care for children and adolescents to a great extent takes place in a care market, and a precondition for entering the market is a licence issued by the state. The aim of this article is to describe and analyse the output of and regulatory conditions for licensing in the Swedish residential care market. The theoretical point of departure is that licensing is a formative mechanism for the development of the supply side of residential care. The empirical material consists of an analysis of formal licence decisions and interviews with inspectors managing licences. The results show that the majority of the applicants were granted a licence during the year of the study and that the licensing system consists of a few stringent licensing standards which may form the basis for rejection. Further, the stringent standards are influenced only to a limited extent by knowledge generated from research on residential care and the applicants are granted a great deal of leeway as regards how to organise their work with the children in practice. The findings are discussed based on whether the current licensing system takes advantage of its potential and what it may entail for the residential care market at a broader level.
Differences between public and private logics when giving support in transition to adulthood

Wednesday, 14th September - 16:42 - Transitions to Adulthood from Care

Dr. Inger Oterholm (VID Specialized University)

Objectives

When a child is taken into care, the child becomes subjected to a public logic. The distinction between public and private ways of thinking is especially apparent when youths are leaving care, and this is the theme of my presentation. The aim of my presentation is to discuss implications of a dominant public logic when child welfare workers are planning for after care services. The presentation is based on my PhD research concerning the judgements of social workers regarding support for youth leaving care in Norway (Oterholm, 2015). When analyzing the judgments of social workers, the difference between public and private logics was a way of grasping the content of the social workers considerations.

In Norway the youth can be supported by Child Welfare Services until they reach 23 years of age. However, several young care leavers are only given support for a short period of time after turning 18, even though they often struggle with difficulties that could imply a need of further assistance.

Method

My study is based on qualitative interviews with social workers focused on their considerations regarding support for youth leaving care. Vignettes were used as part of the interviews. I interviewed social workers from Child Welfare Services and Social Services as well as young people who had left care. In this paper I only present data from the interviews with social workers in Child Welfare Services.

There are many ways of describing the difference between public and private logics. I have used the distinction between the concrete and the generalized other, described by Benhabib (1992), when analyzing the data. The relation towards the generalized other is dominated by formal equality and rights, and characterizes the public domain, while the relation towards the concrete other is dominated by the unique individual’s history, identity and feelings, and render the private domain.

Results

The analysis of the social workers judgement revealed an emphasis on their responsibility for youth in care, additionally; they described how they both tried to be flexible, and considerate of the individual’s situation and wishes. These considerations have similarities with a private logic. Concurrently, the social workers way of describing their decisions were dominated both by administrative language and how local routines had impact on possible support. In some instances such procedures made it impossible to get support after turning it down in the first place. These considerations point to a public way of thinking.

Another difference between private and public which were highlighted was the distinction between private and public relations while private relations are lasting, public relations are supposed to and are predetermined to end. Foster care is somewhere in between private and public logics. Even though the social workers tried to ensure that the youth had lasting relationships, they simultaneously, said they could not control the foster parent’s decisions.

Conclusion
The presentation discusses some of the differences between private and public support in the transition into adulthood, which are important to be aware of when taking children in to care, as well as when planning for after care services. Child Welfare Services are a public service which is obliged to follow rights and procedures, as well as take into consideration the concrete child’s best interest.

References

Extended childhood” and “extended parenthood” challenges in Norwegian Child welfare

Wednesday, 14th September - 16:54 - Transitions to Adulthood from Care

Dr. Ingunn Barmen Tysnes (Bergen University College), Dr. Riina Kiik (Norwegian University of Science and Technology (NTNU))

Aftercare and transition from the child welfare service to the social welfare service system, has in recent years been raised as a research theme in social work. In a broader perspective includes that also a focus on youths’ need of help and support from their parents in young adult years. The term “extended childhood” is one way to describe this phenomenon. If the youths shall have the opportunity to participate in such an extended childhood, it requires that someone is willing to undertake an “extended parenthood”.

Research from different countries indicates that youth who has been under care by the child welfare service seem to get less support form their own family and network than other youths.

In Norway are there few young people who receives support after twenty years of age, despite that the Law of Child Welfare Services opens for aftercare until twenty three years of age. In a time where the organization of public welfare is influenced by new public management has the services focused on effectiveness, cost and throughput. In a social work perspective is it interesting to look at the transition period, and the youth as service users in that period.

This presentation is based on a study of youths who have been placed in institution in accordance with section 4.24 regarding Law of Child Welfare Services, and their experiences with the transition from the institution to a more stable and independent state of living. The study is based on semi-structured in-depth interviews with seventeen youths about their experiences, and a review of documents from the county social welfare board case’s, as well as the child welfare documents following the county social welfare board case’s.

We will focusing of the terms “extended childhood” and “extended parenthood” and see how the child welfare services’ “decision-based parenthood” creates challenges regarding the youths’ wishes to engage in an extended childhood past the age of twenty. Finding from our study shows on the one hand the youths’ wish for continued support, and on the other hand, the ways in which the child welfare services choose to terminate this support. Youth who needs further support are transferred to the social welfare system (NAV).

Youth who have been placed in an institution in accordance with section 4.24 regarding Law of Child Welfare Services, will as a result of complex problems maybe meet greater challenges in the transition to adulthood compering with other young people who has been under care by the child welfare service. Meanwhile, will questions like how long the child welfare should be involved, and what kind of measures Child Welfare Services shall provide, be relevant for all children in Child Welfare Services as approaching eighteen years of age. Our analysis suggests that terms such as “extended parenthood” and “decision -based parenthood”, can be usefully implemented in the discussion of aftercare in the child welfare services.
Transition from school-based training in VET

Wednesday, 14th September - 17:06 - Transitions to Adulthood from Care

Dr. Marianne Dæhlen (Norwegian Social Research, Oslo and Akershus University College of Applied Sciences)

Purpose – To assess the drop-out rate among disadvantaged students within vocational education and training (VET). The article examines the probability of dropping out after school-based training for child welfare clients – a particularly disadvantaged group of youth. Child welfare clients’ drop-out rate is compared with students from a representative sample of their peers.

Design/methodology/approach – Average marginal effects (AME) were calculated from multinomial logistic regression models. Data were from public registries (n = 10,535).

Findings – The results show that differences in observed characteristics cannot explain differences in drop-out rates between child welfare clients and the majority peers. It is argued that this drop-out rate is likely a result of employers favouring apprenticeship applicants who are similar to them or that child welfare clients lack networks, which previous research has identified as crucial in finding an apprenticeship.

Practical implications – The results suggest a need for action targeting disadvantaged youths in the transition that follows school-based training.

Originality/value – The article adds to the very scarce literature on transition from school-based learning to apprenticeships.
Dimensions and Functions of Care Leavers’ Social Support Networks: Linking Early Adversity and Adult Outcomes

Wednesday, 14th September - 17:18 - Transitions to Adulthood from Care

Dr. Eran Melkman (University of Haifa), Prof. Rami Benbenishty (Bar-Ilan University)

Background and Objectives: Youth leaving substitute care are prone to experience multiple difficulties during the transition to adulthood due to their past adverse experiences and the limited resources they can rely on as they face the tasks associated with independent living. While their social network and the support it provides receive growing recognition as a central factor that can promote a successful transition, these have seldom been thoroughly examined in this context. This study explores characteristics of the social support network of care leavers and examines their mediating effects in the link between past negative experiences and current functioning and well-being.

Methods: The sample consists of 345 Israeli care-leavers (52.2% females, mean age 20.78; SD = 1.78) who were formerly placed in child welfare foster (12.8%) or residential care (44.9%), or educational residential facilities (42.3%). At the time of the study they were in a range of living arrangements: independent, supported group in the community, and with parents. The young people responded to standardized self-report questionnaires administered by the researchers face-to-face or via phone. Measures included: structural network characteristics (e.g., size) and qualitative network characteristics (e.g., adequacy) examined vis-à-vis several types of social support (i.e., emotional, practical, and guidance; an adapted version of the SSNQ); childhood and adolescent negative life events (i.e., household dysfunction, abuse and adverse experiences while in care); measures of well-being (BSI-18; = 0.91; loneliness, R-UCLA-LS, = 0.94; life satisfaction, SLSS, = 0.84), and functioning (adjustment to work or military service, SAAQ, = 0.85; accommodation and economic hardship).

Findings: Structural equation modeling (SEM) provided support for the mediating role of social support in the relationship between early adversity and adult functioning and well-being. This was true across the three types of supports examined: emotional (χ²(170) = 285.36; CFI = .96; TLI = .94; RMSEA = .04; SRMR = .04), practical (χ²(170) = 290.68; CFI = .96; TLI = .94; RMSEA = .05; SRMR = .04), and information and guidance (χ²(170) = 288.32***; CFI = .96; TLI = .94; RMSEA = .05; SRMR = .04).

Thus, network size, frequency of contact with its members, satisfaction with support, and network adequacy, were all negatively related to early adversity, and in turn contributed to multiple domains of functioning and well-being. The youth’s perception of having enough people to rely on for support (network adequacy) was the most powerful predictor of outcomes. While patterns were similar across the types of support, the effects of practical and information and guidance support were most substantial.

Conclusions: This study is the first to examine the role of social support network characteristics in the relationship between early traumatic experiences and adult outcomes, while distinguishing between various types of support, and distinguishing within each type between structural and qualitative attributes of the network.

The findings suggest that the detrimental long-term consequences of early adversity on adult outcomes are related not only to an impairment of structural aspects of support, such as the extent of its availability, but also to a decrease in youth’s own ability to recognize available support and mobilize it. For care leavers transitioning to adulthood, the role of practical and information and guidance supports, rather than that of emotional support, are critical in such processes.
International perspectives, practices and programmes on safeguarding very young children from abuse and neglect

Prof. Harriet Ward (Loughborough University)

The purpose of the symposium is to explore issues concerning the point at which the state should intervene when there are serious concerns about the abuse and/or neglect of very young children. Such issues range from evidence concerning the life trajectories of children identified within their first few years as being at high risk of significant harm, to interventions designed to help parents overcome the difficulties that place their children at risk and those aimed at helping very young children overcome the consequences of experiencing maltreatment in the early years.

The questions the symposium explores are not so much about when and whether these very young children should be placed for adoption (although some papers will touch on this), but much more broadly about how abuse and neglect can be prevented and how parents as well as foster carers and adoptive parents can be helped to support these very vulnerable infants in such a way as to reduce the likelihood of their developing the serious emotional and behavioural difficulties that so many studies have identified.

The symposium will begin with papers from the USA and France presenting corroborating evidence from two longitudinal studies that have traced the developmental trajectories of children who experienced abuse and neglect in infancy, and have identified how early adversity has shaped their subsequent development. This evidence also replicates findings from studies in England and Australia. Papers from England and the USA will then explore interventions designed to help parents overcome the difficulties that place their children at risk of significant harm and provide nurturing homes for them (through the Family Drug and Alcohol Court and the Parents under Pressure Programme). Finally an intervention designed in the USA and currently being implemented in England, designed to help both birth parents and foster carers promote supportive interactions between carers and abused and neglected infants (TEND) will be presented.
**Status At Birth, the Risk of Contact with Child Protection Services, and Developmental Trajectories**

*Wednesday, 14th September - 16:42 - International perspectives, practices and programmes on safeguarding very young children from abuse*

Dr. Fred Wulczyn (Chapin Hall at the University of Chicago), Dr. Lijun Chen (Chapin Hall at the University of Chicago), Ms. Kerry Price (Chapin Hall at the University of Chicago), Ms. Keunhye Park (Chapin Hall at the University of Chicago)

In many countries around the world, the risk of contact with child protective services is greatest among children under the age of one. In that age group, children under the age of 3 months are at even greater risk. For example, in the U.S., children under the age of 1 account for between 1-in-5 and 1-in-3 admissions to foster care. Of these admissions, as many as 40 percent may be below the age of 3 months. In some places, the latter figure is even higher.

Because infants represent a developmentally unique sub-population, it is important that child protection systems respond appropriately to the underlying family-based risks and longer-range developmental risks. Without that knowledge, the design of appropriate prevention services and other interventions is that much more difficult.

In the paper, we attend to these issues using a unique data set of birth records that have been linked to child protection and foster care records. These data provide a detailed view of who, among children born, is most likely to have contact with the child protection system (CPS), of those children who is most likely to enter foster care, and of children placed who is most likely to return home or be adopted. Because the birth records contain information about the biological parents (though mostly about the mother) and the child’s wellbeing at birth, the data provide a comprehensive overview of factors associated with whether a child comes to the attention of the child protection system.

To these data, we add findings from the National Survey of Child and Adolescent Wellbeing (NSCAW), a nationally representative survey of children in contact with the child protection system in the US. With 5 waves of data collection and an oversample of infants, NSCAW represents the best source of data pertaining to the long term outcomes of children served by child protection agencies.

Findings prepared for the presentation focus on these three areas. With respect to whether a child is reported to child protection services, we focus on two domains of interest: mother’s background including age, educational status, and use of prenatal care and child characteristics including birth-weight and APGAR scores. We use these data to understand the risk of contact with CPS. Among children in contact with child protection services, we use the same data to understand who will enter foster care and who will leave foster care. Of those who enter foster care, we are particularly interested in adoption. Children who are adopted leave the foster care system with a new set of legal parents.

With the NSCAW data, we broaden our view of CPS involvement by considering developmental outcomes for these groups: children who were at home across all waves of data; children who spent some time in foster care and some time at home (e.g., children placed and reunified); and children who were adopted divided into groups based on the timing of the adoption. As for developmental measures we focus on language development and measures derived from the Batelle Developmental Inventory (BDI). From these data, we identify developmental trajectories that examine wellbeing over the early life course.
With regard to the risk of CPS involvement, the results point to the importance of prenatal care and lifestyle choices on the part of the mother. From a developmental perspective the results reinforce the importance of the home as context for development. The paper concludes with a discussion of policy and practice implications.
Developmental trajectories of children who have experienced abuse in infancy: The Saint-Ex study

Wednesday, 14th September - 16:54 - International perspectives, practices and programmes on safeguarding very young children from abuse

Dr. Rousseau Daniel (Service de pédopsychiatrie CHU 49100 Angers - France)

Developmental trajectories of children who have experienced abuse in infancy: The Saint-Ex study

Introduction

This study traced the long-term outcomes for a cohort of French children who were abused or neglected in infancy and placed in long-term care. A specific feature of the care system in France is that children placed in out of home care are rarely adopted, but remain in foster or residential homes throughout their childhood.

Aim

The purpose of the study was to identify factors related to long term outcomes for children who had been abused or neglected in infancy before being placed in care.

Methods

The Saint-Ex study has been able to describe the outcomes of 129 children who were taken into care between 1994 and 2001, before their 4th birthdays and were followed until they reached the age of 21, keeping track of every one of them.

Comprehensive data has been collected on over 280 variables throughout children’s trajectories and includes: pregnancy and birth data, monitoring before admission into care, circumstances of placement, succession of placements, and then, social, educative, administrative, medical, judicial follow-ups, schooling, specialised education, economic and sometimes criminal follow-ups. It also covers some aspects that have not been previously explored such as experience of specialised medical and social education, of the criminal justice system, hospitalisation admissions and psychiatric care, evolution of the quality of the relationship between parents and child over time, medical and economic costs.

Findings

At admission many children displayed evidence of poor physical and mental health. Many came from turbulent families showing factors such as parental mental health problems and numerous children placed in care. The findings revealed that all children benefited from their placement. For some it simply saved their lives. However, they went on to follow contrasting pathways.

The principal finding was that one in four children suffered from debilitating pathologies in adulthood. They suffered from psychological and/or psychiatric disorders and social maladjustment, and developed a dependency on social welfare. In contrast, another 25% who suffered from somatic and still reversible psychological disorders, had more positive outcomes. Their medical and financial costs were less than half those of the preceding group. The remaining 50% presented psychological problems and difficulties of adaptation when adults, but did not suffer from de-socialisation. Three quarters of the children who became adults presented psychological and/or psychiatric disorders, amongst which, a quarter suffered from debilitating pathologies. The quality of the outcome was statistically linked to early intervention and satisfactory management. It was inversely proportionate to the seriousness of the risk to which the child has been exposed.
Conclusion
Some children who experience maltreatment and/or are taken into care at a very young age show positive developmental outcomes. Pejorative trajectories can be avoided and could be considerably minimised with better screening and early intervention. The study shows that, for some of the children, placement was not enough to reverse the destructive processes at play, while for others, it addressed the needs for personal fulfilment. The results of the Saint-Ex study are all the more relevant as they consider the outcomes of very young children, who are more vulnerable to maltreatment and separation, who may experience a long succession of placements under Child Protection Services. The benefits and harmful effects of the latter remain controversial issues. One of the limitations of the Saint-Ex study was the absence of a control group made up of children close to the cohort in terms of their living circumstances, but who have never been taken into care, or were taken into care at a later stage.
Preventing Maltreatment in Substance Dependent Parents of children under 2.5 years

Wednesday, 14th September - 17:06 - International perspectives, practices and programmes on safeguarding very young children from abuse

Prof. Jane Barlow (University of Warwick), Ms. Sukhi Sembhi (University of Warwick), Ms. Gwynne Rayns (NSPCC), Dr. Richard Cotmore (NSPCC), Prof. Sharon Dawe (Griffith University)

Background: Many babies in the UK are born to drug-dependent parents, and dependence on psychoactive drugs during the postnatal period is associated with high rates of child maltreatment, with around a quarter of these children being subject to a child protection plan. Parents who are dependent on psychoactive drugs are at risk of a wide range of parenting problems, and studies have found reduced sensitivity and responsiveness to both the infant’s physical and emotional needs. The poor outcomes that are associated with such drug dependency appear to be linked to the multiple difficulties experienced by such parents.

Aims: This study evaluates the effectiveness of the Parents under Pressure (PuP) Programme (Dawe and Harnett 2007), which is an international intervention that provides intensive support to this group of parents.

Methods: A multicentre randomised controlled trial using a mixed-methods approach to data collection and analysis. The study is being conducted in six family centres across the UK, and targets primary caregivers of children less than 2.5 years of age who are substance dependent. Consenting participants are randomly allocated to either the 20-week PuP programme or to standard care. The primary outcome is child abuse potential, and secondary outcomes include parent-infant/toddler interaction, substance use, parental mental health and emotional regulation, parenting stress, and infant/toddler socio-emotional adjustment.

Results: We will present the preliminary findings of the study in terms of the key maltreatment data, and demonstrate outcomes using videoclips that have been coded using the CARE-Index.

Discussion: This paper will examine the PUP model of working in contrast with other models that have recently been evaluated with this group of parents, and its effectiveness in reducing maltreatment.
Can a family drug and alcohol court in care proceedings help prevent substance misuse relapse and reunification breakdown? Lessons from a follow-up study

Wednesday, 14th September - 17:18 - International perspectives, practices and programmes on safeguarding very young children from abuse

Prof. Judith Harwin (Brunel University London), Dr. Bachar Alrouh (Lancaster University), Dr. Lily Golding (Brunel University London), Ms. Tricia Mcquarrie (Brunel University London), Dr. Stephen Swift (Brunel University London), Ms. Mary Ryan (RyanTunnardBrown), Ms. Jo Tunnard (Brunel University London), Prof. Karen Broadhurst (Lancaster University)

Background

In 2008 the first Family Drug and Alcohol Court (FDAC) in care proceedings in England was opened. Adapted from an American model of problem-solving courts, FDAC differs radically from ordinary care proceedings because it treats as well as adjudicates. Its main aims are to help parents stop misusing drugs and alcohol so that they can be reunited safely with their children. If that is not possible, the goal is to place the children in an alternative permanent family swiftly.

A number of key features distinguish FDAC from ordinary court. First, a multidisciplinary team assesses and treats parents, links them to community services and advises the court on their progress. Second, the judge plays a problem-solving role, meeting the parents fortnightly to build motivation and remind parents of their responsibilities and consequences of failure to address difficulties. These review hearings, which take place without lawyers, are the therapeutic component of FDAC. Parents in ordinary proceedings do not talk directly to the judge and lawyers attend all hearings.

The case to develop FDAC was strong because research indicates that 60%-70% of all care proceedings involve parental substance misuse and further returns to court are common. Outcomes for both parents and children are frequently poor. The impacts on family justice and children’s social care are particularly detrimental, but repercussions on the health and criminal justice sectors are also significant. The growth of FDACs has been substantial and today a number of sites across England are implementing the FDAC approach, supported by an FDAC National Unit. The long term objective of the President of the Family Division and Head of Family Justice is to embed FDACs across England.

Evaluation of FDAC

FDAC has been evaluated by Brunel University London from its inception http://www.mufieldfoundation.org/evaluation-pilot-family-drug-and-alcohol-court. The research has used a mixed-methods methodology comparing outcomes of cases in the three FDAC pilot authorities with cases from three comparison authorities which went through ordinary care proceedings.

Results

In this talk, we will present findings from the three/five year follow-up of FDAC and comparison cases and discuss their implications.

Discussion

Key issues for the discussion will be the contribution of the problem-solving court model in effecting change, the sustainability of reunification and the role of supervision orders to supporting these very vulnerable families.
The central question is the extent to which the FDAC model can intercept the cycle of harm resulting from parental substance misuse and associated psychosocial problems and prevent recurrence of child maltreatment and neglect. The discussion also aims to promote debate on European approaches to tackling serious child maltreatment resulting from parental substance misuse where the appropriateness of reunification or child removal is the key issue.
TEND: A New Group-Based Evidence-Informed Programme to Support Carers of Young Foster Children

Wednesday, 14th September - 17:30 - International perspectives, practices and programmes on safeguarding very young children from abuse

Prof. Philip Fisher (University of Oregon), Ms. Helen Jones (-)

Early childhood is increasingly understood as a particularly vulnerable period of development. In addition to the fact that there is an extensive amount of brain development that occurs during this time, young children are highly dependent on parents or parent figures to support their emotional and cognitive development, and to buffer them against stress (Shonkoff, Boyce, & McEwen, 2009). As such, children who require placement in foster care due to parental neglect and maltreatment during early childhood are at especially high risk for poor health, educational, and mental health outcomes. Evidence-based programmes do exist to address the needs of young foster children. In particular, Attachment and Biobehavioral Catch-up (ABC) is an attachment-based intervention designed for foster infants and toddlers (Dozier, Lindheim, & Ackerman, 2005). Treatment Foster Care Oregon for Preschoolers (TFCO-P) is a social-learning intervention for children ages 3-6 (Fisher & Gilliam, 2012). Both programmes have been shown to have positive impacts on reducing the effects of early adverse experiences, both during the time they are in care and afterwards (Fisher et al., 2006). However, these programmes were originally developed to fit the context of the foster care system in America. Although there have been some efforts to adapt existing evidence-based interventions in the context of other countries (e.g., Roberts, 2007), the effectiveness of these approaches and their long-term sustainability outside of America at present unclear. In this paper, we describe an alternative strategy, involving an international collaboration between programme developers in America and England to create a programme that is specific to the English foster care context. The group-based programme, called TEND, contains intervention strategies that are based on social learning theory (Price et al., 2009) and that many studies have previously proven to be effective; however, in developing the TEND programme, it was also necessary to consider the how these concepts may be understood in terms of attachment theory (which is an influential model in England), and in terms of the specific demographics (age, education) of English foster carers. In this presentation, we will describe the process by which TEND was developed and implemented, and describe the programme components and intervention strategies.

References


Cost-effectiveness and evidence-based youth policy

Wednesday, 14th September - 16:30 - Cost-effectiveness and evidence-based youth policy

Prof. Tom Van Yperen (Netherlands Youth Institute (NJI)), Dr. Louise Morpeth (Dartington Social Research Unit)

Main content:

Children are frequently referred to services due to concerns from parents or teachers about their behavior or well-being, but how do we know that these services are effective in reducing these problems? Take a hypothetical service that offers help to 250 families at a total cost of 5 million Euros each year. How do we determine whether this is a good use of taxpayers’ money? Will the effects of the service lead to savings for the taxpayer or monetary benefits for the child in the long run? The economic crisis has made these questions highly relevant, from a political as well as from an ethical point of view. The cost-effectiveness of services (i.e. the ratio between the costs of a service on the one hand and its effectiveness on the other) has become an important issue in the allocation of scarce resources. However, this field of research is complex and is still in its infancy in the area of children’s services.

This mini symposium focuses on a variety of methods to evaluate the effectiveness, cost-effectiveness, and cost-benefit of services for children and young people. In an international collaboration between the Netherlands Youth Institute (NJI), Dartington Social Research Unit (DSRU), and Maastricht University efforts are being made to define concepts, develop models for the evaluation of costs and benefits of services, and bring these models into practice. We would like to share this work and discuss how to assess the costs and benefits of competing investment options in children’s services and how to make better informed decisions about strategies, investments and services for children and young people.
Literature review of the state of the art of cost-effectiveness research in youth care: the Dutch case

Wednesday, 14th September - 16:42 - Cost-effectiveness and evidence-based youth policy

Ms. Ingrid Kremer (Maastricht University), Ms. Daphne Kann (Netherlands Youth Institute (Nji)), Dr. Germie VandenBerg (Netherlands Youth Institute (Nji)), Prof. Carmen D Dirksen (Maastricht University Medical Center), Dr. Mickaël Hiligsmann (Maastricht University), Prof. Sylvia M A A Evers (Maastricht University; Trimbos Institute)

Background. In the Netherlands municipalities are responsible for the organization of youth care and for decisions regarding the purchase of interventions. The effectiveness and cost-effectiveness of available interventions are therefore of importance to inform policy making. Cost-effectiveness has received even more emphasis, due to the reorganization in the policies concerning Dutch youth care.

Although knowledge about effectiveness of interventions is considerable, knowledge about cost-effectiveness of these interventions seems to be limited. Studies on cost-effectiveness of interventions - in which the differences in effects and costs between two or more interventions are evaluated - provide information whether the intervention of interest would be preferred compared to a comparative intervention.

Objective. A systematic literature review was performed to evaluate the current knowledge about cost-effectiveness of interventions in youth care in the Netherlands and to assess the quality of the economic evaluations. The literature review focused on psychosocial, preventive interventions for physical, social, cognitive or psychiatric developmental disorders or the (pharmaceutical) treatment of psychosocial and psychiatric disorders of the child.

Methods. Medline (Pubmed), Centre for Reviews and Dissemination Database, and PsycINFO were searched, complemented with specific Dutch databases. Completed, ongoing and planned studies were included. Information about characteristics of all included studies was collected by one researcher and checked by a second researcher on specific items. In addition, completed, full economic evaluations were assessed on their methodological quality with the Consensus on Health Economics Checklist (CHEC) - Extended by two researchers. The CHEC-Extended consists of characteristics of economic evaluations that determine whether the results of a cost-effectiveness analysis are methodologically sound. Examples of these characteristics are the perspective taken, which determines the costs that are included in the analysis; how the amount of costs and effects are measured and valued; whether sensitivity analyses are performed to assess the robustness of the results; and whether the conclusion is based on the results.

Results. In total, 47 studies were identified in this literature review. Of these, 18 studies were completed, full economic evaluations and where assessed on their methodological quality. Another three studies were cost-analysis studies. 10 studies described the study design in a scientific article, and 16 studies were found that had not published their design or results in a scientific journal. There was large heterogeneity in the study populations and interventions that were evaluated. Examples of study populations are children with anxiety (n=6), behavioral problems such as aggression or criminal behavior (n=6), ADHD (n=4), obesity (n=2) and children in the general population (n=9). Often evaluated interventions are cognitive behavioral therapy and interventions that focus on the child’s primary caregivers or his/her whole system. Conclusions about the cost-effectiveness of the studied interventions differed across the types of intervention. Most of the completed, full economic evaluations scored above 70% (n=15) of the maximum number of points for methodological quality. Seven of these studies scored above 80% and could therefore be considered as examples of good...
quality economic evaluations. In general, the items on which some studies could improve were precise formulation of the research question, descriptions of the interventions compared, the measurement of the amount of resources used and methods for calculating costs, performing elaborate sensitivity analyses and disclosing conflict of interests.

Conclusions. The current knowledge about the cost-effectiveness of interventions in youth care is limited with only 18 studies published in scientific journals, while this knowledge is important for decision making regarding the allocation of scarce resources. We note that the extra investments of performing a good quality economic evaluation alongside an RCT are relatively low. Not collecting data about resource use in an RCT studying the effectiveness of interventions is a missed opportunity.
Cost-effectiveness and evidence-based youth policy: Steering on social impact

Prof. Tom Van Yperen (Netherlands Youth Institute / NJi)

Introduction - The cost-effectiveness of many services is unknown. Because the demand for services is growing, whereas budgets are cut, the issue how to enhance the cost-effectiveness of Child and Youth Care is urgent in day to day politics and practice. The NJi developed a working model that helps breaking down this issue into different aspects that - within the financial boundaries - need attention in youth policy making as well as in practice. One element of this model is the use of large databases to monitor the quality of life and the epidemiology of problems and disorders of children and adolescents. Another element is focusing on the ex ante effectiveness (‘what works’) of services and professionals, as well as monitoring their outcome in terms of social impact, drop out, client satisfaction, goal attainment, and significant improvement of functioning. Main assumption of this model is that the cost-effectiveness of policy and practice can be improved by using a quality cycle that is fed with information on epidemiological data, the ex ante effectiveness of services, and the outcome of these services.

Objective – This study was to shed a light on the validity of the assumption of the model.

Method – The model was derived from existing quality cycles that aim to improve professional practices and youth policy, such as ‘Diagnostic and treatment Cycle’ (at the level of the individual professional and client – the primary process), the ‘The Breakthrough Series’ (at the level of teams and organizations), and ‘Communities that Care’ (at the local level of youth policy – the municipality). We studied the literature on the effects of the quality cycles – especially on the outcomes - at the different levels.

Results – Although the quality of many studies is limited, there are clear indications that at the level of the primary process the use of outcome monitoring leads to a better outcome. Hardly any information is available about the effects on the costs. It is possible that costs increase due to the use of monitors and clinical tools, and decrease due to more effective services. Moreover, most studies pertain to adult outpatient health care and may not be representative for the child and youth care. At the level of teams and organizations, there are many anecdotal examples of quality improvements using the Breakthrough Series. A qualitative review performed in 2003 showed that the effects can be impressive, but show a lack of sustainability. Moreover - to our knowledge - the Breakthrough method has seldom been used to enhance the outcomes of child and youth care at the level of teams and organizations. At the level of the local youth policy, a quasi-experimental study has shown virtually no effect of ‘Communities that Care’.

Discussion – In all, the assumption of the model cannot be validated. The positive results in mental health care may show the reasons why the quality cycle in teams and municipalities may not lead to sustainable improvements. (1) At the team and organizational level improvements may not sustain due to turnover in personnel and staff, and a lack of external incentives to keep the performance high. (2) At the level of local policy, success was only monitored by using epidemiological data. The participating organizations were neither asked to verify the quality of their activities, nor to monitor their outcome in terms drop out, client satisfaction, goal attainment, and function improvement.

More research is needed to investigate the mechanisms of the model. The focus in these studies should be on the importance of incentives and the connection between the quality cycles at the different levels.
Towards standardization of economic evaluations in the field of youth: setting a research agenda

Wednesday, 14th September - 17:06 - Cost-effectiveness and evidence-based youth policy

Prof. Carmen D. Dirksen (Maastricht University), Prof. Sylvia M. A. Evers (Trimb)

Introduction – Stakeholders are increasingly interested in the societal impact of psychosocial interventions in the youth sector, in terms of costs and quality of life, next to outcomes research. As a result, there is an increasing attention for economic evaluations in the field of youth. Methods and instruments which are used in economic evaluations have however traditionally been developed for the somatic (health) care and moreover for an adult population, making it challenging to perform economic evaluations in the sector youth.

Objective – The aim of this broad consultation is to reach consensus regarding the steps which have to be undertaken, in order to set a research agenda which will lead to further methodological development and standardization of economic evaluations in the sector youth.

Method – The broad consultation consisted of an 8 step procedure, including the conceptualization of a consultation document consisting of a scoping review of (mainly) international opinion literature and an inventory of existing Dutch guidelines and manuals for economic evaluation, a written consultation procedure among a broad range of stakeholders; and a consultation meeting with these stakeholders. In the consultation document, the methodological issues and challenges emerging from the scoping review, as well as potential solutions for these issues and challenges offered by existing guidelines and manuals, have been categorized by framing aspects. In the written consultation procedure and in the consultation meeting, stakeholders have been asked to rank a maximum of the ten most important methodological issues and challenges for economic evaluations in the sector youth in order of importance, and to provide possible solutions or directions for research.

Results – In total 21 documents (18 articles, 1 white paper, 2 conference proceedings) were included in the scoping review. A total of 22 stakeholders have participated in the written consultation procedure and another 21 stakeholders have participated during the consultation meeting.

The methodological issues and challenges which were ranked top 5 by the stakeholders are 1) outcome measurement, 2) outcome identification, 3) cost valuation, 4) outcome valuation, and 5) time horizon / analytical approach. The existing guidelines and manuals provided guidance for some, but not all, issues and challenges. For the outcome side of the economic evaluation normative questions have been posed such as: what is the goal of psychosocial care for youth which the outcome(s) should comply with, and whose values count when obtaining preference weights for the outcome? Furthermore, respondents urged that they needed instruments specifically developed for youth to perform economic evaluations, such as instruments to measure costs, preference based instruments to measure quality of life, and cost prices (for education, social care, and justice).

For other methodological challenges overall consensus has been revealed, which are in line with the existing guidelines. For instance, regarding the perspective most stakeholders agreed on that economic evaluations should be, in principle, performed from the broad societal perspective, and regarding the type of economic evaluation that the cost-utility analysis is preferred. For the time horizon the stakeholders agreed that a long term time horizon is needed, but that in order to do so, more research is needed looking at the relationship between intermediate short term outcomes and long term final outcomes.

Discussion – This broad consultation has led to a research agenda which will in the long run lead to the standardization and methodological improvement of economic evaluations in the sector youth.
Evaluating the costs and benefits of services for children in the UK

Wednesday, 14th September - 17:18 - Cost-effectiveness and evidence-based youth policy

Dr. Gretchen Bjornstad (Dartington Social Research Unit), Dr. Nick Axford (Dartington Social Research Unit), Dr. Louise Morpeth (Dartington Social Research Unit)

Objectives
The Investing in Children project at the Dartington Social Research Unit (DSRU) aims to estimate the financial benefits of interventions for children from prevention to treatment and over the child’s lifetime. This project centres around a cost-benefit analysis (CBA) model that utilises evidence from trials of interventions, longitudinal studies of long-term outcomes, and real data on public spending and earnings. It works across four different policy areas - ‘Child protection’, ‘Child and adolescent mental health’, ‘Education’, and ‘Criminal justice’. Its primary objective is to indicate to policy makers or commissioners of children’s services the types of interventions they should invest in for good economic and social returns.

Method
The CBA model is used to forecast the monetary benefits that can be expected over a child’s lifetime if they or their family receive a particular intervention. The DSRU has adapted this model for the UK from the benefit-cost model developed by the Washington State Institute for Public Policy (WSIPP). The starting point in the calculations of benefits is an effect size from all comparative studies of an intervention that meet a quality threshold. To be cautious, potential bias in the studies is addressed by adjusting the effects to estimate what can realistically be expected in real-world implementation in a new context. Failure to do this risks overestimating economic benefits.

The CBA model applies the effect sizes to the base rates of outcomes that can be expected from cohort studies to be found in the relevant populations in the UK, such as crime rates, educational attainment, mental health problems, and out of home placement of children. The amount of change in these outcomes that is expected is then calculated and monetised based on the probability of use and costs of public services, likely effect on earnings, and other relevant monetary effects. The assumptions about the effects on these monetary outcomes are based on real research and data, such as the evidence for how much more people with mental health diagnoses access health services and how much less they are likely to earn in the UK than those without the same diagnoses.

All components of this complex model were considered for relevance to the UK context. The overarching assumptions were maintained, as were some of the actual figures, such as the estimate of programme effect sizes and the links between short- and long-term outcomes for children. For the majority of the model, however, the inputs were replaced to provide forecasts of benefits for the UK.

Results
The results from the CBA model are presented in terms of the benefits to the public sector, to the participant (the child and his/her family), and to society in general. The combination of multiple policy areas facilitates the analysis of interventions across different sectors. It can therefore give an indication of how different sectors might work together. In particular, when an intervention delivered in one sector is found to be likely to save money across multiple sectors, a case can be made for cross-sectoral commissioning.

Conclusions
Over 70 interventions for children have been analysed for this project and the results provide details about the costs and how the benefits accrue for each sector and for participants, the taxpayer, and wider society. The results are presented on a searchable website that allows users to compare interventions for similar populations, policy areas, and target outcomes (http://www.investinginchildren.eu). Details about the methodology and example results will be presented.
Mapping expenditure in children’s services: a method and findings from one region

Wednesday, 14th September - 17:30 - Cost-effectiveness and evidence-based youth policy

Ms. Frances Kemp (Dartington Social Research Unit), Ms. Anam Raja (Dartington Social Research Unit), Ms. Cassandra Ohlson (Dartington Social Research Unit), Dr. Louise Morpeth (Dartington Social Research Unit), Dr. Nick Axford (Dartington Social Research Unit)

Introduction: Across Europe many states are experiencing severe pressures on public services, both from escalating need and from diminishing budgets. As a result there is increasing interest in understanding how much is spent on services for children, and, importantly, to what effect. In spite of a requirement in Article 4 of the UN Convention on the Rights of the Child for states to establish a children’s budget, progress has been slow.

Objective: As part of an approach to help public systems working with children increase their investment in evidence-based prevention and early intervention, the Dartington Social Research Unit has developed a method of mapping expenditure across all parts of children’s services (education, social care, health, youth offending, early years). The aim is to: provide a strong foundation for discussions about the balance of expenditure (prevention, early intervention and treatment); identify opportunities for de-commissioning; and determine the extent to which money is spent on evidence-based interventions. In response to a request from the Northern Ireland Commissioner for Children and the Atlantic Philanthropies, the method was applied for the first time at a regional level. Previously it had been used only at local authority level.

Method: All government departments with an interest in children agreed to participate in the study. The research team worked closely with finance officers and department managers to analyse expenditure from the financial year 2012-13. Departments were asked to complete a series of fact sheets which then formed the basis of a series of interviews by the research team to test and clarify responses. Data were collected on: expenditure on services for all children and young people; service use (i.e. the number of children using or benefiting from the service); levels of staffing; unit cost of services (where possible); the level of intervention (universal prevention, target early intervention or treatment/intervention for high level needs); and the use of ‘evidence-based programmes’. The analysis was shared with participating departments before being collated for publication. The research was undertaken in 2014 and 2015.

Results: The Northern Ireland government spent £2.28 billion (22% of the total public expenditure controlled by the Northern Ireland government) on services for the 432,000 children and young people in Northern Ireland. The majority of this expenditure was overseen by the Department of Education (72%) and the Department of Health, Social Services and Public Safety (21%). Just under one-fifth (19%) of expenditure funded treatment or maintenance services. The government departments had not directly funded or commissioned any evidence-based programmes.

Discussion: Despite it being an expectation of the UNCRC, few states are routinely producing a children’s budget. This study encountered a range of organisational barriers while undertaking the work, which would likely be encountered in other jurisdictions and may explain the slow progress. Data held at departmental level provided good insight into what was spent, but much less on how, and although extensive follow-up was undertaken, full interpretation of all budgets was not possible. That said, the work provides a valuable baseline in terms of total expenditure and the balance of expenditure on prevention and early intervention. The region has benefited from a 10-year investment in evidence-based approaches by the Atlantic Philanthropies and it is hoped that it will
have stimulated a long-term investment in such activities by government. A repeat of this exercise in two or more years would provide a valuable insight into the impact of philanthropic investment on government expenditure.
Evaluation of a behavioural training program for foster parents

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Frank Van Holen (Vrije Universiteit Brussel), Dr. Femke Vanschoonlandt (Vrije), Prof. Johan Vanderfaellie (Vrije Universiteit Brussel), Ms. Skrallan De Maeyer (Vrije Universiteit Brussel)

Objectives
Evaluation of a behavioural training program for foster parents caring for young foster children with externalizing problem behaviour.

Method
A RCT was conducted: using restricted randomization (minimization), 63 out of 77 eligible foster parents of foster children (ages 3 – 12) with externalizing problem behaviour were assigned to an intervention group (n = 30) and a treatment as usual control group (n = 33).

The intervention group received a foster parent intervention based on the social-interactional model, including ten home-sessions (see: Vanschoonlandt, Vanderfaellie, & Van Holen, 2012).

Foster mothers filled out a questionnaire prior to the start of the intervention, immediately after the intervention, and at follow-up three months later.

Measures regarding behavioural problems (Child Behavior Checklist/6-18, Achenbach & Rescorla, 2001) in the foster child, and parenting stress (Nijmeegse Vragenlijst voor de Opvoedingsituatie, Wels & Robbroeckx, 1996) and parenting practices (Ghent Parental Behaviour Scale, Van Leeuwen & Vermulst, 2004) in the foster mother were assessed.

Intention-to-treat and analysis of covariance were used to analyse outcomes.

Results
Regarding foster children’s problem behaviour (PB), although not significant, small positive trends favouring the intervention group were reported at treatment completion (internalizing PB: d = .45; externalizing PB: d = .26; total PB d = .45), increasing to large significant effects at follow-up (internalizing PB: p < .001, d = .88; externalizing PB: p = .003, d = .84; total PB: p < .001, d = 1.08). Furthermore, a significant decrease in parenting stress with medium effect size was found at both treatment completion (p = .03, d = .54) and at follow-up (p = .02, d = .72). Regarding parenting practices, a significant increase in positive parenting (with medium effect size) favouring the intervention group both at treatment completion (p = .02, d = .53) and at follow-up (p = .04, d = .46) were found. A significant decrease in harsh punishment (with medium effect size) in the intervention group after treatment completion (p = .03, d = .54), decreased to a non-significant positive trend at follow-up (d = .46).

Conclusions
The intervention showed to be very promising, leading to a reduction of foster children’s behavioural problems and foster parents’ parenting stress and to an increase in effective parenting behaviour.

References


Characteristics of children placed in foster care, family-style group care and residential care: A cross-sectional study

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Harmke Leloux-Ophem (Horizon Youth Care and Special Education), Dr. Chris H.Z. Kuiper (Horizon Youth Care and Special Education), Prof. Evert M. Scholte (Leiden University)

When risky family-circumstances and development-threatening child characteristics cannot be addressed at home, out-of-home placement is considered to be a useful strategy. However, to reduce the risk of a breakdown and of poor prognostic placement outcomes, a better insight into the child, family, care history, and social-cultural characteristics at admission in the three main settings of out-of-home care (foster care, family-style group care, and residential care) is needed. A cross-sectional study is conducted to explore similarities and differences in characteristics at admission of 200 Dutch school-aged children who were placed in foster, family-style group, and residential care. Data are collected through questionnaires for the children’s carers, substitute caregivers, and behavioral scientists. In addition, case file information is used. To systematically report similarities and differences in characteristics at admission of the children in the three main settings of out-of-home care, an adaptation of the developmental framework of Kerig, Ludlow, and Wenar (2012) is used. Results show severe developmental and family problems in all out-of-home placed children. However, several remarkable differences in characteristics at admission are found. This indicates that the three types of out-of-home care serve children with different needs.

In the poster presentation, the main findings will be presented, in particular focusing on the remarkable differences between children in foster care, family-style group care and residential care.
How can child research networks reach global audiences? – Policy makers, professionals and caregivers? An example.

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Niels Peter Rygaard (CEO Fairstart Foundation, www.fairstartglobal.com)

The presentation aims to inspire colleagues in applying their research, using the powerful mix of online based programs and local training to spread child research to audiences worldwide.

Urbanization, migration and conflict cause millions of children to live in fugitive camps, orphanages, and foster care systems, in numbers overwhelming government monitoring and care education systems. At the same time, divorce rates are soaring while birth rates in Western countries drop, making governments downsize child care budgets in spite of research documentation. This situation challenges the research community to create large scale early interventions: how can networks of researchers offer free care training programs, used by governments, NGOs, and frontline staffs? The presentation gives an example.

Gathering a network of international researchers in children without parental care since 2006, presenter designed online caregiver training programs for orphanage staff and foster care groups, first tested and implemented in two European Union projects 2008-2012. Later spreading to Asia and Latin America via the e-learning site www.fairstartglobal.com. Now also creating training programs for preventing parents abandoning children, and community strengthening programs (for SOSChildren’s Villages) in Cambodia. So far, the programs are in sixteen language versions, inspiring professionals in recipient countries, and the caregivers and managers of 25,000 children have been trained. Fairstart Foundation and The Danish National Centre for Social Research will conduct an effect study for the Danish foster care training version.

Recently, an instructor’s education in program implementation has been designed, utilizing the free Harvard/MIT education platform EdX. Program use only requires groups of caregivers for training sessions, internet, a projector, and a local instructor taking the online education while training caregivers. Programs are in local languages and implemented in two year partnerships with local professionals and NGOs.

Training programs are so far in three versions: for work with children 0-6, for ages up to 18 years in foster care systems, and for group care (institutions). In a mix of texts, discussions and tutorial videos, 15 training sessions cover topics like brain development and stimulation, attachment based care, forming the secure child group, how to instruct children in practising their rights, how to overcome loss, etc. At the end of a session, the caregiver group discusses and plan how to practice principles learned between sessions.

A large number of professionals and organisations worldwide volunteer to the development by translating and implementing the programs in their local systems, then designed online by Fairstart at the disposal of users. The project is acknowledged by the Danish and European Psychologist Associations. Recently, The Danish National Institute of Social Research offered to finance and conduct an effect study of the foster care program version.

The mission of Fairstart is to offer an instrument connecting three groups with very different agendas: researchers, local child policy makers, and frontline caregivers and their leaders. Also, to support the formation of sustainable local professional care and research systems in low income countries.

2/issuetoc, and wrote the research debate paper “Infant Mental Health in the Global Village”,
The Influence of Macro Factors on Decision Making in Child and Youth Welfare Agencies. A Case Study from Switzerland

Wednesday, 14th September - 18:00 - Poster Session 1

Prof. Heinz Messmer (University of Applied Sciences and Arts Northwestern Switzerland, School of Social Work), Mr. Lukas Fellmann (University of Applied Sciences and Arts Northwestern Switzerland, School of Social Work), Mrs. Marina Wetzel (University of Applied Sciences and Arts Northwestern Switzerland, School of Social Work)

Like other countries, Switzerland has established a variety of pathways to child and youth welfare services. These pathways can be differentiated with regard to whether they are voluntary or compulsory (cf. Schnurr, in press). Services provided on a compulsory basis are disposed by the Child and Adult Protection Authority or the Juvenile Justice Authority. Typically, they are combined with a limitation of parental rights. Voluntary cases in contrast are understood as those in which a child welfare agency advises or facilitates the service provision without restricting the rights of the parents. With reference to limited statistical data, it has been estimated that around 60% of children’s placements in residential or foster care in Switzerland are arranged on a voluntary basis. Despite this high percentage little is known about the processes, criteria, and considerations taken into account in the decision making on voluntary services.

Furthermore, child and youth welfare services in Switzerland can be roughly divided in out-of-home care (i.e. residential and foster care) and family based services (e.g. home visiting programs). While both types of services can be provided on a voluntary or compulsory basis, compulsory services are firmly regulated according to civil and juvenile law and funding is ensured, whereas regulations and funding on voluntary services differ between the individual cantons (or are even missing). Against this background the question arises, how these unequal regulations and legal frameworks influence the decision making in child and youth welfare agencies in voluntary cases (Duffy/Collins 2010).

This presentation draws on a case study concerning the potentials and limitations of service provision on a voluntary basis. Considering the results from interviews with social workers involved in decision-making, document analyses and a survey with service users, it is shown that especially the provision of family based services is strongly influenced by political and cost considerations and less related to children’s and family needs. Paradoxically, a situation has evolved according to which it seems to be easier to place a child in out-of-home care than to provide access to less intrusive services such as family supervision and counselling. In the light of these findings current challenges in decision making on voluntary services are discussed and concrete recommendations for the improvement of voluntary service provision will be given.

Literature:


Support family service in children’s perspective

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Tiina Lehto-Lundén (University of Helsinki)

Author: Tiina Lehto-Lundén (University of Helsinki)

The focus of my presentation is support family service part of the Finnish child welfare services and introduce a child focused data collection method. The aim is to shed light on children’s own experiences of support families as part of the support their receiving from the child welfare services.

What are the child’s own experiences when moving regularly between these two different families, biological family and voluntary based support families? What kind of meanings children will give to the support family services? And how do the children experience the effectiveness for their lives of support family service?

Research on children’s experiences will help illustrate various factors that may be significant for a child, such as the everyday life and parenthood in the support family. Child welfare emphasises the family perspective, but this also means that children as individuals may be overlooked. The results will broaden the understanding of the support family service as well as of the factors that could protect a child living in vulnerable circumstances. Studying the children’s experiences is essential for uncovering something unique and significant about the phenomenon. It is impossible to improve the service system and the professional practices of child welfare without making children’s actual experiences known. Support family services are included in the actions of Finnish child welfare. It is written in the law as one of the support measures. The support family services involve support families providing support on voluntary basis. In reference to earlier research and evaluations, the primary use of these services is to give relief to parents who, in most cases, are single.

The methodological approach of the study is empirical research, wherein existential phenomenology serves as both the research philosophy and the theoretical framework for the study.

In my presentation I will also introduce five staged data collection phase with children: 1. Interviews in biological home 2. Journey to support family 3. Child’s documentation 4. Meeting at the support family 5. Summary interview with the child.

Data is collected by interviewing the children and the use of child as informants is carefully thought out. The use of children as informants needs to be ethically carefully thought out, and other methods in addition to the interview, such as drawing, video and photos are used. Children will become part of the data collectors.


This presentation is based on my early, data collection staged dissertation research, which I’m doing in the University of Helsinki.

Key words: Support family services, child welfare, experiences, phenomenology
Informal learning of the families who foster a non-relative child based on daily experience

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Ramune Bagdonaitė-Stelmokienė (Vytautas Magnus University), Prof. Vilma Zydziunaite (Vytautas Magnus University)

Background: The number of performed studies for informal learning issues is increasing, but the researches both performed abroad and in Lithuania mostly focus on adults’ informal learning in work environment. Education science has still plenty of undefined factors about the phenomenon of informal learning. Informal learning is little explored when it takes place in daily-life environment. Especially it concerns the daily environment of the families which face unique experience – the families who foster a non-relative child. Informal learning of the families who foster non-relative children is understood like a unique social educational phenomenon which can be analysed based on subjective experience conceptions of the children fostering family members.

Aim: To reveal the informal learning which takes place in the daily-life context of families who foster a non-relative child.

Methods: An analyses strategy was a qualitative research paradigm based on Yin (2003) case study which can be treated as a research strategy for analysing a phenomenon in its daily-life realistic context. There will be presented the results of pilot study, which includes two cases. A chosen analysis method was a thematic analysis by Riessman (2008) which pay attention to individual research participants’ stories, personal experiences.

Findings: The dimensions of informal learning which become apparent in a family who foster a non-relative child among different family members are revealed. The main dimensions of informal learning: informal learning content, process, social environment and its influence for informal learning are identified and defined. The main social environment participators who take a part in an informal learning process are characterised. The way of assimilating the experience gained in an informal learning process is revealed.

Conclusion: The study revealed that the experience of fostering non-relative child is worthy for all fostering family members. This experience enables foster families to learn from various situations of daily-life.
“This is Your Pilot Speaking!” Establishing the methodology for a prospective longitudinal study of risk assessment and decision making, for short and long-term outcomes in child protection and welfare cases.

Ms. Donna O’Leary (Child and Family Agency, Ireland and University College Cork), Prof. Alastair Christie (University College Cork), Prof. Ivan J Perry (University College Cork)

Background:
In the Irish child protection system, Initial Assessments are conducted when it is established that there are unresolved concerns regarding a child’s safety or welfare. Initial Assessments are carried out using structured decision support tools and are concerned with risk and needs assessment. To date there has been no specific research on decision-making during Initial Assessments in Ireland or the outcomes of these assessments.

A research project was established to determine how factors that inform risk assessment and decision making during Initial Assessment, are associated with outcomes at 12 months and annually thereafter. The research is being conducted in nine child protection and welfare social work departments, in the southern region of Ireland, which serve approximately one quarter of the child population of Ireland.

A pilot study was established to examine methodological, practical and ethical aspects of this mixed methods, multi-phase, prospective, longitudinal research project.

Methods:
The pilot study involved 46 cases of children aged 0-18, which had completed Initial Assessment in the latter six months of 2015; and Principal Social Workers, Team Leaders and two teams involved in the management of these cases. Participants were advised that the pilot study would determine the future of the proposed research.

Demographic data, assessment and decision data were manually extracted from Referral Forms, Intake and Initial Assessment Records (these are both decision support tools and business records).

Analytic methods included Thematic Analysis; transformation of qualitative data to quantitative data and descriptive quantitative analysis methods. Data was analysed using SPSS and Nvivo.

Findings: The paper will describe which aspects of the methodology were deemed appropriate and outline reasons for modifications where they were required. Findings indicate that stakeholders are engaged; data collection methods require modification; proposed research methodology requires modification, as the nature of data relating to assessment and judgments recorded did not readily lend itself to the statistical analysis foreseen. The pilot provided a good opportunity for training.

Two groups of qualitative themes were developed during the pilot project. The first group relates the characteristics of the assessment and judgment process: these themes are Cooperation and Imposition. The second group relates to the nature of the decision making by the social worker: these are Enforcement, Subsidiarity or NFA. These themes will inform analysis in the main study.

The study is progressing using thematic analysis, rigorous content analysis for data transformation and various quantitative analysis techniques.
Acknowledgements: The research is supported by funding from the Irish Research Council under the Employment Based Postgraduate Programme and approved by the Social Research Ethics Committee at University College Cork.
Good assessments lead to good outcomes for youth in out of home care: A practice model in Ontario, Canada

Wednesday, 14th September - 18:00 - Poster Session 1

Mr. Murray Davies (The Viewpoint Organisation), Mrs. Morag Demers (Ontario Association of Children’s Aid Societies)

Objectives

1. To inform participants about research on the links between good assessment practice and good outcomes for children and young people.

2. To demonstrate how incorporating standardized scales and measures into assessment processes provides objective measurement that, combined with clinical judgement, supports evidence-based decision-making.

3. To illustrate the effectiveness of combining new media technology with reflective clinical practice to engage youth in decision-making, encourage communication, and provide immediate access to objective measurement.

Method

We will demonstrate the use of Viewpoint, an electronic vehicle for administering and presenting the findings from the Assessment and Action Record (AAR), the main instrument for assessing service needs and monitoring child developmental outcomes in the Ontario Looking After Children project. Viewpoint is being used in a growing number of local Children’s Aid Societies in the province of Ontario, following two pilot projects, to administer and score the AAR electronically and present key individual or aggregated data in a flexible fashion. We will also show the importance of reflective and critical thinking by practitioners in integrating clinical and norm-based information in formulating comprehensive assessments of children’s needs. 1

Results

Participants will have had an opportunity to consider how good assessment practice does indeed favour good outcomes and also how good assessment practice can be implemented. The benefits of incorporating new media technology into clinical practice and of integrating clinical judgment and data-based evidence will also have been demonstrated

Conclusions

Our experience in implementing Viewpoint in Ontario can be summed up as follows:

1. Good assessment practice does promote good outcomes.

2. The components of good assessment practice include being child centred, know child development, and using standardized measures and scales.

3. Practitioners’ reflective, analytical, and critical thinking about all the available information fosters comprehensive assessments of children’s needs and comprehensive plans of care to meet those needs.
4. As a vehicle for the AAR, Viewpoint is consistent with good assessment practice. The web-based AAR explores the young person’s progress and development, from infancy through young adulthood, within seven developmental dimensions. It also provides an assessment that leads to an action plan to obtain positive child and youth development and resilience.

5. Young people have the opportunity to contribute to their own assessments by completing web-based questionnaires that are displayed on graphical backgrounds with avatars speaking text. Practitioners review young people’s responses with the young people themselves, to help them develop their understanding of their circumstances and wishes.

6. Caregivers also complete web-based questionnaires that capture their experiences of the young people and contribute to the latter’s well-being.

7. The AAR assessment questionnaires include a range of validated measures and scales that are completed electronically, thereby enabling practitioners to view young people’s individual responses in relation to normative data. Assessment questionnaires address all age ranges, from under 12 months to 18 years plus, providing information about key development issues at different ages. Practitioners, together with caregivers and young people, are able to identify developmental areas that require further intervention or support and map out a plan to promote better outcomes.

8. In using Viewpoint to administer and present the results of the AAR, practitioners encourage the participation of young people in the assessment process and use the age-appropriate information obtained from the scales and measures to inform their clinical judgements.
Professional intervention in foster care breakdown

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Jesús M. Jiménez-Morago (University of Seville, Spain), Prof. Jesús Palacios (University of Seville, Spain), Prof. Carmen Paniagua (University of Seville, Spain)

Although most foster care placements are successful, some face serious difficulties that can lead to the final separation between carers and children earlier than expected or planned. Typically, these unwanted separations are the consequence of a combination of circumstances where the foster-care providers, the fostered children as well as professional intervention make specific contributions. This poster focuses on the characteristics of professional intervention in the breakdown process.

In the two years under study (2012-2013) there were 4078 children in foster care in Andalusia, a region of southern Spain, of which 3036 (74.5%) were in kinship foster care and 1042 (25.5%) in non-kinship foster families. All of the 116 cases of foster care breakdown analysed in this incidence study occurred during this time period of. According to their relative weight, the majority of the breakdown cases happened in kinship (62.1%) and the rest (37.9%) in non-kinship care; 55.7% were girls and 44.3% were boys. The average age of the children was approximately 7 years old when the placement began to fail, being similar for kinship and non-kinship cases.

Results show that professional intervention was present in most families (82%) during the adaptation phase due to follow up reports (51%) or to the presence of problems (31%). In 18% there was no professional intervention. In most cases (81%), advice was the main intervention, although diagnostic (13%) and treatment (22%) were also present. These initial interventions were more frequently sporadic (56%) than stable (42%). The situation did not change much when problems escalated and the placement was at serious risk, with advice (60%) predominating over all other types of professional action (3% treatment), and with the sporadic actions (61%) predominating even more over stable interventions (33%). Professional intervention was similar in its frequency and characteristics with respect to both kinship and non-kinship families.

In conclusion, results confirm that the initial problems should not be minimalized nor considered typical of the mutual adaptation process. More training and specialization of professionals is needed, as well as more complete intervention protocols. Among these, a more systematic screening of the initial difficulties is needed as a means to intervene before the difficulties escalate.
Foster care in Chile: initial adversity and psychological adjustment of children

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Jesús M. Jiménez-Morago (University of Seville, Spain), Dr. Mª Isabel Zavala (University of Seville, Spain)

Important advances have been made in recent years in the field of child protection in Chile, being especially relevant those implemented in relation to foster care. In this context, research was conducted with the aim of knowing how foster care placement was functioning, what profiles and features foster families had and what the level of development and psychological adjustment of the fostered children was. The sample was composed of 158 foster children between 4-12 years old and an equal number of foster families of kinship and non-kinship modalities residing in the Metropolitan Region of Chile.

The research was realized through home visits. Information and data for the present study come from professional documentation cases, interviews with the families and the application of the Strengths and Difficulties Questionnaire (SDQ). An index of cumulative adversity was composed to assess the level of adversity suffered by children prior to their foster placement, containing a total of 12 risk variables. At the time of the study, the children had been in foster care an average of 5 years.

The profile of boys and girls in foster care in Chile is characterized by a high-level of adversity and the presence of adaptation and adjustment problems. With regards to their history of adversity prior to placement, the children show a greater accumulation of problems and difficulties in comparison with other countries. The average level of initial adversity suffered by the children was 3.9, an amount which stresses the greater presence of risk factors such as child abuse, history of residential care, problems during pregnancy, diseases, delays in development, presence of psychological problems, etc. Data also indicate that the adversity level was higher in non-kinship foster children than in those fostered by kinship families. Respect to adaptation, the presence of difficulties in psychological and behavioral adjustment at the time of the study stands out, with a high percentage of children who obtained scores in the clinical range of SDQ, indicating the possible need for intervention. In addition, data from the study show a high correlation between the level of previous adversity suffered by the children and their scores of difficulties in psychological adjustment years after placement. Finally, data from the study do not allow for differentiation in this general profile between boys and girls.

Experiences of adversity are common in children who pass through protection services. Protection measures such as foster care serve to repair these damages. However, our study seems to indicate that, beyond the profiles and specific capabilities of foster families, children exposed to high levels of adversity may require specific support and specialized professional interventions in order to prevent problems and contribute to better psychological adjustment during foster care.
Positive health in adopted, fostered, institutionalized and community adolescents: a comparative analysis

Wednesday, 14th September - 18:00 - Poster Session 1

Prof. Carmen Paniagua (University of Seville, Spain), Dr. Carmen Moreno (University of Seville, Spain), Mr. Pablo Carrera (University of Seville, Spain), Dr. Pilar Ramos (University of Seville, Spain), Dr. Irene García-Moya (University of Seville, Spain), Prof. Concepción Moreno-Maldonado (University of Seville, Spain)

Studies of children and adolescents in the child welfare system have traditionally focused on the mental health problems of this at-risk population. However, we know little about their health in terms not merely of the absence or presence of illness, but in terms of a more wide and integrated view of health as physical, mental and social wellbeing, as the WHO already stated in 1948. Furthermore, adolescence is an under-researched area in child protection compared to infancy and toddlerhood, despite that a large number of children in the system are in this developmental period. Adolescence is an important developmental stage as it entails critical changes in all of the core developmental areas. Moreover, adolescent children in the child welfare system should be of special concern. Breakups in adoption and foster care tend to occur more during adolescence and the adverse past of these youth can hinder their opportunities for a healthy and positive lifestyle during this crucial developmental period. Accordingly, this study focuses on the health of a sample of adolescents in adopted families, kinship care families and residential care, in comparison with community adolescents. The research is approached from an integrated perspective that includes subjective measures of life satisfaction, health-related quality of life, psychosomatic complaints and sense of coherence (SOC), a construct related to the capacity of coping in a positive and meaningful way.

Method

Participants: The sample was comprised of 28,998 adolescents between 11 and 19 years. Of them, 394 were adopted, 195 were living with their grandparents in kinship foster care, and 35 adolescents were living in residential care. The remaining 28,374 participants formed the control group of community adolescents. All of them took part in the 2014 Spanish edition of the WHO collaborative study Health Behaviour in School-aged Children (HBSC).

Instruments: The instruments used were Cantril’s Scale for Life Satisfaction, Kidscreen-10 Index for Health-Related Quality of Life, Self-Reported Health, the HBSC-Symptom Checklist for Psychosomatic Complaints and the SOC-13 scale for sense of coherence.

Statistical analysis: Descriptive analysis with mean comparisons (ANOVAs) controlling for gender and age were used in all analyses. Cohen’s d was used to measure the effect size.

Results

Data analysis showed significant differences between each group and the control group in the majority of variables, with more negative scores especially in kinship and residential care. The adopted group showed more similarities to community adolescents, only showing significant differences with them in life satisfaction (p = .025). However, adopted adolescents showed differences with the kinship and residential groups in almost all variables.

Discussion

Coinciding with previous research as well as with certain preconceived expectations given their adverse past, adopted adolescents and those in the child welfare system showed a less positive health
profile in comparison with the control group. However, adopted adolescents’ profiles were more positive in comparison to kinship care and residential care adolescents’, who showed a similar profile of deteriorated subjective health and quality of life. Our results stress the importance of applying a psychological health perspective instead of a risk or pathology-based approach to adopted, foster care and residential care youth.
Lifestyles: A comparison between adopted, fostered, institutionalized and community adolescents

Wednesday, 14th September - 18:00 - Poster Session 1

Prof. Carmen Paniagua (University of Seville, Spain), Dr. Francisco Rivera (University of Huelva),
Mr. Pablo Carrera (University of Seville, Spain), Dr. Inmaculada Sánchez-Quijia (University of Seville, Spain), Dr. Antonia Jiménez-Iglesias (University of Seville, Spain), Ms. Ana Villafuerte-Díaz (University of Seville, Spain)

Studies of children and adolescents in the child welfare system have traditionally focused on the mental health problems of this at-risk population. However, we know little about their lifestyles, how they spend their time or what they do in their free time (eating habits, body mass index, tooth brushing, physical activity, sedentary behaviours, and alcohol and tobacco use). Furthermore, adolescence is an under-researched area in the context of child protection compared to infancy and toddlerhood, despite a large number of children in the system being in this developmental period. Adolescence is an important developmental period entailing critical changes in different developmental areas and therefore adolescent children in the child welfare system should be of special concern. Accordingly, this study focuses on the lifestyles of a sample of adolescents living in adopted families, kinship care families and residential care, in comparison with a control group of community adolescents and amongst each other.

Method
Participants: The sample was comprised of 28,998 adolescents between 11 and 19 years old. Of them, 394 were adopted, 195 were living with their grandparents in kinship foster care and 35 adolescents were living in residential care. The remaining 28,374 subjects formed the control group of community adolescents. All of them took part in the 2014 Spanish edition of the WHO collaborative study Health Behaviour in School-aged Children (HBSC).

Instruments: The variables used were selected from the mandatory questions of the International HBSC questionnaire. The questions were about eating habits, body mass index, tooth brushing, body image satisfaction, physical activity, sedentary behaviours, tobacco use and alcohol use.

Statistical analysis: Descriptive analysis with mean comparisons (ANOVA) and contingency tables (Chi square test) were performed, controlling for gender and age in all analysis. Cohen’s d and Cramer’s V were used to measure the effect size.

Results
Data analysis showed the control group and the adoptees as very similar. However, the results showed significant differences between the control group and the institutionalized and fostered adolescents. Specially, the differences seem to be higher in adolescents who live with their grandparents. Results showed that kinship adolescents have breakfast fewer days a week and show a higher rate of sedentary behaviours. Institutionalized and kinship adolescents have a higher consumption of tobacco than adoptees and control group.

Discussion
Coinciding with previous research, fostered and institutionalized adolescents show lower lifestyle quality than adoptees and the control group. Even though fostered adolescents show higher levels of health and psychological adjustment, they show lower lifestyle quality than institutionalized adolescents. The quality of the environment (like rigid timetables and professional supervision)
has an effect on the life of institutionalized adolescents and could therefore explain these results. Likewise, it’s very likely that in kinship foster care situations there is less supervision by the grandparent caregivers. This fact demonstrates that grandparents need more support from the system and institutions.
Supporting Adoption through Structure

Wednesday, 14th September - 18:00 - Poster Session 1

Ms. Lynne Moggach (Barnardos Australia), Ms. Elizabeth Cox (Barnardos Australia)

Recent amendments to Australia’s New South Wales Children and Young Persons (Care and Protection) Act 1998 require the Courts to consider a care plan of adoption for children who are unable to safely return to their family and for whom guardianship is not appropriate. This change enshrines the principle of permanency for children through the provision of a “family for life” that lasts beyond childhood. However, there are few organisations in New South Wales who are currently accredited to undertake this work or who are prepared for this major change to their agency’s focus.

Barnardos Find-a-Family has been finalising adoptions for children in out-of-home care since 1985, with approximately half of the children in the program exiting care through adoption. In 2012 the agency made a strategic decision to focus on securing open adoption for a larger number of children under the age of 5 years where the court had made the decision it was not safe to return home. This objective was underpinned by the agency’s belief that young children should not spend their life in a care system which is known to be unstable and insecure. This presentation will explore the strategies that have supported Barnardos in achieving this goal and how these may assist other organisations.

The commitment and belief in adoption from Boards, senior management and operational staff is critical as a main driver of change and must be embedded in corporate plans and reflected in strategic plans and targets. Equally important is the ability of organisations to be proactive, to prepare for growth and change and to be able to identify barriers to achievement of goals.

The method used to achieve the objective was to review and consider the role of program and team structure in achieving the outcomes required. It had been revealed through a small research project that there were barriers to securing adoption orders in a timely manner which were within the agency’s control to change. Furthermore, another research project provided the agency with an analysis of workload required in the first year of placement. With the benefit of this knowledge, specialist teams with lower caseloads were created to focus only on this very young age group. The teams were located in newly acquired office space and set up prior to acceptance of referrals, which enabled time for training and further skilling up of all staff, both caseworkers and managers.

The first specialist adoption program manager was appointed in 2012 with 8 adoption staff. By 2014, there were 3 specialist teams and 21 staff and by February 2016, 7 teams and 36 staff were working with 127 children with care plans of adoption.

The results of this planned and structured approach has seen an increase in entry to the program of children under the age of 5 years from 29 as at 1 January 2014 to 86 at 29 February 2016. Associated with this has been an increase in the number of adoption applications for children under 5 years: 67% of all current adoption applications are for children under 5 years and 50% of all finalised adoption orders since 1 January 2014 have been for children in this age group, compared with 20% in the preceding 28 years.

We conclude from this that a planned approach influenced by research and experience is critical in achieving objectives. Furthermore planning and reflection are key to ongoing success and must be a constant feature as organisations change and adapt to meet agency goals.
Fairy godparents or fake family? Taking a look at non-familial kinship care

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Meredith Kiraly (University of Melbourne)

Kinship care, or the care of children in their extended family or friends network, is increasingly being used as an alternative to foster care for children in need of care and protection. Within this domain there has been much focus on grandparents as kinship carers, to the extent that it is widely assumed that kinship care and grandparent care are synonymous. However, there is actually little data available to determine the proportions of the various relatives and ‘family friends’ who provide kinship care to children. In particular, care by ‘family friends’ (‘kith care’) constitutes a largely uncharted area. Of concern however are recent studies in Canada and Sweden that each found non familial kinship care to be less stable than familial kinship care. Anecdotal indications that this may also be true in Australia suggest the desirability of exploring non familial kinship care in order to understand the characteristics that may set it apart from familial kinship care. This presentation will describe the results of a research study that has been exploring the nature of non familial kinship care in Victoria via a survey, interviews and focus groups. Findings indicate that such care arrangements are indeed quite different from familial kinship care, and thus there are implications for casework practice if the wellbeing of both children and their caregivers is to be assured. Implications for the development of policy regarding the establishment, support and monitoring of such placements will be discussed.
Child as a victim of crime - Parent perspective on the practices of authorities

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Essi Julin (University of Tampere)

Objectives

This study aims to find out how parents see and experience the multiprofessional investigation process of a suspicion of sexual or physical abuse of their child and the strengths and weaknesses of the process from their point of view. There is a lack of research concerning investigations’ impact on family life.

In Finland, legislation, e.g. mandatory reporting directly to police, emphasizes child’s right to be safe from all kind of physical abuse. Consequently, this can lead to growing numbers of abuse cases investigated by police. There is a quite unique system of Child Forensic Units at the five University Hospitals to help police in investigating a child sexual or physical abuse case. Usually police asks for help when child is young or there are some other special needs either in children’s development or in the whole case. In these situations there are many different authorities working around the family: at least police, child welfare and a multiprofessional team in a Child Forensic Unit.

According to previous research authorities can vary a lot when making decisions concerning suspected child abuse. They should and they try to act according to a child’s best interest, but this definition in practice is not similar or shared between different authorities, e.g. police or social workers. Also research shows that people experience justice when they have the feeling of being heard and treated properly during the process. How people are treated in process led by authorities has impact on family life, so it is not insignificant in which way these processes are organized. The main concepts of this study are client oriented approach and procedural justice in government of public affairs.

Methods

Research data for this PhD study is gathered via narrative interviews and writings followed by semi-structured question forms if needed. Data is nationwide covering all of these five Child Forensic Units. Methods for analyzing the data are still under planning.

Parents of (small) children are asked to tell their experiences, thoughts and feelings about practices of authorities when there is an investigation of child sexual or physical abuse and police has asked help from a Child Forensic Unit. Parent or other adult who is taking care of a child can be either suspect of a crime or a concerned party.

Expected Results

Research aims to show, what kind of consequences there are to family life, when all child abuse cases are considered as a crime and investigated by police and in some cases with a help of a Child Forensic Unit. Parents are expected to take care of the child at the same time when there is a criminal investigation going on and other authorities including child welfare are interested in the situation as well. There are lot of changes coming up in the whole area of child and family practices including physical abuse investigations in Finland during the next couple of years. Parents’ views should be considered when evaluating and improving existing legislation, policy and practices.
Factors that determine the quality of child protection investigations - a literature review

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Svein Arild Vis (UIT The Artic University of Tromso)

Introduction: In 2015 The Norwegian Directorate for Child and Family Affairs commissioned a four year research program that aims to identify factors that contribute to best practice in investigations and decision-making in cases reported to child welfare services in Norway. The first part of the study consists of a research review that identifies factors that determine the quality of child protection investigations.

Methods: Search for relevant studies were carried out in major international research databases in Nordic publications of reports and evaluations related the use of The Assessment Framework in the Nordic countries. A search strategy was developed to identify relevant studies published in English, Norwegian, Swedish or Danish. Inclusion criteria are that the study contains analysis of either methods for child protection investigations or analysis of factors that impacts decisions to investigate and substantiate or dismiss a case reported to child welfare services. Studies identified through electronic searches are screened independently by two researchers and inter-rater agreement was estimated using the Cohen’s Kappa statistic.

Theoretical framework for the analysis: The review categorizes studies and publications as either research based or based on user experience. Research based studies are defined as peer reviewed studies that present primary research data or peer reviewed scoping reviews and meta analysis. Studies based on user experience are non reviewed studies that contain the views and experiences of professionals or service users.

Results: The search and selection process is on-going at the congress abstract proposal deadline. The results will be presented at the conference. The results will be used by the Norwegian Directorate for Child and Family Affairs in in development of a national framework for child protection investigations in Norway and to issue guidance for assessment in cases of suspected child abuse or neglect.
Decision-making in child protection: what is decided at the various services and levels of intervention?

Wednesday, 14th September - 18:00 - Poster Session 1

Ms. Amaia Mosteiro (University of Deusto), Ms. Emma Sobremonte (University of Deusto), Ms. Arantxa Rodríguez (University of Deusto), Ms. Usue Beloki (University of Deusto)

AIM

This study aims to analyse variability in decision-making on child protection at the different services and levels of intervention by competent authorities in this field in the Basque Autonomous Community. Variability is specifically examined in one of the most relevant decisions concerning intervention with children at severe risk: maintain the child at their home or raise the possibility of foster care intervention.

The autonomous communities are the competent authorities for the Spanish child and adolescent protection system and divide these tasks between the different public administrations that operate in each region. In the case of the Basque Autonomous Community, children at low or moderate risk are assisted by the community social services while cases of severe risk are dealt with through regional authorities. There are also private entities that run community and specialised family preservation programmes or residential care. Due to the diversity of agents involved, we consider that variability in practitioners’ decision-making may depend on the workplace and the intervention level.

METHOD

A questionnaire was used including both organisational characteristics and a vignette designed by Davidson-Arad and Benbenishty (2008) in which practitioners had to choose between family preservation or foster care intervention. 204 responses were received from an estimated universe of 712, which guarantees a sample reliability level of 91%. The XL-STAT programme was used to run Chi square tests to analyse the statistically significant differences between the various services and intervention levels.

RESULTS

The findings show that statistically significant differences exist according to the service where the practitioners work (p value 0.000) as well as the intervention level (p value 0.0001). As regards the services, community social services are the ones that most choose the family preservation option, followed by other community services, community family intervention programmes, practitioners from Children’s Services at the regional level and specialised family preservation programmes. The findings also show that the pattern follow by practitioners in residential care services is just the opposite: over half choose foster care intervention. According to the intervention level, practitioners in community care services are the ones that most choose family preservation, followed by specialised care and residential care services.

CONCLUSIONS

Variability in child protection decisions is related to organisational factors. Particular objectives and tasks of each service and intervention level determine the recommended intervention. Services operating at the community level are particularly focused on keeping people in their familiar environment whereas specialised services are mainly in charge of offering alternative residence when the family environment is not suitable. These different visions on intervention alternatives may have a direct impact on the practitioner’s decisions and may explain the variability between them.
The motivations for fostering and its connections with healthy family relationships in a sample of non parental foster families from Madrid. A qualitative study of 26 foster children and their foster families using a multi-instrument research.

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Teresa Diaz (Universidad San Pablo CEU Madrid)

Although the difference between adoption and foster care is meant to be clearly established in theory, the reality is that the distinction still remains insatisfactory in practice. There are few non-kinship foster families in Madrid, mostly due to deficient promotion and support. Therefore the professionals frequently accept foster families that are being drawn towards taking care of children because they want to be parents. This, however, is not the adequate attitude towards foster caring. In Madrid the permanency in family foster care is remarkably long, but due to inadequate reasons: foster families frequently expect the children stay with them forever and the professionals and child protection services prefer to promote this permanency instead of working towards family reunification.

This paper is based on a research about the effects of caregiver’s motivations to become foster parents upon the fostered children’s family relationships taken for a sample of non kinship foster families of Madrid. We have found that a significant percentage of these are families who desired to foster, moved by the desire of having children and, after they had abandoned the route offered by adoption for various reasons. For others, adoption is a driver together with other issues. For several families in our sample this motivation has not prevented them from understanding the different nature of adoption and fostering. These families have succeeded in allowing their foster children to experience a double belonging, as we will show afterwards with different examples. We have however also analysed cases in which these wrong motivations affected their family relationships and how these children perceive and understand their relationship with their biological families. There are even some families that openly express their desire that the children they are fostering were fully theirs and that the relationship of these children with their biological family should be avoided.

In conclusion families with “non possessive” approach are better able to have healthy family relationships than the others. This research shows how support and monitoring are necessary in order to detect this problematic positions that can produce significant problems and jeopardize the success of family foster cares.

The implications of these findings for family support and professional training are also discussed.
Self-perception of psychological adjustment in adolescent adoptees

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Raquel Barroso (University of Porto, Faculty of Psychology and Education Sciences), Ms. Vanessa Coelho (University of Porto, Faculty of Psychology and Education Sciences), Mrs. Isabel Costa (University of Porto, Faculty of Psychology and Education Sciences),
Prof. Maria Barbosa-Ducharme (University of Porto, Faculty of Psychology and Education Sciences)

For decades, the psychological well-being of adoptees has been a great concern in the investigation regarding the field of adoption. However, studies in this particular area have not always been conclusive in determining if adoption works as a successful intervention in the development of a healthy psychological adjustment of children who were separated from their birth families. Also, some research has shown that adjustment problems may intensify in early adolescence, which makes the study of psychological adjustment pertinent in this particular development stage.

The present study aims to analyse the self-perception of psychological adjustment in adolescent adoptees by pairing them with a group of adolescents who were never separated from their birth family and a group of institutionalized adolescents. The participants in the study were 135 adolescents, 45 who still live with their birth family, 45 institutionalized adolescents, and 45 adopted adolescents, with ages ranging from 12 to 17 years old. Data was collected using the self-report version of the Strengths and Difficulties Questionnaire (SDQ) to assess the adolescents’ perception of psychological adjustment. The SDQ includes five scales: emotional symptoms, peer relationship problems, conduct problems, hyperactivity and prosocial behaviour, and allows for, not only the assessment of the difficulties of adolescents, but also their prosocial behaviour. The results showed significant differences between the self-perception of psychological adjustment among the three groups, with the group of adolescents who were never separated from their birth family presenting a more favourable self-perception of psychological adjustment when compared to the other two groups. The only scale where no differences were found between adopted adolescents and those who were never separated from their birth family was the prosocial behaviour subscale. However, in all scales, adolescent adoptees showed a more favourable self-perception of their psychological adjustment than institutionalized adolescents did. This last group obtained the lowest scores on all scales when compared to the other two groups.

The results suggest that adoption can indeed have a protective role in the development of adolescent adoptees, highlighting the importance of the integration of the child into a family context, and also reveal the weaknesses of psychological adjustment of institutionalized adolescents, who did not have the opportunity to grow up in a family environment. However, more research with adolescents is needed, since this is a developmental stage presenting special challenges to those who were separated from their birth family.
Analysis of professionals and family foster care on advantages and difficulties of visits between foster children and their biological families

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Maria D. Salas (University of Malaga), Dr. Isabel M. Bernedo (University of Malaga), Dr. María J. Fuentes (University of Malaga), Dr. Miguel A. García-martín (University of Malaga)

Contact between a foster child and birth parents play an important role in relation to the foster child’s wellbeing. The main aim of this study is to give voice to social workers and foster families about contact visits. This research is part of a project financed by the regional government of Andalusia (Spain) (SEJ-7106) regarding contact visits in foster care. Two focus groups were organized, one with 8 social workers from four foster care agencies and another with 8 foster carers (4 were recruited through the Association of Foster Families in Andalusia and 4 through fostering agencies). Access to foster care agencies and foster families was obtained through the official Andalusian Child Protective Services (SPM). The focal groups were audio-recorded. Transcripts (of the two focus groups gave rise to primary documents for the hermeneutic unit under study. All this information was exported from an Excel database to the ATLAS.ti v7.0 software. The transcripts were examined using an inductive method of coding in order to identify themes among participants’ responses. Results show that both groups agreed on the utility of visits to maintain the children’s attachment to their birth family, to bring a greater sense of continuity to the children’s life story, to enhance the psychological wellbeing of the foster children and to know the real situation of their birth family. In relation to the difficulties remarked in the course of the visits, one of the issues mentioned by both groups refers to a lack in the coordination among the social workers, the SPM and the foster families involved. The other issue brings together several complaints to the SPM, such as the fact of not providing information about taking decisions regarding the future of the child; the lack of support and preparation of the foster carers, the children and the birth families about visits; as well as the shortage of social workers and economic aids provided by the SPM. The conclusions of this study highlight the need to improve contact visits by developing intervention strategies targeted at all those involved (foster children, family foster care, birth family and social workers). These findings have important implications for practice.

Keywords: focal groups, family foster care, social workers, visits
Alignment of perspectives, skills and attitudes through video reflection: The role of team managers in a Youth care Protection Agency

Wednesday, 14th September - 18:00 - Poster Session 1

Mr. Arnout Bunders (Youth Protection Amsterdam Area and VU University Amsterdam), Mr. Marc Dinkgreve (Youth Protection Amsterdam Area), Prof. Jacqueline Broerse (VU University Amsterdam), Dr. Barbara Regeer (VU University Amsterdam)

Child and Youth protection agencies have been established to protect children from unsafe home environments. In Amsterdam the Child and Youth Protection Agency developed an approach in which teammanagers play a key role in guiding a team of case managers (coordinating all contacts with the family), a psychologist and a senior supervisor to assess cases and decide on the way forward. Guidelines are formulated but tailor-made solutions have to be developed in the teams. Does this imply that all teammanagers have to learn how to facilitate this process on their own? In this paper we describe and analyse a video reflection process that was designed and implemented to stimulate learning between team manangers in order to improve teammanager performances and youth care services.

Method

An action research process was used to develop as well as analyse the video-based reflection approach. The approach entails 6 steps: the first three steps include peer reviews (n=16) by video recording teammanagers and reviewed by a peer, the fourth step concerns joint discussions by conducting focus groups (n=4). The fifth step is an evaluation (n=11) by conducting interviews and the last step includes integrating result by formulating recommendations for policy and practice. For the data-analysis coding schemes based conceptualization of work methods and management roles were developed that are used to analyse the videos and interviews.

Results

First, we found that the video-based reflection approach supported the development of a shared vision on teammanagers’ role. The videos clearly showed that the teammanagers had different ways of guiding the team meeting. There is different emphasis on the following roles; the role of expert, secretary, decisionmaker and facilitator. During the focusgroup discussions these differences were explored and related to the key mission of the organisation: “every child safe”. Alignment regarding the aspired role of a teammanager took place and the role of facilitator became central, as is evident from the evaluation-interviews.

Second, through the reflection on the videos, eye-openers with regard to new skills and attitudes were identified rather than new knowledge. This finding was confirmed in the evaluation-interviews.

Third, we found that the most important condition for video reflection is a ‘safe’ environment. With the start of this program many teammanagers were hesitant to participate. After the pilot more teammanagers were interested in participation. We hypothesize that this is due to the structure of the reflection videos with eye-openers, questions and comments. It turns out to be a comfortable situation to hear many eye-openers based on your own activities. It was also the constructive learning atmosphere during the focus group discussions that the fear for video registration was diminished. In later phases of the project teammanagers approached the first author to be engaged in the video-based reflection approach.
Fourth, by comparing the focusgroup discussions with the evaluation-interviews one year later we found that issues that came up during the focusgroup discussion from a specific teammanager came back in the evaluation-interview, complemented with a review of their change proces. Based on this finding we were able to predict the learning process that has taken place with other teammanagers during the last year by looking at the focusgroup discussions.

Limitations of the study

In this study we have discussed the learning experiences of the video-based reflection approach. We did not yet assess the impact on the activities of the family managers and on the safety of the children.

Conclusion

Video-based reflection seems to be an effective way of exchanging learning experiences between peer professionals in Youth Care. Remarkable is that in formal training it is primarily knowledge that is acquired but here skills and attitude have been changed.
Future teachers’ expectations of parental participation in children’s school education according to family structure

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Beatriz Triana-Pérez (Universidad de La Laguna), Ms. Lorena María Pérez-Marrero (Universidad de La Laguna)

Spanish society is becoming increasingly plural with ever more diverse family structures. Some of them, such as adoptive and homoparental ones have become more visible recently. This can influence the beliefs and expectations that teachers hold about parents and families, which might affect children’s adaptation to school. Having misleading expectations could adversely affect the relationships between teachers and their pupil’s parents, and consequently, also the adaptation of these children to school. There are few studies that address the beliefs on family diversity of teachers. For this reason, the main objective of this research has been to explore what expectations of parental participation in school education future teachers have, particularly, should their pupils need close collaboration between both (family and school) to achieve the best adaptation and results. This research has been funded by EDU2012-38588 of the Spanish Ministry of Economy and Competitiveness.

The study involved 323 undergraduates, all single with an average age of 20.63 years old (S.D. 1.79). In the sample, 51.4% were studying a Bachelor Degree in Early Childhood Teaching, and the rest (48.6%) a Bachelor Degree in Primary School Teaching. Females represented 78% of the sample and 22% were male.

The results show expectations of moderate to high participation of both parents. Overall, expectations of participation are greater for mothers than for fathers, regardless of family structure evaluated, except in those cases when the father has the custody of the children, whether he lives alone with them or with a new partner. When the male parent is evaluated, the highest scores are given to families with two gay parents where one of them has blood links with children, followed by homoparental ones where there are no such links. Expectations of lower participation are held, however, of divorced non-custodial parents. As regards mothers, their biological link, their sexual orientation, or type of structure to which they belong (two-parent or single-parent) appear to impact less on expectations. Additionally, the least contact with the school is expected from non-custodial divorced mothers.

The results show that future teachers expect to have the cooperation of parents of their pupils in order to work together to achieve the educational goals set. However, such collaboration expectations are influenced by their beliefs about family dynamics in different modalities, as well as the role that culture gives mothers versus fathers. Nevertheless, more positive attitudes are perceived towards adoptive families and homoparental ones in the new generations of future teachers.
The expectations of future teachers regarding the adaptation of children from diverse adoptive family structures

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Beatriz Triana-Pérez (Universidad de La Laguna), Dr. Juan Antonio Rodríguez-Hernández (Universidad de La Laguna), Ms. Lorena María Pérez-Marrero (Universidad de La Laguna)

In our society, school is an important context for human development. Teachers have an obligation to contribute to the integration of pupils whatever their personal or family situations, avoiding prejudices that may affect these pupils’ results and/or their adaptation. Some family models have become more visible recently, and this fact can influence the way that the future teachers think about them and about the children who are raised in them. For these reasons, the aim of this study has been to explore the expectations of undergraduates taking teaching degrees regarding the potential adaptation of children growing up in different kinds of adoptive families, including homoparental ones with gay fathers or lesbian mothers. The research has been funded by EDU2012-38588 of the Spanish Ministry of Economics and Competitiveness.

In this study, 208 undergraduates participated (70% women, 30% men), whose mean age was 19.90 years old (S.D. 2.04). In the sample, 42.3% were studying for a Bachelor Degree in Early Childhood Teaching, and the rest (57.7%) a Bachelor Degree in Primary School Teaching. All of them answered a semi-structured questionnaire about the adaptation of children from different family models.

The results show that the undergraduates expect that the best adaptation would be in children from traditional nuclear families, followed by children from heterosexual adoptive families with two parents, more than from the rest families evaluated. To the contrary, the worst adaptation is expected in children who grow up with a gay adoptive father, or with two gay adoptive fathers or with two lesbian adoptive mothers with one of the members of the couple being the biological father/mother respectively. However, it should be noted that female undergraduates held greater expectations than the male ones about adaptation of children of homoparental couples when there is a blood link to one of them. The type of teaching degree studied has no significant effects on the results.

The results suggest the need to provide undergraduates taking teaching degrees more specific training in the dynamics, specificities and challenges of different family models, and specially, about the homoparental ones.
Parental satisfaction and stress in adoption

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Isabel Costa (University of Porto, Faculty of Psychology and Education Sciences), Prof. Maria Barbosa-Ducharme (University of Porto, Faculty of Psychology and Education Sciences)

Parenting involves a set of complex and ongoing, responsibilities, which require constant adaptation to change according to the specific needs of each child. This can result in numerous parenting difficulties. Parental stress has been receiving increased attention from the scientific community. It has been defined as an adverse psychological reaction to the demands associated with maternal and paternal roles that can also affect parental behaviour and the quality of the parent/child interaction. Research suggests a relationship between parental stress and satisfaction. High levels of parental stress are associated with a decrease of adoption parental satisfaction, in which the children’s problems constitute a significant predictor of the variability of satisfaction.

This study aims to explore the variables regarding adoptive parenting which can be predictors of stress and satisfaction in Portuguese adoptive parents. The participants in this study were 58 adoptive parents, with ages ranging from 34 to 65 years old. Data was collected by interviewing the parents on adoption satisfaction and using the Stress Index for Parents of Adolescents (SIPA) to assess the level of stress experienced by the parents of children ranging from 12 to 18 years old. The SIPA permits assessing four dimensions of stress experienced by parents, namely, perception of stress in adolescent children, experience of parenting, relationship between parents and adolescents and external stressors. The results will explore the relationships among the different dimensions of parental stress, parental adoption satisfaction and specificities of adoptive parenting.

The results of this study will allow for the understanding of the processes underlining the variability in adoptive parenting of adolescents. They will also contribute to the support of political decision making and the definition of adoption professional practices in Portugal.
Adoption social disclosure and its implications in the school context

Wednesday, 14th September - 18:00 - Poster Session 1

Mrs. Joana Lara Soares (University of Porto, Faculty of Psychology and Education Sciences), Prof. Maria Barbosa-Ducharme (University of Porto, Faculty of Psychology and Education Sciences), Ms. Silvia Monteiro Fonseca (University of Porto, Faculty of Psychology and Education Sciences), Ms. Sofia Bessa Costa (University of Porto, Faculty of Psychology and Education Sciences)

Adopted children are receiving increased attention from developmental researchers due to the specificities of their developmental pathways. Their preadoption adversity is followed by the recovery opportunities afforded by their new post-adoption circumstances. In this context, the experience of being adopted and the development of an adoption related identity are unique and dependent on both psychosocial and contextual variables. The way the adoption story is lived can have an impact on the adoptee’s wellbeing and adaptation, both at home and in the school context.

The goal of this study is to analyse, from the adoptee’s point of view, the school experience of being adopted and the impact of some psychosocial (e.g. social competence) and contextual (e.g. adoption social disclosure and social reaction to the adoptive status) processes. Ninety-four children aged 8 to 10 years participated in this study. The Children’s Interview about Adoption was used to access the child’s school experience of being adopted, adoption social disclosure and the social reaction to the adoptive status. The Social Skills Improvement System-Rating Scales (SSIS-RS) were used to evaluate the child’s self-report of social competence. Results showed that the adoption social disclosure, the school social reaction to the adoptive status and the adoptee’s social competence predicted the school experience of being adopted. Additionally, in the cases of children who reported a less positive social reaction, social skills moderated the impact of adoption social disclosure on negative feelings towards being adopted. As such, social skills can be seen as a protective factor on the personal adoption experience against negative social reactions.

For the adoption practice, this study provides a rationale for preventing negative feelings and to promoting positive feelings towards being adopted in the school environment, through the development of the child’s social skills and the quality of the communication about adoption to social agents. Moreover, the study highlights the importance of school inclusiveness and of promoting the students’ sense of belonging.
Descriptive findings on learning and mental health from the Australian Early Childhood in Foster and Kinship Care study

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Sarah Wise (The University of Melbourne)

Research has consistently demonstrated wide gaps in the academic achievement of children in foster and kinship care compared to children who are not in care. While there have been a number of responses to improve the education outcomes of school-aged children, inequalities in learning and development are evident from the earliest stages of life and tend to exacerbate over time. Current thinking on neurodevelopment as well as evidence from longitudinal childcare and preschool studies also suggest that favourable and stimulating early environments can diminish initial difficulties and change education pathways. The conclusion from this literatures suggests that high quality early childhood education and care plays an important role in supporting healthy development and helps prepare children for school. In-home learning opportunities also provide important foundations for school readiness and success at school. However, long hours in childcare can have a detrimental effect on children’s socio-emotional development, especially if programs are of poor quality, have large group sizes or are combined with poorer quality home learning environments.

Despite the importance of early years learning environments, information that would assist the design and high level monitoring of interventions specific to young out-of-home care children is extremely limited. Some information is available that suggests participation in preschool programs may be lower for young out-of-home care children than their peers, yet we have no way of knowing the type, quality and hours of early childhood education and care young children in out-of-home care typically attend; simply, whether they are using early childhood education and care that is beneficial or detrimental to development and how this combines with informal learning activities. It is apparent, however, through Australian Government payments and services available to help non parent carers, that some young children living with grandparents may be attending up to 50 hours (and in certain circumstances more than 50 hours per week) of childcare. Finally, aggregate data on the developmental and mental health needs of young children in out-of-home care is almost non-existent, so it is also difficult to know what service components might be appropriate for this cohort.

This paper reports results from the Early Childhood in Foster and Kinship Care study; an Australian national study being conducted by the University of Melbourne (Department of Social Work) and the Berry Street Childhood Institute. The objective of the ECIFKC study was to fill a gap in knowledge about the learning and development of children living in non parental care who have yet to start school (babies and toddlers as well as pre-school aged children).

Data were collected from 146 carers across the country about young children’s; developmental and mental health status, use of formal and informal childcare, participation in preschool programs and participation in informal learning activities utilising standardised and validated tools. The main mode of survey administration was online via the project website (www.fosterandkinship.com.au), although some carers opted to complete the survey via telephone interview. The study was promoted through a variety of communication channels by peak kinship, grandparent and foster care organisations, community service organisations that deliver placement and support services and targeted early childhood services.
Results from the descriptive phase of the data analysis are presented. Playgroup, childcare and preschool attendance rates, participation in home learning activities and developmental and mental health status among the study sample are compared with children in normative samples. Explanations for observed differences are offered.
Messages for Policy and Practice from Kinship Carer Surveys in the UK, Australia and New Zealand

Wednesday, 14th September - 18:00 - Poster Session 1

Dr. Meredith Kiraly (University of Melbourne)

Kinship care (the care of children by extended family or family friends) has grown steadily across the Western world over the last two decades. The development of research programs, policy frameworks and support services has lagged behind this growth. However, a number of surveys of kinship carers have been conducted in recent years in different countries. Together, these surveys represent data from some thousands of kinship carers. The exploration of common themes deriving from the various carer cohorts provides an opportunity to add to the body of knowledge available to inform kinship care policy and practice. This poster presentation will describe the findings of a systematic review of 13 kinship carer surveys (8 in the United Kingdom, 4 in Australia and 1 in New Zealand), with a particular focus on the support needs of carers and children. Detailed findings of this review are available online in an Australian Institute of Family Studies research paper oriented towards child welfare policymakers and practitioners.
Children with Intellectual Disability in residential child care

Wednesday, 14th September - 18:00 - Poster Session 1

Ms. Alba Aguila (University of Oviedo), Ms. Carla González (University of Oviedo), Ms. Silvia Pérez (University of Oviedo), Dr. Jorge F. Del Valle (University of Oviedo)

Intellectual disability (ID) is a relatively frequent problem among children and young people in child care. However, despite the high prevalence of this problem, there is scarce research on this specific group of children. Therefore, we have very few data on their profiles and characteristics and their specific needs when living in residential care facilities, particularly when they have also other behavioural and emotional disorders.

The main aim of this paper is analysing differences between intellectually disabled children and the rest of their peers in child residential care in two aspects: needs for mental health services and referrals to those services. The sample consisted of 938 children 6-18 years old placed in children’s homes in several regions of Spain.

In order to describe their personal and family profiles, we gathered data by means of a specific questionnaire and needs for mental health support were assessed using the CBCL. Both instruments were filled in by the key residential worker.

Result show a higher scores in CBCL in several scales in children whit ID, as well as a higher frequency of referral to mental health services, particularly to psychiatric and pharmacologic treatments. These results show the extreme vulnerability of this particular group of children in residential care and the need of using screening and objective tools to early detect behavioural problems and making referrals to proper therapeutic services.
Testing a tool for improving life skills to independent living:  
The Umbrella program.

Wednesday, 14th September - 18:00 - Poster Session 1

Mr. Andre Tavares (University of Oviedo), Dr. Jorge F. Del Valle (University of Oviedo)

There is a unanimous consensus about the need for preparing young people for transitions to adulthood from care before they leave child care facilities. Although support after leaving care is a necessary help, the success of this transition also depends on the skills that young people could acquire while in care.

The Umbrella Programme is a specific tool for developing independent skills in young people in care 14-18 years old. It was thought to be implemented as individual or group activities in residential placements and it is a very flexible programme.

In this research we will present preliminary results of an experience of evaluation of the efficacy of the Umbrella Programme applied in several residential facilities in Portugal. The implementation process included staff training, pre-test assessment and a selection of sessions to be applied in a sample of residential facilities. Also a control group of young people was used to evaluate results.

This paper will present preliminary results of this experience of applying an instrument for developing independent skills in residential care, including the analysis of the pre-test assessment by means of some scales of independent skills and competencies.
Therapeutic Residential Care: Cross-National Challenges for Policy, Research and Practice

Thursday, 15th September - 09:00 - PLENARY: Therapeutic Residential Care: Cross-National Challenges for Policy, Research and Practice

Prof. Jim Whittaker (University of Washington)

On both sides of the Atlantic as well as other regions of the globe such as Australia, concerns abound as to the nature, purpose and efficacy of therapeutic residential care services for high-resource needing children and youth and their families. A variety of factors including media reports of both current and historical abuse, lack of consensus on critical ingredients, a comparably slim evidence-base, concerns about deviancy training and attachment and rising costs all have served as stimuli for both legislative and administrative reforms that suggest major changes for therapeutic residential care in the near future.

As the initial presenter and session moderator, Jim Whittaker (US) will both introduce the other distinguished presenters - Tore Andreassen (Norway) and Sigrid James (US and Germany)- and report briefly on the activities of a recently formed international work group convened with the common assumption that within an overall child and family services system, a properly designed, carefully monitored, well defined and well implemented high quality therapeutic residential care component should exist within a suite of intensive family and foster-family based options to offer choice to service providers as well as youth and family consumers. A Consensus Statement on therapeutic residential care (TRC) from the work group will be referenced including definition, guiding principles and development of priorities for future research.

A strong case will be made for increasing cross-national research and dialogue so that we can learn from the richness that exists in the considerable variations that characterize the nature and use of therapeutic residential services as a sub-set of group care services in a variety of states with developed social welfare systems.
Promising Program Models in Therapeutic Residential Care

Thursday, 15th September - 09:25 - PLENARY: Therapeutic Residential Care: Cross-National Challenges for Policy, Research and Practice

Prof. Sigrid James (Loma Linda University)

Quality care, effective services, and evidence-based practice are topics that have shaped practice and policy developments in human services fields for two decades. In the field of therapeutic residential care (TRC) discussions on the implementation of evidence-based interventions to improve the quality and effectiveness of care are relatively recent. Yet there is evidence that residential care providers are increasingly open toward evidence-based practice and are experimenting with how to implement program models and client-specific treatments that have an empirical base. Unfortunately, the literature to date provides limited guidance from a theoretical and empirical standpoint about which program models and interventions to implement and about the processes and factors to be considered during implementation.

This plenary talk will provide an overview of what is currently known about promising program models in therapeutic residential care (TRC) and the implementation of client-specific psychosocial interventions that are supported by research and are relevant for youth in TRC. It will discuss conceptual and methodological challenges for both practitioners and researchers involved in TRC.
MultifunC: an example of evidence based program in therapeutic residential care

Thursday, 15th September - 09:50 - PLENARY: Therapeutic Residential Care: Cross-National Challenges for Policy, Research and Practice

Dr. Tore Andreassen (MultifunC Program)

Many youths are placed in residential treatment in most countries. Generally it has been a problem that the content – the black box – within residential treatment has been poorly described. In addition there has been a lack of knowledge of the outcomes of residential treatment.

The Norwegian Ministry of Children, Family and Equality initiated together with The National Board of Institutional Care in Sweden in year 2000 a comprehensive review of the research on residential treatment of youth with serious behavior problems, published in 2003. Based on this review the residential treatment model “MultifunC” or “Multifunctional Treatment in Residential and Community Settings” was developed. The presentation will give a picture of the MultifunC model.

The length of residential treatment in the model is about 6 months. An intensive aftercare is integrated into the model and the total treatment process has a duration of about one year. The treatment model target medium to high-risk juvenile offenders, that means offenders with medium to high level of risk factors. The targets of the interventions are known dynamic risk factors for change, implying an assessment of the criminogenic needs both within the individual and in his or her environment. The treatment focus on changing dynamic risk factors within youth, the family, the peer relations, and function at school. Cognitive behavioral methods (Aggression Replacement Training) for changing the behavior and help him/her to develop control of aggression, social skills, and moral development are applied. In carrying out the treatment, there is a focus on individual differences like cognitive level, anxiety, depression, trauma, etc. The treatment climate seek to balance autonomy/support and control for the staff and the adolescents. The staff needs to be competent in how to prevent and manage violent behavior constructively. Family work is in focus during the whole treatment based on principles from PMTO and MST (Multisystemic Therapy). Written manuals or guidelines for all parts of the model are developed.

When the MultifunC project started it was decided that research would be part of the project. The complexity of the model reflects the youth’s complex needs and it takes time to integrate new knowledge into practice. An implementation study was first conducted to assure that MultifunC was correctly performed according to it’s manuals and guidelines. When that was obtained two effect studies would start. Studies of the effects of the model started in 2010 and is still ongoing in Norway and Sweden. The aim is to study if the program has positive effect on outcome for the youths.

MultifunC is implemented in Norwegian, Swedish and Danish institutions. More than 600 youths has gone through the program in Norway and Sweden where the units have been in operation since 2005. The journey to convert the written manuals to practice, the obstacles, challenges and potentials will also be shortly presented. The experiences shows that the implementation is an ever ongoing process.
The prerequisites and practice of audit – a study on the monitoring of out-of-home care for children in Sweden

Thursday, 15th September - 11:00 - Outcomes and Evaluation

Prof. Marie Sallnäs (Department of social work, Stockholm University), Mr. David Pålsson (Department of social work, Stockholm University), Dr. Stefan Wiklund (Department of social work, Stockholm University)

Objectives: When child welfare authorities place children in out-of-home care, society takes on a specific responsibility for children concerned and for the environment in which they reside. Demands for “more audit” of out-of-home care for children have been raised in the public debate as well as within the professional field of social work. The evolvement of an enhanced audit apparatus – in Sweden as well as in other countries - can be understood as the societal response to such non-professional and professional requests. The objective of the presented study is to analyse the nature of this apparatus in Sweden.

Research questions: Who are the actors undertaking different monitoring activities and what different objects are ascribed significance? How do the monitoring systems manage the fact that auditees differ in terms of being on one hand residential homes in the form of private enterprises and public authorities and on the other hand foster homes (with legitimate claims of integrity)?

Method: data was collected by case files from inspections (n=147) observations (n=10) and interviews (n=8) with professionals in the state inspection authority, interviews with residential staff (n=55) and with professionals in child welfare agencies (n=7). A national survey was sent to child welfare authorities (n=261).

Results: Monitoring of residential care is operated by a national inspection authority. The study indicates that the inspection process has foremost impacted the administrative part of care and that the standard-setting increasingly replaces professional judgement with formal authority. Regulatory standards target aspects of care that are other than those linked to evidence-based practice and they seem to some extent challenge the possibility to organize care according to individual needs of children. The inspection process is guided by different inspectorial rationales, which in turn influence the importance children’s opinions are assigned in the inspection process. Our findings also point at difficulties in giving children’s views substantial impact in the inspection process and that most standards used by the inspection authority, diverge from the aspects of care that children attach most importance to.

The operational monitoring of foster care is delegated to municipal child welfare agencies. These agencies constitute the sole actor that can be assumed to have an insight in the conditions of children in foster care. The monitoring of this service distorts common notions of the relation between the state and the family. Monitoring of children in foster care, is in most municipalities a specialized and highly prioritized task. In the monitoring process children are put in a central position as the ones who should be able to tell about the conditions in the foster home. Strong emphasize is put on creating continuous and personal relations to children, but there are obstacles in terms of or organizational changes, lack of time and staff turnover. Even if older children may have a central and active role when maltreatment is disclose, the study show a complex picture of the many routes the information from a child may travel before it reaches child welfare authorities.

Conclusions: The audit of residential care and foster homes builds on separate logics, which in turn are linked to the fact that foster care is based on families, while residential homes are organizations
governed by formal rules. The different logics entail different focus for the audit process and how it is carried out. In both cases children are acknowledged as important actors, but there are substantial difficulties in making conditions of children in out-of-home care visible.
Building safe organisations with and for children and young people: recommendations from a participatory research project on safety in institutions

Thursday, 15th September - 11:12 - Outcomes and Evaluation

Dr. Tim Moore (Institute of Child Protection Studies, Australian Catholic University), Prof. Morag McArthur (Institute of Child Protection Studies, Australian Catholic University)

Objectives

Australia is currently engaged in a Royal Commission into Institutional Responses to Child Sexual Abuse which aims to understand not only what has occurred in the past but also how child abuse can be prevented and responded to within contemporary organisations. In considering how they might best be kept safe, the Royal Commission recognised that there was a need to understand how children and young people understand and experience safety and their perceptions of how adults and institutions were responding to their safety needs. This paper presents the findings from a participatory study with Australian children and identifies the key elements of child-responsive approaches to preventing and responding to their safety concerns (which includes but is not limited to child sexual abuse).

Method

The research reported in this paper was mixed method, engaging 121 children and young people (aged 4-18) in focus groups and 1400 children and young people in an on-line survey. The focus groups attempted to capture children and young people’s conceptualisations of safety and to determine elements of a child-centred (and child-informed) approach to identifying and responding to issues in an institutional context. Survey were then built, in collaboration with children and young people, and gauge the extent to which children believed that institutions were demonstrating child-safe characteristics and responses, particularly when children and young people encountered an unsafe adult or peer.

Results

The study found that children and young people conceptualised safety in terms of their physical and behavioural responses to people, places and experiences; that they differentiated being safe from feeling safe; that they stressed the importance of familiarity and predictability and having trusted adults around them who valued their fears, engaged them in finding solutions and empowered them to identify and manage safety concerns interdependently. The online survey highlighted children and young people needed adults to demonstrate that they pay attention when children raise their concerns and knowing children well enough to determine when they were unsafe (as demonstrated by their behaviour) as being most important. Children and young people’s confidence in adults and institutions to identify and respond to children’s safety concerns (including possible child sexual abuse) ranged depending on age, gender and institutional context.

Conclusions

Children and young people conceptualise safety in ways that are often different to adults. Their perceptions of how adults regard children, children’s fears and concerns and their capacity to deal with safety issues affect their confidence and help-seeking behaviours. Children and young people were generally unhappy with some of the ways that adults and institutions respond to children, believed that they required more information and education about sexual abuse and strategies for
keeping themselves safe and that partnerships with children and young people would yield better outcomes.
The quality standards of the fostering process and its finalization: The intervention program Projet’Ar-te in analysis

Thursday, 15th September - 11:24 - Outcomes and Evaluation

Prof. Maria Pinheiro (University of Coimbra, Faculty of Psychology and Education Sciences), Dr. Carla Palaio (Casa do Canto APDMF-CrescerSer), Dr. Cristina Velho (Casa do Canto APDMF-CrescerSer), Dr. Laura Santos (Casa do Canto APDMF-CrescerSer)

Regarding the international and European treaties frame, including the United Nation’s Convention on the Rights of the Child, the Millennium Development Goals, the European Convention on Human Rights and the Charter of Fundamental Rights of the European Union, the Quality4Children Standards represent an important quality benchmark for the elaboration of children’s and adolescents’ protection and promotion policies. In this paper Quality4Children Standards are used as a framework reference for design, implementation and evaluation of the quality indicators of the Projet’Ar-te, an intervention program which comprises the fostering process, its finalization and even the support process after the fostering. In this context, Projet’Ar-te: Challenges for change in the foster system is analysed. This consists of an institutional process of socioeducational and psychosocial intervention to promote autonomy, during and after fostering process, which is viewed as an instrument that ensures that the rights of the children and adolescents are respected in foster homes. The impact of this project is placed in the safe exit of the foster home, in which it is explicitly ensured to each girl that it is possible to maintain the affective relationships with home staff and access to many types of support after the fostering process, continuing to contribute in the girl’s autonomization and social integration process. Projet’Ar-te is a project financed by the Calouste Gulbenkian Foundation in the aim of the Gulbenkian Program of Human Development - At-risk Children and Adolescents Program (2012-2015). Along this project it is proposed: (i) to show Projet’Ar-te as a project that works as an opportunity to “rethink” the quality of the socioeducational and psychosocial interventions practiced during and after the fostering process, always taking into account the children’s rights; (ii) to reflect about the application of the international benchmark Quality4Children Standards (FICE, IFCO & Aldeias Infantis SOS, 2007), as a set of norms that grant the articulation of protection, promotion, fostering and departure of the institution; (iii) to demonstrate the operationalization of the guidelines created for the finalization of the sheltering process, as a guaranty of the respect for the children’s rights, presenting a support and accompaniment follow-up structure that Projet’Ar-te integrates in its practices: an institutional response of support for the girls after their foster period.

Key words: Children’s rights, quality of the fostering process, socioeducational intervention, psychosocial intervention
Improving outcomes for children and staff in residential children’s homes: An evaluation of the RESuLT training programme

Thursday, 15th September - 11:36 - Outcomes and Evaluation

Dr. Claudia Mollidor (Ipsos MORI), Ms. Sarah Knibbs (Ipsos MORI)

Lack of placement stability of children in residential care has been identified as having an adverse effect on children’s short, medium and long term educational, health and broader life outcomes. This presentation will draw on new research to explore the effectiveness of RESuLT, a 10 session, whole-team training course for residential child care workers who are looking after adolescents. This draws heavily upon the application of Social Learning Theory and has been designed by the National Implementation Service (NIS) in consultation with the sector. It has been designed to help staff develop skills to appropriately respond to young people’s needs and balance behaviour management with helping young people develop life skills and self-efficacy. The programme is currently being evaluated with principal investigators from Loughborough University (Lisa Holmes), and the University of Bristol (David Berridge), as well as researchers from Ipsos MORI as part of the wider Department for Education (DfE) Innovation Programme in Children’s Social Care. The evaluation is exploring whether the training programme can be effectively delivered to whole-staff teams in residential homes and whether the training leads to changes in staff confidence, attitudes, knowledge, skills and practice. In the longer term ongoing evaluation of the RESuLT programme will explore whether outcomes for young people in the homes improves following the training.

The RESuLT training was provided to staff in six local authorities in England between September 2015 and January 2016. A mixed methods approach including both quantitative and qualitative data collection was used. At the end of each training session, staff were asked to complete a short questionnaire. In addition, heads of homes or key workers in homes were asked to provide monthly data about the young people at their home, including number of days missing, planned or unplanned moves, permanent or temporary school exclusions and reports to police for a recorded offence. In each area a comparison home was identified, where the same data on young people was recorded on a monthly basis. At the end of the training course, researchers conducted semi-structured face to face interviews with staff and young people in the intervention homes in each area in order to gain an understanding of how staff practices may have changed during and after the training and whether young people have noticed a difference in staff behaviour.

Emerging findings suggest that staff rated the training overall positively and found it useful particularly with regard to being trained as a whole staff group and being off-site. Staff appreciated getting to know each other better and discussing children’s behaviours and best ways of addressing these. Some young people also noticed positive changes in staff behaviours and practices. Data comparing outcomes for children in intervention and control homes are currently being collated and will be ready for presentation in September 2016.

Drawing on all data sources, including feedback on training sessions, staff and young people interviews as well as comparing children’s outcomes in control and intervention homes, this presentation will discuss the implications of providing the RESuLT training to staff in residential homes, especially with regard to perceived outcomes by staff and young people, as well as placement stability measures.

The findings from this evaluation will provide important evidence on the effectiveness of whole-team training interventions and will be of interest to all those working in the sector.
The home or care study: comparing outcomes for maltreated children

Thursday, 15th September - 11:48 - Outcomes and Evaluation

Prof. Nina Biehal (University of York), Ms. Helen Baldwin (University of York), Dr. Linda Cusworth (University of York), Mr. Jim Wade (University of York)

Objectives

It is widely considered that outcomes for children in care are generally poor. Research has pointed to poor education outcomes, high rates of mental health problems, disproportionate involvement in substance abuse and crime and the over-representation of care leavers among the unemployed, homeless and prison populations. However, most studies to date have found it hard to disentangle the effects of being in care from the impact of the experiences (in most cases, abuse or neglect) that led to children’s admission. As a result, key questions remain unanswered.

- Does being in care compensate children for previous disadvantage and improve their wellbeing, from a frequently low starting point?
- Or does it instead compound the disadvantages they bring with them into care?
- In other words, do children who enter care do better or worse than children with similar backgrounds and histories who remain at home?

This aim of this study is therefore to investigate:

(i) whether outcomes for maltreated children who are admitted to care are better or worse than those for similar children who remain at home, monitored and supported by social workers;

(ii) which maltreated children, in which circumstances, are most likely to benefit from admission to care or, alternatively, from remaining at home?

Design and methods

This comparative, longitudinal study drew on data from local administrative databases to identify a large sample of children who experienced abuse or neglect (n=390) by the age of seven years. Children who were admitted to foster care due to maltreatment (the care group) were compared to a sample of maltreated children who were monitored and supported by social workers (on a ‘child protection plan’) and who were never admitted to care (the home group). Outcome data were collected in interviews with parents (of the home group) or foster carers (of the care group). These included questions on the children’s progress and development and explored their current circumstances at home or in care. In addition, survey questionnaires to social workers collected data on the children’s histories, family circumstances and the reasons for intervention and included a standardised measure of the nature, severity and timing of the maltreatment the children had experienced (the Modified Maltreatment Classification System, or MMCS).

Results and conclusion

This new study (which ends in March 2016) goes beyond most previous studies of outcomes for children in out of home placement, as it compares outcomes for maltreated children in foster care to those for other maltreated children, rather than to the wider population of children. This presentation will compare the health, mental health, attachment and educational progress of the two
groups of maltreated children, taking the type, combination, severity and timing of maltreatment (as measured by the MMCS) into account. It will provide important new evidence on the way the care system mediates the impact of maltreatment on young children, for better or worse, providing a clearer insight into the contribution of foster care to outcomes for young children who have been maltreated. These findings will have important implications for policy and practice.
"Romani children’s health care trajectories". Loredana, a two years old romani girl, her family, volunteers and health professionals.

Thursday, 15th September - 11:00 - Minorities and Social Diversity

Ms. Julie Montoya (University Lille 1), Prof. Bernadette Tillard (University Lille1)

Julie MONTOYA, PhD Student, Bernadette TILLARD, Professor.
CLERSE, UMR 8019, Lille1, France
Migrant Children and Families

This PhD thesis in progress, entitled "Romani children’s health care trajectories", would like to question the French health care system by observing and analysing children’s health care trajectories and understand what specific health care trajectories could teach us about poorest children’s health care trajectories. Moreover, romani children’s trajectories highlight health care trajectories in a migration context.

The observations of romani children’s health care trajectories are led in a shantytown located in Pas-de-Calais, county in north of France, thanks to a volunteer of Médecins du Monde. The association works on the « Mining area mission » engaged with people identified like Romani and managed health questions on the slum scale. The fieldground began on February 2015 as Médecins du Monde’s volunteer. This position allows conducting participant observation at mission’s two times: “monthly trips” and “health mediation”. To resume, a “monthly trip” consist in conducting consultations for a day on the slum, either on patient’s caravan or in Médecins du Monde’s truck. Health mediation is matter of mediator volunteers, people who are not health professionals. They make appointment for patients, accompany them, play translator’s role as possible. In fact, they make the connection between residents and external health professionals.

In the slum, approximately two hundred people live. Half of them are minors, who live in caravans. “Minors” is preferred rather than “children” because some young families are composed by an adult father, a minor mother and one or two young children.

Moreover, few habitants speak french. Mainly coming from Romania, families speak romanian and spanish according to their migration trajectories.

The shantytown population is not uniform: it depends on individual age, family composition and financial resources. To visualize families’ living conditions, it is useful to know that the slum has no sanitation facilities, no electricity and no waste collection. There is only a single water supply at the entrance of the site.

With reference to ethnographic methodology, the fieldground consists in a long immersion on the fieldwork with observations and interviews, focusing on three topics:

• The mission’s functioning: interactions between volunteers on the slum, travel times and team meetings.

• Minors’ health care trajectories: interactions between volunteers and families, between patients and health professionals.

• The shantytown’s life: interactions between residents, and between residents and external persons.
The Médecins du Monde's interventions are conducted in two temporalities: monthly trips in the slum and occasional health mediations in different hospitals. Both give opportunity to analyse different kinds of pathways: long health care trajectories, short health care trajectories and emergency health care trajectories, for example during hepatitis A epidemic in April 2015. The communication is focused on Loredana’s long health care trajectory. She is a two years old Romanian girl, affected by a facial paralysis. As a first step, the paper will present her life course inextricably linked to her health care trajectory. As a second step, arising from observations, we analyse her mother’s place and volunteers’ place in Loredana’s trajectory, the importance of play during consultations, and the “medical knowledge” acquisitions by the family.
Social work in indigenous communities in North-Norway and Montana – a comparative study

Thursday, 15th September - 11:12 - Minorities and Social Diversity

Ms. Reidunn Házy Nygård (UIT The Arctic University of Tromsø), Dr. Merete Saus (UIT The Arctic University of Tromsø)

This presentation is based on the empirical data material from a comparative, qualitative study concerning social work in indigenous community in Norway, and Montana, USA. The main research question is how indigenous social workers conceptualize culture and how this is influencing the social work in indigenous communities. We used both focus group interviews and single interviews of indigenous social workers and stakeholders, and have generated a rich data material.

Indigenous people have been subject of oppression and colonization. Colonization has taken different forms, such as loss of land and language. Through child protection and social work services, colonization have resulted in tremendous effects on family life like compulsory attendance of boarding schools and child removal.

The indigenous people of Norway and USA have experienced similar discrimination at approximately the same time in history (Jacobs & Saus, 2012). There is a growing concern that children with background from a minority culture, enter the system more often and exit the system at a slower rate than children from the majority (Church Il, Gross, & Baldwin, 2005; Sinha, Ellenbogen, & Trocmé, 2013). Indigenous children receive different types and greater amounts of treatment and interventions than children from the majority (Tilbury, 2009). The majorities have the power in construction of the narratives (Said, 2001), a power that also applies in the field of social work. This dominance has caused a maintenance of the systematic violation of the minority culture. To generate a culturally sensitive social service there is a need to challenge the western hegemony of philosophy within the field of social work (Morrisette, McKenzie, & Morrisette, 1993).

Through the analyses, we find that:

1) It is a Eurocentric hegemony in social work conceptualizations: Even though adjustment to local context, the professional language and the methods in use, states ground in hegemonic Eurocentric culture. However, we find a plurality in the conceptualization of culture in both Norway and Montana that challenges the dominance of Eurocentric conceptualizations. High lightening this discourses gives a possibility to facilitate that the indigenous narratives are included in outlining social work in indigenous communities.

2) Knowledge of the social system is important: In both the Norwegian and the Montana interviews knowledge of the social system is regarded as important. In Norwegian interviews, knowledge of the dynamic of the local community is highlighted. In the Montana interviews, knowing the tradition and the history of the tribe is regarded as important. They both addresses the significance of understanding the dynamic in the social system where you work. In order to outline cultural adequate social work, this local differences must be taken into account.

Literature


The Nightingale programme: Preparing future child welfare workers for an increasingly diverse society.

Thursday, 15th September - 11:24 - Minorities and Social Diversity

Mrs. Hedvig Torvik Nilson (Senior Advisor, Norwegian Directorate for Children, Youth and Family Affairs, Department of Child Care), Mrs. Nita Ormen (Assistant professor, Ostfold University College, Faculty of health and Social Studies)

Topic: Migration and minorities in child welfare or Program-evaluation and quality in child welfare

Title: The Nightingale programme: Preparing future child welfare workers for an increasingly diverse society.

What our society needs is good relationships and bonds between individuals. In an increasingly diverse society, the complexity in establishing these relationships is also increasing. The Nightingale is a mentoring programme that started in Norway as a pilot project in 2008. The programme was developed by Malmo University in Sweden several years ago. It is also implemented in several other European countries, as well as Uganda. Through the programme, students apply to become mentors for children aged between 8 and 12 years old. Mentors and children meet once a week, outside school hours, for eight months, in order to partake in activities together. The mentors are recruited by teachers from their university, and the children are recruited by their local school, based on teachers' assessment of who might benefit from participation in the programme. A central aim of the Nightingale is to increase cultural sensitivity and communication skills among students that are going to work in the Child Welfare Services, Social Work or Social Education. This is to be achieved through students meeting and interacting with ethnic minority children and their families. Students' and children's mutual enjoyment and learning is understood to have broader societal implications also beyond these, such as improved integration and participation of minority children and their families into social mobility networks, education and employment. The Nightingale programme is funded and coordinated by the Norwegian government.

Objectives: To present major findings of a scientifically based evaluation report of The Nightingale programme in Norway. This has international interest and possible implications for integration of ethnic minority children in their new place of residence.

Methods: Analysis and interpretation of the evaluation report of The Nightingale programme in Norway made by NOVA, Norwegian Social Research.

Results: The key success factor of the programme is an already proven concept that relies on solid empirical data from Sweden. Major findings from the NOVA evaluation report include a) both children and mentors have positive experiences of participating in the programme; b) in practice, the programme meets its aim, although little is known of the long term effects of participation; d) the programme manual provides a clear ‘how to’ guide and a precise framework outline for the setting up and running of the programme; e) there are low drop-out rates among mentors and children; f) training, guidance and follow-up is central to results, and g) recruitment and matching of mentor and child are central success factors for the establishment of good relations.

Conclusion: The Nightingale as a concept has attracted considerable interest both nationally and internationally. It is currently established at eight different universities and colleges throughout Norway. Knowledge about minority children and their families is important now and in future. Acquisition of cultural competence is crucial to social workers, teachers and other employees who are in direct contact with children and families. Also, children and their families benefit from
participating in activities, and establishing networks in their new place of residence. Mentoring is a worthwhile social investment that yields benefits to society in both the short and long term. For children and mentors alike, The Nightingale mentoring can be a means of gaining access to a wider community, but also a means of gaining greater insight into themselves and others as individuals.
The framing of Sámi Child welfare

Thursday, 15th September - 11:24 - Minorities and Social Diversity

Dr. Marcela Douglas (UIT The Artic University of Tromsø), Dr. Merete Saus (UIT The Artic University of Tromsø)

We will in our paper present a discussion on the developing of Sámi child welfare. The study is an empirical investigation of the stakeholder’s reflection of cultural issues, challenges and opportunities in this field. The main research question is what is the force in Sámi child welfare.

Sámi is an indigenous people in northern part of Europe, living in the fours states Norway, Sweden, Finland and Russia. Their share a common history and culture, and Sami languages that is divided by distinctive regional differences. The Sami has, as other indigenous people in the word, experiences severe oppression and assimilations. However, in the latest year the Sami in Norway, Sweden and Finland, have earned some degrees of co-government with the majority peoples, trough establishment of Sami parliaments in these three states. The Sami parliament is institutions that shall be included when the government are addressing cases that concern the indigenous people. It is a political elected parliament, that is assisted by a discipline organized administration. Within some field they have the power of independent funding, and that goes for the field of social work. Additional, the national social services have in the last decades taken an interest in supporting a development of the social work towards a more cultural sensitive approaches towards the indigenous peoples. In this changing attitudes towards the Sami people, we see the contours of a new framing of Sami child welfare. What is Sami child welfare, what is important to include in such approach, and who has the power to punt out the directions?

We argue the importance of including stakeholder’s reflections when exploring the framing of Sámi child welfare. Stakeholders by nature consist of a duality that can lead to actual changes and at the same time, they have the power to prevent changes by preserving some aspects. A deeper knowledge of the themes, subjects and topics that they call attention on, contribute to the understanding of the forces that frame the new Sámi child welfare. In order to contribute in the discourses of further development of cultural adequate Sami child welfare, this understanding is of importance.

Findings of this study suggest that Sámi child welfare practice is guided mainly by those working in the field. The participants of this study, stakeholders such as Sámi politicians, Sámi child welfare leaders, and governmental leaders that have Sámi child welfare in their responsibility have dual roles as one of creating change and one of preserving. Our findings propose that changes are related to more technical aspects of culture such as language and culture conservation. On the other side, stakeholders are potential agents of change who are continually engaged in development and new ways of thinking. This is particularly relevant when stakeholders are challenged on how to deal with complex issues in Sámi child welfare.
Who returns home? Study on placement outcomes of Flemish foster children

Thursday, 15th September - 11:00 - Family Reunification

Prof. Johan Vanderfaellie (Vrije Universiteit Brussel), Dr. Frank Van Holen (Vrije Universiteit Brussel), Ms. Skrallan De Maeyer (Vrije Universiteit Brussel), Ms. Laurence Belenger (Vrije Universiteit Brussel), Mrs. Laura Gypen (Vrije Universiteit Brussel)

Objectives:
Until recently Flemish family foster care was a temporary measure with as its most important goal the reunification of the foster child with his/her birth parents. Knowledge about reunification rates and associated factors can be useful in critically evaluating reunification decisions and adjusting practices. However, in Flanders, knowledge on reunification and associated factors is nonexistent. The present study seeks to shed light on this topic.

Methods:
Case files of 127 Flemish foster children who exited foster care in 2007, were analysed. Dependent variables were type of foster care placement outcome (reunification, successful placement without reunification or breakdown) and place of residence after placement ending (with birth parents, extended family, foster family, residential care or living independently). Analysed foster child characteristics were: gender, age at entry and exit of placement, ethnic background (autochthonous/non-autochthonous), internalizing and externalizing behavioural problems during placement and placement history. Placement characteristics were: placement duration, referring authority (voluntarily or juvenile court), reasons of removal, type of foster family (kinship versus non-kinship), removal of siblings and if so where they were placed. Birth parents characteristics were: substance abuse and imprisonment at start and end of the placement.

Results:
After placement ending only 40% of the foster children went living with their parents, including foster children who were reunified (26%) and foster children who moved to their parents after placement breakdown (14%). Mainly characteristics of the foster children were associated with a reunification. Foster children who were younger at start and at the end of placement, and with fewer internalizing and externalizing behavioural problems were more likely to be reunified, as were children placed in non-kinship care. There was a trend that the duration of placement was shorter for reunified children compared to non-reunified children (p=.09).

Conclusion:
First, the finding that only 26% of the foster children were reunified, is striking given that during the study period, the principle of permanency was not yet anchored in Flemish or Belgian legislation. Second, an additional 14% of the foster children went living with the birth parents after placement disruption. This means that 14% of the foster children returned to a home environment that probably had not yet sufficiently improved. Third, the association of mainly characteristics of the foster child and in particular the absence of behavioural problems, with the likelihood of a reunification points out that the presence of behavioural problems of the foster child has an important role in child welfare decision-making. Indeed, only foster children who are easier to parent are reunified. It may also indicate that (too) little is focused on the improvement of competencies of the birth parents and on the (future) home environment. These results may point out that foster care workers consider
the home environments of birth parents as continuously fragile parenting environments. In addition, paying insufficient attention to competency building during placement can reinforce this opinion. In conclusion, interventions should not solely focus on the foster child but also on the birth parents in order to avoid a too long stay in foster care.
Outreach support for young people in care transitioning to independence or returning to live with their birth parents: experiences and outcomes

Thursday, 15th September - 11:12 - Family Reunification

Ms. Clare Lushey (Centre for Child and Family Research, Loughborough University), Dr. Georgia Hyde-Dryden (Loughborough University), Ms. Lisa Holmes (Loughborough University)

In 2015 the Department for Education’s Innovation Programme awarded North Yorkshire County Council funding to develop an initiative called No Wrong Door. The No Wrong Door innovation aims to provide an integrated service for young people, aged 12 to 25 who are in care, on the edge of care or leaving care (i.e. transitioning to adulthood). The service aspires to ensure that young people’s needs are addressed within a single team and operates from two ‘hubs’. Each hub has a team that consists of: a manager, deputy managers, residential hub workers (i.e. carers), portfolio leads, a life coach (i.e. clinical psychologist) and a communication support worker (i.e. speech and language therapist). Young people also have an allocated key worker. In addition, the service brings together a variety of accommodation options (including residential placements at the hub, foster placements, supported lodgings and accommodation, and bespoke packages) and outreach support is provided to young people living with their birth families (but on the edge of care), with foster carers or independently as care leavers. It is anticipated that this integrated approach will improve outcomes for young people and ensure that they are not referred from service to service.

No Wrong Door is currently being evaluated by the Centre for Child and Family Research at Loughborough University, England. The evaluation aims to measure changes and improvements in young people in the following indicators: accommodation stability; engagement and achievements in education, training and employment; criminal activity; high risk behaviours; relationships with others; planning of transitions from care to independent living; resilience, self-esteem and wellbeing; and access to support in a crisis.

A mixed method approach has been adopted and includes face-to-face interviews with service users (i.e. young people and their families) and No Wrong Door staff; and anonymous quantitative data routinely collated by the No Wrong Door service.

This paper will focus on the experiences of older young people and their transition to independent/semi-independent living or return to birth parents. Information presented will be based on anonymous quantitative data and interviews with young people, birth parents, and key workers.

Data is currently being collated and this paper will cover how young people were supported during their transition and focus on the outreach support provided by their key worker (and where appropriate the life coach and communications worker) and in particular how this has impacted on: their engagement in education/employment, risky behaviours, accommodation stability, relationships with others and overall wellbeing.
Family reunification after short term out-of-home placement: mothers’ perspective

Thursday, 15th September - 11:24 - Family Reunification

Dr. Dalija Snieškienė (Vytautas Magnus University), Mrs. Daiva Kepežinskienė (Kaunas city social service center)

The relevance of the research. In Lithuania, the number of children who are reunited with their families is about 6-8 percent. Majority children are replaced from the single mother families. There is a lack of scientific articles about what is happening in the life of the mothers when they are trying to get their children back from the temporary out-of-home placement in Lithuania. What determines the success of such processes? What actors in the society are the most relevant in this situation and what kind of support is the most effective at that time?

The research aim is to construct a grounded theory by revealing the child and family reunification process from the mothers’ perspectives. Five mothers who managed to get their children back from the temporary out-of-home placements took part in the research. The average age of the mothers who took part in the survey was about 28 years.

Research results: four phenomena were distinguished during the axial coding. “Why does it happen?”, “I had a difficult and long path to walk through”, “I have strived for that and succeeded”, ” I felt as I had lost my home, my homeland, my flag”. The following paradigm has been constructed during the selective coding: the key to success “I somehow managed to climb over myself”. In vivo codes were created based on the phrases shared by the mothers who took part in the survey. On the basis of the aforementioned paradigm, a grounded theory has been constructed, which has revealed identity changes in the mothers who managed to recover their children from the temporary out-of-home placement.

In Lithuania, many families, especially single mothers are forced to raise their children in especially difficult and socially poor conditions. Mothers have to overcome the gaps in laws and bureaucratic obstacles in order to take care of their children properly. Eventually mothers fail to overcome crises and tension and thus cannot take care of their children the way they should. Different conditions of child placements influenced mother’s decisions. A negative family experience as Childhood family model has also repeated in the families taking part in the survey. When the child is separated from his/her family, mothers suffer emotional stress. The consequences for mothers may be as follows: thoughts about suicide, alcoholism, the loss of hope, etc. In order to get their children back to their families, the mothers made significant efforts: communicated with the specialists responsible for the rights of children, tried to improve their living conditions and proved their strong desire not to go back to their former way of living and ability to take care of their children properly. Those mothers who have succeeded to get their children back to their families tried to maintain a balance with regard to the changes in their family: they tried to eliminate the main reasons, which have resulted in child –out-of-home placement. Mothers actively used social assistance as well.

Pressing social forces from the state policy and culture and supportive actions of social workers and extended families help to change the attitudes to herself and the way of living.
Reuniting children with their biological families after out-of-home care. A pilot project investigating their everyday life and challenges.

Thursday, 15th September - 11:36 - Family Reunification

Ms. Kirstine Karmsteen (SFI - The Danish National Centre for Social Research)

This study investigates reunification of children with their biological families after placement in out-of-home care. Even though reunification is a known phenomenon and is undertaken in 39 percent of the placement cases within five years after the placement (Ubbesen et al. 2012), research in the field is neglected, especially in the Scandinavian countries. Scarce knowledge show that children reunited with their biological families are relatively disadvantaged compared to children in care (Egelund, Hestbaek & Andersen 2004; Egelund et al. 2008; Lausten et al. 2013), 46 percent of the 11-year-olds do not participate in leisure activities, and 14 percent of the 15-year-olds declare that they do not go to school. In addition many risk factors, individual (e.g. self-harm behavior, criminal behavior, or use of illegal drugs) as well as contextual (e.g. mothers with psychiatric diagnoses, unemployed mothers or mothers defined as poor), are still present in the reunited child’s life.

The aim of this pilot project is to investigate the reunification process from three angles. First the project comprises a qualitative study, where seven young people are interviewed about the experiences and challenges – in both their everyday life and their school life – that have been connected with the reunification with their biological families. Second we study, qualitatively, how the case work handling reunifications best ensure stable returns to the family. Third the project comprises a quantitative analysis on DALSC-CiC (Danish Longitudinal Survey on Children – Children in Care) providing an overview of reunifications in Denmark. Furthermore it describes the reunited children on several background factors and describes their everyday-life and school-life on several factors, e.g. completion of lower-secondary school and continuation in upper-secondary school.

Preliminary findings suggest that a stable home-coming is dependent upon the quality of the preparation before reunification as well as the support after reunification. Gradually increasing the time the child or adolescent and the biological family spend together before reunification ensures that both parties are ready for the reunification. Therefore, to secure a stable home-coming in the period after reunification and a continued home-staying, the young people need more systematic support in handling their everyday life than what have been offered so far.
Increasing the Impact of Research on Practice: Developing, Implementing and Evaluating a Reunification Practice Framework

Thursday, 15th September - 11:48 - Family Reunification

Prof. Elaine Farmer (University of Bristol), Ms. Mandy Wilkins (NSPCC)

Objectives
Returning children to their parents is a common outcome for children who enter substitute care, but research has shown that there is a high risk of return breakdown and repeat abuse or neglect when children are reunified.

The objective of this joint University of Bristol and NSPCC project was to create, in partnership with local authorities, a Practice Framework for Reunification. It built on previous NSPCC guidance which had been tested in nine local authorities and was informed by a review of the relevant research literature on reunification.

The Framework aims to support practitioners and managers to apply professional judgement to decision-making about whether a child can be returned home from care and informs their work with families throughout the reunification process and after return. It addresses which services are likely to ensure that reunification is stable and provides a structure for analysing the risks to the child, based on two systematic reviews of studies on the factors associated with child maltreatment recurrence. The Framework aims to support parents and workers to understand what needs to change, agree goals, record them in written agreements, access services and review progress. The emphasis is on engaging children and parents in the process.

Methods
Working closely with three local authorities in England, the project team ran learning sets over a six month period, to assist staff to take the necessary steps at both strategic and operational levels to implement the Practice Framework. This approach was summarised in an Implementation Checklist in order to assist other local authorities to introduce and use the Framework, without outside help.

The University of Bristol undertook an evaluation of the project, examining the views of practitioners and managers on the usefulness of the Framework, how it had been implemented and whether their knowledge of reunification research had increased.

Results of the evaluation
The evaluation showed that the Reunification Practice Framework was welcomed by practitioners and managers who found it clearly set out, practical, evidence informed and showing how reunification could be managed. They liked the emphasis on engaging children and parents in the process. Their positive response is captured in the response ‘It goes back to “proper” social work’. The risk assessment tool was highly valued and they considered that the Framework would be useful for the key tasks involved in reunification.

At the end of this short project, practitioners’ confidence in assessing parental capacity to change had increased. There were also statistically significant positive changes in the management of reunification in relation to establishing the data to monitor reunification outcomes and track cost savings. All the local authorities were developing policies on reunification and had taken action to
increase services to support reunification. Most participants saw the Framework as readily accessible, self-explanatory and immediately useable by other local authorities.

Findings on awareness of research findings on reunification were more mixed. There was an increased awareness of the research which underpinned the practice changes addressed in the learning sets but a number of key research findings in the Framework were still not well known at project end.

Conclusions

The project aimed to maximise the impact of research findings on practice by developing an accessible framework for practitioners to use when making decisions about reunification and during the subsequent stages leading up to and after children return home. This paper will discuss the evolution and structure of the Practice Framework, the research evidence which informs it and key findings from the evaluation. The Practice Framework and the Implementation Checklist have been made available on the University of Bristol and NSPCC websites.
Identity construction among young women with experiences of residential care

Thursday, 15th September - 11:00 - Gender and Sexual Development of Children in Care

Dr. Mathilde Turcotte (Université Laval), Prof. Nadine Lanctôt (Université de Sherbrooke)

Background: The growing body of research on the well-being of young adults with a history of residential care highlights the considerable difficulties and challenges this population faces (Collins, 2001; Courtney & Dworsky, 2006; Courtney et al., 2011; Courtney & Heuring, 2005; Johnson-Reid et al., 2007; Reilly, 2003; Vinnerljung & Salinás, 2008).

However, research on the well-being of former foster youth in emerging adulthood tends to focus on easily measurable outcomes related to functional autonomy or tangible life skills (Goyette, 2006; Propp et al., 2003). Furthermore, placement in residential care is rarely conceptualized as an event or a caring context that can add to the difficulties and challenges these youth must overcome during this transition. Yet, as Samuels and Pryce (2008) point out: “... existing scholarship suggests that aging out of foster care is a challenging location from which to launch a successful and productive adulthood” (p. 1199). For example, a few studies observed fears of being judged and a tendency to devalue themselves among youth in relation to the former foster youth status, especially among young mothers (for a review, see Connolly et al., 2012). In order to better understand how adversities and resiliencies play out in emerging adulthood, some therefore suggested to focus on more relational and emotional factors such as a sense of belonging and sense of self (Samuels & Pryce, 2008; Stein, 2006).

Objectives: The general objective of the present study was to explore how young women with experiences in residential care talk about their lives and themselves in relation with placement history. In particular, the qualitative study aimed to better understand how young women make sense of their history in residential care and the importance given to such experiences among other significant life-course events.

Method: This qualitative study is part of a larger longitudinal cohort study (Lanctôt, 2011-2015). Based on the assumption that placement in residential care is a “biographical disruption” that requires meaning construction through storytelling (Riessman, 2008:10), we opted for a narrative approach. Findings are derived from interviews with 19 women aged 20-24. Based on McAdams’ Life Story Interview (1995, 2008), each participant was asked to decide which events, characters, challenges and accomplishments should be featured in their biographical movie in order for viewers to understand who they are today.

The sample was selected among the remaining participants (n=124) at Time 6 of Lanctôt’s cohort study. Three criteria were used: placement stability (versus instability), immigration generation, and age (participants had to be at least 20 years old).

Analysis was guided by a consensual analysis strategy (Hill et al., 2005; Hill, 2012). Three different researchers were involved in defining, adjusting and approving the final code book. Using QDA Miner, the first phase of open coding led to an inter-judge agreement well above 90%. We then proceeded to examine content within and across codes to derive themes, patterns and relationships between cases.

Results: In general, we observed various discursive signs of a social malaise related to placement experiences. Participants tended to limit the “weight” of placement experiences in life stories. Very few participants could unambiguously discuss either their role in their removal from home or the
beneficial effects of placement in residential care on their lives or themselves. And while few participants mentioned perceived stigmatization directly, the majority held derogatory discourses about “girls in residential care” that were used to dissociate themselves from internalized stereotypes. In general, findings highlight the need for care-providers not to stigmatize, but also to balance the need for youth to take responsibility for their placement with giving them the space to mourn “the failure” of families of origin.
Promoting the Healthy Sexual Development of Children in Care

Thursday, 15th September - 11:12 - Gender and Sexual Development of Children in Care

Dr. Boendermaker Leonieke (Amsterdam University of Applied Sciences), Dr. Claire Bernaards (Amsterdam University of Applied Sciences), Dr. Gitte Riis Hansen (University College Sjælland), Mrs. Gwendy Moentjens (Artesis Plantijn University of Applied Sciences Antwerp), Prof. Andrew Kendrick (University of Strathclyde)

Introduction

In The Netherlands, Denmark and Scotland special awareness on the subject of sexual abuse and sexual exploitation was raised by national investigations on the prevalence and content of sexual abuse in residential and foster care. In Flanders (Belgium) it was the start of the so called Helpline 1712 (in 2012) to report on sexual and physical violence, that raised awareness on the subject.

The investigations showed that professionals perceive very few of the cases of sexual abuse in residential and foster care and in many cases the perpetrators turn out to be peers. This drew attention to a central issue: the incapability of professionals to support a healthy sexual development and discuss sexual behaviour with children and young people, their (foster) parents and other professionals.

Sex is a subject that is not easily talked about and most professionals feel insecure about. Moreover, professionals appear to be incapable of recognizing unacceptable sexual behaviour, setting limits and making that subject of discussion and intervening effectively.

In this project four Universities and four practice partners in the four countries mentioned above work together in an Erasmus+ project to develop education and training for (future) professionals to help them to build competences on guiding young people’s healthy sexual development and to interact with children and young people, their (foster) parents, colleagues and other professionals on the topic of sexual behaviour, intimacy and inter-personal relations in order to prevent for sexual abuse of children and young people in care. A central question therefore is what competences (knowledge, skills, and attitude) are needed for:

- the guidance of healthy sexual development,
- discussing intimacy, relations and sexual development with children and young people in residential and foster care, their (foster)parents and other professionals,
- sexual education (including e.g. feelings, gender-aspects and ‘knowing your own body’) and setting norms in relation to unacceptable sexual behaviour of children and young people in residential and foster care, their (foster)parents and other professionals,
- taking social, religious and cultural diversity on sexual matters into account.

Method

The education and training modules to be developed will be based on:

- a review of studies on determinants of staff behaviour that cause the incapability of professionals to support a healthy sexual development and discuss sexual behaviour
- a review of publicly available training programs, guidelines and tools in the project countries,
- expert interviews in the participating countries
• focus groups with professionals working in residential care or with foster parents in the project.

Results

In this presentation the first outcomes of the review study, interviews and focus groups will be presented. Attention will be paid to:

1) determinants of staff behaviour, 2) evidence based information, 3) core competences and behavioural characteristics, 4) commonly experienced dilemma’s and 5) diversity issues.
Growing up LGBTQ in foster care in England: Young People’s perspectives

Thursday, 15th September - 11:24 - Gender and Sexual Development of Children in Care

Dr. Jeanette Cossar (University of East Anglia, Centre for Research on Children and Families), Prof. Gillian Schofield (University of East Anglia), Dr. Julia Keenan (University of East Anglia, Centre for Research on Children and Families), Dr. Birgit Larsson (University of East Anglia, Centre for Research on Children and Families), Dr. Pippa Belderson (University of East Anglia, Centre for Research on Children and Families), Dr. Emma Ward (University of East Anglia,)

Introduction

This paper will report on findings from a research study titled ‘An investigation of the experiences and identity development of lesbian, gay, bisexual and/or transgender (LGBT) young people in care - and the services to support them’ which is being funded by the UK Economic and Social Research Council from 2014-2016.

Research design and methods

The study is mixed methods and includes the following elements:

- A national survey of local authorities in England of policy and service provision to identify services available to LGBTQ young people in care of leaving care
- Semi-structured interviews with 25 foster carers with experience of caring for LGBTQ young people
- 40 narrative interviews with young people who identify as LGBTQ and who have experience of living in public care
- Multi-agency focus groups with practitioners who work with LGBTQ young people in care.

This paper focuses on the young people’s narrative interviews, analysing their experiences of growing up in the care system in England and how they negotiate their identities. Interviews with forty LGBTQ young people, aged between 11 and 26, provide life stories of their pathways from birth families through the care system. Attention is focused on the individual meanings that the young people ascribe to their sexual orientation and/or gender identity and how this relates to their experiences in care. The interviews are being analysed using narrative analysis, with a focus on intersectionality between LGBTQ and care identities. This approach attempts to remain open to young people’s ways of describing their experiences and identities rather than imposing a particular set of assumptions about sexual orientation or gender upon them, thus ensuring that the analysis can also incorporate other aspects of identity that young people make relevant in the interview, such as ethnicity and religious affiliation. The research team includes young researchers who identify as LGBTQ and have experience of living in care. They have been involved at all stages of the research process including the analysis, to encourage a more sensitive and diverse reading of the data.

Findings

The narrative analysis takes an intersectional approach. Emerging findings include:

- For several young people the intersection of being LGBTQ and their ethnic, cultural and religious backgrounds created specific challenges and resources.
- Some young people felt that being in care had catapulted them into thinking hard about who they were in adolescence and that this had given them space to explore sexuality in a way that might not have been possible if they had remained in their birth families.
• For these young people ‘coming out’ requires multiple strategies as they make decisions about who to tell in their families (foster care and birth) about their sexual orientation and/or gender identity, and how open to be with professionals working with them. Coming out strategies are also employed in the decisions they make about how open they are about being ‘in care’.

• Because of previous experiences some transgender young people were wary of counselling. This wariness could hinder access to gender identity services run by the National Health Service in England.

Implications for policy and practice will be discussed.
Longer-term Contributions of Informal and Formal Supports: Experiences of Jordanian Care Leavers

Thursday, 15th September - 11:36 - Gender and Sexual Development of Children in Care

Dr. Rawan W. Ibrahim (Consultant and Researcher, UNICEF Jordan Country Office)

Purpose: The problems faced by young people leaving residential care to join the adult world are well known. These problems are exacerbated in The Hashemite Kingdom of Jordan, where the prevailing collectivist culture values family identity as a source of self-worth and support. Little research exists to describe the experiences of care-leavers ageing out of child protection systems in the Middle East, despite the pervasive use of institutions to provide long-term alternative care when children are orphaned, abandoned or maltreated. This qualitative study examines the strategies employed by young adults to support themselves as they transition from residential care to independent living in Jordan.

Methods: The first wave of semi-structured interviews and focus groups took place with forty-two care-leavers in 2007. Participants were 50% female, between the ages 17 to 28 years, and had spent an average of 14 years in residential care. Recognising the need for longitudinal research with care leavers, a follow-up study exploring longer-term developments in the lives of the same cohort since the first interview is now in its final stages. A particular focus is on coping with a forced individuality in a collective culture, and the longer-term influences of formal and informal supports on positive turning points in the lives of these young people. A grounded theory analytical framework was employed.

Findings: The study found that care leavers struggled with the challenge of a forced individuality and independence. They felt isolated as they sought to establish themselves in adult roles without the benefit of stable resources and without the benefit of being part of a kin-group. Generally care leavers are highly stigmatised. However, cultural traditions of extending support to individuals lacking their own natural support network and the increase of formal services contributed to more positive outcomes in various life domains.

Implications: While findings elucidate the importance of addressing structures that produce marginalisation and perpetuate cycles of vulnerability. In parallel, there is a need to increase understanding of contributions of both informal and formal supports to longer-term positive turning points, and in varying contexts. Given the shared patriarchal culture evident throughout the Middle East, the results of the study can inform policy and practice development in the region. Additionally, it offers understanding for western professionals working with Middle Eastern communities, particularly with the recent wave of migration to Europe and other western countries. The theoretical implications from this study focus on the inclusion of the cultural context within frameworks pertaining to care leavers.
Caring for lesbian, gay, bisexual or transgender young people: the views and experiences of foster carers

Thursday, 15th September - 11:48 - Gender and Sexual Development of Children in Care

Prof. Gillian Schofield (University of East Anglia, Centre for Research on Children and Families),
Dr. Jeanette Cossar (University of East Anglia, Centre for Research on Children and Families),
Dr. Emma Ward (University of East Anglia, Centre for Research on Children and Families), Dr. Birgit Larsson (University of East Anglia, Centre for Research on Children and Families), Dr. Pippa Belderson (University of East Anglia, Centre for Research on Children and Families)

This paper will report on findings from a research project titled ‘An investigation of the experiences and identity development of lesbian, gay, bisexual or transgender (LGBT) young people in care - and the services to support them’ which was funded by the UK Economic and Social Research Council from 2014-2016. Prior to this project there had been no research in the UK on LGBT young people in care and neither sexual orientation nor gender identity were mentioned in the care planning guidance in England and Wales as factors that may affect care planning, placement choice, well-being or support needs.

The study focused on how LGBT young people negotiate their identities in a particular context, that of growing up in the care system in England. Interviews with forty LGBT young people provided life stories of their pathways from birth families through the care system. These young people came from a wide geographic range of local authorities in England. Their stories included commentaries on the quality of care they had received in foster and residential care and the quality of support from professionals, including social workers, health, education. The interviews were analysed using narrative analysis, with a focus on intersectionality between LGBT and care identities, but also taking account of other identities such as ethnicity. A survey was conducted of local authorities in England to map the services that were available for LGBT young people and caregivers - and three regional multi-professional focus groups were held in England to explore current understandings and practice.

This paper will focus on one part of this project - the findings from interviews with 26 foster carers from across England who were caring for or had cared for LGBT young people. The sample included both short-term and long-term foster carers, caring for a range of LGBT young people of different ages. Telephone interviews were conducted and analysed thematically, with all coding being subject to checks by members of the research team.

A number of key themes have emerged. These include the following:

- In their approach to supporting LGBT young people, foster carers differed on a dimension from minimising and denying that there were any issues or challenges for the young person that are different to other young people in care through to preoccupation and concerns about the difficulties and risks LGBT young people might face.

- ‘Coming out’ may have happened prior to placement or in placement, with foster carers having to adjust their thinking; some feeling confident and others feeling rather confused and, for example, wondering if this was ‘a phase.’

- Foster carers often found they had to help the young person manage their relationship with the birth family and acted as ‘buffers’.

- Lack of training and lack of readily available expert advice on LGBT issues from social workers and other professionals left foster carers often having to seek other sources of information.
• Concerns about how to help and protect young people were especially challenging for foster carers when young people were bullied at school, became involved in criminal activity or were at risk of sexual exploitation.

• Foster carers for transgender young people had particular challenges in working with health and education, as well as the birth family, to ensure that the child’s needs were met and wishes were respected.

Implications for policy and practice

These findings will have implications for recruitment, matching and support for foster carers, but also significant implications for support services to children and carers that are provided by other agencies.
How to do research in the real world: What is to know and who is to gain?

Thursday, 15th September - 11:00 - Theoretical and Qualitative Approaches

Dr. Anne Marie Villumsen (VIA University College)

Real world research: The need for different types of knowledge requires two knowledge production processes

In real world research, there are dilemmas. One significant dilemma is time. The field of practice needs a type of knowledge that is produced quickly and can be applied immediately. This is generally a very difficult task to fulfill in the line of research. Another significant dilemma is the divergences in the types of knowledge required. The field of practice and the researcher need different types of knowledge. Therefore, differences emerge between an immediate and direct applicability versus a more far-reaching type of knowledge. The field of practice needs a type of knowledge that is directly and instantly usable. The researcher needs a type of knowledge that can meet the criteria within the world of academia and under the right circumstances can be applied and con-tribute within a specific line of research. This, again, requires time.

In the presentation, I will propose new concepts concerning real world research and knowledge production. The presentation will be based on data from a collaborative organizational field study. The aim of the study was establish a coherent practice of multidisciplinary collaboration between daycare and social services to support and aid children and families at risk.

First, I propose the concepts of a) Development through Research and b) Research through Development. Both concepts are inter-dependent. They share development as a goal and both require applying research as a centre of rotation in the developmental process in the field of practice.

Development through Research has the purpose of creating development in the field of practice based on a methodically stringent and scientifically based approach and thereby an anticipation of a more substantiated development.

Development through Research is predominantly the goal of practice.

Research through Development has the purpose of displaying credibility on the content and quality of a particular developmental process in practice. It is intended to be made relevant in a more general perspective outside the participating field of practice. Research through Development is predominantly the goal of the researcher.

Second, I propose that these processes of Development through Research and Research through Development produce two different types of knowledge – based on divergence in requirements between field of practice and researcher.

Development through Research produces the type of knowledge I have conceptualised as Applied knowledge. As a joint effort, the organization and the researcher engage in a sense-making process based on data collected within the field of practice and presented descriptively by the researcher. The outcome of this process is an immediately applicable knowledge to support developmental actions in the field of practice.

Research through Development produces the type of knowledge I have labelled Generalizable knowledge. It is created solely by the researcher, based on theoretical analysis of data as well as other relevant research-based knowledge. This type of knowledge is directed at similar fields of practice as well as the field of research in general and thus beyond the participating organization.
Within the line of real world research, I propose that it is time to be up front and open about the different needs between field of practice and the line of research. It is also time to start conceptualizing these particular knowledge production processes to keep the scientific standard high when researching in a collaborative relationship with the real world.
Social pedagogy in children’s everyday life – supporting agency

Thursday, 15th September - 11:12 - Theoretical and Qualitative Approaches

Dr. Ida Schwartz (University College Lillebaelt, Centre for Applied Welfare Research)

A large part of most children’s childhood is about taking part in educational and leisure time activities together with other children across various contexts of childhood. However, children who are in out-of-home care do not always have easy access to these resources. Theoretically the paper draws on a German version of Critical Psychology and discusses how to understand social pedagogy in relation to the support of children’s conduct of everyday life. In general parents coordinate their children’s everyday lives, but for the case of children in out-of-home care, the responsibility of care is distributed between several professionals and institutions. The paper builds on two research projects that followed children in out-of-home care in their everyday lives. By conducting participatory observation and interviews the projects explored, how professionals work together in order to support children’s agency in communities of children in residential home, school and leisure time activities. The paper contributes to discussions of how to define and understand social pedagogy and argues that a central focus in social pedagogy should be to create possibilities of participation in society and to support children’s agency in their everyday life across different contexts. The paper concludes that for children in out-of-home care their possibilities of learning how to conduct everyday life is closely related to the ways professionals cooperate across contexts. That puts inter-professional cooperation at the core of social pedagogy.
Selective quantitative writing on ADHD genetics in study books: a critical analysis

Thursday, 15th September - 11:24 - Theoretical and Qualitative Approaches

Mr. Sanne Te Meerman (University of Groningen), Dr. Laura Batstra (University of Groningen), Dr. Rink Hoekstra (University of Groningen, the Netherlands), Prof. Hans Grietens (University of Groningen)

Objectives
It is often claimed that ADHD is a brain-based and highly heritable disorder. However, although all behavior relates to the brain in some way, there are no physiological, neuro-chemical or anatomical studies showing differences other than on a group level. Such claims are in fact generalizations that occur also in relation to ADHD genetics. High heritability claims originate from quantitative genetics: twin, family and adoption studies. These studies are unfortunately only behaviorally and not genetically informative and very limited in their capacity to separate environmental influences from genetic ones. Studies that are genetically informative, qualitative studies, show that genes associated with ADHD occur only slightly more often in groups of individuals diagnosed with ADHD, and when aggregated they have an effect size of <10% explained variance of ADHD related behaviors. This means those diagnosed with ADHD are slightly more likely than controls to have these particular genes, and many with the diagnosis will not have them. Furthermore, many individuals without ADHD related behaviors do carry these genes. For many healthcare professionals, study books used during their professional training shape their perception of the supposedly strong genetic origins of ADHD. In this study, we examine if authors of study books do justice to the intricate difference between findings from twin/adoption/family studies on the one hand and molecular genetics on the other.

Method
From study guides of >50 (pre-) master’s programs taught between 2012 to 2015 on 10 Dutch universities we selected 43 prescribed study books with a section or chapter on ADHD. We scanned and analyzed chapters and (sub)sections on ADHD with atlas TI, identifying themes on which authors differed in their description of the genetic etiology of ADHD. We analyzed how often authors contrast the high effect sizes of quantitative studies with the low effect sizes from qualitative studies, if they do so at all.

Results
IN 49% of study books only the high effect sizes of quantitative genetics were mentioned, without contrasting them with the low effect sizes from qualitative genetics. These ‘selective quantitative’ study books likely give the impression that genes with elusive names as TPH-2, SLC6A4, CHRNA4 and GRIN2ADRD4, explain much of ADHD’s heritability. 23% of the study books in our sample demonstrate a more thoughtful approach to writing about genetics. These books name effect sizes from quantitative as well as qualitative studies and often contrast these findings. In some cases, the authors explicitly use the contrast as a dialectical tool to discuss pitfalls of heritability estimates and the interaction of genes and environment.

Discussion
Selecting only the high estimates from quantitative studies in ADHD genetics is arguably a form of publication bias. Especially since quantitative genetics are only behaviorally informative and do
not refer directly to genes as qualitative studies do, it seems questionable to overemphasize those findings. This might be a self-reinforcing phenomenon, as authors of study books likely inspire each other. Possibly, influential writings from opinion leaders have paved the way for this approach; for instance the consensus statement on ADHD is ‘selective quantitative’. This statement scolded cultural and environmental approaches in favor of a disease model with a crucial etiological role for genetics. Molecular studies suggest that there is no proof for a strong stand-alone genetic influence. Additionally, one of the most important candidate genes associated with ADHD appears to interact with family environments, indicating that neither biology nor environment can be seen as a primal influence. Contrary to what many authors of study books suggest, the many interacting influences - each with small effect size - seem to reveal the catch-all nature of the ADHD definition.
Perspectives on continuity of care of ‘hard-to-reach’ youngsters in vulnerable living conditions

Thursday, 15th September - 11:36 - Theoretical and Qualitative Approaches

Mr. Jan Naert (Ghent University)

Background: Youth care is rediscovering the relevance of community-based work in the ecology of youngsters in terms of preventive strategies. This movement towards the community is ‘used’ to get in touch with ‘hard-to-reach’-youngsters who are perceived to be ‘at risk’ on different life domains. However, there is little scientific knowledge on the support needs as defined by the youngsters themselves, although their voice is an indispensable perspective in ‘problem definition’ and consequent tailoring and adapting interventions and strategies to the youngsters’ support needs. Recently, ‘continuity of care’ is put forward by policy makers as a concept that can improve the quality of youth care interventions. Despite the acceptance that continuity of care is an important topic, the concept itself seems to lack clarity (Heaton, Corden, & Parker, 2012). Also, its relationship to ‘accessibility of care’ and ‘transition within or out of youth care’ are still issues for debate (McNicholas et al., 2015).

Objective: In this presentation, we aim at gaining insight in the conceptualization of continuity of youth care from the perspective of youngsters living in vulnerable situations. We will argue that rhythm is an important concept in relation to continuity of care. The study is part of a more comprehensive PhD-project, in which different perspectives on continuity and coordination of care are compared.

Method: The participating youngsters received case management provided by youth welfare services in Ghent (Flanders), which are situated in the vulnerable areas of the city, characterized by poverty, small housing, ethnic diversity and few opportunities for youngsters. Many of the participants experienced difficulties on several life domains. In-depth interviews were carried out. To guide these open interviews, a model of continuity developed in the context of general practice in the UK was used as a sensitizing conceptual framework. Interpretative Phenomenological Analysis (IPA) was used to guide the interview process as well as the analysis of the data.

Results: The preliminary results show that each trajectory is perceived as a ‘road with complex twists and turns’. The participants underscore the importance of significant relationships with people in their community to connect with “the outside world”. Reaching a shared problem definition seems to be a balancing exercise, in which appropriate space to match different views is essential for a continuing and rewarding relationship. An ‘interactional acceptance process’ seems to take place between the youngster and the ‘significant other’, who provides support. In this sense, ‘support’ is never just ‘support’ or ‘care’. Rather, it is conceived as a constructed reality within the interactional trajectory, where the interaction itself is a continuous exercise in mutual acceptance.

Engagement from adults, within their communities and within more systemic youth care, is mentioned as a major issue. This engagement is described as an authentic ‘reaching out’ and ‘listening’ to the lived experience of youngsters themselves, without a prefixed agenda or problem definition at hand. The idea of having someone who can be trusted, and whom they recognize as ‘one of them’ and ‘watching their back’ seems very important.

Discussion: Different ‘rhythms’, such as the perceived rhythm of the youngsters themselves in relation to the rhythm of the service provision, seem to be important. Problems mentioned by youngsters relate to the inability of services to match appropriately to the rhythm of the youngster. The stories
disclose that this is often perceived a difficult aspect in youth care, because of the unpredictable nature of the process of care. During the presentation, we will reflect on rhythm as a central concept of care trajectories and look at implications for youth care interventions.

Key words: community-based care, ecology, youth care, vulnerable youth, continuity of care
What transition concept is useful in the field of leaving care? A reflection on research interest and implication of language

Thursday, 15th September - 11:48 - Theoretical and Qualitative Approaches

Mr. Jan Storø (Oslo and Akershus University)

Abstract for EUSARF 2016

Title: What transition concept is useful in the field of leaving care? A reflection on research interest and implication of language.

By Jan Storø, Associate Professor, Oslo and Akershus University

Mail address: jan.storo@hioa.no

Topic: Either topic 1: Historical and theoretical approaches or topic 5: Transition to adulthood from care

Format: Oral communication

Abstract:

I am about to publish an article with the title: “What transition concept is useful in the field of leaving care? A reflection on research interest and implication of language”. I would like to give a presentation based on this work.

The transition of adolescents from state care to independent living is receiving increased attention in many countries, resulting in a growing body of research. However, the concept of ‘transition’ remains undeveloped within this research area. One main issue in comparative work is language: how we define concepts and how we use them to analyze our findings and shape practice. As “transition” over the last decade has become the central concept in the research and practice field of social work with adolescents leaving care, we need to reflect on how its use: its possibilities, and its limitations.

I examine selected research literature on young people’s transition from state care to adulthood. My interest is: How is the concept “transition” used in 18 selected articles?

I find that transitions are described as diverse, but also that they seemingly follow patterns. This oblige us to study the possible link between normative and individual transitions. Transitions have a personal side to them, but are also influenced by cultural and structural factors. The relationship between process and outcome is crucial, and so is the time factor.

I suggest that more theorisation needs to be done within the field.
When things do not go as intended: adoption breakdown, its incidence and circumstances

Thursday, 15th September - 11:00 - When things do not go as intended: adoption breakdown, its incidence and circumstances

Prof. Jesús Palacios (University of Seville), Prof. Julie Selwyn (University of Bristol)

Most adoptive placements turn out to be successful and provide a permanent new family for the adopted child. There are also cases where children and parents experience significant problems, but the placement is still stable. Finally, there are other cases where the difficulties end in the breakdown of the new relationship. The symposium “When things do not go as intended: adoption breakdown, its incidence and circumstances” opens five windows that look at adoption breakdown from different perspectives and in different countries. Some of the contributions highlight the role of pre-placement factors (such as number of moves and poor quality in previous foster care placements), others identify shortcomings in the preparation for adoption of both children and prospective parents, and others address the difficulties experienced once the child is with the new family (behavioral difficulties, attachment problems, family violence). While the contributions differ substantially regarding the reported incidence of adoption breakdown (from 1% to 13%), there is more agreement in their identification of the multiplicity of factors involved, including professional practices that fail to respond to the complex needs of both children and parents, before and after placement, including assessment of prospective adopters, preparation of children and parents, early identification of problems and efficient support before the difficulties escalate and the placement is on the brink of disruption. All presentations in the symposium will emphasize the importance of these professional practices for the prevention of adoption breakdown and its negative consequences for all those involved. Taken together, the five contributions in the symposium can be considered as one of the first systematic analysis of adoption breakdown in different countries and from different perspectives.
A longitudinal examination of outcomes post adoption or guardianship in one U.S. State

Thursday, 15th September - 11:12 - When things do not go as intended: adoption breakdown, its incidence and circumstances

Dr. Nancy Rolock (University of Wisconsin - Milwaukee)

Between 2000 and 2015 the U.S. foster care caseload decreased while the number of children in adoptive homes doubled; in the U.S. there are 2.8 children living in federally-assisted adoptive and guardianship homes for every child in foster care. These shifts are a result of federal policies prioritizing the moving of children from state custody into legal permanence (e.g., adoption and guardianship) with the presumption they will live ‘happily ever after.’ While this shift is generally heralded as a major child welfare achievement, at the same time, there are lingering reservations about the pace of the change, the quality of the aftercare, and the variety of new family relationships that are financially assisted by the state.

Objectives. This study examines the long-term outcomes for children formerly in foster care who exited foster care through adoption or guardianship, and some pre- and post-permanency indicators of post-permanency discontinuity. This study uses child welfare administrative data from one U.S. state to examine the incident rate of discontinuity for the population of all children who exited foster care through adoption or guardianship between 1998 and 2010 (N=51,576). In addition, this presentation will summarize findings from Illinois that suggest key post-permanency characteristics found to be predictive of post-permanency discontinuity.

Method. This study uses child welfare administrative data from Illinois to examine the incident rate of discontinuity. Unlike most studies that track children for a couple of years post-permanence, this study tracked children for a minimum of ten years, or to the age of majority. Survival analysis was used to examine pre-permanency predictive factors associated with post-permanency discontinuity.

Results. Results found that 13% (N=6,781) of children experienced post-permanency discontinuity. For children who experienced discontinuity, their mean age at time of discontinuity was 13.2, SD=3.3 years old. Discontinuity outcomes were also examined by time since permanence: Two years post-permanence 2% of children who were adopted or exited through subsidized guardianship experienced post-permanency discontinuity; five years after adoption or guardianship, 6% experienced discontinuity, and ten years post-adoption or guardianship 12% experienced discontinuity. Multivariate analysis found that, controlling for race and gender, pre-permanence experiences were predictive of post-permanency outcomes. Specifically, for every move a child experienced while in foster care was associated with a 5% increase in the likelihood of experiencing post-permanency discontinuity (HR=1.05; CI=1.04, 1.07). Furthermore, the age of the child at the time of legal permanence had a curvilinear relationship; children who exited care prior to the age of 3 or over the age of twelve were least likely to experience discontinuity.

Conclusions. Examining the population of children who exited foster care through adoption or guardianship, this study found that the vast majority of children were is stable placements (87%). Furthermore, this study found several pre-permanence factors that are predictive of post-permanency discontinuity. Child welfare interventions that target families on the brink of disruption and dissolution serve the interests of children and families poorly. Post-permanency services should target families at the earliest sign of difficulty, rather than wait until there is a crisis to intervene. This study identified key characteristics that can be used to identify families most in need of post-permanency services.
I will also summarize a series of investigations that found strong evidence for two powerful predictors of post-permanency discontinuity: 1) the caregiver’s assessment of the child problem behaviors (using the Behavior Problem Index); and 2) a caregiver’s self-report of the frequency of times he or she thinks of ending the permanency relationship.

Taken together, results presented will provide the audience with an understanding of: (1) the incident rates for post-permanency discontinuity (2) pre-permanency and (3) post-permanency characteristics that are predictive of post-permanency discontinuity.
‘She was a foster mother who said she didn’t give cuddles’: The adverse early foster care experiences of children who later struggle with adoptive family life.

Thursday, 15th September - 11:24 - When things do not go as intended: adoption breakdown, its incidence and circumstances

Dr. Sarah Meakings (Cardiff University)

This presentation reports on some unexpected findings to emerge from the in depth interview work, undertaken as part of two national adoption studies of previously looked after children in England and Wales. Both studies used a mixed method approach to calculate the national rate of adoption disruption (3%) and to explore the experiences of those who had been involved in, or were at risk of disruption.

Ninety adoptive parents were interviewed (45 who had faced an adoption disruption and 45 who were struggling and at risk of disruption). The interview schedule was designed to follow their adoption journey, from the initial adoption application to the present day. This presentation focuses on just one part of that journey - parents’ accounts of the contact with the child’s foster carers during the introductions to their child and the transition to the adoptive home. Just under half of those interviewed revealed that they had harboured serious concerns about their child’s foster care experiences before being placed for adoption. The findings showed that not only did children carry elevated risks for disruption due to their older age at entry to care, multiple foster care placements and traumatic early histories, but once in care, most of the children whose placements had disrupted were considered by their adoptive parents to have had very poor, even harmful fostering experiences before being placed for adoption. The lack of emotional warmth shown to children whilst in foster care dominated the accounts by adoptive parents. Possible explanations for these findings are considered, together with the implications for social work practice.
Postplacement but preadoption breakdown in Portugal

Thursday, 15th September - 11:36 - When things do not go as intended: adoption breakdown, its incidence and circumstances

Prof. Maria Barbosa-Ducharme (University of Porto, Faculty of Psychology and Education Sciences), Ms. Sylvie Marinho (University of Porto, Faculty of Psychology and Education Sciences)

Most research on adoption breakdown refers to adoptions that are legally completed or to a combination of both pre- and post-legalized adoptions. The results to be presented in this paper refer only to placements for adoption before the legal process is completed. The main goals of the study were (1) to identify which variables related to the child, the adopters and the adoption professional practices were associated with adoption disruption, and (2) to analyse the reasons given by adopters to put an end to the adoptive placement. The child’s age at placement is unanimously recognized as a risk factor for adoption success, as older children are more likely to be involved in adoption disruption. However, the child’s age is frequently associated with other perhaps less prominent factors. In order to overcome this limitation, 71 case files of disrupted adoptive placements were compared to 71 successful case files matched by the child’s age at placement whose average was 7.84 (SD=3.23), ranging from 2 to 15 years. In the disrupted group, the breakdown took place in the weeks or months following placement. Results from the comparative analysis of disrupted versus successful cases showed some features which were more frequently present in the breakdown cases, and these characteristics involved the birth family (relinquishment of the child without further contact once in institutional care), the to-be-adopted child (behavioural difficulties, typically in the form of externalized problems, as well as the lack of emotional preparation for adoption) and the adoptive parents (inflexible attitudes, lack of self-confidence in their new parental role, rejection of adoption specificities, poor social support network). Moreover, professional practices in these disruption cases frequently involved poor assessment of the adopters’ competence, insufficient information provided to the adopters about the child’s background and characteristics, poor child preparation for adoption, as well as the participation in the same case of different professionals who shifted along the process (particularly in the case of older children). The main reasons given by adopters to put an end to the adoptive placement were the child’s misbehaviour and their incapacity to deal with it, difficulties in developing an attachment relationship, as well as the complaint of incomplete or inaccurate information about the child’s characteristics provided by adoption professionals. The main conclusions of the study highlight the relevance of considering the multiplicity of risk and protection factors that interact and contribute to the adoption outcome, success or breakdown. In particular, emphasis is placed on better practices of professional intervention with the child’s, plus the adopters’ preparation for adoption, assessment and matching processes, as well as follow-up and support of the adoptive family.
Adoption breakdown in Andalusia, Spain: incidence and characteristics

Thursday, 15th September - 11:48 - When things do not go as intended: adoption breakdown, its incidence and circumstances

Prof. Jesús Palacios (University of Seville), Dr. Jesús M. Jiménez-Morago (University of Seville), Prof. Carmen Paniagua (University of Seville)

In Andalusia, southern Spain, a study was commissioned to answer three main questions: frequency of adoption breakdown, circumstances and characteristics of those involved, and role of professional intervention in these cases. The main findings of the study are to be reported in this paper. For the 2003-12 period, one in 75 adoptions concluded in formal breakdown, with the adoptee returning to the public welfare protection system. Furthermore, one in 23 adoptions went through quite serious difficulties (these cases will not be reported in this presentation). The incidence of breakdown was not significantly different depending on the adoptee’s gender, nor the structural characteristics of the family (single versus two-parent). As in other similar studies, no isolated factor was associated with this negative experience. Typically, noteworthy factors included certain characteristics of the adopted children (older adoption age, sibling adoption and behavior problems), features of the adoptive parents (particularly, problems with expectations and coping skills) and of the adoption-related professional intervention (delayed detection of difficulties, poor and sporadic actions). A high percentage of the difficulties were more relational than personal, as in the case of attachment difficulties and violence within the family. As for professional interventions, early signs of difficulties were often minimized and interpreted as typical of the mutual adaptation phase. Also, many of the professional actions taken were sporadic more than stable, and took the form of advice rather than diagnostic and treatment. The impact of the separation for both adopters and adoptees was also considered, as well as post-separation contact between them. One of the main conclusions of the study is that breakdown cases are neither anecdotic, nor exceptional. They should be an integral part of professional intervention, from the training of professionals to the protocols for the preparation, selection, follow-up and support of adopters and adoptees.
Adoption disruption of previously looked after children: the emergence of adolescent to parent violence.

Thursday, 15th September - 12:00 - When things do not go as intended: adoption breakdown, its incidence and circumstances

Prof. Julie Selwyn (University of Bristol)

The paper will report on the findings of the first national studies of adoption disruption in England and Wales. Examining national databases of approx 39,000 adoptions of children from foster care, over a 12 year period, we found the disruption rate was very low (3%) with the majority disrupting in the teenage years. We wanted to understand more about parents and children’s experiences and undertook in-depth interviews ( lasting 3-5 hours) with 90 adoptive parents (45 who had experienced a disruption and 45 who were finding parenting very challenging). We were surprised to find that adolescent to parent violence (APV) was responsible for the vast majority of difficulties and disruptions in adoptive families.

APV has received little attention in the social work literature, although it is known to be a factor in families whose children are at risk of entry to care and be responsible for foster and residential care disruptions. Neither does APV sit comfortably within our approach to domestic violence or reflect the psychological theories on the development of aggression. The behaviour patterns that characterise APV include coercive control, domination and intimidation. Crucially, parental behaviours are compromised by fear of violence.

Our studies exposed the prevalence of APV in the lives of families who had experienced an adoption disruption and those who were finding parenting very challenging. Two main APV patterns emerged: early onset (pre-puberty) that escalated during adolescence, and late onset that surfaced during puberty and rapidly escalated. The stigma and shame associated with APV delayed help-seeking. The response from services was often to blame the adoptive parents and to instigate child protection procedures. The factors associated with disruption and the development of APV will be considered including children’s early histories of trauma and movement in care.
Children’s and parents’ participation in care order decision-making

Thursday, 15th September - 11:00 - Children’s and parents’ participation in care order decision-making

Dr. Jill Berrick (University of California at Berkeley)

This symposium compares and contrasts cross national child protection practice in five countries. Drawing upon an on-line survey with child protection workers and with judicial officers, four of the papers include findings from California, England, Finland, and Norway. The fifth paper includes findings from a study in Australia regarding key informants’ views of children’s participation in court proceedings. Findings from these studies shed light on the role children and parents play as agents within the child protection system and the importance various child protection actors ascribe to their participation.
Parents’ participation in child protection court cases

Thursday, 15th September - 11:12 - Children’s and parents’ participation in care order decision-making

Prof. Marit Skivenes (University of Bergen)

Objectives

The aims of this paper are to describe and assess cross-national differences in the ways that parents’ views and wishes are heard in child protection court cases, and identify some of the challenges of international research on this topic. Courts and court-like bodies are an important element of formal child protection systems across Europe and the world, but also have vital roles to uphold parents’ rights and family autonomy. The European Convention on Human Rights includes the right to freedom from inhuman and degrading treatment (Article 3), but also the right to respect for private and family life (Article 8). Any interference in this by state agencies must be in accordance with the law, necessary and proportionate to the risks and harms involved. Courts therefore have to balance the rights of parents to express their views and to bring up their own children, with considerations of the children’s rights to be brought up safely, the children’s views, and the responsibilities of child welfare agencies. The dilemmas are common to all countries, but the legal and welfare systems and practices that have evolved to deal with them can differ greatly.

Method

This paper draws on findings from an ongoing study of social work and judicial decision-making in child protection cases (2012-16), comparing policy and practice in Norway, Finland, England and the USA (specifically, California). The study used online questionnaires for child protection workers and court decision-makers (judges and others, such as experts and lay members, according to the different systems). The questionnaires included (amongst other things) questions about parents’ participation, either in the pre-court social work processes, or in the child protection court hearings. This paper focuses on findings from the court decision-makers’ questionnaire, about the ways that parents’ views and wishes are heard in child protection courts, directly or indirectly.

Results

The court data comes from 54 respondents in England (35 professional judges and 19 magistrates, also called ‘lay judges’); 39 judges in California; 65 respondents in Finland (35 judges and 30 experts); and 1,636 respondents in Norway (41 judges, 247 experts and 1,348 lay members). There are differences of opinion between and within the four countries. But in all of them, the cases which get to court are the most serious and intractable, and parents’ involvement and representation is freighted with high expectations and multiple requirements. Children’s protection and best interests are to the fore, but so too are the rights and interests of their parents.

Conclusions

Welfare and legal systems come together in child protection court proceedings, and the issue of parents’ involvement brings out the overlaps and the tensions between them. Furthermore, differences between countries in the underlying philosophy of child welfare services, and in their court systems and approaches, mean that even where they share ostensibly similar values, there may be considerable differences in practice. This creates challenges but also stimulating potential for cross-national learning. Paradoxically, looking abroad can both question and reinforce preconceived ideas and routine ways of protecting children and serving families.
International perspectives on children’s participation in child protection agency decision making

Thursday, 15th September - 11:24 - Children’s and parents’ participation in care order decision-making

Dr. Jill Berrick (University of California at Berkeley)

Objectives

Removal of a child from parental care to public care is a serious state intervention in the private relations of children and their parents. Children, the subject of removal, are sometimes involved in decisions about their separation, but they are not necessarily engaged as agents of their fate. Some states make explicit through legislation an expectation that children are involved in determining their future; others are silent on children’s participation. And because we know that child protection workers, as street-level bureaucrats (Lipsky, 1980; 2010), sometimes employ wide discretion in their work with families, we do not know whether workers in various state systems are more or less inclusive of children’s voice. This international comparative paper examines how child protection workers in England, Finland, Norway, and the US involve children in decision making regarding involuntary child removal.

Method

This paper draws on findings from an ongoing study of social work and judicial decision-making in child protection cases (2012-16). The study includes a sample of 772 child protection workers who completed an on-line survey including a vignette regarding a case requiring preparations for a care order. Staff were asked a series of questions about how they would involve children in the case. We examine children’s involvement along three dimensions including information given to the child, information gathered from the child, and opportunities for their perspectives and interests to be considered.

Result

Of the total 1020 informants who responded to the survey, 772 had experience with care order proceedings and thus were eligible for inclusion in data analysis for this study. The total numbers of respondents from each country were 367 from Norway, 208 from Finland, 102 from England, and 84 from California. Results indicate that child protection workers weight children’s involvement differently based upon age. Staff in the four countries were more likely to talk with an older child, to provide information, to gather information, and to include in relevant decision making if the child were 11 compared to live in our hypothetical vignette. Although the Nordic countries and England provide policy guidance regarding children’s role in child protection decision making, we did not see consistently higher indicators of children’s involvement from the respondents in these countries. Using welfare-state and child protection system frames to analyse the findings also did not produce consistent differences between the family service systems and child protection systems included in this study.

Conclusion

Findings highlight the wide range in policies and practices concerning children’s involvement in child welfare decision making, despite their formal position as central to all deliberations in some states. The study also highlights the wide space for professional discretion in implementing practice with children at the local level.
International perspectives on parents’ participation in child protection agency decision making

Thursday, 15th September - 11:36 - Children’s and parents’ participation in care order decision-making

Prof. Tarja Pöösö (University of Tampere)

Objectives
This paper examines parents’ involvement in care order decision-making in four countries in edge-of-care cases, when the child protection worker has determined that placement in foster care is recommended. The countries represent different child welfare systems with Norway and Finland categorized as ‘family service systems,’ the US as a ‘child protection system,’ and England as a hybrid system. The focus of the study is on whether the type and degree of involvement are different in these four countries, and whether the system orientation (family services to child protection) influences line level practice with parents.

Method
This paper draws on findings from an ongoing study of social work and judicial decision-making in child protection cases (2012-16). The study includes a sample of 772 child protection workers who completed an on-line survey including a vignette regarding a case requiring preparations for a care order. Staff were asked a series of questions about how they would involve parents in the case. We examine parents’ involvement along three dimensions: providing information to parents, collecting information from parents, and ensuring inclusion in the decision-making processes.

Results
The overall finding is that parental involvement is an important aspect of child protection practice in all four countries. Cross country differences reflect the relative importance between countries of involving parents. Based on the case vignette, child protection workers indicated a pronounced priority for informing the parents about the proceedings, whereas other aspects of parental participation were regarded as important, but relatively less so. The survey responses echo the legislative and policy frames in these countries, as well as the orientations of the child welfare systems. The findings do not show a consistent pattern of difference regarding parental involvement along the lines of the well-known child protection or family service orientations.

Conclusions
Child protection workers across the four countries aspire to include parents in their practice, but the precise ways in which this is accomplished (or not) vary. The findings show that the principles of practice should not be taken for granted; it is important also to examine the ways that state policy, agency regulations, and organisational context shape the way that these are understood and practiced.
International perspectives on children’s participation in child protection court cases

Thursday, 15th September - 11:48 - Children’s and parents’ participation in care order decision-making

Prof. Jonathan Dickens (University of East Anglia, Centre for Research on Children and Families)

Objectives

The aims of this paper are to describe and assess cross-national differences in the ways that children’s views and wishes are heard in child protection court cases. Courts and court-like bodies are an important element of formal child protection systems across Europe and the world; and the UN Convention on the Rights of the Child requires that children shall ‘be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body’ (Article 12). Courts have to balance the rights of children to express their views with considerations of their age and maturity, their rights to be brought up safely, their parents’ rights, and the responsibilities of child welfare agencies. The dilemmas are common to all countries, but the legal and welfare systems and practices that have evolved to deal with them can differ greatly.

Method

This paper draws on findings from an ongoing study of social work and judicial decision-making in child protection cases (2012-16), comparing policy and practice in Norway, Finland, England and the USA (specifically, California). The study used online questionnaires for child protection workers and court decision-makers (judges and others, such as experts and lay members, according to the different systems). The court questionnaire included (amongst other things) questions about children’s participation in the court proceedings, either directly or through a representative, and the ‘child friendliness’ of the courts.

Results

The court data come from 54 respondents in England (35 professional judges and 19 magistrates, also called ‘lay judges’); 39 judges in California; 65 respondents in Finland (35 judges and 30 experts); and 1,636 respondents in Norway (41 judges, 247 experts and 1,348 lay members). There are differences of opinion between and within the four countries. But in all of them, the cases which get to court are the most serious and intractable, and children’s involvement and representation is freighted with high expectations and multiple requirements. Children’s protection and best interests are to the fore, alongside their views and wishes, and the rights and interests of their parents.

Conclusions

The issue of children’s involvement in child protection court proceedings brings out the overlaps and the tensions between rights to participate and rights to protection from hostile or insensitive treatment. Differences between the legal and welfare systems in different countries, and between the underlying philosophies of child and family welfare, mean that there may be considerable differences in court practices and in the attitudes of judicial decision-makers. The paper highlights key findings from the study, the challenges of interpreting the findings and the potential of cross-national studies.
International perspectives on children’s participation in child protection court cases - The Children’s Court in Australia

Thursday, 15th September - 12:00 - Children’s and parents’ participation in care order decision-making

Prof. Morag McArthur (Institute of Child Protection Studies, Australian Catholic University)

Objectives

Children’s Courts in Australia are important parts of the systems which protect children and young people. They are institutions which play a critical role in making decisions about the best interests of vulnerable children and young people. Similar to other countries, child protection legislation across Australia recognises the right of children and young people to participate in decisions that affects them. The aim of this paper is to describe how Children’s Courts work in Australia and how children participate in decision making processes. It reports on specific findings about children’s representation in child protection matters in the Children’s Court in Australian Capital Territory (ACT).

Method

The research reported in this presentation is part of a national study, funded by the Australian Research Council, which systematically examined the Children’s Courts in Australia. The paper draws on interviews with a diverse group of forty-six key stakeholder which included Children Court Magistrates and Registrars; legal aid practitioners; representatives from the Director of Public Prosecutions and ACT Government Solicitor; private legal practitioners; Advocates from the Public Advocate; ACT Children’s Commissioner; out-of-home care providers, the Director-General and child protection practitioners and policy makers; parent’s advocates and policy staff associated with the Aboriginal Circle Sentencing Court. With the agreement of participants, all interviews were recorded and professionally transcribed. Interviews were imported into NVivo and initially analysed thematically according to the research questions asked.

Results

The study found that most stakeholders were adamant that for all parties to receive as fair a hearing as possible, they needed representation. However they identified a range of barriers to this occurring including; access, quality and conflicts about what represents ‘best interests’ of children. There was also ambivalence about the desirability of best interests being decided in an adversarial court system, where parties and their representatives (if they have them) are pitted against each other. Most people considered that the case conferencing for care and protection matters, run by the Court Registrars, was a positive aspect of the Court. The main reasons given were that it was less formal and parties had a chance to be heard: however children do not attend these meetings. The majority of matters were settled at conference. Due to the adversarial nature of Australian courts children’s participation in decision making is not a direct process but rather, depending on the age of the child, filtered through adult participants. Although children have representation in the ACT Children’s Court a tension exists between children’s views and wishes being represented or adults deciding what is in the child’s ‘best interests’.

Conclusions

Welfare and legal systems come together in child protection court proceedings, and the issue of children’s involvement brings out the overlaps and the tensions between them. Furthermore, differences
between countries in the underlying philosophy of child welfare services, and in their court systems
and approaches mean that even where they share ostensibly similar values, there may be consider-
able differences in practice. This creates challenges but also stimulating potential for cross-national
learning. Paradoxically, looking abroad can both question and reinforce preconceived ideas and
routine ways of serving families and protecting children.
Leaving care from a life course perspective

Thursday, 15th September - 11:00 - Leaving care from a life course perspective

Mr. Samuel Keller (ZHAW Zurich University of Applied Sciences)

Professional knowledge in Child and Youth Social Services emphasizes that care leavers should be seen as a sensitive and vulnerable group (Arnau-Sabatés/Gilligan 2015; Stein/Munro 2008) - without an intention to stigmatise but to support them. On the other hand, care leavers must be viewed as a diverse group with individual life courses that differ distinctly from each other as for example the typology of “survivors”, “strugglers” and “moving ons” (Stein 2004) implies.

This Symposium brings journeys to adulthood out of care as big steps for individuals into focus: from a life course perspective care leavers face a high risk of social exclusion due to barriers in education, training and employment, accommodation, parenthood, health, and well-being. Nevertheless it will also point out the problematic character of existing approaches tending towards reductionism that links life courses to problematic socialisation conditions. A wider view accommodates flexible biographical patterns, individual coping strategies, or the relationship between vulnerability and resilience. But still there is very little evidence of official data based on the views of care leavers. Thus presentations want to examine as well which factors positively contribute with a successful transition from a care home into adult life.

On the basis of international findings from young social scientists’ research in this field (international PhD network), this Symposium wants to bring together and discuss insights from different countries concerning following question: What are conditions or meanings of stability and continuity, additional help and/or support in developing social networks when leaving care?

The presentations will reflect from a life course perspective:
- the relevance of participative planning (M. Bengtsson, SWE)
- subjective perspectives on age and development (A.-K. Mølholt, DK)
- leaving care period after military service (T. Refaeli, ISR)
- educational pathways (E. Brady, IR)
- and leaving care as a lifelong process (S. Keller, CH & B. Strahl, D)

Having nuanced information and research is important for planning and reflecting structures, processes and attitudes in regional and national social services in order to meet the needs of young people – in education, employment, housing, health and well-being. Further comparing different perspectives from different countries allows to reflect critically methods of research and practice, and to take into consideration youths’ perspective comprehensively – separated from national laws and structures.

Arnau-Sabatés, l. & Gilligan, R. (2015). What helps young care leavers to enter the world of work? Possible lessons learned from an exploratory study in Ireland and Catalonia. Children and youth services review, 53, 185-19


From a life course structured by society to independent adulthood

Thursday, 15th September - 11:12 - Leaving care from a life course perspective

Mr. Mattias Bengtsson (University of Gävle)

Objective: The objective of the study is to investigate young care leavers experience of planning their move from care as a central turning point of their life course. What do they think is crucial to plan and to what extent are they participating in the process?

Context: Off all children and youths placed in out of home care in Sweden sometime during 2014 (N=28700) a fourth were aged 18-20, thus in the age of leaving care and heading for the path towards independent adult life. Earlier research has shown that they embark on this journey earlier than their peers and that they make this transition faster and with less support. Leaving care is also to a high degree affected by society’s formal structural conditions as laws, regulations and professional praxis. Furthermore they are highly over represented in later life criminality, mental illness and increased mortality - especially those being placed for reasons related to their own behavior rather than lack of care.

A life course perspective helps us to take a closer look at their transition from care as a part of a lifelong development process, a turning point followed by others in which each individual makes own decisions and plans for their future, given the options they perceive. These options are affected by contextual social circumstances on different levels but we know from a life course perspective, that making plans and decisions promote one’s agency and have a strong impact on future trajectories.

Method: The data are based on the first wave in a longitudinal and qualitative study of 23 young care leavers (aged 16-21) in Sweden for whom leaving care was a current issue. The data was analysed by thematization.

Results: The tentative results show that the informants express a need for clarity in the moving out of care -planning process; when to move (the exact date), where to live, how to manage (economy, education, work), will they get any support from professionals (practical and emotional) when they leave the safety of a placement? Many also stress the need for a clear agenda of goals that can be checked off giving them a sign that they’re actually moving on and minimizing the risk for misunderstandings. One pervading issue is time; sometimes too little of it and sometimes too much when it comes to waiting for the day of leaving care.

Conclusion: Quite a few of the informants expressed a lack of participation in the planning process. Some refrained from participating as a way to avoid responsibility (if something goes wrong they could not be blamed). Others did not get the opportunity to participate. However, even though they had a low degree of participation in the formal planning, they often developed strategies to influence informally (by knowing how to “play the game”). These different strategies used will be framed in a life course perspective and discussed as ways of claiming agency for the studied informants.

Key references:


Defining age. Perspectives on age and development among young people in vulnerable life situations

Thursday, 15th September - 11:24 - Leaving care from a life course perspective

Ms. Anne-Kirstine Molholt (Aalborg University)

This abstract focuses upon young people who have been in out-of-home care and their perspectives on age and development. Young people who have been in out-of-home care often experience a variety of vulnerabilities and challenges such as unemployment, psychiatric illness, homelessness, alcohol, and drug misuse. Additionally, resent research documents how young people in vulnerable life situations often do not organize their time along the same educational, employment and family structures as other young people. Nonetheless the young people in their daily life are met by and compare themselves with expectations of what can be termed as a normal biographical life course understood as a life course that follows a relative stable and predictable pattern. This results in the young people being confronted with socially defined roles connected to formal and informal age structuring. For example, formal age structuring plays an important part in the life of the young people, as they at age 18 have to leave care and live an independent life.

My PhD study deals with constructions of meanings among young people who have been in out-of-home care and is designed as a qualitative longitudinal study based on narrative interviews. Through a period of two years interviews were conducted with eight young people age 20 to 33 approximately every six months. Thus a total of five interviews were conducted with each participant. Drawing on a life course perspective findings from my study points to three central perspectives on age from the stance of subjective age identity. Through subjective age identity it is possible to analyze the roles and positions the individual assigns to oneself through a subjective view and discussion of age. The first perspective of age discusses whether the young people find themselves living an adult and independent life. Findings clearly show that youth and adulthood are terms that the young people wish to negotiate. The second perspective deals with the flexibility of self-ascribed age. The young people find themselves consisting of several understandings of age and roles inherent in socially defined age positions. The third perspective is a comparison between and discussion of the age-related roles ascribed to the young people formally from the child welfare system and their own experiences of subjective age identity.

Findings show that the young people’s definitions of their own age provides an important insight into the social roles they ascribe themselves as well as an understanding of their experiences of marginalization from their surroundings.
Transition from the moratorium of military service to independent living in the life stories of Care leavers in Israel

Thursday, 15th September - 11:36 - Leaving care from a life course perspective

Dr. Tehila Refaeli (Ben Gurion University)

Background and Purpose:

Studies reveal that many care leavers are not successful in dealing with the challenges of independent life after leaving care. In Israel, care leavers are expected to enlist in military service right after leaving care. Military service, although often challenging, is in many ways a moratorium on the quest for independence. Consequently, in the Israeli context, discharge from military service is a period of transition to independent living. The current paper explores the subjective life course perspective of care leavers in Israel and their efforts of coping with the challenges of the transition from military service to independent life. In addition, the study examined the role of internal and external resources as well as previous experiences to understanding transition processes in the life course of this group.

Methods:

As part of a mixed-method study, sixteen narrative interviews were conducted with care leavers. Participants were selected using “purposeful sampling” based on the quantitative research. The sample included eight women and eight men, ages 22-24. Life story interviews were conducted, recorded and fully transcribed. Two kinds of holistic analyses were used: content and structure (Libelich, Tuval-Mashiach & Zilber, 1988). Content analysis included mapping the main theme expressed by interviewees, and structural analyses included, for example, time spent on certain people or issues, omissions, pauses and breaks in narrative.

Findings:

The analysis highlighted the transition from military service as a meaningful and stressful period from the care leavers’ perspectives. We identified two distinct groups among care leavers transitioning from the military service to independent life.

1. The “Struggling to Survive” group: Their narratives highlighted their vulnerability and included descriptions of current difficulties in coping with their daily life and their continuous efforts to avoid risky behaviors. Many of their difficulties are associated with the stressful experience of transition from military to civilian life. The presentation will describe the current situation of this group, characterized mainly by an immense lack of social support and, and for some, by lower sense of agency.

2. The “Surviving through Struggle” group: Their narratives highlighted their resilience while describing positive situations today in various life domains. These achievements are results of constant efforts to overcome obstacles they face, including in their military service. This group is characterized by strong agency and ability to adapt to unwanted changes. All had multiple sources of support, which are mainly a result of developing and holding on to social networks.

Conclusion and Implications:

The analysis highlighted that resilience in the life course of care leavers can be achieved by protective factors. While transitions are challenging for all care leavers, some of them have the combination of internal and external resources that is especially vital in periods of transition.
The implications for social services include the necessity to support care leavers in normative transitions by strengthening the support network of adolescents in and after care, exposing them to formal and informal support networks and taking an active duty in connecting them with social organizations while they are still in the moratorium of military service. It is also necessary to enhance their coping strategies and their sense of agency during and after care (e.g., by empowering youth to identify their strengths and interests).
Using a life course approach to explore the educational pathways of care leavers: New dimensions in understanding.

Thursday, 15th September - 11:48 - Leaving care from a life course perspective

Ms. Eavan Brady (Trinity College Dublin)

The aim of this presentation is to provide the audience with an understanding of the key reasons the life course approach is suited to the exploration of the educational experiences and pathways of care leavers (hereafter “care-experienced adults”).

Three key objectives lie at the heart of this presentation:

1) To present a review of existing international quantitative and qualitative literature outlining the educational outcomes of care-experienced adults and previously identified influencers of these outcomes.

2) To outline the key features of the life course approach and the ways this approach may act as a valuable framework within which to explore the educational progress and pathways of care-experienced adults.

3) To provide an overview of the key features of my PhD research study design, which draws on the life course approach as a framework within which to explore the educational pathways of care-experienced adults in Ireland who are now aged 25-35.

This presentation seeks to highlight the capacity of the life course approach to facilitate i) an understanding of the intricacies and nuances of individual pathways (e.g. care/education pathways), ii) the ways in which these pathways interact and shape long-term trajectories of individual lives, and iii) identification of specific disruptors and supporters of care-experienced adults’ education. Through outlining the key features of my PhD research design, I will provide an example of how this approach may be applied in research practice.

Applying the life course approach to research regarding the educational pathways of care-experienced adults will add a new dimension to our understanding of this issue; the life course approach allows us to understand where we are by considering where we have come from. This presentation has considerable relevance to the education and qualification improvement of young people in care by way of highlighting a new framework within which to examine this issue. In addition, the PhD study that will be presented stands to contribute to the basis of future research aimed at supporting the development of targeted policy and practice responses to the educational needs of children in care today and care-experienced adults.
How care experiences arise in critical turning points in life courses after care

Thursday, 15th September - 12:00 - Leaving care from a life course perspective

Mr. Samuel Keller (Zurich), Mr. Benjamin Strahl (University of Hildesheim)

Objective: The aim of this presentation is to reflect on life-long impacts of care experiences. Thus leaving care is seen as a structural and emotional transition out of care on the one hand, and as an unfinished process in life courses of care-experienced adults on the other hand (Schröer et al. 2012). The key objectives are to define named theoretical premises, to understand long term outcome of care from the view of those affected, and to deduce how to prevent burdensome life course as long as young people live in care and start to leave care.

Context: This paper adopts the hypothesis that the primary organizational structures and social environment of the out-of-home-placement play a decisive role in explaining pathways and junctions in further life (Gabriel & Keller 2014). Processes of upbringing and socialisation are always to be understood as products of active subjective interactions. But research thus far does not allow for precise statements about the social situation or the social exclusion of people having spent years in out of home care. In the context of the study within a Swiss National Research Program this presentation will be based on (www.placing-children-in-care.ch), it was of special interest to scrutinize the biographies of former children in care (1950 – 1990) by analysing junctions and relevant turning points in their life from a life course perspective.

Method: One generic case will be presented; it’s theoretically selected from a qualitative study-sample with 35 care-experienced adults (placed between 1950 and 1990) in the Canton of Zurich (Switzerland). In biographical narrative interviews (duration 1.5 to 5.5 hours) they told of their life. This rich data was analysed by the method of Grounded Theory (Strauss & Corbin 1990). Taking into consideration the objective of this presentation, categories connecting care experiences to life courses will be focussed when following the reconstruction of a care-experienced life course.

Findings & Conclusion: As mentioned, the second part of the presentation discusses a generic case and its subjectively relevant meanings of having been placed in care and becoming adult respectively old. That highlights the concrete capacity of a turning-point-model when reflecting and trying to understand life course after care. The case will represent a struggling way to independency as well as an overarching story back to dependency after many years. Here the question is what the influences were of administrative decisions and placement, and which turning points of an individual life after outplacement could be connected to those (overall) experiences. The third part concludes what current practice of placing children could learn from individually meaningful turning points, how to prevent or supervise leaving care in a short-term and a long term manner. Finally it might question a common concept of resilience as well.


Decision-making processes in cases involving minority families: the incorporation of intercultural approaches with child protection mandates in daily practice

Thursday, 15th September - 12:30 - Decision Making in Child Welfare

Mrs. Marie-Joëlle Robichaud (Université de Montréal), Dr. Poirier Marie-Andree (University of Montreal, School of Social Work)

Context: Despite growing concerns about adapting child protection services (CPS) to the specific needs of minority children and families, scant attention has been paid to the intervention methods practitioners use in their daily work with these families, or how they make decision about these cases. In Canada, research has documented the overrepresentation of minority children in CPS mainly at the entry point (allegations) (Lavergne, Dufour et al. 2008, Lavergne, Dufour et al. 2009). Furthermore, overrepresentation would seem to be countered following the evaluation process, with the majority of cases involving minority children being unsubstantiated and dropped after investigation (Lavergne, Dufour et al. 2009). To date, we have no explanation of the reasons behind this situation. We know that practitioners working with these families need to develop skills to navigate the complexities of intercultural and child protection approaches.

Objective: Evaluation (also referred to as the investigation) is a critical step in the socio-judicial process of CPS. It is crucial to understand how practitioners combine the legal and clinical mandates of the Youth Protection Act (YPA), the imperatives of intercultural intervention, but also other aspects such as personal, deontological and social work values, and the larger sociopolitical context in which racism and discrimination persist. This presentation reports on how professionals make decisions during the evaluation stage, particularly in an intercultural context. This understanding will clarify the experiential knowledge of practitioners, the decision-making process and what influences it during the evaluation of maltreatment allegations regarding minority families.

Methods: This presentation reports on the preliminary findings emerging from the first stage of a Grounded Theory research project that explores decision making processes of child protection workers (N=10) assigned in an evaluation team in Montréal youth protection agency. Semi-structured interviews were undertaken with the aim of exploring 1) the clinical processes of the evaluation stage in CPS; 2) the particular challenges of evaluation within an intercultural context; 3) the perception of similarities and differences in the evaluation of situations involving minority families; 4) the role of personal and professional values in the practice of evaluation and 5) the influence of larger social and political contexts on practice.

Results: Themes generated from the analysis of interviews with practitioners uncover the challenges of combining intercultural approaches with the specific mandate of CPS, specifically in relation to risk-management and education regarding the mandate of CPS with certain families. Concerns regarding delays of evaluation, access to resources and lack of basic knowledge about intercultural approaches were also identified as obstacles to evaluation with these families. Analyses also document the importance practitioners give to their personal identity and values in order to support their decisions. The results reveal as well how institutional and social contexts are intertwined in a complex way in shaping daily interventions with minority families in CPS.

Conclusion: Such report has the potential to inform practices and policies to better address the needs of minority families in child protection services. Building on these results and the specificity of the methodology (grounded theory), all relevant issues have been Incorporated into a second round
of interviews to deepen our understanding and analyses of the evaluation within an intercultural context.


Child protection assessments in Norway - Experiences of workers and families

Thursday, 15th September - 12:42 - Decision Making in Child Welfare

Dr. Jim Lurie (Norwegian University of science and technology), Ms. Torill Tjelflaat (Norwegian University of science and technology)

Objectives
Child protection assessments in Norway play an important role in determining which children receive child protection services and which services they receive. The results from two recent studies of the assessment process will be presented. These describe the assessment process from the perspective of child protection workers and families. The studies provide interesting new information about how child protection workers carry out assessments, and how workers and family members experience interaction with each other in this process.

Method
The studies are qualitative, with data collected through interviews with participants in the assessment process in central Norway. The first study is based on interviews with child protection leaders and workers from 18 local agencies, and with supervisors from three county authorities. A second ongoing follow-up study is based on interviews with workers and family members who have interacted in a recent child protection assessment.

Results
The first study found much variation in how local child protection agencies carry out assessments. This is partly due to Norwegian law which gives local agencies and individual workers considerable discretion in the assessment process.

Variation was found with regard to completion of assessments within mandated deadlines (normally three months), and the proportion of assessments which resulted in a child protection intervention. There was also variation with regard to how workers carried out the assessments. Practice variations included whether and how standardized assessment instruments were used, different types of interaction with the child and the parents, and to what extent they participated actively in the assessment process. There were also variations with regard to interaction with other agencies and in the use of outside experts in making assessments.

Some similarities in practice were also found. Child protection workers distinguished between two types of assessments, ordinary and comprehensive assessments, which were handled quite differently. This distinction was often made early in the assessment process based upon the presumed seriousness of the case, and the most likely outcome of the assessment, supportive services to the family, or placement of the child in alternative care.

Reasons for concluding an assessment with no intervention were also similar. The most common reasons were failure to find a legal need for services, parental unwillingness to accept voluntary support services, and referral to other agencies with no follow-up by child protection services.

Preliminary findings from the second study indicate differences in how the child, the parents and child protection workers experience the assessment process, and interaction with each other. Workers often try to achieve good cooperation with the parents, in order to facilitate information gathering and to pave the way for agreement on choice of intervention. Family members, particularly the child,
were sometimes less positive about interaction with child protection, and felt that they had too little influence.

Conclusion

Practice variation in carrying out child protection assessments raises important and complicated questions. Norwegian child protection policy aims to ensure the rights of children to competent assessments and needed services regardless of where in the country they reside. On the other hand, good quality professional child protection must be able to deal with complicated and challenging family situations on an individual basis, with good professional judgement and discretion that can require differing solutions in seemingly similar circumstances. Pressure to complete assessments within mandated deadlines must not result in poor quality assessments, or in the failure to ensure that the child and the parents are able to participate in a meaningful way.
An alternative decision-making process and outcome to emergency placements of children

Thursday, 15th September - 12:54 - Decision Making in Child Welfare

Dr. Anita Storhaug (Norwegian University of science and technology), Mrs. Berit Skauge (Trondheim Municipality and Norwegian University of science and technology), Dr. Bente Heggem Kojan (Norwegian University of science and technology)

The purpose of this paper is: 1) to present data from the study “Not-planned decisions to place a child in out of home care”, and 2) to present an alternative decision-making process and outcome to emergency placements of children. The aims of our study were to explore parent’s views and experiences with not-planned emergency placements, and look at how unnecessary emergency placements might be reduced within the Norwegian Child Welfare Services.

In the first section of our paper, we will present survey data from our interviews with parents (N64). Our analysis shows that approximately 40 % of the parents were in contact with the CWS ahead of the emergency decision to place their child, and said they wanted and asked for help at an earlier stage. Interestingly, we also found that the representation of families from advantaged social classes is higher in emergency placements compared to their representation in planned placements (Kojan og Fauske, 2011).

National aggregated data shows that there has been a significant increase in emergency placements in Norway over the last years. From 2008 to 2014 there was a 63 % increase. Although emergency placements are sometimes necessary, studies suggest that such placements should be prevented. Baugerud and Melinder (2012) show that children exposed to emergency placements, express feelings and behaviors similar to those who have experienced bereavement loss such as numbness, memory loss and apathy. Children experience the separation from their family, siblings, friends and school as stressful and traumatic. 50 % of the children experiencing emergency placements returns to their families within a year (Buárd, 2014). This raises great ethical and legal concerns for all parts involved.

In our study researchers and practitioners are working together to look at how the decision-making processes can be improved.

This brings us to the second purpose of our paper; how CWS systems can make use of humane options of using legal (and sometimes physical) powers in emergency situations. Our aim is to implement a decision-making process that might avert unnecessary emergency placements and to make a space for professionals to help the child within its family and extended network. If children are emergency placed in out of home care, opportunities for change within the family might be lost. Practitioners in our project experience that a crisis is often followed by a quiet period. A crisis provides an opportunity for change.

Our innovation requires no reorganization, but new ways of cooperating between already existing units within the municipality. Three CWS units in the municipality of Trondheim, i.e. Barnevernvakta, Gartnerhaugen and LINK are involved in the project. At Barnevernvakta, the professionals respond to concerns of immediate risk of harm to children 24/7. Gartnerhaugen is a 24 hour residential care unit. LINK is a support service, where family therapists, psychologists and social workers work with children with severe behavioral problems and families at risk, who struggle with the care situation.

The team will work with the families in their homes, and when necessary, they might stay with the family during the night or intervene with other kinds of support for a period to avert out of home
care placements. The team can access a residential care unit where children and (extended) families can stay together or separately. The team might offer interventions such as family groups, network mobilization, individual therapy, family therapy, couples therapy and network therapy. We suggest that this is a more humane way of helping children and families, additionally, it might also add valuable contributions to the Child Welfare Service’s assessment and decision-making process.
Dental health personals experience with mandatory reporting to child welfare authorities.


Prof. Anette Christine Iversen (University of Bergen), Dr. Ragnhild Bjørknes (University of Bergen), Ms. Silje Øverland Risøy (Vtrefylka child welfare service)

Norway has as most other western countries mandatory reporting requirements for health personnel and other public personnel. This law requires any individual who suspects serious child maltreatment to report to child welfare authorities. Each year the child welfare authorities receive more than 50,000 notifications and, in 2014 hospital/doctor/dentist accounted for six percent of these messages. All children have the right to free dental care until they are 18 years old and are called in to their local public dental health clinic regularly through their childhood. During the last few years mandatory reporting has received increased public attention and many counties have implemented new routines for public dental health personnel on what and when to report to child welfare authorities. Signs of child abuse and neglect may often be difficult to understand, reporters must therefore make decisions under uncertainty just as social workers in child welfare authorities often have to do. According to an ecological decision model, such decision is not only influenced by the characteristics of the case but also the knowledge and attitudes of the professional, the organization and external factors like policy.

The purpose of the present project was to investigate dental health personnel’s experience with mandatory reporting to child welfare authorities.

Individual qualitative interviews were carried out with four dentist and three dental hygienists in 2014. The informants had from four to 30 years’ experience and were employed at four different dental health clinics in Hordaland County, Norway. The interviews were audiotaped and then transcribed verbatim and analysed.

The informants had all sent notifications to child welfare authorities and experienced situations with their patients that had made then concerned such as patients that did not show up, poor dental health, signs of neglect, signs of psychological abuse and patients showing strong resistance to treatment. However, in many cases the signs were vague and the informants found it difficult to reach a decision to send notification to child welfare authorities or not. Since they often experienced a “gut-feeling” they were afraid to make a mistake if they had no objective proofs, they were uncertain regarding ethnic minorities and different cultural practices, and they were also uncertain whether sending a notification would help the child. The informants felt the need to have someone to discuss their worries and concerns with and they also needed more training and competence. They wanted a closer collaboration with the child welfare service which they perceived as a “closed” service.


Mr. Arve Lerum (University of Stavanger, Faculty of Social Science, Intitute of Social Work)

Objective
The aim of this study is to explore decision-making and implications of emergency out-of-home placements made by the Child Protection Service in municipalities in Norway. In such interventions, children and young people are forcibly removed from their families in accordance with the Norwegian Child Welfare Act (CWA). The Child Protection Service in each municipality has the authority to make and carry out such decisions, but the decision has to be agreed by the Regional Social Welfare Board. In the period 2008 to 2012, the number of such interventions increased by 47%

Method
Data was collected from semi-structured interviews with 36 frontline child protection workers in municipalities in Norway. Formal documents held by the municipalities and the Regional Social Welfare Board were also collected. Content analysis was carried out by NVivo 10.

Results and discussion
Two different pathways of out-of-home interventions have been identified; fast track and slow track. The fast track indicates that the child is moved from the family immediately or some days after the concern is recognized. The slow track indicates that several months can pass from the time an acute concern is recognized by the Child Protection Service until the out-of-home placement is carried out. In such slow track cases, the Child Protection Service needs to discuss the concern both with other organizations such as the police, teachers and with other specialized child protection services. Our initial findings indicate that the Child Protection Service shows signs of doubt about the situation of concern both before and after the decision to carry out an emergency out-of-home intervention.

After the out-of-home placement, two main pathways were identified, a return back to the family or a long-term out-of-home placement. The preliminary findings are discussed in relation to social work practice and to the discourse of the child’s best interests and the rights of the biological family. The study discusses the processes through which emergency out-of-home placement decisions move, and the opportunities for the Child Protection Service to prevent such interventions. The different pathways are discussed and related to the discourse of the child’s best interest and to the contending discourses of the rights of the biological family.

Conclusions
A preliminary conclusion is that the Child Protection Service, in some cases, should do more to explore the opportunities for empowering the family before an emergency out-of-home placement is enacted. In other cases, the Child Protection Service should make the out-of-home placement more directly. It is hard to find a single way in which such cases should be managed. The study highlights the complexity of emergency out-of-home placements and discusses implications for social workers and child protection frontline workers.

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Youth care workers perspectives on and use of evidence-based practice

Thursday, 15th September - 12:30 - Outcomes and Evidence Based Practices

Mr. Tim Stroobants (Vrije Universiteit Brussel / Child and Family), Prof. Johan Vanderfaeillie (Vrije Universiteit Brussel), Dr. Frank Van Holen (Vrije Universiteit Brussel / Plegzorg Vlaams-Brabant en Brussel), Prof. Caroline Andries (Vrije Universiteit Brussel)

Despite increased emphasis on evidence-based practice (EBP), the limited implementation of EBP is a well-known reality. EBP is considered to be a comprehensive concept including, but not restricted to the use of empirically supported treatments (ESTs). Also policy and values directives, practice principles, common factors, common practice elements and specific practice knowledge are considered as parts of EBP (Barth et al., 2011). This latter nuance is important since it identifies one of the most controversial topics in the field, namely, the high-fidelity implementation of empirically supported intervention protocols (Borntrager, Chorpita, Higa-McMillan, & Weisz, 2009). It is often suggested in the literature that practitioners should have knowledge of and favorable attitudes toward EBP before they adopt it into practice.

The current study addresses several research questions. First, what provider background characteristics predict knowledge of EBP and attitudes toward EBP/ESTs? Second, how are providers’ knowledge of EBP and attitudes toward EBP/ESTs associated? Third, how are providers’ knowledge of EBP and attitudes toward EBP/ESTs associated to the use of EBP?

Three self-report measures were completed by 74 special youth care practitioners. The EBPQ was used to assess practitioners’ knowledge of, attitudes toward and use of the process of EBP influencing EBP uptake and implementation. With the EBPAS, practitioners’ attitudes toward manualized interventions were measured. Finally, a practitioner background questionnaire was developed to gather information about provider’s demographic characteristics, work setting, education, experience and use of ESTs.

In general it was found that few practitioner background variables were related to knowledge of and attitudes toward EBP and EST. The results of multivariate regression analysis showed that degree (t=3.24, p<.01) and gender (t=-2.03, p<.05) of the provider predicted the knowledge of EBP significantly. Next, years of work experience (t=1.84, p<.05) and age (t=1.73, p<.05) predicted the attitudes of practitioners toward EBP. No provider background variables were associated with their attitudes toward ESTs.

Concerning the relationship between providers’ knowledge of EBP and attitudes toward EBP/ESTs, some positive associations were found. The attitudes of practitioners toward ESTs and EBP appeared positively related (rs=.31, p<.01). The correlation between EBP attitudes and EBP knowledge was also significant but small (rs=.26, p<.05). There was no significant relation found between providers’ attitudes toward manualized interventions and knowledge of EBP.

Finally, some associations were found between providers’ knowledge of EBP and attitudes toward EBP/ESTs and their use of it. Using multivariate linear regression analysis, providers’ knowledge of EBP (t=4.42, p<.01) predicted providers’ use of EBP, while attitudes toward EBP approached the significance cutoff (t=1.78, p=.08). Attitudes towards manualized programs and the use of ESTs did not significantly predict providers’ use of EBP.

With regard to the use of ESTs, no single variable predicted the use of manualized programs when entered simultaneously in the multivariate model. Nevertheless, the negative association between
attitudes of practitioners toward EBP and their use of ESTs approached the significance cutoff (B=-.03, p=.08). The more positive practitioners are towards EBP, the less they use an EST in a high-fidelity way.

Together these findings confirm that enhancing the knowledge base of practitioners and positively influencing their attitudes toward EBP are two of the tracks for closing the gap between research and practice (Kazdin, 2008; Newnham & Page, 2010). On the other hand, the findings also demonstrate that in practice EBP and ESTs are barely related to each other. We believe that the debate would benefit from more attention to the broader picture of EBP, more specifically the relations between all concepts of EBP instead of an overly exclusive attention to ESTs (Barth et al., 2011; Lilienfeld et al., 2013).
User Defined Outcomes? Opportunities and challenges of Goal Attainment Scaling as a measure of outcomes in child and family social work

Thursday, 15th September - 12:42 - Outcomes and Evidence Based Practices

Ms. Amy Lynch (University of Bedfordshire, Tilda Goldberg Centre), Ms. Fiona Newlands (University of Bedfordshire, Tilda Goldberg Centre), Mr. David Westlake (University of Bedfordshire, Tilda Goldberg Centre), Prof. Donald Forrester (Cardiff University)

Introduction
Measuring outcomes in child and family social work is notoriously difficult. Reasons for social work involvement are complex and varied, ranging from a baby where there are serious concerns about risks, through a family with social problems to a teenager with challenging behaviour. Even where there is a clear presenting problem, the specific goal may not be captured by standardised instruments. Furthermore, the aim of social work is not always to create change: sometimes it is to maintain a fragile situation. Finally, the values of social work point to the importance of service users defining their own goals. This is difficult using pre-existing standardised instruments.

This presentation reports on an attempt to overcome some of these challenges by measuring outcomes in a client defined way, using Goal Attainment Scaling (GAS; Kiresuk & Sherman, 1968). We explore the opportunities and challenges of GAS using data collected in research studies on social work practice in England.

Background
GAS was first used to evaluate mental health treatment outcomes (Kiresuk & Sherman, 1968). It forms part of two research interviews. At the first, the client shares a goal that is important to them. Detailed descriptions are elicited to document the current situation and how things might be if they get ‘much better’ or ‘much worse’. At the second interview, progress is mapped against the initial descriptions through a qualitative summary of changes and by quantifying progress on a scale from -2 to +2.

Method
A version of GAS, adapted for child and family social work is being used in three studies exploring the impact of social work skills on outcomes for children and families. This follows analysis of a pilot of GAS (Forrester et al, forthcoming). We will present a content analysis, giving a description of client-defined goals illustrating contrasting potential outcomes. We will also use quantitative data to explore progress and examine how far the GAS framework accommodates these goals. At the time of submission, data has been collected from 196 clients at interview one and 34 clients at follow up.

Results
Content analysis identified a diverse set of goal categories, including substance misuse, parenting, and issues such as housing or immigration. Some goals did not fit easily the GAS framework, due to the nature of the goal. Some goals were not behavioural or within the client’s control and some were unrealistic within the timeframe. Not all descriptions were specific enough for assessment of progress. This analysis illustrates the potential of GAS, highlights the challenges and suggests further adaptations.
Conclusions

GAS is promising for measuring outcomes in child and family social work, and adaptations implemented here increase its utility. Implementation is challenging but GAS offers a more flexible and client-centred assessment of outcomes than many alternatives. We explore the practicalities and ethics of operationalising GAS as a research tool, arguing that GAS is best conceptualised as a collaborative (rather than client-centred) outcome measure, and that this makes it particularly useful for research and practice. We also suggest further enhancements (client perspectives of agency goals, exploring barriers). We aim to contribute to a wider debate about the impact of social work and how outcomes can be defined and understood.

References


Examining the Differences Between “Low” and “High” Research Evidence Users in Child Welfare Practice

Thursday, 15th September - 12:54 - Outcomes and Evidence Based Practices

Ms. Kristen Lwin (Practice and Research Together (PART)), Ms. Julia Wedeles (Practice and Research Together (PART)), Ms. Sarah Head (Practice and Research Together (PART)), Mr. Aaron Turpin (Practice and Research Together (PART)), Ms. Auriole Fernandes (Practice and Research Together (PART))

Child welfare is arguably one of the most challenging fields of practice in the human services, with workers facing a multitude of issues intertwined with policies, legislation, media, and the need for transparency and accountability. The use of research in practice has been shown to increase service user positive outcomes, and promote the reciprocal relationship between organizational culture, climate, the learning organization, leadership, and worker self-efficacy.

Evidence-informed practice (EIP) includes research evidence within the consideration of context, client preferences, and worker/supervisor experiences to build a comprehensive framework of practice and decision-making. However, there is a gap in the literature, as the field needs a better understanding of factors that contribute to the consistent use of research evidence. Thus, this presentation explores the differences between “high” and “low” research users in the Canadian child welfare worker population.

Quantitative analyses of two data sets were used to answer the research question. The first data set was developed to better understand what child welfare workers (N=253) and supervisors (N=103) need to promote the use of research in practice. Measures included: demographics, organizational promotion of research use, self-efficacy in using research, research course completion, and amount of research in daily practice. Linear regression findings indicate that a supervisor’s self-efficacy of using research significantly predicts the amount of research engaged with in the team setting. Further results indicate that for child welfare workers, higher organizational promotion of research significantly predicts being a “high” individual research user.

The second set of data were collected from a study evaluating a professional development series aimed at increasing the use of research in child welfare practitioners (N=96). Measures include: EIP knowledge and use; attitude towards EIP; likelihood of adopting EIP; confidence in using research; perception of barriers to using research; frequency of discussing research; relationship with supervisor; team cohesiveness; supervisor practice support; self-efficacy of using research; and number of times research was used in the previous month. Linear regression results indicate that the total number of times research was used in the past month was significantly predicted by whether participants took a research course at some point in their education, higher likelihood of adopting evidence-based practice, and positive attitude towards evidence-based practice.

Taken together, these findings are informative about the differences between child welfare practitioners and supervisors who use research frequently and those who do not. To bring the findings of this research to practice, we offer practical suggestions. The use of research in child welfare practice is not a simple direct singular relationship; rather, there are factors at various levels (organizational, supervisory, and practitioner) that may have an impact upon research use. Promoting discussion of research in supervision; team meetings, department meetings, and case conferences will increase the likelihood of individual research use. Self-efficacy may be a reciprocal concept; those who are confident in research use, engage with it more often, and vise versa. However, we know from the literature that self-efficacy plays a key role in engagement. Thus, supervisors need to build their
own confidence with research, including professional development and support from mentors to promote the learning and confidence of those they supervise. Lastly, practitioners should be supported in their education of research, methodology, and application to practice. A concurrent focus on increasing the amount of research used in practice and promoting values and beliefs about research use in child welfare practice will only strengthen the outcomes for children and families they work with.
Evaluating treatment effectiveness: The power of single case designs

Thursday, 15th September - 13:06 - Outcomes and Evidence Based Practices

Dr. Marc J.M.H. Delsing (Praktikon)

One of the central issues when evaluating treatment effectiveness is the issue of causality. This means that we want to know whether observed improvements in client functioning can be attributed to the treatment. In this respect, an RCT-design (RCT: randomized controlled trial) is generally regarded as the ‘gold standard’ by means of which alternative explanations for client progress can be ruled out. In an RCT-study, clients are randomly allocated to a treatment group and a control group. The primary goal is to test whether an intervention works by comparing it to the control condition, usually either no intervention or an alternative intervention. In practice, however, it is not always desirable or feasible to conduct an RCT-study. In this presentation, I will demonstrate that a single case study with an interrupted time series design can be an interesting alternative to an RCT-design. Single case studies typically involve repeated, systematic measurement of a dependent variable, usually before, during, and after the active manipulation of an independent variable (e.g., applying an intervention). In a single case design, the client can serve as his/her own control because the client’s functioning before (baseline) and during treatment can be compared. Like RCT’s, single case designs can thus provide a strong basis for establishing causal inference. Moreover, single case studies have clear advantages over group-based RCT-studies since they provide information on treatment progress of individual clients, which is usually the aspect practitioners are most interested in.

In this presentation, I will discuss the most important features of single case designs, the research questions they can address, as well as the most commonly used types of single case designs. Subsequently, I will focus on the different techniques available for the analysis of single case data, and discuss their strengths and limitations. More specifically, I will focus on Simulation Modeling Analysis (SMA; Borchart et al., 2008), for which a freely downloadable software program is available. This program is easily accessible for practitioners and has several advantages over visual techniques and other types of (statistical) analysis. The application of SMA in practice will be demonstrated. It is shown how SMA can identify changes in level and slope of symptoms across intervention phases, on the basis of which causal inferences regarding the effectiveness of the intervention can be made.
Identifying predictors of recorded child maltreatment and admission to care, using data from a birth cohort study

Ms. Helen Baldwin (University of York)

Objectives
This study aimed to identify predictors of recorded child maltreatment and children’s admission to care, through the longitudinal analysis of data from a large birth cohort study, linked to administrative data on abuse and neglect. The study forms part of a wider study examining decision-making and outcomes for maltreated children, which is funded by the UK’s Economic and Social Research Council. Child maltreatment is known to be associated with several factors including deprivation, domestic violence and parental substance misuse, however little is known about the complex relationship between these variables. Furthermore, the majority of studies in child welfare research use cross-sectional designs, due to difficulties in collecting data on children and their families before they come into contact with the child protection system. This study provided a unique opportunity to examine children’s family circumstances prior to their involvement with children’s social care, drawing on data from the Born in Bradford project, a cohort study of 13,500 children born between March 2007 and December 2010 in Bradford, a city in the north of England with a multi-ethnic population.

Method
This study used a catch-up design, linking together two types of pre-existing data collected at different time points: (i) data from questionnaires administered to expectant mothers during antenatal appointments for the Born in Bradford project, and (ii) administrative data held by Bradford local authority on young children who have been identified as children in need of social care due to abuse or neglect. This study is the first to collect pre-birth data on children who subsequently come into contact with the child protection system for reasons of abuse or neglect.

Results
Measures of maternal and family characteristics captured at the antenatal stage were compared between a group of children with recorded maltreatment concerns, and a larger group of children with no recorded maltreatment concerns. Comparisons were also made between children who had entered care for reasons of abuse or neglect, and those who hadn’t. Indicators of socioeconomic status emerged as strong predictors of recorded maltreatment concerns, including: housing tenure, the mother’s highest educational qualification and the father’s employment status. Meanwhile, ethnic group was found to predict admission to care.

Conclusions
This paper presents important new findings on factors evident at the antenatal stage which indicate a higher risk of subsequent abuse or neglect and likelihood of care placement. These findings will advance scientific understanding of risk and protective factors in relation to child maltreatment and inform future social care interventions with children and families.

Theme
Safeguarding children in the early years
“They’ve been thrown here”: residential care professionals’ discursive construction of the term “unaccompanied minors”

Thursday, 15th September - 12:30 - Unaccompanied Asylum Seeking Children

Dr. Marzia Saglietti (Università di Bologna), Prof. Laura Palareti (Università di Bologna)

Abstract

Objectives

In this presentation we intend to analyze how care professionals discursively construct the term “unaccompanied minors” (UMs) and how, in doing so, they account for their everyday practices within residential care. Relying on two specific interview datasets (collected respectively in 2008 and 2016), changes in the discursive production of representations over the years emerge.

Recently, numerous labels have been coined to describe this dramatic phenomenon: mineurs étrangers isolés, refugee children and adolescents, unaccompanied minor asylum seekers, and so forth. Each label recalls specific aspects of the extremely complex scenario – the asylum-seeking process, their (often) traumatic journey, the distance from their birth families, and so forth – and appears to be strictly connected to the country in which the hosting process takes place (Betancourt, Fromfeller, Mishra & Hussein, 2015; Carlson, Cacciatore & Klimek, 2012; Oppedal & Idsoe, 2015; Sirriyeh, 2013). Which aspect of UMs’ identities –their age, migration status or lack of family members – counts most in orienting residential care practices?

In Italy UMs are provided with the same type of care as for any other out-of-home children. In 2016 10.601 UMs were in residential care services or foster families, and an additional 4.696 were untraceable (MLPS, 2016). The scenario is not only difficult to piece together and describe, the child welfare response is also difficult to create, maintain and develop.

Method

Based on discursive psychology (Edwards and Potter, 1992), this study draws on ethnographical research in three residential care services for children based in Rome (Italy) as well as includes two different interview datasets collected in 2008 and in 2016 (Saglietti, 2012a and b) with six professionals, mainly social educators and social managers.

Results

Results show that in 2016 professionals’ social construction of UMs is more complex than in the 2008 interviews. In 2008 professionals described UMs as “lonely” and lacking agency concerning destination country choice (“They’ve been thrown here”) and a demanding attitude (“They are annoying”) connected to their economic mandate (“They arrive with a lot of requests”). In 2016 instead, the interviewed professionals profess a more manced, mature and active representation of UMs and, consequently, of their own work.

In both datasets professionals’ representations of unaccompanied minors are very different from “standard” out-of-home children regarding their (psychological) age, cultural background, and everyday needs. Additionally, UMs reflect numerous (existential) paradoxes (Ferradji, 2012). They have to attend Italian schools while in their birth-country some of them already worked, they no longer have control over their everyday lives even after having successfully managed a long and excruciating journey, some of them ran away from home and are “forcedly” located in a family-like environment.
These considerations impact the way care professionals balance their everyday work practices, requiring different (or even opposite) patterns of interaction and implicit intervention theories depending on the “category” of children in care (i.e. if coming from vulnerable families or if UMs).

Professionals indicate their willingness to deal with changing organizational mandates and daily practices in order to fulfill UMs’ rights to childhood, inclusion and well-being as well as balance their different needs and requests.

Conclusions

We have explored connections between professionals’ discursive representations and everyday practices that could provide practical suggestions for welfare agencies, reflections on intercultural management of residential care, and call for a closer examination of the issue. Moreover, stepping beyond care professionals’ views, we problematize how the out-of-home model of intervention based on the idea of therapeutic milieu (Palareti & Berti, 2009; 2010) must be completely revised when applied to UMs.
Returned asylum-seeking children: How are children who stayed in European host countries faring after return to their country of origin?

Thursday, 15th September - 12:42 - Unaccompanied Asylum Seeking Children

Ms. Danielle Zevulun (University of Groningen), Prof. Margrite Kalverboer (University of Groningen, the Netherlands), Dr. Elianne Zijlstra (University of Groningen, the Netherlands), Dr. Wendy Post (University of Groningen, the Netherlands), Prof. Erik J. Knorth (University of Groningen, the Netherlands)

Objectives

In 2014, 51% of the refugee population worldwide consisted of children (UNHCR, 2015). Research on asylum-seeking children and the risk and protective factors associated with their wellbeing has been conducted in the – mostly high-income – host countries where they are staying. However, as many asylum seekers return to their home countries, the refugee cycle does not necessarily end in the host country.

How asylum-seeking children are faring after voluntary or forced return to their countries of origin is not studied widely as yet (Fazel et al., 2012). NGO reports show that returned unaccompanied minors in Afghanistan and returned children in families in Kosovo are facing adaptation difficulties after return, such as living in poverty, not having a family or social network, reintegration difficulties due to being westernized, dropping out of school, and severe social-emotional problems (Gladwell & Elwyn, 2012; Knaus et al., 2012).

This study aims to gain insight into the rearing environment and wellbeing of asylum-seeking children who returned with their parents to Kosovo and Albania, including the factors that are associated with the children’s wellbeing and quality of the child-rearing environment: Which factors seem to predict whether the returned children do (not) fare well, and end up in a high/low quality rearing environment after return to the country of origin?

Methods

As part of a broader European project to develop a monitor on returned migrant children (MRM-project) we collected data on the living situation of 150 returned children in Kosovo and Albania. Kosovar interviewers assessed the quality of returned children’s rearing environment with the Best Interest of the Child-Questionnaire (BIC-Q) (Zijlstra et al., 2012; Zevulun et al., 2016). In addition, social-emotional wellbeing of the child was screened by using the SDQ (Goodman, 1997).

Results

A first look at the results shows that factors relating to the status of the family in the host country and the accompanying possibilities to work, the forced or voluntary nature of their return, and the belonging to a minority or majority ethnicity, seem to influence the children’s situation after return.

Conclusion

Knowledge on the post-return situation of asylum-seeking children and the factors associated with children’s wellbeing after return, can inform the migration decision-making procedures in the host countries. In addition, it provides indications for the strategies to support children before and after the actual repatriation, in order to comply with the best interest of the child principle in the return process.
References


Unaccompanied minors in the Netherlands: in which type of care facility do they flourish best and what do we know about unaccompanied minors in foster families?

Prof. Margrite Kalverboer (University of Groningen), Ms. Jet Rip (University of Groningen), Dr. Elianne Zijlstra (University of Groningen), Dr. Wendy Post (University of Groningen)

Objectives
One of the major decisions affecting unaccompanied minors’ lives after arriving in the Netherlands concerns the type of care facility that will best protect them while waiting for the outcome of their residence permit application. Several studies recognized that the best outcome for most unaccompanied minors are highly supportive environments (Nidos 2015b; Ni Raghaillaigh 2013; Wade, 2011; Wade et al. 2012).

The presented study consists of two parts. The main questions on which we focus in the first part of the study are: what are the opinions of unaccompanied minors living in foster care, small living units, small living groups or campuses in the Netherlands about their daily lives, the care and support they receive and their future prospects and which type of care facility offers them the best support and guidance for their wellbeing?

The second part of the study goes deeper into foster care for unaccompanied minors. The Dutch practice is to place unaccompanied minors under 15 years of age in foster care (Kamerstukken II, 2013/2014), and more specifically in foster families that are ‘connected with or close to their own ethnic background’ (Nidos, Salar & CHBT, 2015, p. 70).

Methods
Interviews with 132 minors are both qualitatively and quantitatively analysed. Based on the transcripts from the interviews the researchers completed a questionnaire (BIC-Q) to judge the quality of the child rearing environment in the different types of care facilities.

As part of a larger study on the factors contributing to a successful placement of unaccompanied minors in foster families and the influence of matched cultures herein, a systematic review has been carried out in order to determine what we know about unaccompanied refugee minors in foster families.

Results
The results of the first part of the study indicate that minors in foster care feel most at home and are most positive about their place in Dutch society. Minors in small living units and small living groups often miss affectionate bonds, care, support and stability in their lives. Most minors in campuses often feel lonely and sad and feel they are outcasts in Dutch society. Several minors mention that campuses are unfit for them because the lack of care and support they receive. The quality of their child rearing environment is judged by the researchers as being so low that these facilities would appear to be unfit for unaccompanied minors.

The results of the systematic review are not available yet, but they will be when the EUSARF conference is held.

Conclusions
There is a growing body of findings on the relative merits of a highly supportive environment for unaccompanied minors in the host country like foster care (Ni Raghallaigh 2013; Wade 2011; Wade et al. 2012). The results of our study point out in the same direction. Compared to minors growing up in less supportive environments, minors in foster care fare best.

References


The Best Interests of the Child assessment in asylum procedures of unaccompanied minor asylum seekers: A case study

Thursday, 15th September - 13:06 - Unaccompanied Asylum Seeking Children

Ms. Carla Van Os (University of Groningen), Prof. Margrite Kalverboer (University of Groningen), Dr. Elianne Zijlstra (University of Groningen), Ms. Danielle Zevulun (University of Groningen), Ms. Jet Rip (University of Groningen), Mr. Daan Beltman (University of Groningen), Prof. Erik J. Knorth (University of Groningen)

Background and objective. For unaccompanied asylum seeking children arriving in the host country, an assessment and determination of the best interests of the child must be carried out before a decision can be made about their request for protection. An unaccompanied asylum seeking child who asks such protection has to tell his or her life story to the migration authorities to enable them to make the decision on the child’s asylum request. However, a lot of unaccompanied refugee children face difficulties with sharing their life stories (Kohli, 2006). Experiences prior, during, and after the migration can cause hesitation to disclose their life narratives (Ni Raghallaigh, 2014; Van Os et al., 2016).

Decision-making in a migration procedure obliges the decision-makers to gather extensive information on an unknown – recently arrived – and often, silent child. In order to safeguard the best interests of children it is important to have scientifically based standards on the way the best interests of the child should be assessed. The Best Interests of the Child (BIC)-model, developed by the Study Centre for Children, Migration and Law of the University of Groningen, provides such a standard (Kalverboer & Zijlstra, 2006). The BIC-model consists of fourteen pedagogical environmental conditions that promote, and should safeguard, the development of the child. The right to development is closely linked to the ‘best interests’ concept. Against this background we will describe how the application of the BIC-model as part of a diagnostic assessment procedure can be helpful in ensuring the right to development of unaccompanied asylum-seeking children.

Method and results. Elsa is an unaccompanied asylum seeker who came to the Netherlands at the age of 16. She failed to tell the reason for her flight in a coherent and consistent way, as the migration authorities requested. Elsa’s guardian asked the Study Centre for Children, Migration and Law to conduct a diagnostic research in order to find out what happened to her, and why she was not able to tell about her life in Eritrea in a ‘proper way’. We assessed the best interests of Elsa and concluded that the effect of traumatic experiences was hampering her ability to share with others the details that were needed to grant her protection.

Conclusions. This case study shows how the best interests of the child could be assessed in asylum procedures. It describes the topics that should be included, the instruments that can be used, and the facilitators needed for refugee children to disclose their life stories. Implications for research and practice will be reflected upon.

References


Parent counseling in Child Welfare Services: A Norwegian study

Thursday, 15th September - 12:30 - Family Intervention

Mr. Dag Skildred (Uni Research Health), Dr. Karen J Skaale Havnen (Uni Research Health)

Objective

Over the past 20 years, an increasing portion of children and adolescents has received assistance from the Child Welfare Services (CWS) in Norway. Today, roughly every tenth child receives at least one intervention in the course of childhood and adolescence. In-home services form the main type of interventions offered by the CWS. Despite of the considerable public investment, little research has focused on in-home services up to present day. One important part of the project “Research on Norwegian Child Welfare Services in-home” initiated by the Norwegian Directorate for Children, Youth and Family Affairs, was to gain in-depth knowledge about parent counseling, which is the most common in-home intervention. This paper will present the method and the main findings from this part of the project.

Method

Parents and case workers in 12 cases were interviewed. The data have been supplemented by two focus group interviews with supervisors performing this type of intervention. Each interview was audiotaped, transcribed and analyzed using the software NVIVO 10. Thematic analysis allowed for identifying and analyzing themes and patterns of meaning across our data.

Results

The 12 interviews with parents and case workers included a total of 16 children at the age of 0 to 18 years, 10 boys and 6 girls. Most children lived together with their single mothers or fathers, two of the mothers had a minority background, and only a few children lived together with both parents. The case contents could be described as a concern for the children’s care situation, the mother’s depression, domestic violence, parenting problems, behavioral problems, return from foster homes, and fathers’ challenges in taking on their new roles in daily care.

There was great variety in terms of the scope and contents of parent counseling interventions. The frequency of meetings ranged from several times a week to monthly or even less often. Parent-child interaction was the most dominant topic of counseling. In most cases the intervention was performed by specific supervisors, while some case workers also performed this task. In about half of the cases specific methods were adopted (COS, PMTO). In the other half, general methods of social work were used. Parents who received counseling based on specific methods had more frequent contact with their supervisor compared to those who received general methods of social work. In about one half of the cases the counseling was carried out in the parents’ home, while the other half took place at CWS offices.

Overall, most parents stated that the counseling had led to positive changes, both for themselves and their child. In contrast, the interviewed caseworkers referred to less pronounced changes in this regard. Although the usefulness of the intervention was emphasized by both parents and caseworkers, we argue that the interviews with these participants as well as with the focus group with supervisors revealed several themes that need to be highlighted and discussed. This applies primarily to: The importance of a common understanding of the purpose of counseling, how broad the counseling can and should be, the balance between direct advice versus a more reflective type of counseling, the
use of specific methodology versus a rather general social work methodology, the need for follow ups after the intervention’s termination, and finally the need for interagency cooperation.

Conclusion

Although parent counseling forms the most used in-home intervention offered by Norwegian Child Welfare Services, research on this type of intervention is limited. There still remains a great demand for descriptive research and approaches to examine the effects of different parent counseling interventions.
Child outcomes of home visiting for families with complex and multiple problems: a systematic review and meta-analysis

Thursday, 15th September - 12:42 - Family Intervention

Mr. Arjen Van Assen (University of Groningen), Mrs. Jana Knot-Dickscheit (University of Groningen), Dr. Wendy Post (University of Groningen), Prof. Hans Grietens (University of Groningen)

Introduction

Families with complex and multiple problems are faced with an accumulation of problems across multiple areas of life. Furthermore, these families are often considered to be ‘difficult to treat’. Children and teenagers growing up in these families are exposed to an accumulation of risks and are adversely affected in their cognitive, social, emotional, and health development (Ghesquière, 1993).

A prominently used type of intervention for these families is Home Visiting (HV); these programmes take into account the complex combination of problems, set a clear priority of goals and support families in attaining these goals through intensive home visiting. Whereas positive effects of HV on parental stress and family functioning have been established, child outcomes show only moderate or incoherent patterns of change. Possible explanations of this phenomenon are 1) that existing interventions are too short to realise sustainable change and 2) that children receive too little attention in family-focused interventions (Knot-Dickscheit, Thoburn & Knorth, 2016).

Objective

A systematic review of child outcomes of professional HV programmes is lacking. The aim of this study is to investigate which child outcomes are reported in evaluation studies of HV and how HV affects these outcomes. The study is part of a larger project investigating the effects of combining home-visiting with child and youth coaching.

Methods

A systematic review was conducted using the PsycInfo, ERIC, SocIndex and MedLine databases. Combinations of terms referring to families with complex and multiple problems (e.g. multi-problem families, multi-stressed families, disadvantaged families) and home-visiting programmes (e.g. home-visiting, home-based care, placement prevention programmes) were used. The focus of this study was on home visiting programmes for families with complex problems. This excludes interventions aimed at families or persons with a single problem (e.g. financial problems) and interventions that are not home-based (e.g. foster care or residential care). In focussing on child outcomes we excluded reports of parent or family-related measures and only included measures related to child development such as cognitive development, social skills and problem behaviour. Finally, studies from before 1980 were excluded. During the review process both qualitative and quantitative studies were included. However, for quantitative outcomes – where enough statistical data was available - a meta-analysis was conducted to examine the extent to which home visiting programmes are successful in influencing these outcomes.

Outcomes

In the presentation a description will be given of the systematic review of reported child outcomes of HV. Multiple child outcomes of HV programmes are reported such as decreased externalizing problem
behaviour, decreased delinquency and improved language and cognitive development. Although some positive effects of HV have been found, patterns of outcomes – both within and between studies – are often incoherent. Outcome measures will be presented in more detail, as well as specific outcomes of the meta-analysis. A review of child outcomes of HV provides youth care practitioners and researchers with a systematic overview of how HV affects child development. The identification of child outcomes in HV programmes allows practitioners and researchers to establish when HV is suitable. Finally, identifying child outcomes is an important step in the process of identifying which intervention elements of HV are related to meaningful improvement in child development.

References


Contribution of protective mechanisms for planning family-based interventions for youth with behavior problems

Thursday, 15th September - 12:54 - Family Intervention

Mrs. Gabrijela Ratkajec Gašević (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Prof. Antonija Žlžak (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Prof. Martina Ferić (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Ms. Ivana Maurović (University of Zagreb, Faculty of Educational and Rehabilitation Sciences), Ms. Josipa Mihić (University of Zagreb, Faculty of Educational and Rehabilitation Sciences)

Standardised family-based interventions are the most effective way of preventing or treating emotional and behaviour problems (Kazdin, 1994, McCabe et al., 2005, Hoeve et al., 2009, 2011, Sexton, Turner, 2010, Kumpfer, 2014). Research examining family relations suggests that good relationships between children, youth and their parents can improve their adjustment during important developmental phases and serve as a buffer to problem behaviours such as aggression and delinquency (Reingle et al. 2011; Losel and Farrington 2012). Since the process of positive adaptation in the context of risk is defined as resilience (Luthar et al., 2000), analysing relations between the above mentioned constructs is a contribution to this area of research.

“Research of the Family Resilience” was piloted at the University of Zagreb, Faculty of Education and Rehabilitation Sciences in the second half of 2015. The aim of the project was to determine ways of family resilience assessment and explore the contribution of the family resilience to the developmental outcomes of youth.

Goal of this paper is to determine the level of stress caused by entering high school, family protective mechanisms and behaviour problems perceived by the students in their 1st year of high school (N=304). Also, specific contribution of gender, stress levels and family protective mechanisms (Family communication and problems solving, Utilising social and economic resources, Maintaining the positive outlook, Family connectedness, Family spirituality, Ability to make meaning of adversity) to high school students’ behaviour problems will be examined. Instruments used for data gathering were: Sociodemographic questionnaire involving question on stress level caused by entering high school; Family resilience assessment scale (Sixbey, 2005) and Strengths and Difficulties Questionnaire (Goodman, 2005). The results of hierarchical linear regressions (separately for every subscale of behaviour problems: Prosocial behaviour, Emotional problems, Conduct problems, Hyperactivity, Peer problems) have shown significant contribution of some aspects of personal characteristics and family protective factors. More specifically, female gender and family connectedness contributes to higher levels of self-reported prosocial behaviour of youth. Female gender, presence of social and economic resources, family connectedness and ability to make meaning of adversity contributes to lower level of self-reported emotional problems while other aspects of family protective mechanisms do not contribute to self-report of other aspects of behaviour problems.

The results emphasise the importance presence of social and economic resources, and promoting family connectedness and building ability for making meaning of adversity in family interventions when challenging behaviour of youth is present.
Exploring work with Australian Aboriginal families to avoid care placements and to develop culturally safe care services.

Thursday, 15th September - 13:06 - Family Intervention

Ms. Kerry Moore (Barnardos Australia), Ms. Vivianne Freeman (Barnardos Australia)

Australian Aboriginal and Torres Strait Islander children are seven times more likely to receive a child protection intervention and nine times more likely to be in out-of-home care (foster, kinship or residential care) than the general population of Australian children. Australia’s history of past child welfare interventions, particularly the ‘Stolen Generations’ of Aboriginal children forcibly removed from their families under government policy in the 20th century has importantly led to some non-Aboriginal care agencies supporting ‘self-determination’ in Aboriginal child protection in the contemporary Australian setting. In a climate of ongoing crisis where large numbers of Aboriginal children are being reported to statutory child protection, and entering care, Barnardos Australia has examined ways of assisting Aboriginal children, their families and communities in culturally competent ways.

This paper presents an overview of recent approaches to working with Aboriginal families and communities by Barnardos Australia in NSW. It will explore attempts to increase Aboriginal staff numbers and the re-design of programs within a large NSW non-Aboriginal child protection organisation, and includes research which identifies the factors which work in some of the new programs. The paper will describe programs established in rural and city locations. It will also explore two culturally respectful approaches specific to work with children removed from their own families. The first is an emphasis on building kinship programs to support extended family and kinship groups, and secondly the development of partnerships with Aboriginal agencies to assist in development of standards of practice with ultimate movement to full Aboriginal control.

The method used in the study of ‘what works’ has been qualitative, utilising ‘cross cultural collaboration’ and bi cultural practice methods. We will present data on the achievement of improved Aboriginal staffing numbers and retention and the cultural changes required in our agency to achieve goal success. The research shows the slow development in employing Aboriginal workers and trainees and ways of supporting individuals. The paper will describe the formation of an Aboriginal advisory group within Barnardos with associated local regional meetings, and the importance of key Aboriginal workers and leaders. Time lines for establishment of local working parties, consultation and data collection and analysis will be presented.

In Barnardos rural and metropolitan Aboriginal learning centres, the results of a research study into ‘what works’ showed that in the learning centres extra support was needed for individual children with high level one-to-one attention required according to discrete child plans. Intensive work was also needed to develop positive relationships with Aboriginal parents; workers needed to come from the same Aboriginal community and children needed to be strongly connected with that local community. Practical assistance was very important, particularly food and transportation to programs.

Specific programs that have been developed with an Aboriginal focus, including Parents as Teachers and Home Interaction Program for Parents and Youngsters, will be included in the paper presentation.

Barnardos also now operates three specific Aboriginal OOHC programs, with focussed work on search for kin and supporting extended family. The demand for these services is high. Two active Aboriginal
agency partnerships with Aboriginal community controlled agencies are currently operating including one of four years duration and a more recent partnership. Establishment of these partnerships has proven to be an area of great complexity and challenge. Success and barrier factors will be examined and described.

Whilst it is too early to draw conclusions about the best ways for non-Aboriginal agencies such as Barnardos to work directly with Aboriginal families, the qualitative research and broad practice approaches undertaken to progress culturally competent service delivery to Aboriginal children and their families in NSW Australia provide critical lessons for the future.
Early family intervention: what is meant by Prevention? 
The case of French “parental centers”.

Thursday, 15th September - 13:18 - Family Intervention

Dr. Claire Ganne (University Paris Ouest Nanterre la Défense), Dr. Nathalie Thiery (University Paris Ouest Nanterre la Défense)

In all occidental countries, child protection systems are moving towards the greater implication of birth families and towards providing increased family support. Most legal frameworks recommend increasing parental participation, but this objective remains challenging in practice (Boddy et al., 2013). In France, since the 1980s, the legal framework of the child protection system has evolved from the logic of substitution to the logic of support for parenthood (Fablet, 2010). However, the practice of workers in child protection services is often far off these recommendations (Boucher, Belqasmi, Pouchadon, Eloi, & Petit, 2014). Research findings which take into account parents’ perspectives describe that feelings of shame and inadequacy can result in a difficult relationship with professionals, whether in the situation of out-of-home care (Join-Lambert et al., 2015) or in early family-focused intervention such as in maternity homes (Ganne, 2013).

At the same time, successive legislative reforms have emphasized the importance of early intervention and prevention. In this context, over the last ten years or so, different institutional actors have set up « parental centers », which house and support parental couples and their babies who find themselves in situations with multiple weaknesses: material precarity (such as socioeconomic resources and housing conditions), fragile social support networks and preoccupying interpersonal difficulties (institutionalization, family break up...). These centers are not part of shelter and insertion services (although they work towards helping adults in these areas), but are really part of child protection services. Their objective is one of prevention and, through early intervention, they promote the protection of the children by their parents. There are now a dozen of these centers in France.

The aims of the ongoing research presented in this communication are to identify and understand the relationship dynamics between parents, infants and professionals during these early family interventions, in a child protection context. The first step of this research consists of the analysis of institutional contexts, inspired by the work of Breugnot (2011). The data collected includes 10 group interviews with the professionals from ten parental centers and the analysis of the institutional documents from these ten centers. The results highlight the diversity of the different interpretations of the notion of prevention. This diversity is linked to local contexts, in terms of theoretical framework but also in terms of the expectations of the local administrative authorities. The prevention of institutionalization is a key issue between the institutional actors. The different ways of thinking about prevention also have consequences on the relationship between parents and professionals, and on the place of infants in these dynamics.

Bibliographic references


Development, Feasibility, and Piloting of a Novel Natural Mentoring Intervention for Older Youth in Foster Care in the USA

Thursday, 15th September - 12:30 - Transitions to Adulthood from Care

Dr. Johanna Greeson (University of Pennsylvania), Ms. Allison Thompson (University of Pennsylvania)

Purpose: The purpose of this oral presentation is to present the development and piloting of a novel, natural mentoring intervention, Caring Adults ‘R’ Everywhere (C.A.R.E.), for older youth transitioning to adulthood from foster care in the USA. C.A.R.E. is theory-driven and research-based, and this study represents the first step toward laying the foundation for an evidence-based, youth-centered child welfare practice that promotes inter-dependence and the strengthening of social support for older foster youth.

Background: Aging out of foster care, or emancipating without a legally binding permanent adult connection, is associated with increased deleterious emerging adulthood outcomes. Research indicates that the enduring presence of a caring adult, such as a natural mentor, can serve protectively for emancipating foster youth. Caring Adults ‘R’ Everywhere (C.A.R.E.) is a 12-week intervention designed to facilitate and support the development of growth-fostering natural mentor relationships amongst aging out youth. Prior to the initiation of C.A.R.E., a masters-level interventionist meets individually with youth in an effort to identify natural mentors, who are then screened, approved, and trained. During the 12-week intervention, youth and their natural mentors participate in structured group activities and supportive one-on-one sessions with the interventionist designed to strengthen bonds and clarify expectations surrounding the natural mentoring relationship. Natural mentors are expected to meet with youth on a weekly basis outside of the program’s activities for at least 2 hours, during which they provide hands-on life skills training and opportunities for engagement in community activities. At the end of the 12 weeks, there is a dinner/graduation for all the youth and their natural mentors, during which each pair celebrates the development of their relationship. After-care sessions are available as needed for the youth and their natural mentors to further support and sustain the relationships long-term.

Objectives: The aims of this study were to: (1) test the feasibility of implementing C.A.R.E. as an intervention for older foster youth, and (2) test the feasibility of conducting a rigorous randomized controlled pilot study in a child welfare setting with older foster youth. Feasibility questions focused on the recruitment and engagement of foster youth as well as their random assignment, the identification, recruitment, and training of natural mentors, and tolerance of the intervention and research protocol. Programmatic questions were also addressed pertaining to staffing, engagement and participation of both youth and natural mentors, and sequence and length of intervention activities.

Methods: Twenty-four foster youth aged 18 – 20.5 residing in out-of-home care were recruited and randomly assigned to the intervention group (n = 12) or the control group (n = 12). A mixed methods concurrent nested study design with an emphasis on qualitative inquiry was employed. Process-oriented qualitative data (e.g., satisfaction surveys, activity reports, interviews) and quantitative pre- and post-intervention outcomes data were collected to assess non-cognitive abilities, prosocial development, and youth/natural mentor relationship quality. Qualitative analyses were guided by a directed content analytic approach, and quantitative data were explored using descriptive statistics, t-tests, and chi-square tests.
Results and Conclusions: This study addressed many of the research feasibility aspects suggested in the intervention development literature, including the viability and practicality of measurement, recruitment, randomization, and retention. Overall, we succeeded in all these areas, and this study supports the feasibility of using a randomized control design to evaluate the effectiveness of C.A.R.E. following several program modifications, including additional program staff, more flexible program requirements and communication strategies, more external supports for natural mentors, and a narrowed target youth population. This study yielded valuable data that support the continued refinement, delivery, and testing of C.A.R.E. with great promise for programmatically supporting natural mentor relationships among youth aging out of foster care.
Life goals, social capital and sex-affective relationships: a comparative study between young women in foster care and young female undergraduates

Thursday, 15th September - 12:42 - Transitions to Adulthood from Care

Ms. Foradada-Villar Mireia (University of Lleida), Dr. Josefina Sala (Universitat Autònoma de Barcelona)

In 2014, 3,037 of the 6,985 minors living in foster care placements and 332 of the 774 care leavers supervised on transition programs in Catalonia were girls. Little research has been done that focuses on these girls from a gender perspective, despite this population having specific problems. The scientific literature shows that 30% of them become adolescent mothers (Sala, et al., 2009; De Zárate, 2013; Courtney et al., 2005): more girls than boys are in care for sex abuse; and girls in foster care and adult females are more vulnerable to gender violence (Fundació Surt, 2013; Aldred i Biglia, 2015) and unhealthy sex-affective relationships based on the ideology of romantic love (Martin, 2015). That said, the social phenomenon of gender violence affects women (adults and young people) from different backgrounds and in different living contexts (age, social class, sexuality, race, and so on). Accordingly, the aim of this study is to determine the different perceptions held by young women in foster care or care leavers and young female undergraduates with regard to life goals, social capital and gender violence.

We used a qualitative methodology to compare these two groups by means of structured interviews. The sample consisted of 52 young women: 26 in the foster care group and 26 female undergraduates. All had participated in a peer-mentoring program. Finally, the Atlas-Ti software program was used to analyze data. Categories were created inductively in the content analysis.

The main outcomes showed that all participants were aware of the phenomenon of gender violence. However, girls in care and care leavers displayed more contradictions in their statements and practices, neither recognizing nor identifying some kinds of violence and sexism (neo-male-chauvinism) in their relationships. For instance, a large number of them would give permission to their partners to check their social media networks as proof of their love and trust. In general, university students responded that they would rather not give this permission, with a small group of university girls saying they would give it under specific justified situations. At the time of the interview, all of the girls in care and care leavers identified themselves as heterosexuals, although in the university group some reported being open to other sexual options.

The social capital of girls in care and care leavers is mainly reduced to a narrow network: biological family or extended family, a few friends in the same situation, social educators at the foster care home, and partners. In fact, partners were reported as being one of the most important emotional supports at the time of the interview, even if these girls seek out the social educator, members of their families or a close friend when they have important problems. Female undergraduates have a wider, more diversified and more stable social capital, and if they have a partner, he is not generally the center of their network. Thus, when these girls need help they will ask their partner as the second or third option. Finally, a high proportion of the participants from both groups wanted to be mothers at some stage of their life, more than half of them thinking that it is important to plan for motherhood and that stability is a requirement for having a baby.

KEYWORDS: Young women, foster care, gender violence, romantic love.
The House Project: putting young people in charge of their transitions from care.

Thursday, 15th September - 12:54 - Transitions to Adulthood from Care

Ms. Jade Ward (University of York), Ms. Jo Dixon (Dept. Social Policy and Social Work, University of York), Ms. Heidi, Jade, Mia and Zoe - HP Young People (Stoke on Trent’s House Project)

Objectives

Research evidence over the past three decades suggests that many young people who leave care face a higher risk of disadvantage and social exclusion throughout their adult life. Disruption through placement movement while in care together with a lack of support networks, obstacles to education and career opportunities, and isolation post-care can result in care leavers struggling to cope. With transitions to independence rushed and sometimes instant, care leavers can be forced into adult living without sufficient preparation. A recent study of young people in and from care (Dixon et al, 2014) reported that 48% of ‘care leavers’ left their final care placement before their 18th birthday. One-third said they had ‘no choice’ and 42% said they did not have enough information to help prepare them for leaving.

This paper describes an alternative route to post-care accommodation, for young people in the UK transitioning from care. It focuses on the development of The House Project, the first UK housing cooperative for care leavers. The main aims of the project are to provide young people with a supported transition to independence and to ensure that they are provided with a safe and stable ‘home’ and a say in how this can be achieved. This project allows young people to play a key role running a housing co-operative and in identifying and designing the types of homes they would like. Additionally, it provides opportunities to work with professionals, including architects, training providers and education workers to develop their skills and employability. The House Project’s stated aims are to get to the heart of the issues that lie behind the poor outcomes associated with leaving care, by allowing the young people to have the greatest say in how the co-operative works, how their transitions can be best managed how they can be and supported to remain in their property for as long as they need or want.

Method

The paper will draw on the early stages of an ongoing evaluation of The House Project (HP). The evaluation uses a participatory method to ensure that HP members contribute fully to the evaluation. As participants, they have contributed views and experiences via interviews, focus groups and questionnaires. HP young people have also worked alongside researchers from the University of York to shape the direction of the research enquiry e.g. attending a two-day research workshop to identify key issues that they considered important to understanding transitions from care, such as the importance of not only having a house after care but making it a home.

Results

The evaluation is ongoing and results will be discussed where available. As the House Project is the first UK housing project for care leavers that is based on a co-operative model, the focus of the paper is to understand: how and why it came about; the issues it was seeking to address; early indications, based on the views of HP young people and staff, on progress and outcomes so far; and some the challenges and facilitators involved in implementation of the project.

Conclusions
Care leavers involved in the initial set up of the HP have played a vital role in bringing young people’s voices and opinions to shaping the project so that it can meet the needs of care leavers. In aiming to create a project and new approach that will provide care leavers with more choice, support and security when leaving care, the HP represents a subtle shift in the way young people in care make their transition to independence in the UK.

The paper will be co-presented by young people involved in the House Project.
What are the profiles of the adolescents in care who will be assisted shortly by the Support to Young People Under Guardianship or ex-Guardianship in Catalonia (Spain)?

Thursday, 15th September - 13:06 - Transitions to Adulthood from Care

Mr. Joan Llosada-Gistau (Child Protection Department, Catalan Government), Mr. Francesc Xavier Balagué Gea (Child Protection Department, Catalan Government), Mr. Manel Lolo (Child Protection Department, Catalan Government), Mr. Eduard Hernandez (Child Protection Department, Catalan Government)

Background and objective: The Support to Young People Under Guardianship or ex-Guardianship (ASJTET) is a service of the Child Protection System in Catalonia (Spain) which encourages 16 to 21 years old in their personal autonomy and social inclusion through various programs. In recent years, the number of young people in ASJTET has increased as well as their personal and social characteristics. The main objective of the study is to identify the different profiles of adolescents in care who will be assisted by ASJTET shortly with the aim of adapting their programs to the specificities of these boys and girls.

Method: A cross-sectional survey carried out in Catalonia (Spain) in 2015. The study population consisted of 15 to 17 year old adolescents who were in residential care or in kinship care. The study presented is the fourth of a series starting in 2004, which has included for the first time 15 to 17 years old in family kinship care and who have been followed-up by a specific support team. An ad-hoc structured online questionnaire was administered. The questionnaire was indirect: educators-tutors answered to each of the followed-up adolescents. The questionnaire included 42 questions grouped into 5 sections: sociodemographic characteristics, situation of the adolescent within the child protection system, academic training, health conditions, and estimated date for leaving care. A descriptive and bivariate analysis was carried out. The independent variables were: gender and type of placement (residential care and kinship care).

Results: The rate response was 40% (n=526) among adolescents in residential care and 62% (n=202) among kinship care. Of the 728 adolescents, 50.1% were boys and 80.0% were Spanish. Regarding age, 35.3% were 15 years old, 32.4% 16 years old and 32.3% 17 years old. As regards to type of placement, 72.2% lived in residential care and the rest in kinship care (27.8%). 29.5% of the adolescents in residential care had at least one health problem compared to 12.4% of those in kinship care and these differences are statistically significant. There are also significant differences by gender: 20.8% of girls had at least one health problems compared to 28.5% of boys. Only 8.8% of these adolescents were not currently studying, compared to 84.3% who wanted to continue studying next year. The 78.1% of adolescents who lived in a residential center had not had any contact with juvenile justice system as compared to 93% of adolescents in kinship care, and these differences are statistically significant. According to educators-tutors, the girls were more concerned about their future than boys (72.7% and 52.2% respectively) and the differences are statistically significant.

Conclusions: The results of this study provide important information about the profiles of adolescents who are in care in Catalonia. ASJTET policy-makers should bear in mind the specificities of these adolescents depending on their type of placement, differences by gender and nationality, as well as the characteristics of health and their expectations for the future when implementing programs designed to help them in the transition to adulthood, promote their emancipation and, ultimately, lead them to social inclusion.
Programs and Services to help Foster Care Leavers during their Transition to Adulthood: A Study Comparing Chicago to Barcelona

Thursday, 15th September - 13:18 - Transitions to Adulthood from Care

Dr. Laura Arnau (Universitat Autònoma de Barcelona), Dr. Josefina Sala (Universitat Autònoma de Barcelona), Prof. Mark Courtney (University Of Chicago), Mrs. Amy Dworsky (Chapin Hall at the University of Chicago)

Making comparisons between services and programs provided in different jurisdictions, such as Chicago (Illinois) and Barcelona (Catalonia), presents some major challenges, since the realities of national and subnational contexts are different. Nevertheless, studies of care leavers around the world have found them to face similar difficulties across a range of national contexts. Moreover, the child welfare systems in Catalonia and Illinois have pioneered policies and services aimed at supporting transition age youth since the 1990s, making them excellent case studies of the current status of transition services. So, the study is aimed at comparing the transitional programs and services available to support youth in Chicago and Barcelona.

A variety of methods (document review of statutes, regulations and procedures, research and evaluation reports, websites and exploratory qualitative interviews) were used. Interviews were conducted with 20 professionals from service-providing agencies (nine in Chicago and eleven in Barcelona).

Some results, in terms of similarities and differences, were found in both cites. In Barcelona, autonomy after 18 is promoted as the priority, whereas in Chicago it is protection. In Barcelona youths are considered young adults at 18 and are expected to follow their case plan scrupulously (being involved in either work or training) to receive benefits. In contrast to the jurisdiction in Chicago which could be seen as more lenient as youths are not seen as adults until they are 21. However, this protection ends abruptly at the age of 21 whereas in Barcelona, it tends to be more gradual as the adult welfare system seems to offer more protective services and subsidies than in Chicago. Another example of a difference between these two approaches (autonomy vs. protection) are in the living arrangements; in Chicago the agency assumes the cost of the rent even though it is expected that the youth assumes an increasing responsibility for their rent and other living expenses. Contrarily, in Barcelona it is expected that youths pay from the first moment for their living expenses including rent and food with their monthly emancipation payment. In addition, Chicago agencies have specialized programs such as specialized schools, laboral insertion programs, etc. for youths 18-21 years old whereas in Barcelona there aren´t any and youths 18 and over are refereed to community-based services. The type of staff is another difference, in Barcelona the social educator is the only professional involved while in Chicago professionals are more diverse, such as caseworker, casemanager and on-site staff, with different training backgrounds. It is also important to highlight the crucial role of foster families in both cites to help youths in housing transition and connecting them with other adults, as some of the youths remain with their families after 18 or older. It is interesting to note that in Chicago there is a more extensive and consolidated culture of evaluation than in Catalonia, especially in evaluating the performance of the private child welfare agencies and in conducting studies such the Midwest to track longitudinally youth outcomes once they leave care.

Some recommendations were highlighted to provide guidance to practitioners, researchers and policymakers.
Working with families to achieve reunification after foster care: research and good practice

Thursday, 15th September - 12:30 - Working with families to achieve reunification after foster care: research and good practice

Dr. Nuria Fuentes-Peláez (University of Barcelona)

Scientific reports, social needs (studies) and legislative bodies (e.g. the committee of Children’s Rights, 2010) share the conviction that it is vital to promote family reunification and work with families (during and after reunification). Despite this, some studies indicate that while the idea is accepted amongst professionals, this is not reflected in practice (Del Valle, López, Montserrat, & Bravo, 2009). Facing up to the challenges of family reunification after foster care is a duty of child protection systems which is not currently carried out satisfactorily.

Scientific studies clearly indicate that socioeducational work and the support it offers to families is fundamental to encourage and maintain reunification. It is evident that the success of reunification depends on the work with the family starting from the initial stages of separation. If the aim is reunification it is vital to that process (Amorós, Palacios, Fuentes-Peláez, & León, 2011; Amorós & Palacios, 2004; Balsells et al., 2014; Berrick, Cohen, & Anthony, 2011; Budd & Holdsworth, 1996; Del Valle, Bravo, et al., 2009; Testa & Shook, 2002). However, there are still questions to be asked about how to ensure the benefits of the reunification process.

Five examples of innovative practice were presented at the symposium. 1. The increase of active participation, specifically, giving voice to those involved, and how this affects the development of a collaborative relationship with professionals, allowing for case plans to be revised. 2. Training opportunities for professionals regarding how to implement programs to enable the introduction of group methodologies, as well as positive approaches to work with families and research perspective. 3. The involvement of families who have already experienced the reunification process and who help by acting as mentors for other families. 4. The need to improve contact visits by developing intervention strategies. 5. Discussion of effective measures to be taken once the family are back home together again.

Finally, the symposium aims to provide scientifically proven solutions to help develop our understanding of how to transform the reunification process. This improves the outlook and general development of children in foster care and helps bring about and maintain family reunification.
Promising practices to reconnecting families: case-studies in P.I.P.P.I. program in Italy

Thursday, 15th September - 12:42 - Working with families to achieve reunification after foster care: research and good practice

Dr. Sara Serbatì (University of Padua), Prof. Paola Milani (University of Padua), Dr. Ombretta Zanon (University of Padua), Dr. Chiara Sità (University of Verona), Dr. Marco Ius (University of Padua), Dr. Diego Dimasi (University of Padua)

Context

P.I.P.P.I. (Program of Intervention for Prevention of Institutionalization) is a national research-training-intervention program developed in the area of Family Preservation, funded by the Italian Ministry of Welfare and developed by the team of LabRIEF (Scientific Group, SG) as an intensive care program for vulnerable families. It aims at preventing child placement out-of-home and at responding to problems connected to poor parenting and child neglect through an intensive intervention where every family is in charge for about 18 months.

Particular focus is placed on method and tools supporting the intervention process within a participatory and transformative evaluation approach. In P.I.P.P.I. the team around the child (multidisciplinary team, MT) use tools with children and parents in order to give them voice, to collect their story and their points of view on “World of the child” in terms of strengths and needs, and therefore to develop a shared care plan where everyone is a main character of the intervention.

The “World of the child”, based on the Italian adaptation of the triangular models of the Assessment Framework developed in U.K., is the framework and main tool, and gives the structure to the web based tool and database, named RPMonline. It covers the 3 dimensions of child’s need, parental responses to those needs and environment, and it can be used with children and/or with parents in individual, familiar or group settings, and in several active ways according to the creativity of professionals, children and parents.

The first implementation of P.I.P.P.I. in 10 cities (2011-2012) involved 122 children 0-11 years old (89 families); the second one (2013-2014) involved 241 children (166 families), the third one (2014-2015), as the first national scaling up of the program, involved 600 children (453 families) in 50 cities of 19 out 20 Italians Regions.

During the third implementation, 6 families out 453 experienced a placement of their children due to a unexpected event. For these families P.I.P.P.I. was run as Program for Family Reunification instead of Family Preservation.

Objectives, method, results

The main goal of this paper is to highlight two case-studies through a quali-quantitative analysis of data about the assessment and the care plan of each family, collected through RPMonline in three times of the process of intervention, T0, T1 e T2.

The results show:

- how and in which settings it was possible to keep a strong engagement of the families in decision making process before and after the placement of the children;
- how it was rebuilt the care-plan of the children, also through a specific plan of meetings and visits between children and birth families;
- how the MT was integrated by foster families;
- how the “World of the Child” has helped to create a common vision concerning child needs and then to maintain the link between birth families, professionals and foster families;
- how the MT accompanies the families in the period before and after the child placement;
- how the researchers GS accompanies the MT.

Conclusions

The case-study analysis reflects a process of co-analysis between SG, MT, birth and foster families involved in the process. This co-analysis was co-built in some “laboratories of reflection on action” that were carried out every 2/3 months all along the implementation process. The reflective process between researchers, professionals and families, turned out into a new care-plan for these families (micro and meso-system), but also produced some new ways to design care plan and collaborative relationships (eso and macro-system) between agencies (for birth families, for children out-of-home and their schools) overcoming the fragmentation that usually characterizes these situations.
The role of professional training when implementing “Walking as a family” program

Thursday, 15th September - 12:54 - Working with families to achieve reunification after foster care: research and good practice

Dr. Nuria Fuentes-Peláez (University of Barcelona), Dr. Crescencia Pastor (University of Barcelona), Dr. M. Ángeles Balsells (University of Lleida)

Objectives

One of the challenges in the Child protection system in Spain is to assist the reunification processes. The socioeducational programs to improve parenting are part of this assistance, especially those which are based on group intervention (Amorós et al., 2009). This paper aims to provide a summary of the training model for professionals to implement the “Walking as a family” program and forms part of the program evaluation design (EDU2014-52921-C2-2-R).

Method

We gathered information using a mix methods combination: quantitative (questionnaire) and qualitative (discussion groups). Both methods were applied at different times in the implementation process, as they were designed as pretest-post-test, to identify and explain the changes in skills and professional practices.

The professional’s role in this study is not just as a leader of the training groups but also as a researcher. The training has two phases: the first before carrying out the program focused on the “learning by doing” approach, and lasted 20 hours, over the course of two and a half training days; and the second throughout the implementation process focus in assessments using online learning platforms.

The training is aimed at the professionals of specialized services of the child protection system who will implement the program in 5 autonomous communities of Spain and one region of Portugal and who will directly take part in the research during 2016-17.

Results

The training model outlined here will be combined with the implementation process of the program and develops the professionals’ understanding of a series of competencies associated with the theoretical contents on which the program is based (positive parenting, participation of families, the children’s voice and resilience), on their grasp of didactic strategies for dealing with group dynamics and the development of the program and on competences to co-perate as rescher. This, in turn, has an impact on the attitudes of the professionals.

The training model for the professionals takes five basic factors into account, these all depend on the complexity of the program, the conditions in which it is implemented and how it is evaluated: 1) subjects: it is aimed equally at children and parents, as well as the family as a group; 2) phases: it is developed during different phases of the process, during separation as well as reunification; 3) coordination amongst different specialists: child specialists, residential centres, foster care teams, family educators in the home; 4) types of sessions: group sessions with mothers, with fathers, with boys and with girls, individual sessions with children and family group sessions; 5) program evaluation, how the professional and institutional processes of change are being handled: participative and transformative evaluation tools and group methodology represent a change in the approach to work with families.
Conclusions

Propose methodologies for professional training helps to improve professional standards and competence (Cojocaru, Cojocaru and Ciuchi, 2011). The training developed in this study aims: to offer professionals the content and basic strategies to implement the program “Walking as a family”; and to allow them integrate the dynamics of the program evaluation and the knowledge from research into their work. Previous studies suggest that cooperative-action research may have had a positive result in motivating change by promoting competences through basic training (Balsells, Fuentes-Peláez, Mateo, Torralba, Violant, 2016 in press).

The design of the implementation of the program affect the results obtained when that program is applied (Odgen, 2009). We expect to be able to establish how the results are affected. The results of the evaluation of the implementation processes will allow us to establish the key points for developing a professional training model which will support the reunification processes.
Working with Peer Mentors to Support Reunification

Thursday, 15th September - 13:06 - Working with families to achieve reunification after foster care: research and good practice

Dr. Jill Berrick (University of California at Berkeley)

Objective:

Interventions based on peer support are gaining prominence in child protection. Such models may involve dyads of parents in “mentor” relationships, in which a parent who has successfully navigated a complex system shares the experience with a parent newly entering the system. Intervention goals include parent engagement in reunification case plans and reduction of social isolation and stigma. Encouraging peer support is part of an overall movement to engage natural helpers in child protection. One public child welfare agency in a large U.S. state developed a “Parent Partner” program to link birth parents who had previous experience successfully reuniting with their children in child welfare, with parents whose children were recently removed from their care. This paper will review findings from an exploratory study examining the following questions. (1) What are parent and key informant experiences with the Parent Partner program? (2) What are Parent Partners’ perspectives on their work with birth parents? (3) How do rates of reunification compare for families utilizing Parent Partner services compared to families not served? Lessons learned about peer mentor selection, training, supervision, support, and organizational climate will be included.

Method:

A mixed-methods design was used. For question 1, focus groups (n=30), and a written client satisfaction survey (n=88) were used with birth parents who utilized a Parent Partner; telephone interviews were conducted with individuals from allied agencies and from units within the child welfare agency (n=20). For question 2, in-person interviews were conducted with all Parent Partner staff (n=5). For question 3, a matched comparison group was drawn to examine rates of reunification within an 18 month timeframe. 68 treatment group were compared to 68 comparison families matched by ethnicity, case intervention reason, gender, child age, and substance use of the parent.

Results:

Responses from birth parents and allied professionals were very positive, attesting to the promise of peer mentors for inspiring change, for reducing anxiety about, and increasing understanding of the child protection system. Peer mentors suggest the value and challenges of the work. Results from the outcome study indicate that reunification is more likely for parents served by peer mentors. Specifically, approximately 62% of women with a Parent Partner reunified, compared to 37% of women not served (X2 = 8.502, df=1, p=.004).

Conclusion:

Birth parents involved with the child protection system are often isolated in their solitary experience. Friends and family may not be available to provide support and parents are often unaware of others who may be experiencing a similar plight. Programs that encourage birth parents to share their common experiences may facilitate the process of change and inspire hope. Although additional research is clearly warranted, preliminary findings suggest that peer mentors may be an important resource for child protection agencies in their efforts to engage families and promote reunification. Findings from the qualitative portion of the study offer important implications for practice using peer mentors.
Need to improve contact visits by developing intervention strategies targeted at birth family to improve likelihood of the child return home

Thursday, 15th September - 13:18 - Working with families to achieve reunification after foster care: research and good practice

Dr. Isabel M. Bernedo (University of Malaga), Dr. Maria D. Salas (University of Malaga), Dr. Maria J. Fuentes (University of M), Dr. Miguel A. García-martín (University of Malaga)

In foster care, contact visits with birth families play an important role in relation to the child’s wellbeing, and they may impact on placement outcomes. Contact between foster child and birth parents can have a number of functions, for example, visits have been associated with a greater likelihood of a return home, since they help the child maintain an expectation of reunification with the birth family, increasing the stability of the foster placement and promoting better mental health in the child.

Objective: The aim of the present study was to analyse the characteristics of contact visits between foster children and their birth parents, to examine the quality of the emotional relationship that the children have with their biological parents, and to explore the association between the characteristics of contact visits and the emotional relationship with likelihood of a return home.

Method: In our study, 22 contact visits were recorded on video with the objective to observe and analyze the relationship between foster children and their birth families across three provinces in Andalusia (southern Spain). All this information was exported to the ATLAS.ti v7.0 software. The visits recorded were transcribed and the transcripts were examined using an inductive method of open coding to identify themes among participants’ responses and behaviors.

Results: The results highlight the need to improve contact visits by developing intervention strategies targeted at birth family to improve likelihood of the child return home. These findings have important implications for practice.

Specifically, we have observed the need to train to parents in social skills and good communication. At times, the biological family gives the child false expectations. The biological parents sometimes lie to the children and give them false hopes about returning to live with them. It has long been known that a parent-child relationship characterized by warmth and communication offers a better context for the child’s development. In the presence of warmth and affection, children are more likely to pay attention to what their parents say, to respond positively to child rearing practices and to adapt their behaviour to the rules established by their parents. The findings also suggest that preparation for parents should focus especially on ways of helping birth parents both to acquire positive parenting strategies and to avoid authoritarian and permissive parenting.

Conclusion: After observed an inappropriate behavior during the visits, which have an influence in the quality of emotional relationships, it is necessary explain to the birth families what the benefits of contact visits are, as well as the rules that have to be followed (arriving, saying goodbye, interaction with the child, etc.), and this has to be done using language that they can understand, with the objective to improve the relationship between foster children and their families, and to improve likelihood of return to live with them. In this presentation we will show several examples of the parents’ messages and behaviors during the visits.

Keywords: Birth families, contact visits, intervention strategies, return home
Improving practice in respect of children who return home from care in England

Thursday, 15th September - 13:30 - Working with families to achieve reunification after foster care: research and good practice

Dr. Georgia Hyde-Dryden (Loughborough University), Ms. Lisa Holmes (Loughborough University)

Objectives
The National Children’s Bureau and the Centre for Child and Family Research at Loughborough University have undertaken a study exploring how, and to what extent, English local authorities implement, embed and monitor effective practice in respect of children who return home from care. The study also considered the facilitators and barriers to achieving successful reunification.

Method
The study began with a rapid review of the existing literature followed by case studies across eight English local authorities. The case studies involved the following phases of data collection:

- In-depth telephone interviews with eleven senior managers (based on a possible two interviews in each local authority);
- A total of eighteen focus groups held across six local authorities. In each authority this comprised of one focus group with commissioners, senior and middle tier managers; one with frontline social care workers including case workers and team managers, and one with representatives from other agencies that support return home;
- Face to face interviews with 22 parents or carers, and nine children aged six to eighteen years.

Results
Analysis of the data revealed a number of key findings in respect of the approach taken to the process of reunification. For example, when considering the possibility of reunification, participants emphasised the importance of considering it in the early part of a child’s care journey. Social workers also needed to use their professional judgement to plan for multiple reunification scenarios and to be ready to adapt their approach. During the assessment and decision-making process, the practice of evidencing change in the level of risk to a child described by professionals contrasted with research evidence that this does not always occur. There was recognition of the importance of careful planning for reunification, and the need for it to be flexible and responsive to changing circumstances. Participants also highlighted the difference between parents being involved in planning and feeling meaningfully involved in the process. When providing services to support families before and after reunification, multi-agency working needed to be properly co-ordinated and embedded. The lack of a clearly defined and embedded policy and protocol relating to reunification presented a potential weakness in the provision of support. Post reunification, it was acknowledged that support, monitoring and review was less rigid and structured in cases where children had been accommodated or had ceased to be looked after. Finally, although the majority of local authorities were undertaking some monitoring of re-referrals and/ or re-entry to care or accommodation, practice varied. There also appeared to be no monitoring or analysis of the costs of reunification.

Conclusions
Overall, local authorities in England were found to be in the early stages of focusing specifically on their reunification policy and practice. The findings suggest that the existing research evidence base had been used to a limited extent by local authorities to inform policy and practice and senior managers expressed an intention to focus more closely on this. The findings also suggest there are a number of barriers and enablers to implementing effective practice based on the research evidence, and from these, it is possible to identify factors which need to be in place to implement effective practice. For example, both senior managers and frontline workers need to understand key messages from research. There needs to be an emphasis on communicating with families, for instance, involving an independent person who has had no involvement in a child entering care or accommodation. Local authorities also need to understand their local data on reunification including costs to enable them to assess the effectiveness of their approach.
The therapist-client alliance in youth care: predictors and impact on outcome

Thursday, 15th September - 12:30 - The therapist-client alliance in youth care: predictors and impact on outcome

Prof. Ron H.J. Scholte (Radboud University Nijmegen)

Recent research has indicated that the alliance between professional and client is an important predictor for treatment outcome (Duncan et al., 2009). Although this has been frequently reported for adults, the role of the alliance between professionals and adolescent clients is less clear (McCleod, 2011; Norcross et al., 2011). The little empirical research that does exist on the professional – adolescent alliance focuses almost entirely on individual psychotherapy, leaving open the question to what extent the alliance is important in affecting outcomes of youth and family, and residential care. We will present five studies, that have either been conducted in Europe or the US, using four different datasets.

The first presentation will systematically review the literature on the alliance between parents and professionals in youth and family care. It will highlight whether the alliance between parents and professionals impacts outcomes of child and family care, and whether factors can be identified that moderate this alliance-outcome association. In conclusion, implications for clinical practice and future studies will be formulated. The second presentations will examine to what extent alliance is influenced by, and influences, treatment adherence over the course of systems intervention. The third presentation will present findings on the link between alliance and outcome within systems intervention, using three different methods, while the fourth presentation will report on the association between group climate and alliance in residential settings. The last presentation will study the alliance as a helping relationship within the therapeutic context and beyond.
Parent-professional alliance and outcomes of child and family care: A systematic review

Thursday, 15th September - 12:42 - The therapist-client alliance in youth care: predictors and impact on outcome

Ms. Marieke De Greef (HAN University of Applied Sciences), Dr. Hubert M Pijnenburg (HAN University of Applied Sciences / Radboud University Nijmegen), Dr. Marion Van Hattum (HAN University of Applied Sciences), Dr. Bryce D. McLeod (Virginia Commonwealth University), Prof. Ron H.J. Scholte (Radboud University Nijmegen / Praktikon)

This presentation is based on a systematic review on the association between the parent-professional alliance and outcomes of youth and family care. In child and family social services, parents play an important role (Accurso, Hawley, & Garland, 2013; Chaffin & Bard, 2011). They are either the main target of service delivery (e.g., parenting support), are involved in child-focused care (e.g., residential care), or are involved in family- or multisystem-focused care (e.g., Multisystemic Therapy). Despite the important role of parents, empirical evidence that helps to optimize outcomes of care offered to parents is limited (Myers, 2008).

Available studies investigating elements of effective care, often focus on effective intervention programs (Karver, Handelsman, Fields, & Bickman, 2006). Useful as these studies are, a broader focus is needed when investigating ingredients of effective care. Research in adult mental health shows that care effects are not only influenced by specific factors such as interventional or therapeutic techniques, but also by common factors, relating to care processes and outcomes, regardless of the therapeutic approaches (McLeod, 2011). One of these common factors is the alliance between clients and professionals (Greencavage & Norcross, 1990; Weinberger, 1995; Norcross, 2002). Recent meta-analyses indicated that alliance is a consistent predictor for outcomes of individual psychotherapy for adults (Norcross, 2011; Hubble, Duncan, Miller, & Wampold, 2010).

Although all research in youth and family services has lagged behind in comparison to service delivery to adult clients, meta-analyses on the alliance-outcome association in youth psychotherapy (McLeod, 2011) and family therapy (Friedlander, Escudero, Heatherington, & Diamond, 2011) indicated that alliance plays an important role in realizing positive care outcomes. However, these studies offered no or limited information regarding the association between the parent-professional alliance and outcome, and potential moderators of this relationship. Furthermore, given the specific focus of these studies, information about other types of care involving parents (e.g., parenting support) is lacking. As a result, drawing general conclusions regarding the importance of the parent-professional alliance for outcomes in youth and family care presents a challenge. This knowledge gap limits our ability to understand how we can optimize youth and family care involving parents, and thereby promoting children’s well-being and psychosocial development.

Since knowledge concerning the association between the parent-professional alliance and outcomes of youth and family care is limited and not yet aggregated, we have taken up this challenge and conducted a comprehensive systematic literature review. In accordance with the PRISMA Statement for Reporting Systematic Reviews and Meta-Analyses (Moher, Liberati, Tetzlaff, & Alsmann, 2009), we explored research examining the relationship between parent-professional alliance and outcomes. With respect to this association, we distinguished outcomes related to the behavioral impact of treatment (i.e., changes in child, parent, or family functioning), and outcomes associated with the treatment process (i.e., dropout/retention, treatment satisfaction). Furthermore, we investigated whether factors can be identified that moderate this alliance-outcome association. In line with
previous meta-analyses (e.g., McLeod, 2011), we differentiated between methodological moderators (i.e., source and timing of alliance assessment), and moderators related to the context and content of care (i.e., referral source, target problem).

In this presentation, following a brief introduction of the study design, we will present the results of this systematic review. In conclusion, we invite symposium participants to reflect on implications of our findings for professionals, researchers, educators and policy makers in the field of youth care, regarding the role of the parent-professional alliance in optimizing outcomes for children and families.

Key words: review, alliance, outcome, youth care, parents.
Alliance and therapist adherence: bidirectional associations in systemic therapy for antisocial adolescents in the Netherlands

Thursday, 15th September - 12:54 - The therapist-client alliance in youth care: predictors and impact on outcome

Ms. Aurelie M.C. Lange (de Viersprong), Dr. Rachel E.A. Van Der Rijksen (de Viersprong), Dr. Marc J.M.H. Delsing (Praktikon), Prof. Jan J.V. Busschbach (Erasmus Medical Centre), Dr. Joan E. Van Horn (de Forensische Zorgspecialisten), Prof. Ron H.J. Scholte (Radboud University Nijmegen)

Objectives: The current presentation will describe the conjoint role of the client-therapist working alliance and therapist adherence. Alliance is a key contributor to effective adult psychotherapy and may also be essential for effective family- and system therapy. However, the process through which alliance plays a role in therapy remains largely unknown. Alliance is usually conceptualised as consisting of personal alliance (the affective bond) and task-related alliance (addressing the goals of the treatment and the tasks required to achieve those goals). Most studies have measured alliance on only one occasion, thus failing to take into account the longitudinal and developmental nature of alliance during therapy. Yet, alliance is likely to fluctuate over time and the development of alliance during therapy may be a more consistent predictor of treatment outcome than the alliance at a single point in time.

Another limitation of many previous alliance-studies is that alliance has often been investigated in isolation. Available evidence, however, suggests that alliance is likely to interact with other process variables, such as therapist adherence. Therapist adherence is the extent to which the therapist delivers the technical elements of a treatment as designed. Monitoring therapist adherence allows evaluation of the quality of the delivered intervention and helps identifying potential problems if the intervention is not achieving the desired outcomes.

Although theoretical models posit that alliance and therapist adherence work together to initiate and facilitate therapeutic change, few studies have investigated their interaction so far. Knowledge regarding the conjoint role of alliance and therapist adherence may be used to monitor and improve treatment, leading to better treatment outcomes. The current study assessed alliance and therapist adherence on a monthly basis during therapy and investigated how alliance in one month predicted adherence in a subsequent month and vice versa.

Method: We used routinely collected data of a sample of 1,970 adolescents and their families participating in Multisystemic Therapy (MST). The bidirectional associations of alliance and adherence were investigated using a cross-lagged panel analysis with five fixed time points. Alliance and therapist adherence were scored at monthly intervals through telephone interviews with the primary caregiver. A number of client characteristics were included as moderators, namely demographic characteristics, type and severity of adolescent problem behaviour, and whether or not the MST treatment was court-ordered.

Results: Alliance in one month predicted therapist adherence in a subsequent month. Adherence only predicted subsequent alliance during the middle part of the treatment process. The results were not moderated by any of the client factors.

Conclusions: The results suggest that alliance and therapist adherence may reinforce one another during therapy. Whereas alliance may facilitate the development of therapist adherence, adherence
may subsequently deepen and consolidate the client-therapist alliance. Our results suggest that it is important to build a strong alliance at the start of therapy. Adherence to the therapy protocol may further strengthen the working alliance.
Longitudinal associations between alliance and outcomes in family care in The Netherlands

Thursday, 15th September - 13:06 - The therapist-client alliance in youth care: predictors and impact on outcome

Prof. Ron H.J. Scholte (Radboud University Nijmegen), Ms. Aurelie M.C. Lange (de Viersprong), Dr. Rachel E.A. Van Der Rijcken (de Viersprong), Dr. Marc J.M.H. Delsing (Praktikon)

Objectives: Existing research on the alliance between professional and client suggests that a stronger alliance is predictive of better treatment outcomes (Duncan et al., 2009; McCleod, 2011). As most of these studies have been conducted on adult clients, we know little about the role of alliance in youth care or family care. Another important limitation of existing studies is that they are either cross-sectional in nature, or have not optimally used their longitudinal assessments of alliance during treatment. The latter is crucial because several studies reported that there are differential effects of the alliance, depending on when the alliance has been assessed during treatment (e.g., at the beginning or the end of treatment; Sharf et al., 2010). Thus, to really gain an understanding the role of the alliance in youth or family care, we need studies that include adolescents, have multiple assessments of the alliance over time, and preferably have multiple follow-up outcome assessments to be able to investigate long-term effects of care.

In the presentation, we describe such an empirical study on almost 2,000 adolescents and their families. We will examine how the alliance unfolds during treatment, and how it is related to outcomes assessed at 6, 12, and 18 months follow-up. More specifically, we will use three different models to test the alliance-outcome link (see Owen et al., 2016): (a) mono-method model (i.e., 1 rating of working alliance correlated with outcomes), (b) aggregate-assessment model (i.e., multiple sessions aggregated and correlated with outcomes), and (c) change-based model (i.e., changes in working alliance scores correlated with outcomes).

Method: Alliance was assessed monthly as part of the regular quality assessment of Multisystemic Therapy (MST). The participants consisted of roughly 2,000 adolescents with antisocial and/or behavioural problems, and their families. Latent class growth analyses were conducted to distinguish subgroups characterized by similar developmental trajectories regarding the outcome measures during follow-up. Subgroup membership was regressed on the mono-method, aggregated, and change-based measures of alliance.

Results: The analyses are currently conducted. In line with Owen et al. (2016) we hypothesise that trajectories of care that are characterised by a continuous development of the alliance (change-based model), rather the a good alliance during a specific phase of treatment (mono-method or aggregate-assessment model), will be most predictive of positive outcomes.
The relation between children’s views on group climate and the therapeutic alliance with their mentor in residential care

Ms. Eefje Strijbosch (Jutz youth care), Prof. Geert Jan Stams (University of Amsterdam), Dr. Peer Van Der Helm (Leiden University of Applied Sciences), Dr. Inge Wissink (University of Amsterdam), Mrs. Mariëtte Van Brandenburg (Jutz youth care)

Residential care for children/youths is heavily debated, and it is often used as a last resort given the disadvantages, including problems with safety, coercion by group workers, deviance training, lack of placement stability and attachment problems due to rotating staff (Dozier et al., 2014). Nevertheless it can be argued that this care will continue to be needed in the future for a specific group of children/youths who suffer from severe problems in the family situation and/or pose a risk to themselves or others because of severe emotional or behavioral problems (Baker et al., 2007; Department of Health, 2000; Preyde et al., 2011). There is an urgent call for more research to identify factors that lead to better outcomes in residential group care (Marshall & Burton, 2010). Moreover, research on the youngest age group is relatively limited so far.

A central factor associated with positive outcomes in (youth) care in general is creating and maintaining good therapeutic alliances between practitioners and children during the course of treatment (Bickman et al., 2012; Duppong, Hurley et al., 2013; Holden, 2009; Shirk & Karver, 2003). Studies within residential care settings have shown that the quality of the therapeutic alliance is affected by staff and child characteristics (Bastiaanssen et al., 2012; Tarren-Sweeney, 2007, 2012), but relations between therapeutic alliance and situational/ group climate factors are seldom taken into account. It is important to examine these factors as well, as for example a negative group climate can have bad impact on the stress system of the child (Arden & Linford, 2009), thereby influencing the extent to which children are able to develop secure attachment relationships and alliances again (Bradley et al., 1986; Martins et al., 2013).

As part of the Stronger Together study ‘You matter!’ (presented at EUSARF 2014), two youth care organizations in the Netherlands (Jutz and Stichting Maashorst) have collected data every six months between 2012 and 2015 on how children (age 4-14) view the group climate (Group Climate Instrument for Children, GCIC; Strijbosch et al., 2014) and the therapeutic alliance with their mentor (Children’s Alliance Questionnaire, CAQ; Roest et al., 2014). The teams were provided with their own scores soon after the measurement, so that they could work on improvements together with the children, and six months later they could check on changes in the scores after a new measurement had taken place. Thus, the study resulted in valuable information that could be applied in everyday practice instantly. Besides that, the data provide us with more general knowledge about the correlation between group climate and therapeutic alliance (from the children’s points of view) over time. N=152 children have filled out both the GCIC and the CAQ at two subsequent measurement moments.

In this presentation, following a brief introduction of the study design, we will present the first results of a cross lagged panel analysis on the longitudinal data from the ‘You Matter!’ study. The main research question addressed is: To what extent does the perceived group climate influence the perceived therapeutic alliance between the child and its mentor? To conclude, we invite symposium participants to reflect on implications for future research and practice, regarding the role of group climate in the enhancement of alliances in residential care for children.
Unpacking the helping relationship within the therapeutic context and beyond.

Thursday, 15th September - 13:30 - The therapist-client alliance in youth care: predictors and impact on outcome

Dr. Charles Izzo (Cornell University)

Our field employs a small army of people dedicated to helping young people find a healthy life trajectory. The needs of young people are immense, and their would-be helpers are motivated and have a lot offer. So why is it such a challenge for practitioners to engage these consumers in an effective relationship and to keep them engaged for long enough to really help them? Some of the more tangible barriers are easy to see and we can at least conceive of how to address them (e.g., logistic issues like scheduling, transportation, and cost or programmatic issues like matching the content with a clients’ priorities and needs). However, the most difficult and elusive barriers are often relational (i.e., patterns of reciprocal interaction and the meanings and feelings each member attaches to those social experiences).

The key to unlocking the full potential of our youth services system lies partly in honing our ability to activate vital and engaged helping relationships. The recent explosion of findings from across the social sciences offers valuable lessons for understanding (or re-understanding) the task of “meeting the clients where they are”.

The current presentation assembles research findings from both scientific and practice literature in order to:

1. highlight key pieces of current knowledge about the relational and interactional factors that influence how individuals are likely to respond and engage within the context of a helping relationship; (2) propose some informed, working hypotheses about why these factors are influential and the processes by which they operate.

We will reframe the issue of “client engagement” (i.e., getting the client to engage actively participate in a discrete service so they may gain the knowledge and skills the helper has to offer) and “working alliance” (i.e., a strong relational bond in which there is agreement on the tasks and goals of the relationship) into a broader understanding of social engagement as an intrinsically vital aspect of human adaptation and development, regardless of the structural context within which it plays out.

We conclude by proposing a set of evidence-informed strategies designed to optimize helping relationships across a wide range of social contexts.
Researching Agency in Transitions from Out-of-Home Placements

Thursday, 15th September - 12:30 - Researching Agency in Transitions from Out-of-Home Placements

Prof. Ute Karl (University of Luxembourg)

In the last decade, research on transitions to adulthood from residential and foster care became a broad field of research including studies on the preparation for leaving care, the transition process itself and the outcomes after having left the care system. Different theoretical concepts have enriched and guided the research such as readiness, resilience, life skills, needs, social support and social networks and institutional frames and pathways. At the same time, debates on agency in the social sciences have grown reaching from more individualistic to more relational approaches. These debates can inspire research on transitions to adulthood. The symposium will discuss, how the concept of agency can contribute to the debates and empirical research on transitions of young adults out of care arrangements. It also raises the question how the above-mentioned concepts can be linked to questions of agency. We will further ask, if agency often stays an implicit point of reference within other concepts and how. The symposium brings together different theoretical and empirical contributions.

It includes a contribution based on a systematic literature review (Karl/Peters) and a theoretical analysis of concepts of agency to set the frame for the symposium. A second contribution will focus on turning points (Höjer/Sjöblom) and the possibility to gain agency in these specific moments. With a critical perspective on the concept of “autonomy” a further contribution will shed light on the transition process itself and the constructions of transitions and young adults (Kerivel/Lunz). Based on data of former care leavers and their outcomes, and different types of how the transitions are experienced, a forth contribution will discuss how the different pathways are linked with fostering and hindering factors (Stein). A fifth contribution will discuss the engagement of former care leavers as helpers and ask how the engagement of young care leavers is part of enacting agency.
Agency as an implicit concept in research on care leavers

Thursday, 15th September - 12:42 - Researching Agency in Transitions from Out-of-Home Placements

Prof. Ute Karl (University of Luxembourg), Prof. Ulla Peters (University of Luxembourg)

Our presentation is based on two papers: the first is an in depth literature review on research in the field of transitions of young people from the care system to adulthood.

The review is based on a search in the electronic social science databases “Eric” and “Scopus” and in three selected English, in two German and in two French journals for all articles published between 1st January 2000 and 28th September 2015. A total of 432 English articles were found and according to inclusion criteria a total of 129 articles were selected and included in the discussion of results (96 English, 3 German and 30 French)

Concepts such as experiences of young people, resilience, life skills, mental health, readiness and outcomes after leaving the care system were main foci.

The second is a theoretical paper where we worked on a concept of agency and how it is referred to in social work research. The main focus is the question, how an ecological understanding of agency based on the idea of actors being always in transaction with context can be grasped for an empirical perspective in transition research.

Bringing the insights of the two papers together our hypothesis is that in cases where agency is used as a reference in research on transitions it rather stays an implicit category that underlies concepts such as resilience or readiness then being developed as a distinct theoretical approach.

We will discuss this hypothesis in depth by asking how the perspectives of the young people could be taken into consideration from a theoretical stance that focuses on the practices of the young people as transacting with contexts. We will ask how other theoretical concepts could benefit from such a perspective. Focusing on practices from a relational-transactional perspective allows us to analyse how contexts emerge while people are relating to people, ideas and places, and how contexts and agency are intertwined.

The presentation is meant as opening the discussion within the symposium and as setting a frame for discussing the contributions of the symposium related to structured questions.
Experiences of turning points for young people in the process of leaving care.

Thursday, 15th September - 12:54 - Researching Agency in Transitions from Out-of-Home Placements

Prof. Ingrid Högner (department of social work, University of Gothenburg), Prof. Yvonne Sjöblom (Department of social work, Högskolan i Gävle)

Objective: In this study our aim is to investigate what can be identified as “turning points” for a group of young people leaving public care and discuss how the concept of agency can be understood in their narratives.

Context: In the year of 2014, about 29 000 children placed in out of home care in Sweden, a group that is on the increase in the child welfare system. Children and young people placed in public care often come from a disadvantaged background, where they may have experienced abuse, neglect and violence. The actual placement in care implies various transitions, such as moving from parents to foster homes or residential facilities, having to change schools in this process and also leaving behind friends and well known neighborhoods. A considerable number of children and young people placed in public care have also moved between foster homes and residential facilities on several occasions. In this process they are likely to encounter a number of turning points, occasions that have had a substantial impact on their life and changed their life course. Leaving care in Sweden is stipulated by law at the age of 18 (or 21 in cases of mandatory care orders). However, young people often remain in care until they have completed their upper secondary school education, which usually happens when the young person has reached the age of 19.

Method: During 2008 – 2011, we performed a study focusing on young people leaving public care in Sweden. In one part of the study 65 young people between 18 and 26 years old were interviewed by telephone. They had left care within three months to three years. We interviewed 14 young men (22 per cent) and 51 young women (78 per cent). We have in this study chosen accounts where the interviewees describe experiences and events connected to the placement while in care or after leaving care that have had an impact on their life and changed their life-direction in a positive or a negative way.

Results: The narratives of the young care leavers’ reveal important knowledge about their experiences from being in care and leaving care. Altogether, the results suggest that there are both positive and negative turning points connected to the care experience. To develop a trusting relationship to a family member or a significant other, a feeling of being in control of your life and experience an opportunity to change a negative life course are important factors in the young care leaver’s accounts about turning points. These factors were also linked to how they interpreted their care experiences and the impact it had on their self-identity, feeling of agency and well-being.

Conclusion: There are indications that the transition to adulthood could be a positive turning point in itself, since it can enable the young people to leave behind the burdens of an exposed and difficult childhood in favor of an adult life that provides them to make choices and being able to gain agency and have more control and influence over their trajectories in life.

Although it is evident in our result that the transition period from care to adulthood can be an important turning point we cannot say anything about the long-term effects this will have on the young care leaver’s life course.
Moving on, surviving and struggling: opportunities and obstacles to promoting the agency of young people during transition

Thursday, 15th September - 13:06 - Researching Agency in Transitions from Out-of-Home Placements

Prof. Mike Stein (University of York)

This paper has two objectives: first, to describe three outcome groups, drawing on research studies of care leavers carried out between 1980 and 2015; second to explore, how young people’s experiences of care and transition, who fall into these three groups, either provide opportunities or barriers to promoting their agency.

The first outcome group includes those young people successfully ‘moving on’ from care. This group welcome the challenge of independent living and gaining more control over their lives. They see this as improving their confidence and self-esteem. In general, their resilience has been enhanced by their experiences of living in and leaving care. They have been able to make good use of the help they have been offered, often maintaining contact and support from former carers and having supportive social networks.

The second outcome group, the ‘survivors’, have experienced more instability, movement and disruption while living in care than the ‘moving on’ group. They are also likely to experience further movement and problems after leaving care, including periods of homelessness, low-paid casual or short-term, unfulfilling work and unemployment. They are also likely to experience problems in their personal and professional relationships through patterns of detachment and dependency.

The third group of care leavers, the ‘strugglers’, is the most disadvantaged. After leaving care they are likely to be long-term unemployed, become homeless and have great difficulties in maintaining their accommodation. They are also highly likely to be lonely, isolated and have mental health problems, often being defined by projects who work with them as ‘young people with very complex needs’. Support by leaving care services is not always able to help them overcome their very poor starting points and they also lack or alienate professional and personal support.

In meeting the second objective the paper will explore agency in the context of resilience – as distinct from identifying it as a separate or independent quality. This will include discussing the opportunities and obstacles in promoting agency both within care and during transition. The former will focus on: the quality of care and placements provided; educational opportunities; and, health and well-being. The latter will consider: young people’s transitions from care; and, support for young people on their main pathways to adulthood; education, employment and training; accommodation; and achieving good health and positive wellbeing. It will be suggested that a better understanding of the differences in how young people cope and the progress they make – and what can assist young people during their journey, as well as the barriers they face – has important policy and practice implications for how the agency of young people can be promoted during their journey from care to adulthood.
Contracting ‘Autonomy’ of Young People: Ambivalences in Addressing Agency


Dr. Aude Kerivel (University of Luxembourg), Mrs. Marei Lunz (University of Luxembourg), Ms. Anna-Marie Herdtle (University of Luxembourg)

Objective: The aim of this presentation is to show the paradox that arises when ‘autonomy’ and the way to ‘autonomy’ of young care leavers is subject to contractualisation. Our hypothesis is that agency of the young people is addressed in a very specific way.

Context: We will describe the context of the care system in Luxembourg in regard to transition. It is especially noteworthy, as important laws and circulars that determine the context, are relatively recent (2008-2015). The analyses demonstrates the changing situation of the field, as a field in transition. Laws and circulars provide us information regarding the role of residential care and foster family organization, the role of the state and the role of young people. In Luxembourg, as well as in other countries, the age of 18 is determined as the mark of attaining majority. This age is also taken as the moment for preparing the leave of the institutional setting. In Luxembourg the goals for autonomy are defined in the ‘projet d’autonomisation’ and against these objectives the end of care is determined.

Method: Our focus lies on the agency of young people which inevitably correlates with the agency of professionals in a specific legislative context. Researching these relationalities we will present first results of an analysis of documents, expert interviews as well as interviews with young people that show ambivalences in addressing agency.

Results: This collection of first data allows us to see different paradoxes and a contradictory injunction to the young people. On the one hand they are seen as becoming adults very rapidly. On the other hand, they continue to be viewed as young people whose legal ‘projet d’autonomisation’ and the time for this is subjected to an institutional evaluation and perspective. Moreover, these relations are described with an idea of ‘autonomy’ and ‘participation’ of young people while simultaneously they are realized in a contract. In the institutional context the term ‘autonomy’ is used and set as the final goal of the work with young people. Consequentially ‘young adults’ have to leave the care system and take their own ‘responsibilities’. The expected autonomy is reified by contractual relations. These contracts include strict regulations and expectations as well as norms, which is contradictory to the term of ‘autonomy’. Further the process of becoming autonomous (‘autonomisation’) and its connectedness is neglected.

Conclusion: In the vocabulary of social care, agency is addressed in legal texts but in a contractual relation. We will try to discuss how young people live this ‘autonomy’ in contract and how professionals permit autonomy in this legal framework.
Helping others and Agency: The engagement of former care leavers.

Thursday, 15th September - 13:30 - Researching Agency in Transitions from Out-of-Home Placements

Dr. Katharina Mangold (University of Hildesheim)

Research related to the living situation of care leavers particularly emphasises the disadvantages suffered by young people who have grown up in residential care (e.g. Courtney, Dworsky, Lee & Raap, 2010). In other words, care leavers are specifically studied and constructed as a group in need of help and deserving support. This, in turn, is constitutive of social work in general (Scherr, 2013). Here, among other things, there needs to be a discussion of the structural conditions leading to or influencing these constructions and outcomes. That is not to say that young people in the youth welfare services are simply subjected to these conditions. Social work does not deal with passive beneficiaries but with “self-willed actors ... who are more than, and nothing like, puppets on the strings of their social circumstances” (Scherr, 2013: 230). They do not act in a vacuum; instead, their actions and, what is more, their agency, are embedded in social circumstances and structures. This interplay of action and structure is negotiated in debates on agency (Emirbayer & Mische, 1998) which can also be put into use in the context of social work (Scherr, 2013). This article picks up on the example of care leavers’ social engagement to discuss the concept of agency, which can be conceptualised using the metaphor of “boundary work” (Schroer & Schwepppe, 2013). The aim is to investigate how care leavers generate their individual agency by means of social engagement depending on their situatedness in social framework (structures, relationships, etc.). In this article I will study this from a different viewpoint, examining young people in care and care leavers not (or not only) as in need of help, but as helpers; as socially involved young people doing their bit for others. Social engagement is particularly noticeable among young people with a relatively high level of education and among young people who have been introduced to forms of social engagement (Metz & Youniss, 2003). However, data from the collaborative research project “Higher Education without Family Support”, carried out from 2012-2014 by Israeli and German universities, reveal a wide range of heterogeneous processes of social engagement in the biographical narratives of the care leavers interviewed. The study sample consisted of 28 Israeli and German care leavers, aged 18-26, who had begun, were about to begin or had already finished higher education. The results show various ways of social engagement - some volunteer within their communities, some support members of their family of origin, and others integrated the idea of supporting others into their career choice. According to these young people, assuming a helper role provided a strong sense of purpose in life and contributed to their self-efficacy, social connectedness and ability to cope with their adverse past. Therefore, these supporting practices can be set out in relation with the discourse on agency outlined before. Social engagement gives the young people opportunities to see themselves as possessing agency as well as offering various aspects of social support – though care leavers are often denied the opportunity for social engagement (which brings in the issue of their situatedness within social structure). It is not only that there is a lack of low-threshold programmes and opportunities to become involved, but also that the youth welfare department itself does not have an idea of where or how young people in care could become helpers. Thus, finally, this article will find and name opportunities to provide young people in residential care with spaces for social engagement.
Towards a comprehensive view of factors affecting decision-making and judgments in child protection

Thursday, 15th September - 15:00 - PLENARY: Towards a comprehensive view of factors affecting decision-making and in child protection

Dr. Mónica López (University of Groningen)

Making decisions is the core task of practitioners working in child protection services. It may be also the most difficult and the riskiest. Wrong decisions can damage children and families irreparably. Moreover, they may also evoke negative consequences for the decision-makers themselves.

Researchers in our field have tried to answer a tough question: where do wrong decisions come from? Frequently, wrong decisions in child protection cases can be traced to the way they were made: the information available was insufficient or ambiguous, the alternatives were not well defined, the costs of the decision were not adequately estimated...

Researchers have also pointed to the mind of the decision-maker as the cause of wrong decisions. Research conducted in the lab and the field has shown how decision-makers use unconscious routines to deal with the complexity of decisions. This is what we call heuristics, a series of psychological traps of our thinking that can undermine our decisions. Unfortunately, the individual awareness of the effects of these irrational anomalies has not improved the quality of decisions at the organizational level. More complex steps are needed to counteract these biases, as decision making is not an event that takes place in solitude at a single point in time. Decision making in child protection is a process that unfolds over months or years. It is replete with personal nuances and organizational history, and determined by the policy and the social context in which the decisions are made.

Traditionally, we have considered decision-making as an individual action, a prerogative of the decision-maker. Both the information used and the logic behind the decisions have been left up to them. The decision-maker has frequently been depicted as a black box: the information goes in and decisions come out, and what happens in between is a mystery. Moreover, unlike other fields, decision-making in child protection has rarely been the focus of systematic analysis within our child protection services and organizations.

The field of decision-making in child protection has made important conceptual advances during the last decade. Firstly, we have begun to define decision-making as a temporal process that includes several decision points which are part of the system of child protection, each point has a different decision-making context. Secondly, we have become more interested in how multiple nested contexts affect decision-making behaviour at the individual case level.

In this plenary session we intend to unpack the decision-making black box by using a comprehensive approach. We will present the latest research that articulates and explains how context and decision-maker behaviours affect decision-making in child protection, and how such knowledge might lead to improvements in decision-making for children and families.
Child Welfare Judgments and Decision Processes in Context

Thursday, 15th September - 15:25 - PLENARY: Towards a comprehensive view of factors affecting decision-making and in child protection

Prof. Rami Benbenishty (Bar-Ilan University)

Child welfare professionals are entrusted, both morally and legally, with acting in children’s best interests, and regularly make crucial decisions that have a significant impact on children and their families. Such decisions include whether to remove an allegedly maltreated child from home, keep the child at home even though there are concerns for his or her welfare, or reunify a foster child with their biological family. Such decisions may influence both positively and negatively short and long term outcomes for children and their families. In most cases, these judgments and decisions are made under circumstances of uncertainty and are prone to error, due to the fallibility of human judgment processes.

One way to improve decisions is to explicate the underlying processes and open them to public and professional scrutiny. By describing how child welfare practitioners make judgments and decisions it would be possible to identify factors that may unduly influence their decision process, as well as factors that they should attend to, but tend to ignore.

This presentation will focus on the Judgments and Decision Processes in Context (JUDPiC) model, as it applies to judgments and decisions in cases of alleged child maltreatment. According to this model, professionals make their judgments (e.g., case substantiation and risk assessments) based on case information on the child (e.g., physical signs of alleged abuse) and the family (e.g., parents’ explanations of these signs). The information on these case characteristics are processed by professionals embedded in social agencies who are influenced by their personal characteristics (e.g., their personal experiences of abuse and their attitudes toward child removal) and their agency features (e.g., placement policies and guidelines). These judgments (i.e., whether maltreatment has been substantiated, risk for future harm) lead to intervention decisions. The link between judgment and decisions is moderated by a large number of factors, such as policies as to what threshold warrants child placements, available knowledge and evidence that connect between case characteristics and appropriate interventions, and values and attitudes as to the relative merits of protecting the child and maintaining the family unit.

Finally, the whole judgment and decision process is embedded within wider and nested contexts, such as the ecological context of the family, the organizational context of the decision making agency and higher level contexts relating to the overall characteristics of the service system and the multiple cultural contexts (e.g., the public attitudes toward the protective system or national child welfare legislation).

I will present some data derived from an international study to illustrate some of the ideas. I will also address some of the limitations of the model and will suggest how it could be expanded. In my presentation, I will emphasize the role of context in child welfare decisions. I will discuss the potential implications of context-dependency on our dreams to develop universal decision making protocols, on our research agenda, and on the need to develop local monitoring systems to help guide our judgments and decisions.

Thursday, 15th September - 15:50 - PLENARY: Towards a comprehensive view of factors affecting decision-making and in child protection

Dr. John Fluke (Kempe Center. University of Colorado)

When children come to the attention of the child welfare system, they become involved in a decision-making continuum. Decisions along the continuum have an increasingly significant effect on the future well-being of children, yet many of these decision occur under conditions of uncertainty. The decision to remove children from their families have particularly uncertain consequences, yet other decisions such as those related to reunification and adoption are equally uncertain with regard to the lifelong consequences on children and families.

An understanding of statistical decision-making errors is viewed through this lens, providing a context and a process for understanding child protection decision-making. The Lynch pin is the idea of thresholds for taking action. The Decision-Making Ecology (DME) represents an effort to advance our understanding of Child Welfare decision-making using the knowledge gained from the decision sciences. It is a theoretical framework for organizing decision-making research in Child Welfare and places the topic squarely in the context of actual protective-service operations in this field. The systemic context for decision-making includes a set of decision-making influences that include case, external, organizational, and individual factors that combine in various ways to influence decisions and outcomes. The influence of these factors are expressed through the actions of individual decision makers. The DME is intended to guide an understanding of both the context and process of decision-making, the goal of which is to predict “behavioral thresholds for action”.

This presentation focuses on the development, testing, and application of the DME. The model will be described and its implications will be underscored. A central argument is that the theory makes important contributions to Child Welfare because it enhances both prediction and understanding. A theory like the DME is also useful in helping to set and to clarify the research agenda and design of studies. Examples such as how the model has been successfully applied to the problem of disproportionality (e.g., Baumann et. al., 2010; Fluke, et. al., 2010; Rivaux, et. al., 2008), and the decision to place children into care (e.g., Graham, Fluke Baumann and Detllafl, 2015), will be briefly described. The presentation will then turn to examples of how the research infrastructure for the DME framework is being applied in the domain of implementation science.
**Reflections of social behavioural diagnostic research on migrant children in judicial decision-making**

**Thursday, 15th September - 16:30 - Migration and Social Diversity**

Mr. Daan Beltman (University of Groningen), Prof. Margrite Kalverboer (University of Groningen), Dr. Elianne Zijlstra (University of Groningen), Ms. Carla Van Os (University of Groningen), Ms. Danielle Zevulun (University of Groningen)

Since 2006 the Study Centre for Children, Migration and Law of the University of Groningen is requested by lawyers to make an assessment and a determination on the best interests of the child (BIC) of migrant children involved in migration procedures. The assessment is done by using the BIC-method, that is derived from the BIC-model (Kalverboer and Zijlstra 2006 and Zijlstra 2013), which is found to be in line with the 2013 published General Comment No. 14 of the United Nations Committee on the Rights of the Child (Kalverboer and Beltman 2014) which provides guidelines on the implementation and interpretation of article 3, paragraph 1, of the United Nations Convention on the Rights of the Child (“In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration”). As we are interested in what came forth of the requested expert opinions (based on the BIC assessment and BIC determination), in particular how lawyers deal with social behavioural diagnostic research findings, we analyzed 25 expert opinion which have been submitted in 25 different court cases (judgments), including the 25 notices of appeal. In this qualitative study, we show the reflections of the submission of expert opinions by lawyers in Dutch judicial migration procedures. We conclude that migrant children are very dependent on a lawyer who should be able to make a good transposition of social behavioural diagnostic research findings into legal terms. We further found that the expert opinions give substance to children’s rights in the context of human rights provisions that (directly) could lead to a right to residence, i.e. the protection of the child in the host country. Lastly, from the studied cases it emerged that the best interests of the child, although identified in the expert opinion, are not always weighed as a primary consideration. This is due to legal procedural constraints. We suggest the courts to embrace General Comment No. 14 which would guide them in a meticulous weighing of the best interests of the child in the specific individual context of the case.
Constructions of normality among care leavers in the context of societal conditions of differences and migration

Thursday, 15th September - 16:42 - Migration and Social Diversity

Mrs. Angela Rein (University of Applied Sciences Northwestern Switzerland, School of Social Work, Institute for Studies in Children and Youth Services)

This presentation deals with the biographical constructions formed by care leavers with a background of migration in the context of societal conditions of inequality. It focuses on the question of how young adults constructing their biographies deal with topics related to difference and with normalising societal requirements, and what subjective constructions of normality they develop as a result.

There have been numerous investigations on transitions to adulthood (Hof, Meuth & Walther, 2014), but until now research on the youth welfare services in German-speaking countries has only very rarely studied the effect of residential care. In English-speaking countries, renewed attention has recently been paid to young people’s transition from care to adulthood (e.g. Stein, 2011). Studies show that care leavers are at a higher risk of exclusion and marginalisation (e.g. Mendes, Johnson & Moslehuddin, 2011). For example, it has been shown that compared with their peers, care leavers have far lower educational qualifications and are far less likely to enter higher education (Berridge, 2012). Studies from Switzerland also suggest that these young people experience numerous challenges during this transition. Among other things, social and economic disadvantages have been shown to make the transition more difficult for care leavers (Schaffner & Rein, 2015).

However, considering the higher risk of discrimination and exclusion suffered by young people with immigrant origins – especially during transitions to vocational training and work (Imdorf, 2010) – such young people must be assumed to encounter even greater discriminative structures for reasons of racism. As a construction of difference, race also intersects with other constructions such as class, gender, ability or sexual orientation (Crenshaw, 1991; Riegel, 2013). This presentation takes an intersectional position when referring to the differences exhibited by care leavers as a group; this also underlines the importance of taking into account difference-based social categorisations during analyses, and examining the effects they have on subjective possibilities and positionings.

The presentation starts out by defining the context based on theories of subjectivation and difference, then goes on to set out the considerations behind the research methodology and present the results of the study.

One conclusion is that “non-normality” is an everyday condition for care leavers with regard to various constructions of difference. Care leavers are shown to take an approach extending from normalisation to problematisation. Their biographies also reveal how, when it comes to the young people’s contact with the welfare system, the complex, contradictory nature of their individual biographical experiences should be set out as a need for support which is recognised in terms of legal and institutional logic. This is related to the fact that the complex circumstances in their biographies mean that their cases need to be viewed in an individualising manner, e.g. in laying out their individual disorders, diagnosing psychological illnesses or articulating experiences of violence. The trajectory of their biographies shows that they are the subject of additional categorisations and attributions with negative implications to which they sometimes maintain a distance. During the transition to work, further experiences of exclusion are also revealed with regard to being labelled as having immigrant backgrounds, deviating from an imagined standard for physical and mental abilities, or homosexuality, and the consequences for care leavers are set out.
To sum up, the presentation describes the effects which constructions of normality have on care leavers, then asks what lessons can be learned from this on how to guide and support these young people.
Psychological needs of unaccompanied asylum-seeking children in residential care in Spain

Thursday, 15th September - 16:54 - Migration and Social Diversity

Dr. Iriana Santos González (University of Cantabria), Mrs. Susann Hesse (University of Oviedo), Dr. Amaia Bravo (University of Oviedo)

An important number of unaccompanied asylum-seeking children (UASC) has been received by the Spanish Child Protection System in the past two decades. Nevertheless, few or nothing is known about the possible emotional or behavioural problems these underage youths may suffer due to the consequences of their migration process.

This research aims to identify some of the possible hardships these minors present, from their own view and from that of social workers who attend them in residential child-care institutions.

Information was gathered by applying two forms of the Achenbach System of Empirically Based Assessment (ASEBA; Achenbach and Rescorla, 2001) for a sample of 64 UASC. The Child Behavior Checklist (CBCL) was completed by professional and the Youth Self-Report (YSR) by youths. Age ranged from 13 to 17 years, the majority was male. Origin was diverse with Moroccans being predominant. During the process of data collection, foreign minors were living in residential child-care institutions throughout Spain.

Results underscore the existence of clinical profiles, being 25.10% for the YSR and 31.26% for the CBCL. Correlations of the two forms show significantly higher internalized problems reported by youths than detected by professionals. This suggests the need of a screening system which helps professionals detect internalized symptoms. In addition to that, emotional upset expressed by minors needs to be taken into consideration by social workers.

Furthermore, the perceived well-being of the sample was assessed by applying the Personal Wellbeing Index (PWI; Cummins et al., 2003) with an increased number of domains. Median score of 76.4 (out of 100) suggests moderate personal satisfaction. Domains presenting highest scores are family (83.3), leisure (80.8) and personal relationships (78.5). Lowest scores are registered for standard of living (69.9), residential situation (70.8) and achievement in life (71.6). The subsample classifying as clinical according to the CBCL show significantly lower satisfaction for both Personal Wellbeing and Life as a Whole. Again, the low satisfaction with the living situation in residential child-care institutions was confirmed. A relationship between emotional well-being and some aspects of personal well-being can be concluded.

Overall results of the study underscore the need of further research on mental health issues of UASM with the aim of improving their quality of life.
Immigrant population in the Spanish child welfare system: needs assessment

Thursday, 15th September - 17:06 - Migration and Social Diversity

Mrs. Susann Hesse (University of Oviedo), Dr. Amaia Bravo (University of Oviedo)

Children with a migrant background are overrepresented in the Spanish child welfare system in various levels ranging from case notification rate to their share in residential care. Studies of risk factors also suggest higher vulnerability of this population, given their higher risks of poverty and social exclusion for example. This research aims at assessing the needs of parents with a migrant background living in Spain regarding their parenting to prevent situations of child abuse and neglect in this specific population. In the first phase of the investigation, records of families with a migrant background classified in the child welfare system as low or moderate risk cases will be screened and analysed with basic statistical measures. The core of the study are semi-structured interviews with three samples: (1) Parents with a migrant background with children under age at their care living in Spain who have a record in the child welfare system for low or moderate risk of child abuse or neglect. (2) Parents with a migrant background with children under age at their care living in Spain with no record in the child welfare system who present similar demographic characteristic as sample one. (3) Psychologists and social workers attending families with a migrant background with low or moderate risk. The interviews aim at understanding the needs of migrant families in Spain and identifying best practices in intervention with families with low or moderate risk. The results will be analyzed using Grounded Theory and open up an insight into a scarcely investigated but socially relevant issue.
Fathers and the child welfare service: Self-conception and fathering practice

Thursday, 15th September - 16:30 - Focusing Parenting Practice

Dr. Anita Storhaug (Norwegian University of science and technology)

This paper is based on individual in-depth interviews with 15 men who have children with measures from the Norwegian child welfare services (CWS). The purpose of the interviews was to gain insight into their experience of fatherhood, the contact with the CWS, and factors influencing their self-conception as fathers.

The fathers' relation to their own parents appears to be important; both in terms of what they emphasize in their care of the children, and the importance they ascribe themselves as fathers. Their self-conception and fathering practice is based partly on their own fathers as negative role models; they are clear on what their own fathers did wrong and do not want the same negative and distanced relationship with their own children. Their mothers, however, were highlighted as important role models for several of the fathers. The relationships to their own mothers also seemed to affect the importance they attached to themselves as fathers. Most fathers highlighted their own mother as their most important caregiver, and they transferred this to their own families and understanding of themselves as fathers.

The informants position themselves as fathers by distancing themselves from what they understand as female characteristics, and as “typical” of mothers. They emphasise that they as fathers have some special characteristics that mothers do not have to the same degree. Through an emphasis on activities and boundaries, they construct themselves as different to mothers.

Experiences of not being assessed as worthy caregivers also has an impact on their self-conception, and it affects their involvement with the CWS and in their child’s life. If fathers are uncertain of their role and importance for their children, while being faced with the CWS’ understanding of mothers as primary caregivers, this can cause them to pull away from their contact with the CWS and the child. There is a need for a greater degree of critical awareness and reflection regarding different understandings of fatherhood, how the CWS relate to gender roles in meetings with families, and how CWS involve fathers in their work. Some of the fathers in this study are uncertain about their role and need to be made aware of their importance for the children. This is something the CWS should be aware of in their work with families. A number of fathers in this study did not feel involved in the CWS’ work with the child. When the CWS fail to involve fathers, they might be missing out on important information about the child’s situation and a potential resource for the child. The CWS’ main task is to ensure that children and adolescents who live in conditions that can harm their health and development receive the necessary help and care at the right time. This means that the CWS should examine the child’s overall care situation to identify matters that may negatively affect their care situation, and potential resources that can help ensure that they receive the necessary care. If assessments fail to consider how both parents can affect children’s care situations, it is difficult to see that the child’s best interests are safeguarded.
What mothers think about parenting? Cognitive representations of parenting in mothers referred to child protection services

Thursday, 15th September - 16:42 - Focusing Parenting Practice

Ms. Claudia Camilo (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Prof. Margarida Vaz Garrido (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Prof. Maria Calheiros (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL)

From a cognitive information processing approach, abusive and neglectful parents are unable to understand the signals or states of the child, interpret these signals correctly, select and implement adequate responses (Crittenden, 1993; Milner, 1993). In this model, parents’ cognitive schemas strongly influence the way they perceive and act towards their children (Bugental & Goodnow, 1997; McGillicudy-DeLisi & Sigel, 1995; Sigel, 1985) and are likely to influence parental perceptions about their child’s needs and behaviors, and to determine the subsequent information processing stages (Milner, 1993).

Social cognition research has been giving a vast contribution for the study of cognitive representations and impression formation, emphasizing that people share common implicit personality theories (Bruner & Tagiuri, 1954). Applying this knowledge to the parenting context, the present study intends to explore how maternal cognitive representations about parenting are organized in a multi-dimensional space, comparing mothers referred to child protection services and mothers with no such reference. Specifically, we sought to replicate the original two-dimensional personality structure (social and intellectual dimensions) obtained by Rosenberg, Nelson, and Vivekananthan (1968; see also warmth and competence Cuddy et al., 2002), as well as dominance and trustworthiness (Oosterhof & Todorov, 2008).

In a free description task, a sample of 70 mothers - half referred to the child protection services and other half non-referred – freely generated parental attributes (i.e., words immediately associated with parenting). The most frequent characteristics were selected. In a second stage another sample of 70 mothers (also referred and non-referred) performed a grouping task of the attributes according their probability of co-occurrence in the same mother. The results were analyzed using the multidimensional scaling technique (e.g., Rosenberg et al., 1968) in order to identify the underlying dimensions of maternal representations.

As expected, the data revealed a good adjustment in a two-dimensional configuration, as proposed by Rosenberg and colleagues (1968), with both intellectual and social dimensions and their respective positive and negative poles. This replication is particularly important because it refers to “mothers” and not people in general. Additionally, it was obtained from a specific population of referred and non-referred mothers (instead of undergraduate students). Regarding the comparison between the two groups, referred mothers showed a higher density in negative clusters than the non-referred mothers, which may suggest that referred mothers have a representation of parenting more homogeneous and less differentiated.

The perceptive map that this technique enables allows representing and analyzing how maternal attributes are organized in the multi-dimensional space. Given that mental representations influence behavior, the knowledge of these structures is likely to contribute to a better understanding of parental practices. Further research is crucial to understand the cognitive factors underlying child maltreatment and neglect.
The role of parent efficacy in the relationship between child and parent mental health in the first year post-adoption.

Dr. Katherine Shelton (Cardiff University), Dr. Sarah Meakings (Cardiff University), Mrs. Rebecca Anthony (Cardiff University), Dr. Julie Doughty (Cardiff University), Dr. Heather Ottaway (University of Bristol, Hadley Centre for Adoption and Foster Care Studies), Dr. Amanda Coffey (Cardiff University)

Objective: The relationship between parent and child mental health is well-established. Less clear is whether there is a link between parent symptoms of mental health problems and children’s mental health in the first months of an adoptive placement, where parent and child are unrelated to one another and during a period of potentially profound upheaval and change for all concerned. This study considers whether parent symptoms of anxiety and depression are associated with children’s psychological health (e.g. conduct problems emotional problems) in the first year of an adoptive placement. Our second research question is whether parent’s perceived efficacy and confidence mediates the relationship between parent and child mental health.

Method: The Wales Adoption Study is national research study that used a mixed-methods approach to examine the characteristics and experiences of a sample of children recently placed for adoption in Wales, to consider the early support needs of adoptive families into which these children were placed, and to better understand what helps such families flourish. Ethical permission for the study was granted by the ethics committee at Cardiff University, School of Social Sciences. Permission was obtained from the Welsh Government to access local authority data. Data for the present study are based on parent reports for 96 Welsh children, where the child was placed for adoption between July 1st 2014 and June 30th 2015. Questionnaires were sent to parents between 3-5 months post-placement with a second questionnaire sent 12 months post-placement. We are currently collecting the 12 month post-placement questionnaires (up to June 2016). Ninety six adoptive families completed a questionnaire around four months after the start of their adoptive placement. Forty adoptive parent were, or will be, interviewed at home about nine months after the start of the adoptive placement. The characteristics of the 96 children whose families participated in the study were compared to all Welsh children placed for adoption during the study period (n=374). Our sample is representative of Welsh children placed during the study window for age, gender, primary reason for placement and past experiences of abuse/neglect.

Measures: Parent anxiety and depression was measured using the Hospital Anxiety and Depression Scale, HADS; Snaith, (2003). Child mental health was measured using the Strengths and Difficulties Questionnaire (SDQ; Goodman, 2001) and the Child Behavior Checklist (CBCL; Achenbach & Rescorla, 2000; 2001). Parent efficacy was measured using the Parental Sense of Competency Scale (Johnston & Mash, 1989).

Statistical analysis: We will present data on the across-time associations between parent and child mental health and parent efficacy assessed at 3-5 months post-placement and 12 months post-placement. Longitudinal data will give us a sense of who is influencing whom (i.e. whether parent symptoms are associated with increased child symptoms, the converse, or both). We will also test the mediating role of perceived parent efficacy underlying these relationships to consider whether parent’s sense of confidence and assurance in their role in the first year of an adoption placement is relevant to understanding links between parent and child mental health. We will supplement our data analysis with qualitative data derived from interviews.
Conclusions: Identifying a relationship between adult and child mental health in the earliest stages of an adoption placement is important because it highlights the potentially important role of the form and availability of post-adoption support. The evidence from this study will inform how these relationships unfold over two time points and provide important insights about the possible role of parenting efficacy in understanding why these symptoms are linked.
Parental Empowerment: Construct validity and reliability of a Dutch empowerment questionnaire (EMPO)

Thursday, 15th September - 17:06 - Focusing Parenting Practice

Mr. Harm Damen (Pactum / Arnhem ; Radboud University Nijmegen / Praktikon), Prof. Jan Willem Veerman (Radboud University Nijmegen), Dr. Ad Vermulst (Radboud University Nijmegen), Ms. Rozemarijn Nieuwhoff (Pactum / Arnhem), Dr. De Meyer Ronald (Radboud University Nijmegen / Praktikon), Prof. Ron H.J. Scholte (Radboud University Nijmegen)

The term empowerment has become increasingly prominent in the realm of human endeavor. Empowerment refers to the processes through which individuals, organizations, or groups gain control over matters that are important to them, and the outcomes of these processes (Rappaport, 1987; Zimmerman, 2000; Zimmerman & Rappaport, 1988). The strength of people to shape and give meaning to interactions with their environment is central to the concept of empowerment (Holden, Crankshaw, Nimsch, Hinman, & Hunt, 2004; Peterson, 2014). In the scientific context, the large scope of empowerment has led to a multitude of theoretical insights, but less empirical knowledge, due partly to the lack of context-specific instruments to measure this construct (Akey et al., 2000; Holden et al., 2004; Peterson, 2014; Vuorenmäki et al., 2014).

Since the 1980s in The Netherlands, value has increasingly been attached to the empowerment of clients within youth care (Verzaal, 2002). The increasing use of programs as Families First Home-Start, Family Centred Therapy, wraparound care, and parent support programs, can be seen as the consequences of adopting a strength-based approach to care instead of a deficit-based approach (Slot & Spanjaard, 2009), a tendency which is also prevalent in other countries (Powell, Batsche, Ferro, Fox, & Dunlap, 1997; Lietz, 2011). This approach is based upon the assumption that clients who come for help already have various competencies and resources that may be accessed to improve their situation. Although, in a strict sense, children and adolescents (hereafter referred to as youth) are the clients of youth care, parents are involved mostly as mediators in helping to achieve beneficial change. An important prerequisite for this role is that professionals know parents are knowledgeable and competent with regard to the needs of their child/children (Minjarez, Mercier, Williams, & Hardan, 2013; Singh et al., 1995), and that parents become partners in shared decision making to determine the best support for themselves and their child (Kutach et al., 2011). In line with Zimmerman (2000), we see this as a parental empowerment process in which parents are stimulated to strengthen their parenting competencies to such an extent they can address and solve parenting problems independently of youth care and make the right decisions regarding parenting issues. For the purposes of assessment and evaluation, it is very important to measure the outcomes of this process. Our empowerment questionnaire is meant to do this.

In our study, we examined the construct validity and reliability of the Empowerment questionnaire (EMPO). The EMPO focuses on measuring parental empowerment in raising their children and consists of 12 items. The three components of psychological empowerment (intrapersonal, interactional, and behavioral) form the rationale for the EMPO. We used non-clinical (n=673) and clinical (N=1,212) data. To determine construct validity we tested the factorial structure, measurement invariance, correlations with other instruments (PSQ-S and SDQ), and empowerment differences between the two groups. Reliability was determined by testing the internal consistency and test-retest reliability. The results show that the factorial validity of the EMPO was sufficient to good, the EMPO was measurement invariant for various subgroups, and the EMPO scales were negatively correlated with parenting stress (PSQ-S) and child behavioral problems scales (SDQ). Furthermore, the clinical group was less empowered, and the correlation between parental empowerment and child
behavioral problems was stronger in this group. In addition, both groups of parents had relatively high scores on the interactional component. In the clinical group, however, parental scores on the interactional component were less correlated with scores on the intrapersonal and behavioral components. Finally, reliability analyses showed a largely sufficient to good internal consistency and test-retest reliability.
Benefits and challenges of promoting family leisure experiences during the visits in the Child Welfare System

Thursday, 15th September - 17:18 - Focusing Parenting Practice

Mrs. Alicia Navajas (University of Lleida), Dr. M.Angels Balsells (University of Lleida (Spain))

The scientific literature recognizes family leisure as a key parental competence. It promotes well-being and quality of life, reasons that justify why it has been considered an element of positive parenting, a protective factor and one of the main characteristic of resilient families. In that sense, family leisure experiences could be especially beneficial for families involved in the Child Welfare System, due to the fact that it strengthens resilience processes and it promotes positive familial dynamics.

This communication aims to show the results obtained about the benefits that family leisure could provide to the families involved in the Child Welfare System and the challenges to incorporate these experiences in the context of the visits.

A qualitative research was conducted through an analysis of secondary data. The secondary data come from interviews and focus groups based on the voices of families and professionals related to the Child Welfare System. The total number of the participants was 135 people from different regions of Spain, composed by: a) 63 professionals from different fields of knowledge (social work, education, psychology,...) with experience working on the Child Welfare System, b) 42 mothers and fathers whose children were in foster care with a plan of reunification or were actually reunited, c) 30 kids and adolescents who were the daughters and sons of the parents mentioned before (of them, 11 were reunited with their parents and 9 were in the Child Welfare System at the moment of the data gathering).

In order to analyze the data from the focus groups and interviews, firstly it was designed a category system which was re-designed through the bottom-up technique. After that, a content analysis was carried out to deeply analyze this information according to the qualitative method.

The obtained results describe multiple benefits for the families who share leisure moments in their time of visitation. Two different types of benefits were identified: a) general benefits that all the families can join just by the fact of practicing family leisure activities, b) special benefits which families related to the Child Welfare System can experience because of their specific situation. In the first one group of benefits, there are included benefits as providing fun and wellbeing to all the members of the family, strengthening family bonding and improving family cohesion and positive interactions. The second group of benefits, which are exclusive of families whose children are in foster care, includes advantages related to the improvement of the quality of the visits, satisfaction with the visits and motivation to continue with the process of reunification, among other benefits.

About the challenges of including family leisure experiences during the visits, the results point out that it is necessary a socio-educative intervention on family leisure, due to the low ability of some of these parents to play with their children or running out some leisure activity, especially with their adolescents sons/daughters. Moreover, the characteristics of visits (restricted time, artificial context, supervision, etc.) hinder the natural relationship between the members of the families and obstruct some type of leisure experiences which requires more time, space or resources. Other challenges are related to the institutional available resources and professional’s conceptions about leisure, among others.

As conclusion, family leisure experiences could be a useful strategy to empower families related to the Child Welfare System and promote their quality of life, through an intervention based on a
positive parenting approach, not just a preventing abuse approach. However, besides the multiple benefits that family leisure provides to these type of families, there are some weighty challenges necessary to face on in order to include shared leisure experiences into the visits.
Family narratives on fostering a child with a history of sexual abuse

Thursday, 15th September - 16:30 - Working with Victims of Sexual Abuse and Maltreatment

Ms. Dorijn Wubs (University of Groningen), Prof. Hans Grietens (University of Groningen), Dr. Laura Batstra (University of Groningen)

The impact of a history of sexual abuse on foster families has been studied, although never from a multilevel family perspective. Therefore, in Project Iris narratives are collected on the expertise, needs and experiences of family members in foster families concerning the care for a child with a history of sexual abuse previous to placement in the foster family.

The study includes the voices of foster parents, biological children of foster parents (9 to 17 years old and 18 to 25 years old) and foster children (9 to 17 years old). The narratives of 17 foster parents and 10 biological children of age were collected through several episodic interviews. An activity book containing narrative eliciting activities was used to collect the voices of 2 biological and 2 foster children below the age of 16. After doing an inductive thematic analysis, we created a synthesis of the narrative for each individual participant. The various individual syntheses of members of the same family are reviewed on a comparative base, resulting in a “family narrative”.

Comparing the different individual accounts, we found family members to speak from their particular position within the family (parent-position or the child-position). However, the participants do not limit their narratives focusing on themselves, as a great part of the individual narratives contains a reflection on the impact on the family as a unit. Furthermore, the experienced impact is affected by the interpersonal connections between the family members. For instance, foster parents and their biological children speak of the strain on themselves, however, seeing the other family members struggle is possibly even harder than one’s own struggles. Results on the level of the individual narratives as well as on the family level will be presented.

Studying the impact of fostering a child with a history of sexual abuse from a family perspective adds to our understanding of the complexity of the topic, as the family dynamics are taken into account. The knowledge gained in Project Iris will be used to professionalize and strengthen foster families as well as optimize the care for foster children with an abuse history. In the future, the key findings of this study will contribute to the development of an e-toolkit for foster families and their network.
The needs of children in foster care: A Q-sort study on the differences between the psychosocial needs of foster children with and without a history of sexual abuse

Thursday, 15th September - 16:42 - Working with Victims of Sexual Abuse and Maltreatment

Ms. Anne Steenbakkers (University of Groningen), Dr. Steffie Van Der Steen (University of Groningen), Dr. Ingunn T. Ellingsen (University of Stavanger), Prof. Hans Grietens (University of Groningen)

Children in family foster care have a specific set of psychosocial needs, stemming from previous caregiving, (traumatic) experiences, and living in a foster family. Foster parents are expected to learn about these needs and incorporate them into their parenting and nurturing. When children have a history of sexual abuse prior to placement, foster parents are more often challenged with behavioral, emotional and educational difficulties and sexual risk behavior. In general, studies have focused on the problems encountered by this group, with a focus on the prevalence of behavioral problems, placement breakdowns, and possible interventions that could be used to minimize this. Yet, needs as described by Maslow (1943), and Deci and Ryan (1985) have not received much attention, even though this can guide foster parents in their caregiving practices. This study therefore aims to describe what children in foster care consider their most important needs, how these needs can be met during their foster care placement and how these needs differ for children with a history of sexual abuse.

First, based on interviews with 15 adolescent and former foster youth (ages 15-23) and 7 foster care workers in the Netherlands, 45 statements describing possible psychosocial needs of foster children were constructed. Examples are: ‘I want to have a nice time with my biological parents during contact visits’ and ‘I want to be able to take time and space to think about and process my past’. Second, a Q-sort methodology was chosen to capture the subjective opinions of (former) foster children about their most important needs. The 44 (former) foster children that participated in the Q-sort study were aged 16 to 28 (M = 21, SD = 2.9), were mostly woman (80%) and 15 had experienced sexual abuse during their childhood. The participants sorted the statements in a grid, ranging from ‘most important’ to ‘most unimportant’, according to their own personal point of view. Using the program PQMethod, three principal component factor analyses with varimax rotations were performed on the participant’s Q-sorts (by-person factor analysis). In the first two analyses, we included participants with and without sexual abuse experiences separately. Participants who found similar needs important or unimportant were grouped together in a factor. The third analysis was a higher order factor analysis, comparing the factors of both the abused and non-abused groups to search for similarities and differences in their needs.

The results show that the needs of the non-abused group were focused on people they do (or explicitly do not) want to have a close relationship with, for example with their foster or biological parents. In contrast, the abused group was more focused on themselves and on what other people could do for them. The second order factor analysis confirmed this, and showed that although some needs between the abused and non-abused group overlapped, the abused group also had a specific set of needs. This group strongly felt foster parents and foster care professionals should help them, while warm relationships with those people seemed less important.

In conclusion, although some needs seem equally important for all foster children, both groups show inter-individual differences in what they consider their most important needs. In addition, the analysis shows that for the children with a history of sexual abuse, using other people’s help as
a resource is more important than developing close relationships. This study provides researchers, practitioners and foster parents insight into the needs of foster children and how these differ on an inter-individual level, especially for children with and without a history of sexual abuse. The next step is to optimally meet the needs of this diverse population.
Psychotherapeutic care for sexually victimized children – does it meet the need? A multilevel analysis

Thursday, 15th September - 16:54 - Working with Victims of Sexual Abuse and Maltreatment

Dr. Andreas Jud (Lucerne University of Applied Sciences and Arts, School of Social Work), Mrs. Sabine Weber (University Children’s Hospital Zurich)

Objectives: Surprisingly little is known on the decision to provide psychotherapy to sexually victimized children. Previous research on service provision for victims of child maltreatment has analyzed the impact of case characteristics, e.g. child or caregiver functioning issues, lacking social support, and low socioeconomic status. Findings, however, show that the decision to provide services is not only need-driven but also affected by external factors such as provincial legislation, institutional policy, or availability and accessibility of services. By analyzing characteristics of the decision to provide psychotherapy to sexually abused children both at the case and institutional level, we aim at identifying if psychotherapy is provided to the ones most in need or if the decision is biased.

Method: The data for this analysis was drawn from the first nationally representative agency survey on reported incidents of child sexual victimization in Switzerland (Optimus Study). During a 6-month data-collection period (March 2010-August 2010), 165 child protective services, 87 penal authorities and 98 agencies in the health and social sector have documented a total of 911 incidents of child sexual abuse. A multilevel logistic regression was applied to analyze both factors at the case level and the level of totally 350 agencies from all regions of Switzerland.

Result: In 22.6% of the cases, psychotherapy was offered to the victim. The severity of consequences, repeated referrals and caregiver functioning issues significantly increased the likelihood of psychotherapeutic services. Institutional disparity in the decision to provide was large (Median Odds Ratio = 3.83). Factors measured at this second level were, however, not significantly associated with the dependent variable. Furthermore, biases were identified at the individual level: Victims born in Switzerland were more likely to be referred to a psychotherapy in the aftermath of child sexual abuse.

Conclusion: Psychotherapy is primarily provided to victims of severe sexual abuse. Beside needs, the decision also largely depends on the institution that takes care of the victim. Institutional factors driving this decision remain, however, obscure. Future research should therefore invest in scrutinizing contextual factors of child protective services decisions.
Prevalence and Perpetrators of Child Maltreatment in Foster Care

Thursday, 15th September - 17:06 - Working with Victims of Sexual Abuse and Maltreatment

Dr. Eric Van Santen (German Youth Institute (Deutsches Jugendinstitut e. V))

Most of the children in care have experienced at least one form of child maltreatment (e.g. Havlicek & Courtney 2016). In fact it often is the reason why they are in out-of-home care. It is also known that children with maltreatment experiences have a higher risk of again becoming victims of maltreatment (e.g. Hindley/Ramchandani/Jones 2016). Reviews of the literature (e.g. Biehal 2014) show that foster families cannot be regarded as a safe place. But we cannot extrapolate these findings to Germany as we can assume that e.g. carer recruitment, training and supervision, number of contacts of professionals with the foster family and thresholds for investigations of allegations are not the same. So the research question is, whether foster care in Germany is a safe place for children? The study presented is the first representative study providing data on child maltreatment in foster families in Germany. Since the study also covers the perpetrators it is able to distinguish child maltreatment during a foster care placement from maltreatment by foster carer or other members of the foster family.

Method

The study was done as a standardized online-survey among all 579 local youth authorities (Jugendamt) in Germany as a part of the evaluation of the new child protection law (Bundeskinderschutzgesetz). The response rate was 83 % (N=481). Among other topics concerning child protection in foster families the local youth authorities were asked for the number of allegations for child maltreatment in foster families during the last year, the number of substantiated child maltreatment during the last year and the perpetrators. The list of possible perpetrators covers the members of the foster care family as well as the biological parents, youngsters and adults, who are not member of the foster family. The results allow a profound estimation of the number of allegations and substantiated cases of child maltreatment in foster care per year. Furthermore a comparison with the maltreatment prevalence rate per year for children not living in out-of-home care is possible. Also aspects of the action of the professionals in the local youth authorities, such as the number of contacts of professionals with the foster children are gathered in the survey and are part of the analysis.

Results

The proportion substantiated cases of child maltreatment is one third of the total number of allegations. Per year 3.6 of 1,000 children in foster care are victims of maltreatment during their foster care placement. Approximately 90 % of the perpetrators are members of the foster family, the vast majority foster parents. 10 % of the perpetrators are persons other then foster family members. There is no evidence that foster families are an unsafe place compared to birth families. The ratio between reported and unreported cases of maltreatment in foster families compared to reported and unreported cases of maltreatment in birth families will be discussed.

Conclusions

Compared to other countries the prevalence of child maltreatment in foster families per year seems to be low. Still the results signalize the necessity for further efforts to make foster families a safer place for vulnerable children. Especially because other research shows that even children in care only report a small proportion of maltreatment events (e.g. Samson-Commissie 2012). Sensitivity for this
topic among child welfare professional should therefore be increased and foster carer recruitment, training and supervision should take the possibility of child maltreatment in care into account.
The dialogical-systemic case laboratory - a method for the analysis of serious or fatal cases in child protection

Thursday, 15th September - 16:30 - New Methodological Approaches

Prof. Kay Biesel (University of Applied Sciences and Arts North Western Switzerland), Prof. Reinhart Wolff (Kronberger Kreis für Dialogische Qualitätsentwicklung e.V. / Free University Berlin)

In Germany in 2007 the five year old Lea-Sophie died following serious neglect, despite the fact that concerns about her situation had been notified to the Jugendamt (child welfare department) several times and there had been a history of contacts between Lea-Sophie’s (grand-)parents and the Jugendamt and a number of children’s and family service agencies. The case received considerable media attention and sparked a wide-ranging debate on quality and errors in the German child protection system. The federal government and local authorities launched programs, and legal and organisational reforms designed to raise quality and provide opportunities to learn from errors in child protection. This paper reports on a project whose objectives had been twofold: to reconstruct the Lea-Sophie case and to develop an innovative method of learning from serious cases in child protection that goes beyond traditional serious case reviews. A key feature of this method, which is called the “dialogical-systemic case laboratory” is the involvement of both the clients and the professionals who had been directly involved in the case. The method could be used for the research of system-related errors in child protection and is designed for the dialogical reconstruction of a serious case processes. In the “dialogical-systemic case laboratory” seven phases play a role: (1.) clarification phase: preparation and coordination of the case laboratory, (2.) data collection phase: collection, sorting, reconstruction and analysis of relevant case documents, (3.) research phase: realization of retrospective interviews and research workshops, (4.) analysis phase: elaboration of the research report, (5.) feedback phase: feedback loops for commenting and correction of the research report, (6.) dissemination phase: publication and presentation about the findings and recommendations, (7.) aftercare phase: final talks with involved clients and professionals, and if needed - organization and coordination of further support. The paper presents findings of the case review process and discusses pitfalls and potentials of the new methodological approach.
Using Social Network Analysis to compare traditional approaches to working with adolescents in and on the edge of care with a new multi-disciplinary model

Thursday, 15th September - 16:42 - New Methodological Approaches

Ms. Katie Hollingworth (Institute of Education, University College London), Dr. Emily Munro (University of Bedfordshire)

This paper presents the methodological approach and key findings from a mixed methods Social Network Analysis strand of a wider evaluation that set out to compare traditional ways of working with adolescents in and on the edge of care against a new multi-disciplinary model developed by a Local Authority in England. This new model aimed to support and enable the children’s social care workforce to build effective, consistent relationships with young people, families, communities and carers, and to use those successful relationships to bring about positive change. Key elements of the model included the creation of new multi-disciplinary teams with lower caseloads to facilitate relationship building and more intensive work with young people, families and carers, the provision of early intensive support to prevent family breakdown, the shifting of power and decision making to adolescents and their carers and implementation of new training for frontline staff and foster carers.

Using network mapping and NodeXL software, the Social Network Analysis component of the study explored the similarities and differences between the pre-existing traditional model of working and relationships with adolescents and their families against the new model, with a focus on effectiveness in promoting positive relationships and social networks between professionals, young people, parents and carers.

This paper will explore the extent to which this new model promotes positive relationships and examine this in the context of different models of working such as team around the child vs. team around the worker.
Research in daily practice (how we) just do it!

Thursday, 15th September - 16:54 - New Methodological Approaches

Mr. Marc Dinkgreve (Youth Protection Amsterdam), Mrs. Sigrid Van De Poel (Youth Protection Amsterdam), Mr. Inge Busschers (Youth Protection Amsterdam); Dr. Barbara Regeer (Free University of Amsterdam)

Aim: Two years after the implementation of a new system-based case management method, Youth Protection Amsterdam Area started an organization-wide implementation booster (270 staff working with 3200 families). At the same time, an implementation and evaluation study was set up. The main aims of this - transdisciplinary - Learning Effectiveness Study are: 1) to get insight in program fidelity; 2) to study the effectiveness of the program; and 3) to combine research evidence and daily practice in order to enhance learning on caseworker level and organisational level; and 4) to improve the outcomes for families.

In this presentation we share our experiences in developing and using program fidelity and meaningful outcome measures, co-created by professionals and implemented in clinical practice. The results are important for three reasons: 1) they provide insight in the ongoing learning process of professionals in child care and youth protection; 2) management and stakeholders have measures for quality assurance on an organizational level; and 3) the data are important input for a longitudinal effectiveness study.

Method: Measures for program fidelity and effectiveness were developed and designed together with professionals, and were validated through the change mapping method. Change mapping is a participatory method to plan, monitor and evaluate (part of) a program. It is specifically applicable to collaborate with users of an intervention, as it improves understanding and use of scientific knowledge in daily practice. By explicating relations between program elements and aimed impact, the process of change mapping becomes a learning activity for professionals. Three sessions were organized with implementation agents and 42 sessions with all users.

Results: Alongside the program fidelity booster session, all professionals joined a change mapping session. Professionals became more aware of the underlying program theory and the use of scientific knowledge in daily practice. The sessions led to one integrated change map including variables on the level of professional’s behavior (concrete elements of the intervention) and variables on impact level. The variables are used to co-create fidelity and impact scales. These are implemented and used for reflection and adaptation of daily practice as well as for measuring impact.

Preliminary conclusion/discussion: The Learning Effectiveness Study is a large-scale example of shared scales for clinical practice and research purposes. The change mapping sessions resulted in input for the measures of program fidelity and impact. With this input, both scales were adapted to fit the clinical practice and are now used on a daily basis. Professionals use these data for reflection on an individual and a team level, while researchers use them to examine overall implementation and quality assurance. Simultaneously, data regarding program fidelity and impact are gathered for the effectiveness study. Integrating research into daily practice is thought to be an important prerequisite for professionalisation of child and family care, but challenges abound. The social worlds of research and practice are separated in terms of language, time lines, aims and practices; administering questionnaires in clinical practice is experienced as burdening rather than supporting core tasks. This paper shows the potential of constructing scales that act as boundary objects, by being meaningful in both science and clinical practice.
The prevalence and characteristics of children growing up in kinship care in the UK: An analyses of the Census 2011 microdata

Thursday, 15th September - 17:06 - New Methodological Approaches

Mrs. Dinithi Wijedasa (University of Bristol, Hadley Centre for Adoption and Foster Care Studies)

Around the world, kinship care remains the most commonly used out-of-home placement for children who are not able to live with their parents. However, research indicates that only a small proportion of kinship families are known to and supported by child welfare services.

This presentation focuses on this ‘hidden’ population of kinship families in the UK. The number and characteristics of children growing up in the care of relatives in the four UK countries (England, Wales, Scotland, and Northern Ireland) were established through analyses of data from the 2011 UK Census. Ninety-four percent of the households in the UK responded to the 2011 Census, which provides the most accurate and reliable source of data on the population of the UK.

The presentation will explore the prevalence of kinship care in the four UK countries and the characteristics of children growing up in the care of relatives such as gender, ethnicity, disability, poverty and deprivation when compared with children who were growing up with at least one parent in the household. The implications of the results will be discussed alongside the strengths and limitations of using Census data as a secondary source of data in social work research.

This research study, which is funded by the ESRC, is ongoing. All outputs from the study are available on the project website: www.bristolkinshipstudy.co.uk

- Kinship care in this study was defined as an instance where children are brought up by relatives in the absence of parent/s.
Youth „Aging out” of Foster Care in Poland

Thursday, 15th September - 16:30 - Transitions to Adulthood from Care

Dr. Malgorzata Gocman (Opole University), Dr. Malgorzata Szarzynska (Opole University), Prof. Paul Toro (Wayne State University)

Research conducted in the US show that the youth leaving foster care experience many psychological and social problems associated with starting an independent life. The goal of the present study was to evaluate the psychosocial functioning of the youth who aged out of the foster care system in Poland. 134 randomly selected people who have left foster families (N=76) and orphanages (N=58) in the south of Poland within the previous four years participated in the study. “Aging out” survey, designed for the purposes of conducting the research among the group from the foster care system was used as a research tool. The tool was approved by the American Psychological Association Ethics Committee and adopted to the Polish reality by the group of researchers from the Opole University. The survey consists of the following research tools: Foster Care History, The Housing, Education and Income Timeline, The Victimization Scale, The Diagnostic Interview Schedule, The List of Criminal Activity, The Brief Symptom Inventory, and The Behavior Checklist. The results showed that the youth leaving foster care experienced a number of problems that make it difficult to start an independent life. Their problems include: mental disorder symptoms, abuse of psychoactive substances, antisocial behavior and victimization. Respondents from orphanages compared to respondents from foster families have higher intensity of mental disorder symptoms, such as: obsessive compulsive, interpersonal sensitivity, depression, anxiety, paranoid ideation and psychoticism. The results are discussed in terms of available support programs for the youth leaving the foster care system.
A peer research study of care leavers in Argentina: an approach to the reality of youths and a contribution to the methodology

Thursday, 15th September - 16:42 - Transitions to Adulthood from Care

Ms. Mariana Incarnato (Association for the Rights of Children Adolescents and Youth DONCEL)

The findings presented in this paper are the product of a peer research project developed in 2014-2015 focussed on the conditions of youths transitioning out of the care system in Argentina. The aim of the project was to describe and analyse the processes of transition towards autonomy and towards adult life of a mixed group of 70 in-care residents and young people who had recently left the protection system in institutions of the provinces of Buenos Aires, Tucumán, Santiago del Estero and Chaco, in Argentina.

The specific objective of the project was to analyse the tools that in-care and out-of-care young people have when they transition out of the protection system. In this sense the research focused, on one hand, on the perception of their level of preparation for this transition and, on the other, the relationships they established with the system once they had left care. It also identified and analysed risk and protection factors for the acquisition of autonomy amongst the youth and elaborated a series of policy recommendations based on our findings.

In addition, the paper engages in further reflection on the use of a peer research methodology as part of the development of the project. In recent decades there has been a developing body of youth research utilising peer research methods. Although the benefits of participatory research have been underlined, less is known about the effective contributions and challenges of involving young people as peer researchers, in particular care leavers.
Autonomy promotion in the foster care process of at risk youth: results of a personal and social competences programme

Thursday, 15th September - 16:54 - Transitions to Adulthood from Care

Dr. Laura Santos (Casa do Canto APDMF-CrescerSer), Prof. Maria Pinheiro (University of Coimbra, Faculty of Psychology and Education Sciences), Dr. Cristina Velho (Casa do Canto APDMF-CrescerSer), Dr. Carla Palaio (Casa do Canto APDMF-CrescerSer)

The foster home Casa do Canto - Associação Portuguesa para o Direito dos Menores e da Família-CrescerSer - for adolescents girls, aged between 12 and 18 years, developed a Life Competences Programme that relies on the promotion of the rights of the fostered girls, their life project and their autonomy. During the programme implementation, each girl receives a preparation for her emancipation in order to promote a safe and secure exit of the institution and to facilitate the insertion and functionality in the family and/or community.

This Life Competences Programme is integrated in the psychosocial and socio-educational intervention project - Projet’Ar-te (a project funded by Calouste Gulbenkian Foundation, 2012-2015). The aim of this project was to promote and follow the life autonomy process of the participants, during and after the hosting in foster home Casa do Canto, and the specific aims were to promote emotional regulation strategies and to develop social and personal competences. This second aim is accomplished in the Personal and Social Competences Programme (PSCP) that has a 6-month duration and two intervention levels.

Participants in the program, 39 adolescents girls with ages between 11 and 19 years (M=15.33; SD=1.797) completed an evaluation protocol, applied in two moments, pre and post intervention, composed by the standardized instruments: Umbrella Inventory (Del Valle e Garcia Quintanar, 2006), the Self-esteem Toulouse Scale (Táp & Vasconcelos, 2004) and the Youth Self Report/YSR (Achenbach, 1991).

In terms of autonomy competences, the results highlight a significant increase in the scores of Umbrella Inventory, in specific dimensions as money, study/work and home. Significant intraindividual differences were also registered in personal competences: 74% of participants increase in home competencies (Qui2(2)=29.692; p<.001), 67% of participants increase in study/work competencies (Qui2(2)=21.385; p<.001) and 72% of participants increase in money management competencies (Qui2(2)=27.846; p<.001).

The results presents a positive significant change on emotional problems, perceiving a decrease in anxiety/depression problems (F=-2,304; p=0.021). The calculation of the RCI (Reliable Change Index) for YSR scores suggests a global clinical improvement in adolescents mental health: decrease in general psychopathology levels in 57.9% of the participants (Qui2(2)=18.053; p<.001), decrease in internalizing problems in 57.9% (Qui2(2)=16.000; p=.000), and decrease in externalizing problems in 52.6% (Qui2(2)=10.316; p=.006). In specific dimensions of anxiety/depression problems and isolation there were a significant clinical improvement, correspondingly, 57.9% of the adolescents (Qui2(2)=10.474; p=.005) and in 50% (Qui2(2)=7.947; p=.019).

It also became possible to verify that 63.2% of the girls had a self-esteem increase (Qui2(2)=16.632; p=.000), showing a general self-esteem increase (F=-2.496; p=0.013) from the pre to the post intervention.
The results of the participants will be discussed in comparison with those obtained from the reference adults, in the corresponding instruments.

In a general way, it is possible to conclude that with the increase on the protection and autonomy promotion factors, such as the self-esteem development and the acquisition of life competences, as well as the decrease on risk factors, such as emotional and behavioural problems, it became possible to capacitate the individuals, developing confidence and security to overcome the challenges and difficulties during and after their foster period.

Key words: Foster care, autonomy, personal and social competences
Supporting adolescents on the edge of care - using short stays in residential units to prevent longer term care.

Thursday, 15th September - 17:06 - Transitions to Adulthood from Care

Ms. Jo Dixon (Dept. Social Policy and Social Work, University of York), Ms. Jenny Lee (University of York), Ms. Sarah Ellison (Dept Health Sciences, University of York)

There has been renewed and increased focus on preventative strategies for adolescents on the edge of care in the UK. This has been driven, in part, by the rising number of young people in care (currently at its highest in almost 20 years) and in particular, the increase in those aged 10 years and above entering care. The resulting pressures on services and resources together with research and practice evidence that highlight the risk of poor outcomes for care-experienced young adults, have reinvigorated the search for effective strategies to support families and prevent entry to care for adolescents. Alongside this, is the observation that many adolescents enter care for very short periods of time before returning home to families, raising the question - was entry to care the right option, the best option or the only option at a time of family crisis? The paper considers the growth of preventative strategies for adolescents on the edge of care, focusing particularly on the use of short stays in residential units as a means of preventing longer term care. It will explore the characteristics and needs of families and adolescents using the services; the approaches used to support young people, and outline learning points for further development.

Methods and results

The paper draws upon three recent studies carried out by the authors and colleagues:

- A completed mixed-methods study that focused on a model of short stay residential care within a wraparound family support service. This study reported on the characteristics of adolescents and families using the service and on experiences and early outcomes.

- A recently completed national evidence scope that explored the needs of adolescents on the edge of care and the use of short stays in residential units to prevent longer term care.

- An ongoing mixed-methods study exploring a range of preventative options for young people at risk of care or homelessness. Preliminary data suggests useful learning from the developmental and operational stages of setting up a short stays service.

Conclusions

The paper shows that locating the ‘edge of care’ is both complex and changeable, as is defining the characteristics of the edge of care group and the type of support they need. That said, the studies found that families and adolescents accessing ‘edge of care’ support such as short stays, were often vulnerable with longstanding and high thresholds of need. Those using short stays in residential units reported positive experiences and outcomes (at least in the short term), particularly when this was accompanied by a programme of adolescent and family support. There was also some indication from practice, that where entry to longer term care proved to be the best option for the adolescent, the prior use of a short stay service could ease the transition into longer term care and provide time for more detailed assessments of need. Findings highlight a need for further policy and research attention to the challenges facing edge of care services in targeting support at the right families at the right time and also on understanding the longer-term outcomes for families and adolescents using short stays options.
Re-thinking support for adolescents on the edge of care in England

Thursday, 15th September - 17:18 - Transitions to Adulthood from Care

Prof. Emily Munro (University of Bedfordshire, Tilda Goldberg Centre), Ms. Katie Hollingworth (UCL Institute of Education, Thomas Coram Research Unit), Ms. Veena Meetoo (UCL Institute of Education, Thomas Coram Research Unit)

The Department for Education Children’s Innovation Programme aims to: promote better life chances for children and young people receiving help from the social care system; provide stronger incentives and mechanisms for innovation; and better value for money across children’s social care. A number of the pilot projects that were initiated focus on rethinking support for adolescents on the edge of care to improve the quality of services and promote positive transitions to adulthood.

The Brighter Futures pilot involved the establishment of new teams intended to support and enable the children’s social care workforce to build effective, consistent relationships with young people, families, communities and carers, and to use those successful relationships to bring about positive change. Key elements of the model included:

- Re-designing the model of service delivery: creating multi-disciplinary teams with lower caseloads to allow them to build relationships and work intensively with young people, families and carers;

- Shifting power and decision making: providing young people with a choice of lead professional, offering access to peer mentors to help young people present their views, and introducing personalised budgets;

- Providing intensive early support to young people, families and carers: providing skilled, intensive interventions to prevent family breakdown;

- Expanded support for adolescents on the edge of care (i.e. access to provision available to those in care): positive activities, education, employment and training support, and specialist services for those at risk of involvement in gangs or sexual exploitation.

A mixed methodology was employed to evaluate implementation of the Brighter Futures ‘intensive engagement model’ and to explore whether aspects of the model promoted positive relationships and social networks and improved young people’s wellbeing. Drawing on qualitative data from twenty young people, their parents and lead professionals, the presentation will provide an overview of the model and explore similarities and differences in perspectives on its strengths and limitations.
Supporting the physical and mental health of young people in care: Messages from research and practice

Thursday, 15th September - 16:30 - Supporting physical and mental health of young people in care: Messages from research and practice

Dr. Dominic McSherry (Queen’s University Belfast)

Looked after children and young people have an increased risk of both physical and mental health difficulties. A survey of those in the English care system showed that two-thirds of all children in care had at least one physical complaint (Meltzer et al., 2003) and almost half met the criteria for a psychiatric disorder (Ford et al., 2007). Promoting physical and mental well-being is a priority for policy-makers and practitioners, because of its central role in children’s development and its importance for longer-term outcomes.

This symposium covers a range of mixed methods work that sits at the intersection of research and practice in England and Northern Ireland. It incorporates a review of mental health interventions (Luke et al., 2014); action research with local authorities (Bazalgette et al., 2015); practice surveys with Virtual School head teachers; direct work in schools; interviews with carers, other professionals, and young people (McSherry et al., 2015); and the use of innovative visual methods. Taken together, these papers present a picture of the physical and mental health needs and experiences of young people in care. The session will draw on findings from research and practice to suggest a set of priorities for services looking to support young people’s well-being.

The symposium will highlight a number of themes, including the interplay between physical and mental health, and the role of ‘ordinary care’ in promoting well-being. A key focus across the presentations will be the importance of ensuring that young people’s voices are represented in healthcare decisions and in research.

References


The health experiences of children and young people in care in England

Thursday, 15th September - 16:42 - Supporting physical and mental health of young people in care: Messages from research and practice

Ms. Áine Kelly (Rees Centre for Research on Fostering and Education, University of Oxford)

Having grown up in care myself, I am interested in improving health outcomes for other children in care. When children and young people enter the care system, the law requires that they undergo an initial health assessment within twenty working days. Thereafter, children aged nought to five are required to have bi-annual review health assessments that incorporate a developmental element, and children and young people aged five and over are required to have annual review health assessments. These health assessments are used to identify health problems and if necessary, to develop health care plans. Foster carers and other professionals can then use these health care plans to monitor and manage health conditions appropriately. Yet, despite the implementation of these specialist services many children and young people fail to engage appropriately with the healthcare system and go on to experience deteriorating health during their transition to independence.

I will present a new study that is exploring the physical and mental health experiences of children and young people in care in England. My study adopts visual and creative research methods to elicit the health beliefs of young people aged eleven to eighteen to explore how their beliefs relate to their engagement with health services. I will discuss this in relation to their experiences of health services, which includes their experiences of statutory health assessments. Specifically, five young people from each region of England are being given digital cameras to enable them to capture what they believe it means to be healthy or unhealthy, and are also asked to complete food and sleep diaries. They are then invited to an interview where they each collage a life size human body to represent their health and health experiences while talking about their health experiences. Young people are also displaying one key message on their collage that they think professionals need to hear in order to improve services. Preliminary analysis will be available by the end of August 2016 and key themes will be presented. My unique, user-led research aims to represent the voices of children and young people in care in England.
Improving the mental health and well-being of young people in care

Thursday, 15th September - 16:54 - Supporting physical and mental health of young people in care: Messages from research and practice

Dr. Nikki Luke (Rees Centre, University of Oxford)

Aims and Objectives:

Looked after children and young people have consistently been found to have much higher rates of mental health difficulties than the general population, with almost half of them meeting the criteria for a psychiatric disorder (Ford et al., 2007). There are many reasons for this, including the experiences they have had in their birth families before coming into the care system. Children's experiences once they enter care are also linked to their well-being, and can further contribute to both the causes and the nature of any difficulties.

This presentation will draw out some key themes from the Rees Centre's review, commissioned by the National Society for the Prevention of Cruelty to Children (NSPCC), of strategies for the prevention and treatment of mental health difficulties among children in the care system (Luke et al., 2014). We will outline key messages from research regarding best practice in ‘ordinary care’ in terms of reducing the likelihood of mental health difficulties, as well as the principles that appear to be most important for the effectiveness of mental health interventions. The presentation for EUSARF 2016 will also update the review to include research published since 2014.

Methods:

Our review focused on identifying and bringing together existing evidence, including 106 individual studies of interventions identified from searching the literature and suggestions made by an international panel of experts in the field. Our literature search on specific interventions covered any programmes that were listed as targeting behavioural, emotional or hyperkinetic outcomes for looked after children and young people.

The review distinguishes between the effects of 'add-on' interventions (for example therapeutic services or mentoring), and the effects of variations in the quality of 'ordinary care' provided (such as whether the foster placement is a good one).

Key findings:

This review of mental health and well-being interventions for looked after children suggests that differences within ordinary care can be a powerful influence on well-being for children in residential and foster care, as well as providing the context for any additional interventions. We conclude that interventions for behavioural and emotional issues are more likely to be effective when they include some focus on developing relationships and understanding of self and others. In addition, the review shows that one approach does not fit all. For example, some interventions benefit highly antisocial young people but might be the wrong fit for others.

The review highlights issues that are relevant for practitioners and policy makers, because of the importance of improving earlier decision making about care placements, as well as the consequent resource allocation for assessments and interventions. The evidence reviewed supports the position that high-quality caregiving, with added interventions targeted either directly at the child or indirectly (through the caregiver or those around the child), providing support where necessary, might effect positive change in children's well-being.
References


Supporting good mental health and wellbeing for looked after children through system change

Thursday, 15th September - 17:06 - Supporting physical and mental health of young people in care: Messages from research and practice

Ms. Louise Bazalgette (NSPCC)

Aims and Objectives:
Looked after children are between four and five times more likely to have a mental disorder than children in the general population (Ford et al., 2007). In the context of the English care system, poor mental health exposes children to a range of poor outcomes, including an increased risk of placement breakdown. Government statistics show that this continues to be a problem that affects many children in England each year; 14% of young people leaving care in England between 2014-15 had experienced 5 or more placements and 5% of those leaving care (1,390 children) had experienced 10 or more separate placements.

This presentation will draw out findings from an action research system design project undertaken by the NSPCC in partnership with four UK local authorities in 2014-15. It will identify the impact of failures of support on the lives of children in care, the key system challenges involved in supporting the mental health needs of children in care, and proposals for improving mental health outcomes for children in care.

Methods:
This system design project involved consulting with young people in care, their carers and professionals who support them in four UK local authorities (3 in England and 1 in Wales). Through interviews, focus groups and interactive workshops, the project team consulted with 42 children in care and care leavers, 65 foster carers and residential workers and over 70 professionals from health, social care, education services and the voluntary sector.

Through this work, we were able to identify how looked after children and their carers thought their mental health and wellbeing could best be supported through the care system; key ways in which this support was and wasn’t being supported currently, and proposals for how the care systems in these four areas could be changed so that looked after children’s mental health and wellbeing would be made a priority at all times. The report we published in July 2015 made proposals for how policy and practice could be strengthened both locally and nationally to improve mental health outcomes for looked after children.

Key findings:
This work identified 5 key priorities for change:
1. Embed an emphasis on emotional wellbeing throughout the system: Professionals working in the care system need the skills and knowledge to understand how they can support the emotional wellbeing of looked after children and young people.
2. Take a proactive and preventative approach: Support for looked after children should begin with a thorough assessment of their emotional and mental health needs.
3. Give children and young people voice and influence: Looked after children and young people need more opportunities to identify what is important to them and influence their own care.
4. Support and sustain children’s relationships: Children’s carers require training and support to be sensitive, understanding and resilient.

5. Support care leavers’ emotional needs: Help young people to identify and strengthen their support networks before they leave care.

References


Supporting the Mental Health of Looked-After Children Across the Primary to Secondary School Transition

Thursday, 15th September - 17:18 - Supporting physical and mental health of young people in care: Messages from research and practice

Ms. Helen Drew (University of Sussex)

Aims and Objectives:

In the first part of this presentation we will discuss a new study of Virtual School provision. Virtual Schools were recently established in all English local authorities to improve looked-after children’s educational attainment (Berridge et al 2009). This survey identified the ways that Virtual Schools are supporting many of the broader factors impacting educational attainment including mental health across the transition school years, which can be particularly challenging for looked-after children (Brewin & Statham 2011). Perceptions of the issues that facilitate and hinder effective support will also be discussed.

The second part of the presentation will present our initial findings from the first phase of a longitudinal study involving looked-after children between the ages of 10 and 13 and a sample of comparison children. The relationship between mental health and well-being outcomes and care factors, social activity, peer relationships, sense of support and self-perceptions will be explored. Implications for practice will be discussed, especially in terms of identification of, and intervention for, pupils who are at higher risk of mental health difficulties during these transition school years.

This research is a collaborative project between the Universities of Sussex and Surrey, the Rees Centre for Research in Fostering and Education at the University of Oxford and Sussex Partnership NHS Foundation Trust.

Methods:

The study of Virtual School provision used a survey in which a sample of Virtual Schools described their service provision for foster families, looked-after children and schools, with a particular focus on the services provided for 10 to 15 year olds. Respondents identified focus of services, evaluated service effectiveness and the barriers and facilitators to service development.

The second study will use statistical regression and structural equation modelling to look at the relationship between care factors, social activity, peer relationships, sense of support, self-perceptions and mental health and well-being outcomes.

Key findings:

Our study of Virtual School provision revealed four key themes to service provision: Providing enhanced learning opportunities; Direct support for the process of transition; Support for Well-being and Relationships, and Raising Awareness. Virtual Schools impact on many of the broader factors affecting educational attainment including social and emotional understanding, attachment and mental health through direct work, inter-professional working and the development of supportive environments around the child.

In our second study we will report our findings on the relationship between care factors, social activity, peer relationships, sense of support, self-perceptions and mental health and well-being outcomes for looked-after pupils across the three school years from age 10 to 13 and compare this to pupils of the same age who are not looked-after. We will discuss how our findings can impact on early intervention in school settings to support mental health outcomes.
References


Mind your health: The physical and mental health of children and young people in care in Northern Ireland

Thursday, 15th September - 17:30 - Supporting physical and mental health of young people in care: Messages from research and practice

Dr. Dominic McSherry (Queen’s University Belfast), Dr. Montse Fargas Malet (Queen’s University Belfast)

Aims and Objectives:
The relationship between health and social inequalities is well documented (Marmot, 2010), in that inequalities in social conditions are associated with poor health for particular vulnerable social groups. Both nationally and internationally, children and young people in care are considered one such group (Mather, 2010). They are largely drawn from families who experience considerable social disadvantage and deprivation (McSherry et al., 2010). Most of those who enter the care system have experienced abuse or neglect (DoH, 2009), which may have adverse consequences for their cognitive development, educational attainment, self-efficacy, attachment relationships, and social competencies (Tanner & Turney, 2003). In relation to their mental health, large-scale surveys conducted in England, Scotland, and Wales indicate that, across Great Britain, around 40% of children and young people in care have some form of clinically significant mental disorder; 39% have conduct disorder, 13% have an emotional disorder, and 10% have a hyperkinetic disorder, although these percentages varied across three countries (Meltzer et al., 2003; 2004a; 2004b). No such survey was conducted in Northern Ireland at that time. The current study was designed to address this deficit.

Methods:
The study used a mixed-methods approach, which included: a review of policy and practice documents; five focus group interviews with senior social work managers in each of the local government authorities across Northern Ireland; 233 telephone interviews with carers (foster, kinship, and residential); 25 semi-structured interviews with young people; and multi-disciplinary focus group interviews across the HSC Trusts.

Key findings:
- 40% had been diagnosed with Behavioural problems; 35% with emotional problems and 21% with depression or anxiety;
- One third were suffering from a long-standing illness or disability;
- Young people living in residential care had a much more negative health profile than those living in foster or kinship care;
- Some had difficulties in accessing the services they needed, due to a range of issues;
- Some positive factors were identified as currently helping to meet the children’s health needs including: priority status for children and young people in their referral to particular services; professional co-operation; placement stability and well supported foster placements; and support services from statutory and voluntary organisations.

The study makes 10 recommendations to improve the health of children and young people in care, including the need for a greater focus on prevention and early intervention, and moving towards a more proactive approach, as opposed to one that is reactive and crisis-led.
References
Exploring Links between Child Welfare Outcomes and Poverty

Thursday, 15th September - 16:30 - Exploring Links between Child Welfare Outcomes and Poverty

Dr. Cinzia Canali (Fondazione Zancan), Prof. Elizabeth Fernandez (The University of New South Wales)

The growth in income inequality and corresponding social divisions and societal exclusion experienced by families and children is a feature of contemporary society presenting urgent challenges for social policy affecting children, youth and families. This symposium brings together exemplars of current work in five countries on conceptualization and response to multi-dimensional child and family poverty. Various social protection approaches and interventive programs that have the potential to alleviate poverty and disadvantage in country specific contexts will be discussed. The various analyses and interventions proposed provide a springboard for developing targeted strategies and policies to respond to disadvantaged children, youth and families in child welfare systems.

Themes pursued in the symposium include: Extent and intensity of international poverty and its impact on everyday lives of children and families; Returns on early childhood education for children from lower socioeconomic backgrounds; Lenses for understanding long-term or chronic and short-term or transient poverty among children and families, the impact of poverty on life outcomes for children and implications for prioritising policy and program interventions; Socioeconomic and marginal outcomes experienced by young people leaving the care system and potential of post-care services to alleviate economic and social disadvantage for care leavers; Interactive effects of poverty and out of home care experiences and innovative family group interventions with birth parents of children in care to enhance parent child relationships and empower families for mutual help and support.
Child poverty in the international context

Thursday, 15th September - 16:42 - Exploring Links between Child Welfare Outcomes and Poverty

Prof. Elizabeth Fernandez (The University of New South Wales)

Poverty crosses geographic and demographic boundaries affecting children in developing and developed countries. The percentage of children living in poverty as identified by child poverty rates varies from about 5% - 7% in Northern European countries to 10.9% in Australia, 12.1% in the UK, 15.9% in Italy and 13% in the USA (UNICEF Innocenti Research Centre, 2012).

There is increasing awareness of the impact of poverty and social disadvantage and the need to respond to the poorest groups who are the most difficult to reach, and who are the focus of child welfare services. Poverty is the result of many overlapping dimensions of deprivation and non-fulfilment of children’s rights making its influence felt in every aspect of a child’s life. Apart from the harm done to children through a lack resources for full social participation, their education, health and general wellbeing are seriously compromised. Poverty affects children’s mental and physical health, their access to education and their adult outcomes.

The impact of poverty is experienced in different and unique ways in the life course, particular groups being disproportionately affected by poverty and disadvantage. The experience of, and exposure to poverty is perceived to be dynamic with consequences for children likely to be influenced by timing, developmental stage and context including family, school and neighbourhood. Impoverished environments experienced by children affect developmental outcomes and have a continuing impact on later years. The vulnerabilities of youth in the transition to adulthood arising from economic disadvantage and family stress are well documented. In out of home care many youth are forced to transition out of care without adequate supports.

The dynamic interplay between poverty and maltreatment and the over representation of socioeconomically disadvantaged families in child protection and out of home care systems, and the role of stress factors in parenting in impoverished families is also recognised.

This presentation will examine trends in relation to the extent and intensity of child poverty in the international context. It will highlight the development of comprehensive approaches to define, identify and measure poverty that go beyond financial deprivation, and capture direct and indirect effects of child poverty. Three composite methods to measure child poverty will be presented to illustrate the multiple aspects of deprivation and wellbeing captured in the assessment of poverty. Trends from research that explore the associations between child poverty, education, health and wellbeing will be discussed.
Chronic versus transient child poverty in the United States

Thursday, 15th September - 16:54 - Exploring Links between Child Welfare Outcomes and Poverty

Dr. Jill Berrick (University of California at Berkeley), Dr. Sara Kimberlin (Stanford University)

Child poverty is widely recognized as a problem of significant proportions in the United States. Compared to other industrialized nations, the U.S. stands out for the large number of children living in poverty. In fact, a recent UNICEF report showed the U.S. had the second-highest rate of relative child poverty among 35 economically developed nations. Poverty in the U.S. is often examined from the perspective of a single year, with families categorized as poor by comparing annual income to an annual poverty threshold amount. Indeed, the official government method for measuring poverty in the United States follows this cross-sectional approach, comparing annual household cash income to an annual poverty threshold that varies by family size and composition. Individuals are thus considered poor if their family’s annual cash income is below the threshold designated for their family type.

While these data provide a snapshot of child poverty in the U.S., they do not capture information about whether children were poor for one year only, or poor across multiple years. Assessing child poverty using a cross-sectional approach ignores the time dimension of poverty. Yet theory suggests, and empirical research shows, that the persistence of poverty is relevant to understanding the demographics of the poor population and the impact of poverty on life outcomes, particularly for children. Long-term or chronic poverty has different causes and impacts compared to short-term or transient poverty, with implications for prioritizing policy and program interventions.

This paper draws upon an analysis of data from the Panel Study of Income Dynamics (PSID), a longitudinal survey that follows a national sample of U.S. households, surveyed biennially to collect detailed income and demographic information. Using publicly available PSID data, we examine chronic and transient child poverty rates for the 11-year period from 1998 to 2008, a timeframe representative of the contemporary welfare policy context in the United States (spanning the period from the initial implementation of welfare reform to the start of the Great Recession). While prior research on child poverty persistence in the U.S. focused only on African American and white children, we use an expanded PSID sample that includes a nationally representative sample of immigrants, allowing us to examine poverty persistence for Hispanic and other race children as well as African American and white children. Similar to previous findings, our analysis shows that during this period, chronic child poverty in the United States was much less common than transient child poverty, and the two types of poverty had somewhat different demographics.

We review the findings of the study and offer suggestions for policy approaches that distinguish between transient and chronic poverty. We emphasize the opportunity afforded by targeting chronic child poverty, in particular.
Childhood First: Responding to poverty and disadvantage in the early years

Thursday, 15th September - 17:06 - Exploring Links between Child Welfare Outcomes and Poverty

Dr. Cinzia Canali (Fondazione Zancan), Dr. Tiziano Vecchiato (Fondazione Zancan), Dr. Marzia Sica (Compagnia di San Paolo)

Objectives: The presentation is based on the project called “Transatlantic Forum on Inclusive Early Years”. It is coordinated by King Baudouin Foundation in co-operation with European and Northern American Foundations. In Italy several foundations are involved, coordinated by Compagnia di San Paolo (Turin). The project is rooted in the idea that the poverty that affects children has long-term effects and inadequate investments can negatively affect their growth. Research has shown that returns on investment in early childhood education are higher for children from low socio-economic background, while returns on educational investment at later stages are higher for children from high socio-economic background. In comparison to Europe, Italy has a critical position in terms of exposure to the risk of poverty for children and families. Eurostat data tell us that in 2014 29.9% of Italian children ages less than 6 were at risk of poverty or social exclusion, against 25.8% on average in the EU-27. For this reason the aim of the project was to increase awareness that investing in early childhood and specifically in children of low-income and migrant families should be at the top of the agenda of Italian policy makers. After the end of the three-year project, each country is developing national strategies for creating innovative services targeted at children of low-income and migrant families. One of the actions implemented was a survey involving social workers operating in children and family services.

Method: The survey collected information about children at risk of poverty and social exclusion, their needs and interventions provided, in order to understand how to strengthen services and improve the living conditions of children. The survey investigated three main aspects of the helping process: admission to services, needs of children and families and interventions provided.

Results: The data collected through 258 questionnaires refer to a population of more than 10 thousand children in the age group 0-6 living with families supported by social services in the year 2013. As regards to the interventions provided, economic support represents the prevailing intervention. Sometimes it is integrated with other interventions. Furthermore, it emerges the double direction of the services provided: on the one hand aimed at children, such as educational home service, on the other aimed at parents, for example job counseling. But how useful is the support provided by social services? It emerged the importance of direct interventions provided to children and indirect services to support and integrate parenting skills. For each intervention, social workers defined the usefulness for children and family. For example, only 22% of social workers consider cash transfers “very useful” for children while 39% consider them “very useful” for the family. The majority of social workers consider “very useful” the admission of children to early childhood services; and for 54% this is useful also for the family. Social workers consider more useful the professional intervention instead of cash transfers without a specific goal.

Conclusions: The analysis underlines the importance of child poverty but at the same time it shows that it is not considered as a specific issue even if it can cause very serious damages. There are reports, publications and declarations that highlight this vacuum of interest. The attention to these issues is still not adequate as it should. The initiative “Childhood, First” promoted by a group of Italian foundations represents an example of interventions against childhood poverty because it aims to experiment innovative services for supporting children from low-income and immigrant families.
The survey among social workers, in its quantitative and qualitative results, confirms the need to reduce cash transfers and to increase the provision of services based on a professional analysis.
How can post-care services contribute to alleviating economic and social disadvantage for young people leaving care?

Thursday, 15th September - 17:18 - Exploring Links between Child Welfare Outcomes and Poverty

Dr. Carme Montserrat (University of Girona), Mr. Joan Prat (Federación de Entidades con Proyectos y Pisos Asistidos (FEPA)), Prof. Ferran Casas (University of Girona)

Unemployment among 40% of young people constitutes a very serious issue in Spain. The situation of children and young people belonging to disadvantaged groups of the population should be a priority for policy and practice. Young people leaving care or with a care background are often within this group. The international research points to the socio-economic disadvantage and marginal outcomes experienced by young people who had left the care system, overrepresented in social indicators such as poverty, homelessness, unemployment, delinquency, and adolescent pregnancy. A research project conducted in Catalonia (Spain) to assess the types of interventions undertaken by the post-care services from 1994 to 2012 was carried out. It was commissioned by The Catalan government and the Federation of Organizations with Projects and Assisted Apartments (FEPA) with the following aims: (a) to determine the evolution and current situation of young people leaving care, (b) to understand their situation, identifying factors that facilitate and obstruct the processes of emancipation, (c) to evaluate these young people’s passage through post care services, (d) to make recommendations to enhance outcomes. A mixed-method approach was used: (a) a secondary analysis of previously existing data on the program database (N=5,538), (b) a qualitative study using semi-structured interviews with young people and focus groups with young people (N=49) and professionals (N=10), and (c) a quantitative study administering a questionnaire to all professionals working with the age groups 16-18 and 18-21 (N=218). The data for the period 1994-2012 show positive results, with half of the young people who have passed through the program achieving emancipation in a satisfactory manner. Satisfaction among both users and the professionals working in the services was also high. Young people and professionals give importance to factors related to: (i) the inclusion of young people within the formal education system, which requires greater coordination between the Social Welfare department and the Education department, (ii) a firm commitment and improved expectations towards this group from micro to macro level iii) support for professionals working with these young people in terms of managing emotions (iv) receiving more personalized attention and establishing close and stable ties with young people, (v) providing them with greater stability on their life pathways (vi) working on the personal and social autonomy, making them more responsible and participants in their own process and in the community, including housing assistance and financial support. Some recommendations have been made based on the findings as: (i) improvements are needed in the data collection system to evaluate the outcomes, and (ii) there is an urgent need to diversify the range of services offered in order to reach more care leavers, especially those with a disability, mental illness, behavioural problems or others excluded from the current programs.
Multiple Family Group Therapy with Poor Chinese Families of Children Placed in Out-of-home Care in Hong Kong

Thursday, 15th September - 17:30 - Exploring Links between Child Welfare Outcomes and Poverty

Prof. Mooly Wong (The Chinese University of Hong Kong), Prof. Joyce Ma (Department of Social Work, the Chinese University of Hong Kong), Ms. Choi Lin Londy Chan (Sheng Kung Hui St. Christopher’s Home)

Many children placed in out-of-home care in Hong Kong came from poor families with multiple problems. A majority of these families were living on a welfare subsidy and residing in a public housing estate unit or partitioned room. Most of them were single-parent families because of divorce, desertion, death and separation. Many parents suffered from physical and mental illnesses with multiple disabilities; some of them were drug abusers. The removal of children from their home, with the social worker’s intention of protecting the children’s welfare, may traumatize children and disempower parents. The interplaying effects of poverty and care experience of children and their parents may negatively affect the quality of parent-child relationships, specifically to disrupt the parent-child attachment. At present, out-of-home care services in Hong Kong emphasize on behavioral management to children and surveillance to parents. Little work has been done to respond to the developmental needs of children such as improve parent-child relationships and foster quality family time. In view of this service gap, the first phase of a service initiative, that adopted multiple family group therapy (MFGT) in an out-of-home care service in a local non-government organization, was launched in 2010 and the second phase was implemented from April 2012 to March 2014. It aimed at improving parent-child relationships, promoting quality family time, and empowering families for mutual help and mutual support. Based on the model adapted, we conducted three groups and served a total of 13 families in the first phase. Feedbacks were collected from the participants for further refinement of the adapted model. In the second phase, we ran five groups and served 30 families. We conducted a research study with a mixed methods design to evaluate the effectiveness of the intervention strategy in achieving the intervention objectives. The findings showed that parenting stress of the parents was decreased after the group. The qualitative data from the parents and the children also indicated that changes at intra-family and inter-family levels. In intra-family level, new interaction patterns that promoted mutual understanding and effective communication were identified between parents and children. In inter-family level, a strong support network was built among families. Our service initiative has helped to change the work culture in out-of-home services in Hong Kong. We recommend that child welfare professionals should promote quality family life and foster parent-child relationships, rather than merely focusing on disciplining children and supervising parents.
Measuring Outcomes

Thursday, 15th September - 16:30 - Measuring Outcomes

Ms. Vânia S. Pinto (InED; REES Centre, Department of Education, University of Oxford)

When a child or young person is removed from their biological family, decision-making around placements and family reunification should reflect the characteristics and needs of the child. This highlights the importance of development and specialisation of different types of placement to meet their needs. Judgments about whether the “right” decision has been made depend on the assumption that the most relevant outcomes are being measured.

This symposium will reflect on which are the most relevant needs of looked after children in different countries, and how their outcomes can be measured. It includes two studies conducted in Romania. The first is based on document analysis of case-files of child abuse and neglect and on interviews with public social services. The second is based on analysis of interviews with young adults that were raised in residential care, foster care, domestic or international adoption. One retrospective study will present evidence from in-depth interviews with biological mothers and participatory research methods with young people that were removed and re-integrated into the child protection system in Moldova. The final two studies will look at Portuguese data, the first is focused on the quality of residential care and will look at results from direct observation, documentary analysis, interviews and questionnaires from children and young people, caregivers, welfare services’ professionals and directors. The final paper is based on focus groups conducted in Portugal and in England with social workers, foster carers, care leavers and young people in care and will analyse their perspectives about outcomes and successful placements.

The speakers will reflect on looked after children’s outcomes and what actions should be taken to improve residential care, foster care and the decision making process, taking into account the voice of looked after children. These studies intend to contribute to knowledge by developing research that can support country level policy decisions.
The child protection system’s response to abuse and neglect in Romania

Thursday, 15th September - 16:42 - Measuring Outcomes

Ms. Gabriella Tonk (Babes-Bolyai University)

The child protection system’s response to abuse and neglect in Romania shows an evident development in the last 15 years, in terms of legislation, policy provisions, institutional buildup and even methodologies and guidelines for professionals. However, as the last recommendations of the Committee on the Rights of the Child highlighted in 2009, there is still no comprehensive system of recording and analyzing data on child abuse and neglect and that mechanisms of physical and psychological recovery and social reintegration for victims are not sufficiently provided for in all parts of the country. On the other hand there is no harmonized set of standards to guide the decision on placing a child in out-of-family care, as well as its follow up and review, to guide the planning and monitoring of the intervention, including the assessment of the child’s individual needs; the over-representation of Roma children in the care system is not seemed to be accompanied with special culturally sensitive preventive programs for children and family support.

There is a lack of research in Romania to analyze the interventions taken by the public social services in cases of child abuse and neglect in terms of referral, registration, decision making, service provision and monitoring of outcomes. The paper presents some of the results of the Romanian Case Based Surveillance Study on Child Abuse and Neglect (CBSS CAN) and of the qualitative study on system’s response to the needs of the Roma children and their families living in deep poverty in ghettoized settlements.

Both studies explored questions like: who are the children who are registered by the child protection services as being victims of abuse and/or neglect (demographic data, family background, economic situation), what are the needs they face in terms of education, health, recovery from consequences of maltreatment, and what measures are taken by the public services to prevent re occurrence of maltreatment and ensure protection and recovery.

The CBSS CAN was conducted in the frame of BECAN Project. The results of this study are based on the document analysis of 288 case-files collected from the 16 counties, of children aged 11, 13 and 16, who were registered in a year being a victim of maltreatment. The paper focuses on data regarding elements of case management in terms of involved agencies and services provided for children victims of abuse and neglect and for their families. The study shows the absence of standard tools for risk and needs assessment, as well as the absence of clear thresholds or reference points in decision making and intervention planning. Case management often relies on uncompleted assessment, lacking essential information to orient intervention planning. The results of the study show a great need for evidence based instruments to be used in all phases of case management.

The qualitative study presents the challenges and limits of the public child protection services face in order to adequately respond to the extremely complex needs of children and their families from a ghettoized Roma settlements in Romania. Both the service providers and the families are affected by ‘structural violence’ in terms of Gil (Gil, 1999).

References
What Matters to Children, Transitions to Adulthood from Different Types of Care

Thursday, 15th September - 16:54 - Measuring Outcomes

Mrs. Mariela Neagu (REES Centre, Dept. of Education, University of Oxford)

In the child protection field, some types of placement are regarded as superior to others. There is strong NGO advocacy for closure of residential care institutions while adoption is often seen as the ideal type of protection for the permanent legal relation it creates between the child and the adoptive parents. Foster care contrasts with both residential care and adoption as the child’s identity is preserved while children grow up in a family like environment. But is the type of care sufficient to predict a child’s future outcomes?

What matters to children in the care system? How do they regard the types of placement they have been through? What were the challenges and highlights of their protection experience? What in their childhood had an influence on their well-being in adult life?

This qualitative research interviewed 37 young people born in Romania in 1989-1991 who entered adulthood from types of placement: residential care (large institutions as well as group homes), foster care, adoption (domestic as well as intercountry adoption) and explored their transition to adulthood from each of these types of placement. Through life history interviews they have been asked to reflect on their childhood and their current life and what in their views has contributed to who they are today.

The analysis of the interview data will use the lenses of ‘threatened identities’ and ‘resilience’, both considered relevant to the experiences of growing up in care. ‘Threatened identity’ is defined by Breakwell (1986, p.47) as occurring when ‘the process of identity, assimilation-accommodation and evaluation are, for some reason, unable to comply with the principles of continuity, distinctiveness and self-esteem, which habitually guide their operation.’ This might be helpful in understanding the care and adoption experiences of the research participants since Breakwell identifies denial and acceptance as possible coping strategies, the latter with a view to minimising the damage produced by change. According to her, the coping powers of the individual depend on his/her social network and membership groups. The research will explore whether specific coping strategies are associated with individual attitudes or if there is dominance of a certain coping strategy in a particular type of placement and whether there is any association between the quality of care and the identity threat imposed by the care.

Resilience has been variably defined and has developed in an attempt to understand children’s different reactions to adversity. Gilligan (2008, p.37) defines it as ‘a person faring better than might be expected in the face of serious adversity’. Luthar et al. (2000, p.546) note the importance within debates on resilience of acknowledging the ‘two-dimensional characterization that encompasses aspects of children’s life circumstances (...such as “impoverished” or “maltreated” children), and evidence of positive adaptation ...across one or more domains of functioning. Resilience is a ‘dynamic process’ (Luthar et al. 2000) and can be used to explore associations between adversity and outcomes. In this study, resilience may serve as a useful conceptual framework for the experiences of young people who grew up in care.

The findings will inform professionals and policy makers on what is important to children when they are in one form of care on another and which affect their everyday life and development.


Going home from residential care: an exploratory study of separation and re-integration experiences of young people and their mothers in Moldova

Thursday, 15th September - 17:06 - Measuring Outcomes

Ms. Irina Sirbu (University of East Anglia, Centre for Research on Children and Families)

Background/ Purpose: Re-unification from child residential care (RC) is a widely-researched topic in social work literature. However, it remains greatly under-explored in Moldova, where the institutionalization of children is a significant child welfare concern due to high parental migration rates. The existing approach to studying such experiences has a number of shortcomings. Firstly, it typically focuses on quantitative outcomes rather than in-depth family experiences. Secondly, children’s perspectives are often excluded or seen only through a parental or professional lens. However, involving children moves the focus from research on children to research with children, empowering them to talk about their experiences, without imposing an outside agenda. The present qualitative study aims to fill these gaps by exploring separation and re-integration experiences of children and their birth mothers in Moldova. The study seeks to enhance research on children transitioning from RC to kinship care in families where parents are migrant workers.

Methods: The study explored retrospective accounts of separation and re-integration experiences of young people (13-16 y.o.) and their mothers before and during separation, and following re-integration from residential care. Adopting a life-story perspective allowed a more integral understanding of families’ experiences. All families were from extremely deprived rural areas in Moldova with the mothers being migrant workers. Drawing on grounded theory approach, data from 48 in-depth open-ended interviews (25 mothers and 23 children) in 20 localities in Moldova were collected and analyzed. Children’s views were explored using participatory research methods: photo-elicitiation, life story maps, and drawings, producing rich child-driven data.

Key findings: Children’s accounts reflected complexity of their experiences. Being separated from their homes and families, children formed family-like relationships at RC- a fraternity of people that shared experiences and supported each other along the way. Children also defined RC as their “second home”. Re-union with their families was fraught with challenges: children struggled to fit into their homes, schools and communities; many saying they felt like a “stranger” alienated from their surroundings. Becoming native again for these children required adjusting to the re-shaped family contours and relationships, and creating social ties and circles in a changed environment.

Mothers’ accounts revealed their lack of understanding and powerlessness when their children were placed at RC. Left without family and social support, these mothers were presented with no other choice than to give their children to RC. Working abroad and not being able to see their children for years, they co-shared their child-rearing duties with extended family, community and RC. Mothers relied on RC as a highly trustworthy institution, which served for protection, education and better sustenance for their children. The mothers employed a range of strategies to manage separation and maintain contact with their children – keeping a link to the child, either during visits to Moldova or through extended family, keeping the child psychologically present in their lives, and maintaining a positive mother’s identity. Re-union challenges were identified as being inadequately supported by social services and feeling “under surveillance”. Alienation and stigma in their own families and communities came out as strong themes in mothers’ narratives.

Conclusions/Implications: The findings highlight the role of RC as an institution responsible for child care when mothers are not able to support their children. Children’s networks of family-like
relationships at RC can be capitalized on as an important source of support during separation with their birth families. The study also revealed the families’ complex needs for a more comprehensive and fair system of ongoing social support and better involvement in decision-making processes. The findings will contribute to creating social support policies and practices in Moldova that are better informed by families’ needs and perspectives.
EQAR by ARQUA-P: A nationwide assessment of Residential Care quality in Portugal through a comprehensive system

Thursday, 15th September - 17:18 - Measuring Outcomes

Mrs. Sónia Rodrigues (University of Porto, Faculty of Psychology and Education Sciences), Ms. Ana Catarina Martins (University of Porto, Faculty of Psychology and Education Sciences), Prof. Maria Barbosa-Ducharne (University of Porto, Faculty of Psychology and Education Sciences), Dr. Jorge F. Del Valle (University of Oviedo)

Currently in Portugal 8025 children and youngsters are growing up in 433 different Residential Care (RC) facilities, accounting for more than 90% of all the children in out-of-home care. Most children stay in RC for 2 years or more. Over 60% of these children still grow up in large sized centres and more than 50% are raised in institutions segregated by gender. In Portugal, almost 99% of babies under three in out-of-home care are placed in an institution, which is against all international recommendations.

An analysis of the historical and current context of RC in Portugal shows some ignorance regarding the way these centres work. RC for children and young people in Portugal has developed and changed without a service quality evaluation.

In order to accommodate subjective, contextual and plural aspects of the quality concept it is mandatory to include the assessment made by everyone involved (including the children) and the collection of information from different sources and types in order to benefit from a multiplicity of perspectives and understandings.

An ongoing research on Portuguese RC System care quality evaluation (EQAR), using the ARQUA-P methodology will be present. Based on an ecological theoretical model and using an adapted Portuguese version of the Spanish ARQUA evaluation system for RC with reference to international standards, the research team have visited the centres and interviewed children, caregivers, directors, teachers and tutelary entity articulation professionals (welfare services).

The goals of this research project are the assessment of the needs and psychological adjustment of institutionalized children, the evaluation of the centres’ services and how they are matching each other.

Data was collected using demographic information direct observation, documental analysis, interviews and questionnaires.

Fourteen RC centres for children and young people were visited within an exploratory study of this nationwide assessment on the quality of the Portuguese RC system. By means of multi-informant analysis, this study considers the perspective of children, caregivers, directors, Social Security professionals and researchers. Two hundred and eleven children and youngsters, 146 caregivers, 12 welfare services’ professionals and 6 directors participated in this study.

Results have shown significant differences between the scores of the quality assessment of the different groups. Children/youngsters in care were the group with the highest scores, followed by caregivers, directors and lastly welfare services’ professionals. The evaluations made by the different groups were crossed with that of the researchers. There were no significant correlations regarding the overall quality between the groups. However, there were significant correlations between the different groups, in relation to the specific dimensions of the evaluation of RC.
These results highlight the relevance of an approach that listens to the different voices in achieving a wide, comprehensive and accurate assessment of RC quality. Furthermore data from this nationwide evaluation of the RC system in Portugal may support country level policy decisions about structures, methods, mechanisms and resources, contributing to a higher degree of specialization. Moreover, it will allow for the comparison of the RC state of the art in Portugal and the international reality. Implications are drawn from these results for further research in RC in general and some guidelines are highlighted in relation to interventions aiming for the improvement of RC quality in Portugal.
Different countries, different perspectives? A cross-country comparison of the factors that are associated with successful foster placements

Thursday, 15th September - 17:30 - Measuring Outcomes

Ms. Vânia S. Pinto (InED; REES Centre, Department of Education, University of Oxford, UK)

In the majority of European countries, when it is necessary to remove a child or young person from their family, they are preferably placed in foster care rather than residential care (institutional setting). Foster care is based on the principle that every child or young person has the right to live in an alternative family. Foster carers are expected to protect and care for these children and young people, by being able to balance the demands of the professional and the parenting roles. They need to be skilled in this fostering role and to be motivated to achieve their fostering potential. These are some of the key elements for placement success, that can be measured through looked after children’s outcomes and through placement stability. However, this definition of placement success may not be applicable to child protection systems that are different and that focus on different type of placements. Knowing what makes a ‘successful’ foster placement can aid in the design and use of instruments that purport to measure foster carers’ skills and potential. The main goal of this paper is therefore to understand how ‘successful’ foster placements are defined by stakeholders from two different child protection systems.

To pursue this goal, focus groups were carried out with social workers, foster carers, care leavers (within five years of leaving care) and young people in care (16-17 years old), in England and in Portugal, the later with the cooperation of the research group InEd, «Contact in foster care: patterns, results and management models» project. Participants were asked to reflect about ‘placement success’ and to analyse the salience of items from the Casey Foster Applicant Inventory (Cuddleback, Buehler, Orme, & Le Prohn, 2007; Orme, Cuddleback, Buehler, Cox, & Le Prohn, 2006), an instrument designed to measure the qualities of foster carers and thought to be linked to fostering potential.

Manifest and latent content analysis of the data collected in the focus groups was conducted.

A comparison of results from the two countries allows us to identify some common characteristics that were highlighted by all the different groups, regardless of the country. For example, good foster carers are classified as the ones that are able to invest in the children and young people’s social and emotional development and that promote nurturing environments, and a placement can be classified as successful when looked after children present social and emotional development and when they are considered as part of the foster family. On the other hand, the main differences reflect the different conception of the foster carer role in each country. In England, foster carers are understood as professionals, whereas in Portugal they are seen as substitutes of the biological family, therefore the focus is on the characteristics of the parenting role. The literature and the legislation stresses that a skilled foster carer needs to balance these two roles. The findings from this study will be discussed considering the implications for policy and practice and the possible directions of these different child protection systems.

Keywords: Child protection systems, Foster care, Looked after children, Placement success

References:


Use of mental health services in children in residential care: factors associated with referral to therapeutic attention

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Carla González (University of Oviedo), Dr. Amaia Bravo (University of Oviedo), Ms. Alba Aguila (University of Oviedo), Ms. Silvia Pérez (University of Oviedo)

Children in residential care show many mental health needs as consequence of their risk background. Researches in this area have emphasised that a high proportion of children with emotional and behavioral disorders are not receiving mental health treatment. Furthermore, some investigations have associated the existence of different personal and family factors with the probability of referral to therapeutic attention. In the light of these findings, there seems to exist a failure in the detection and referral to early treatment. The main objective of this presentation is to explore the therapeutic coverage and the factors that are associated with referral to therapeutic attention in a sample of children in residential care. For this purpose, this study was carried out with 1,216 children from 6 to 18 ages who were living in residential facilities in several regions of Spain. The information was collected through different questionnaires: a questionnaire designed ad-hoc to obtain the basic descriptive information (socio-demographic process of intervention, family background, therapeutic attention and type of mental health treatment) and the Child Behavior Checklist (CBCL) applied to detect mental health needs. All information was collected through the key residential worker. Main results showed that four out of ten cases identified with mental health needs according to results obtained in CBCL were not receiving treatment. Factors such as intellectual disability, experiences of previous foster care or adoption breakdown, clinical ranges in internalizing or total scale in CBCL, experiences of sexual abuse and suicidal behavioral were associated with a high probability of referral to mental health services. In contrast, the fact of being an unaccompanied asylum seeking child was related with a lower likelihood of referral to therapeutic attention. Results show the importance of examining the use of mental health services in this vulnerable group. Several factors seem to influence the detection of mental health problems and the decision of referral. In addition, the challenge for the coming years is to establish objective procedures based on screening test that could ensure the most efficient strategy for treatment referrals.
It’s all or nothing! The trajectories of ‘everything but the kitchen sink’ through preventive programs and out-of-home care in Denmark

Thursday, 15th September - 18:00 - Poster Session 2

Mrs. Mette Lansten (SFI - The Danish National Centre for Social Research), Mrs. Signe Frederiksen (SFI)

The intension behind preventive programs and out-of-home care is to ensure safe transition into adulthood for young people in need. Building on a cohort born in 1995, 6 waves of longitudinal survey-data on DALSC (Danish Longitudinal Studies on Children, N=6,000) and 4 waves on CIC (Children in Care, N=2,900), we analyse ‘what works’ in the context where the social welfare system is in charge of the parental role. The social system is here determined as a common denominator for preventive programs and different kinds of out-of-home care arrangements. Can we, by analysing the trajectories through life course of all adolescents in need of child protection, give a simple contribution to answering the question on what works?

Using sequence and cluster analyses on monthly data from birth to age 18 we will include the following research questions:

1) Can we bundle the trajectories through the wide range of preventive programs and out-of-home care facilities into a finite number of clear care careers, or is it really ‘everything but the kitchen sink’ for everybody? One of the objectives of the analysis will be to test whether preventive interventions in the early years make a difference between the clusters.

2) Does the number of risk factors at entry affect the trajectory? Risk factors are here family stability, parental socioeconomic background and mental health, subjective child wellbeing, and school attendance at different ages (following the 4 waves).

3) Do the different pathways affect the outcome? As outcomes we will use level of education/enrolment in education, delinquency, mental health, and dependence on social assistance, all at age 19.

Preliminary results show a staggering diversity of life events histories hidden behind the common story of out-of-home care children, confirming the ‘everything but the kitchen sink’ approach from the social welfare system. However, we also find clear patterns identifying distinct clusters of young people with different characteristics and levels of disadvantagedness with significant negative outcomes suggesting a need for a more targeted line of action and a more coherent view on vulnerable children's life trajectories to ensure that that their transition into adulthood is a transition into independent adulthood.

Keywords: out-of-home care, administrative data, sequence analysis, longitudinal data, early prevention, social welfare system.
Factors influencing the length of time care leavers spend on a housing program to promote autonomy

Thursday, 15th September - 18:00 - Poster Session 2

Mr. Antonio Comasolivas (Universitat Autònoma de Barcelona), Dr. Josefina Sala (Universitat Autònoma de Barcelona)

In Catalonia, care leavers can apply for a housing program offered by ASJTET (Area de Suport al Jove Tutelat i Extutelat – Support Office for Young People In Care and Care Leavers) to those aged between 18 and 21. This program offers care leavers residential units shared with other young people and supervised by a social educator, who usually visits twice a week. The program aims to help care leavers in their emancipation process. Nevertheless, government reports (DGAIA 2008 and 2014) show that most young people leave the housing program before they are 20 years old, and the average time spent on the program is 15.6 months. Montserrat, Casas and Sisteró (2013) found that 47.5% of care leavers left the ASJTET program upon completing the autonomy plan agreed with their social educator, whereas the remaining 52.5% left because their process was not working (24.1%) or because they had decided to leave despite their planned goals not having been met.

The aim of this study is to determine factors influencing the length of time care leavers spend on the housing program. We interviewed one ASJTET professional, 26 professionals from NGOs that provide the residential units and 33 care leavers on the housing program. Semi-structured interviews were used.

The professionals pointed out that those young people who stay and take advantage of the program are the ones who have a clear plan for autonomy and accept the educational guidance and rules. Both professionals and care leavers agreed that having an educational plan or being enrolled on a study program were factors that extend the length of time on the program. The professionals also pointed out that a lack of employment opportunities dissuades young people from leaving the program because economic grants do not provide them with enough financial stability.

Regarding reasons for leaving the housing program, both the professionals and young people mentioned financial stability. However, the main reason given by the latter was the desire to lead an independent life without professionals controlling their lives or needing to follow the program rules.

Most professionals reported that they frequently need to push young people on the program, who either settle into a routine or become too afraid of the uncertainties of life outside the program to leave it. In fact, due to the social and economic situation and the lack of job opportunities, most of the young people leave the program without having had the chance to test themselves.
Factors influencing a positive evolution in teenagers being cared for in intensive education residential centres in Catalonia

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Marta Sabate (Universitat Autònoma de Barcelona), Dr. Laura Arnau (Universitat Autònoma de Barcelona), Dr. Josefina Sala (Universitat Autònoma de Barcelona)

Objectives

This exploratory research seeks to understand the trajectories of those teenagers who lived in intensive education residential centres (CREI) in Catalonia, and the factors that had an impact on this path, especially, in the youngsters who performed a positive evolution in the centre. Personal traits, intervention carried out in the centre and the social support network while in care were observed.

CREIs are for young people, in the custody of the Catalan Departament de Treball, Afers socials i Famílies, aged between 12 and 18, who require a temporary and intensive educational attention due to behavioural problems.

Method

The data from 86 cases who lived in the centres for a year or more, time considered by professionals as necessary to conduct a meaningful intervention, was collected. There were 4 of these centres in Catalonia and this study considered all the population of the centres.

A structured interview was answered by a member of the professional staff that worked together with each of the 86 teenagers. It sought to collect information about different fields such as profile on entry, behavioural problems, academic and practical education, intervention progress, relationship with staff members/caregivers, external social support network, and destination after leaving the centre.

All participants signed a written consent form and data was delivered to researchers anonymously to preserve confidentiality and anonymity.

Results

Data showed that most of the youngsters arrived at the intensive education residential centres when they were around 15 years old and their average stay was 23 months, which meant they left the centre when they approached or reached adulthood (18 years old in Spain). The intervention carried out in the 4 CREIs was focused on working on their behavioural problems, academic level, substance abuse and social abilities. Most of the youngsters showed a positive evolution in the process (61.6%), positive evolution being considered as an improvement in the problem areas presented at the time of entering. Professionals reported that the most valuable factors for this improvement in the teenagers process were “finding a clear limit that he/she lacked”, “the inner dynamic of the centre”, “understanding the centre as a resource for help”, “intense individualized care” and “attachment to caregivers”. However this bond built during their stay seemed to get broken after teens left the centre, with the relationship between them and the caregivers reduced to occasional contact which only occurred if the youngsters took the initiative.

Conclusions

Intensive education residential centres prepared youngsters to be independent once in out-of-care but it was seen that they were left on their own when the date came. Even though the centre remained
open for the youngsters who wanted to get in touch, nothing was known about most of them after a few months. The study concluded it was necessary to implement a systematic monitoring process in order to know how they were doing and maintain the support and the healthy bond teens had created with their caregivers and/or the centre. This was above all because most of them went back to the same environment from which they had been removed or they started an independent life on their own. This monitoring process should be useful to extend the positive impact the centre had on these young lives and facilitate their successful performance in their out-of-care life.
Long-term outcomes of children who grew up in foster care: Literature Review

Thursday, 15th September - 18:00 - Poster Session 2

Mrs. Laura Gypen (Vrije Universiteit Brussel), Prof. Johan Vanderhaeillie (Vrije Universiteit Brussel), Ms. Skrallan De Maeyer (Vrije Universiteit Brussel), Ms. Laurence Belenger (Vrije Universiteit Brussel), Dr. Frank Van Holen (Pleegzorg Vlaanderen)

Objective:
Foster care is one of the most far-reaching interventions targeted at children who are abused or neglected by their parents or who are involved in anti-social behavior. Given the large number of children in foster care and the high cost of child welfare, research on long-term outcomes of former recipients of foster care has been a worldwide trending topic in the past decades. Nevertheless, research that combines results on different extents (education, employment, mental health, substance abuse, criminality and housing) is sparse. This literature study provides an overview of the most significant outcomes in international research. This information can advise those who work with (former) foster youth on supporting them through youth-care, preparing them for emancipation and developing programs that meet their needs more closely.

Method:
Several databases were searched for the period of 2004-2015 using the following combination of search terms: foster care, foster alumni, foster children outcomes, long-term perspectives and results. This resulted in a total amount of 60 articles, used to write a detailed literature review.

Results:
Overall young adults with foster care experience, encounter considerable difficulties. Research indicates that they mostly have lower educational attainments than their peers from the general population. Former foster children are obliged to be independent at a much younger age than their peers: trying to find a place to live, working hard to afford this place and combining this with further studies seems to be a stumbling block. However, not obtaining a degree has many negative consequences. Former foster children mostly have lower annual earnings and are often unemployed even until the age of 30. Furthermore, it was found that former foster children have an increased risk for alcohol and substance abuse and are more involved in criminal behavior. Former foster children experience a high lack of stability, as well in jobs, in housing as in social environment. However, considering the circumstances, they are mostly satisfied with their life.

Conclusion:
The results are clear, as well as troubling. Our findings suggest that foster alumni continue to struggle on multiple areas even up to age 30. We must keep in mind that not only their history of foster care, but also their history of neglect and abuse plays an important role in their outcomes. In addition, they often grew up in low-socioeconomic circumstances and experienced chronic poverty and dysfunctional and disrupted family situations. All these problems are known to predispose them to poorer outcomes. Furthermore, foster children leave care at a vulnerable age. To help foster children to a brighter future, we must adapt our support strategies. Research indicates that having a steady home base during the time in foster care and establishing a foothold in education or employment are important ingredients for a successful transition to adulthood. The latter should be combined with a steady social support figure who can support the former foster child when needed,
even until an older age. To define the needs of Flemish former foster children, a five-year follow-up study is organized in Flanders, starting in April 2016.
Social support and interdependency in transition to adulthood: preliminary findings.

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Veronika Paulsen (NTNU)

In my poster presentation I want to focus on social support and interdependency in youth’s transition from the Child Welfare Services into adulthood. The presentation draws on interviews with 43 adolescents between the ages of 18-26 years, which have received support from the Child Welfare Services (CWS). Youths transitioning out of the Child Welfare Services are facing (at least) two parallel processes in transition to adulthood. The first one is the individual process going from adolescence to adulthood, which all youths go through in different ways. This process is often characterized by the urge for independency, detachment and accountability at the same time as the need for social support. The other process is the exit from the Child Welfare Services, which is often described as sudden and with limited possibilities of returning to the service and assistance if needed.

The object of my presentation is to explore the individual process for the youths transitioning, either from care or from assistance measures, and what sort of social support the youths need in their transition to adulthood, and from whom they get such support. By focusing on the content in different categories of social support, it is easier to identify the youths’ needs and thereby initiate support that matches each youths individual needs. Focusing on the need for social support and being independent at the same time makes it relevant to discuss this in light of the concept of interdependency.
Self-representation questionnaire for youths in residential care

Thursday, 15th September - 18:00 - Poster Session 2

Prof. Maria Calheiros (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Ms. Joana Patrício (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL)

Objectives: The objective of this study was to develop and test an instrument to measure self representation of youths in residential care.

Method: The sample was composed of 848 youths in residential care that filled the Self-Representation Questionnaire for Youths in Residential Care (SRQYRC). The Child Behavior Checklist was applied for each youth to test the SRQYRC construct validity.

Descriptive analyses, correlations and exploratory and confirmatory factor analyses were conducted to analyze the psychometric properties of this instrument.

Results: The results indicated that SRQYRC is organized in 6 dimensions (Social, Competence, Relational, Behavioral, Emotional, and Misfit) and 2 second order factors (Global negative representation and Global positive representation). The instrument presents good initial psychometric properties, namely it has adequate reliability and construct validity (i.e., self representation showed the expected relation with mental health outcomes). We found the following three trends: 1) that female youth described themselves as less competent and had a more global negative self-representation than male youth; 2) older youth described themselves as more competent and had a more global positive representation than younger youth; and 3) the longer a youth was in care, the more likely they were to describe themselves as competent and with a less global negative representation.

Conclusions: We concluded that the SRQYRC is a valid and reliable instrument to measure youth self-representation in care. Furthermore it can be used to identify which youths need intervention to develop a more positive self-representation.
On the edge of alternative care? Specialized residential child care in Finland

Thursday, 15th September - 18:00 - Poster Session 2

Mrs. Susanna Hoikkala (Central Union for Child Welfare)

Children who are placed outside their homes are entitled to receive high quality foster or residential care based on their individual needs. In Finland, the field of alternative care has become privatized and divided in the past few decades. Municipalities or federations of municipalities carry out public competitive tendering procedures, make ranking lists and sign contracts with the private service providers that have been successful in the competition. There are different categories for alternative care services in which service producers compete. There are categories for, e.g., ordinary foster care, licensed professional foster care or residential care, as well as for more targeted residential care services. Foster care is defined as a primary form of alternative care. The aim is to strengthen family-based services and to cut down on the number of placements in residential care. At the same time, however, one of the most recent inventions is the (re)formulation of ‘specialized’ residential care services, which differ from the ordinary forms of residential care as a service and practical implementation. These ‘specialized’ services are close to various professional fields such as psychiatry and services for the disabled. The boundaries between these fields seem to have become unclear and blurred. At present, the regulative base of ‘specialized’ services lies in the grey zone.

Objectives

This poster is based on a qualitative study in which the topic of quality in alternative care was examined. The aim was to examine how the concept of quality is understood and defined as well as what kind of factors either sustain or prohibit the fulfilment of high quality care in practice. In this poster, the focus is on specialized residential child care services, and the following questions are illuminated: ‘What are “specialized residential child care services” and how do these services differ from other forms of services?’ and ‘What do these services reveal about the present formation of alternative care in Finland?’

Method

The data of this particular study included: 1) the documents of public competitive tendering (19 examples), 2) four group interviews (two for purchasers and two for service providers), and 3) one group discussion with public officers who are responsible for monitoring alternative care services. The data were analysed by using a qualitative content method.

Results

The analysis revealed that residential child care services cannot be understood as a singular and unified field. Residential child care is more divided and targeted as well as productized and market-oriented than before. The creation of ‘specialized’ services highlights this change. Service providers are expected to respond to the individual needs of a child in an effective and multi-professional way and to generate changes in a relatively short time frame. Even though the logic of ‘specialized’ residential care services seems somehow artificial and vague, the results reveal the increasing need for such services.

Conclusions

The reformulation of residential child care both as a system and a practice is ongoing in the Finnish context. In the future, it will be important to elaborate the overall role of residential child care services and the expectations of it.
Interparental conflict, emotional insecurity and self-representations: the moderating role of parents-adolescent relationship

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Carla Silva (Instituto Universitário de Lisboa (ISCTE-IUL), Centro de Investigação e Intervenção Social (CIS-IUL)), Prof. Maria Calheiros (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL)

Exposure to destructive interparental conflict is one of the most upsetting life stressors for children and adolescents, and its harmful effects on multiple child/adolescent development outcomes (e.g., internalizing and externalizing problems) have been well documented. However, less is known about the effects of interparental conflict on other child/adolescent outcomes, such as their self-representations (i.e., the set of attributes they use to describe themselves). Although associations between interparental conflict and children/adolescents’ self-representations have been reported, little is known about the processes that explain, and the conditions that influence, those associations. The mediating role of emotional insecurity in associations between interparental conflict and several domains of child/adolescent functioning has been consistently supported (e.g., Rhoades, 2008). However, scarce research has examined the conditions under which that mediation occurs. Some evidence supports the moderating role of various parent-child relationship dimensions, indicating that negative dimensions of parenting can exacerbate its effects, whereas positive qualities have the potential to buffer children from its adverse effects (e.g., DeBoard-Lucas, Fosco, Raynor, & Grych, 2010; Skopp, McDonald, Jouriles, & Rosenfield, 2007). Yet, no studies have analysed the role of this kind of variables in pathways linking interparental conflict to adolescents’ self-representations.

Based on the Emotional Security Theory, we hypothesized that certain signs of adolescents’ emotional insecurity may mediate relations between interparental conflict and adolescents’ self-representation, and that these mediating effects may be moderated by the level of support and negative interactions perceived by adolescents’ in their relationship with their parents.

Participants were 229 Portuguese adolescents (60% girls; 10 to 18 years old; Mage = 13 years), fifth to ninth graders, recruited in elementary and secondary public schools. Intergenitorial conflict, adolescents’ emotional insecurity in the interparental relationship, self-representations and perceptions of parent-child relationship were measured through self-report measures.

The results of moderated mediation analyses using PROCESS (Hayes, 2013) suggest that increased interparental conflict predicts lower levels of signs of emotional insecurity, some of which (i.e., emotional reactivity, avoidance reactions) in turn predict less favourable self-representations in several domains (e.g., instrumental, emotional, social). However, for adolescents’ who perceived lower levels of negative interactions in their relationship with their mothers, interparental conflict is associated with more favourable self-representations in the instrumental, emotional and physical appearance domains through avoidance reactions in face of interparental conflict. A positive association between interparental conflict and emotional self-representations through avoidance responses was also found for adolescents who perceived lower levels of negative interactions in their relationship with their fathers. Also worth noting, interparental conflict predicted more favourable instrumental, social and opposition self-representations was found, through adolescents’ constructive representations about interparental conflict.

These findings suggest that the relations between interparental conflict and adolescents’ self-representations are complex and that it is important to consider aspects of the parental-child
relationship as conditions that can influence the valence and strength of those associations. It elucidates processes linking interparental conflict to adolescents’ self-representations and highlights how positive aspects of parenting (i.e., low negative interactions) can moderate some of these processes and defuse maladaptive developmental cascades. These findings also contribute to unravel some inconsistencies in the literature regarding the role of avoidance reactions to interparental conflict as a successful way of reducing exposure to stress vs. a dysfunctional process that increases the risk of negative child/adolescent outcomes, by suggesting that that role is conditional on aspects of the parent-child relationship. This study thus highlights the importance of reducing negative interactions in the parent-child relationship as well as enhancing adolescents’ emotional security in the interparental relationship in interventions with adolescents’ and their parents in the context of interparental conflict.
Preventing out-of-home placement: needs assessment, program design and evaluation in an at-risk community setting

Thursday, 15th September - 18:00 - Poster Session 2

Prof. Maria Calheiros (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Dr. João Graça (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Ms. Joana Patrício (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL)

Objectives: Researchers have been emphasizing the importance of promoting needs-led, context-specific, user-centered services in the context of child protection for preventing out-of-home placement. However, policy-makers and service planners scarcely invest on based research evidence of what is effective in the domain of family support.

This work presents, in two studies, the process of needs assessment, the design and evaluation of a targeted family support intervention that was developed and implemented for preventing out-of-home placement.

In study 1, we: 1) assess the needs of the children (and families) of a risk community children center; 2) identify different clusters of needs; and 3) define the target population. In study 2, we: 1) build a theoretical process model for the intervention; 2) design and describe the logic model; and 3) evaluate client outcomes.

Method: Following the Common Language Approach to needs assessment (Dartington Social Research Unit, 2001), in study 1 we screened 100 children and their families attending a community children center. Most of the children (64%) were in preschool (with ages ranging from 3 to 5 years), and 36% were in elementary school (with ages ranging from 6 to 11 years). With regard to ethnicity, 54% were Portuguese and 46% were African in origin. Fifty percent of the families were single-parent. With regard to the parents’ professional status, 32% were both employed, nearly half of the sample group (49.6%) had one unemployed parent, 14.6% had both parents unemployed.

In study 2 we describe the theoretical process model and the logic model for the intervention, and experimentally evaluate the program’s efficacy.

The sample group was comprised of 40 families, 20 in the intervention group and 20 in the control group (attending preschool). An experimental study plan was used to implement the process of verifying the program’s effectiveness. The aim was to comparatively assess two groups of families and their children (control group and intervention group) at two moments in time (before and after the intervention), randomizing the participants in the two groups evaluated. The participants in the intervention group took part in the activities laid out in the program implemented. The participants in the control group continued to receive a response which was merely educational in nature (i.e. pre-school).

Results: In Study 1 the identification of needs patterns revealed four different needs profiles, with different degrees of risk for the development of their respective children. Except for need cluster two, the evaluated families showed the existence of needs which could not be addresses by a merely educational service; they required a response centered on the family and not just on the child. In the view of the levels of risk observed and the characteristics of the children and parents, this response would entail different types and levels of intervention. One cluster was selected as target-group for the design of a service to match their needs. Families in this cluster had socioeconomic disadvantages,
a challenging family environment and inadequate parenting practices. Children were showing signs of problematic social behaviors.

The findings of study 2 show that the program had a positive impact on living conditions, financial conditions, support for the parents, parent/child interaction and stimulation of development versus the control group. Matching needs with services appears to have resulted in direct improvements in these areas. We also found positive significant effects on parental perceptions of some of the children’s indicators of social and behavioral development (inattention and pro-social behavior).

Conclusions: This approach to need-service matching seems to be a viable pathway to design needs-led, context-specific, and user-centered services, and to assess their efficacy, thereby informing policy makers and service planners how to prevent out-of-home placement.
Assessment of user-satisfaction of the care received from the specialized teams of childhood and family care

Thursday, 15th September - 18:00 - Poster Session 2

Mrs. Patricia González (University of La Laguna), Dr. Eduardo Martín (Universidad de La Laguna)

Family intervention models in Child Welfare have change over time. Currently, the teams specialized in childhood and family care are responsible for providing quality service to their users, therefore, the evaluation of the quality of these services through the measurement of user satisfaction is necessary. This work has three goals. Firstly, to know which persons are included in the interventions; secondly, to assess service user-perceived quality; and thirdly, to determine possible differences in satisfaction as a function of two relevant variables: the case plan assigned in the intervention and the family role carried out by the surveyed. Two hundred and twenty-five interviews were performed with people who were included in a total of 159 cases, who represent more than one half of the population of cases attended to in Tenerife. The assessment was made by means of an ad-hoc questionnaire specifically designed to assess satisfaction with the service, following the quality criteria of Setién y Sacanell (2003). This questionnaire includes questions with response scale of 1 to 5 and 1 to 10. Interviews were carried out by telephone by a person outside intervention. Then, data were analyzed using SPSS 15 and R statistical software. The main results indicate, on the one hand, a tendency to work with the entire family support network, adopting an ecological and systemic model. Regarding the second objective, results indicate high levels of user satisfaction with the service received. Score are high in all aspects evaluated with the interview. The positive attitude towards the family has been essential to obtain the cooperation of parents. This shows that family intervention conducted under the collaborative approach provides good results. Finally, it was found that there are no significant differences as a function of case plan and family role.

Keywords: child welfare; family intervention; quality assessment; user satisfaction; case plan
International Review on Family Group Conferencing (FGC)

Thursday, 15th September - 18:00 - Poster Session 2

Dr. Karen J. Skaane Havnen (Uni Research Health), Dr. Øivin Christiansen (Uni Research Health)

Objective:
The present review on FGC was carried out on behalf of the Norwegian Directorate for Children, Youth and Family Affairs from December 2013 to July 2014. The main objective was to provide an updated overview of the current knowledge base on FGC, from which the further development of FGC in Norway could benefit. This included reviewing the existing literature on the effects of, and experiences with, FGC on the one hand, and the identification of thematic areas that required new or further research on the other.

Method:
The review includes publications in English and in the Scandinavian languages, covering the countries in which FGC has been actively in use. The searches were based on an exhaustive and systematic examination of literature found in relevant databases (see http://www.kunnskapssenteret.no). The search included referee-based scientific journals, professional articles, dissertations, books. To obtain information on the participants’ experiences, we also searched for grey literature. Experts from several countries around the world were contacted to get up-to-date information on recent activities and publications. The searches were not subject to any time limit.

Results:
The knowledge base on the effects of FGC is weak. The strongest evidence based on methodologically sound studies is that FGC increases the likelihood for children to be placed in kinship care as opposed to public placements and adoption. Furthermore, FGC increases the likelihood of returning from care to either the parents or other family members. Singular research findings indicate that FGC facilitates the access to services beyond the Child Welfare Services (CWS) in the short term, but not in the long term. In addition, there are indications that FGC is used to a similar extent among families with a minority background as in other families. With regard to experiences with FGC it is difficult to draw any common conclusions, because most of the studies are based on small samples aimed at muncing the participants’ experiences. Still, the majority of participants have made positive experiences with FGC. Factors that are appreciated the most by family members, and not least the children, include the relational and professional aspects of FGC processes. Research findings indicate two factors that are crucial for the functioning of FGC as intended: Firstly, all participants should be prepared for the specific procedures of the FGC meeting, including their own role. Secondly, coordinators need to maintain their central role in a qualitatively good way. The most negative experiences were related to the implementation (or lack) of the action plan developed by the FGC. The same thematic areas and challenges can be found in research and reports on the use of FGC in other services beyond CWS.

Conclusions:
The review first and foremost reveals the need for further research, which applies to most aspects of FGC. It also questions, however, the aims and ambitions for the use of FGC in CWS and other services, which cases or areas should be prioritised, and issues related to model fidelity. To allow for a continuous evaluation of FGC practices, the review recommends including such practices in the Norwegian national child welfare statistics, as well as the introduction of short evaluation forms that are to be filled out by all participants after having attended FGC. Finally, the importance of
sound research on new areas for FGC within the Norwegian CWS is highlighted. This particularly applies to the use of FGC in acute cases and in the cases of residential placements.
Evaluation of an Evidence-informed Practice Training Program in Child Welfare: A Focus on Research

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Kristen Lwin (Practice and Research Together (PART)), Ms. Sarah Head (Practice and Research Together (PART)), Ms. Julia Wedeles (Practice and Research Together (PART)), Mr. Aaron Turpin (Practice and Research Together (PART))

In 2008, in Canadian child welfare, an estimated 235,842 child maltreatment investigations took place, suggesting that 39.16 per 1,000 children were involved with the child welfare system (Trocme et al., 2010). Child welfare workers have the vital role of promoting the safety of children and strengthening the family system. Indeed, child welfare workers have a difficult task and require several sources of information to offer the most appropriate services for children and families. Evidence-informed practice (EIP) can offer a comprehensive practice framework, and is the consideration of: case context, client preferences, worker/supervisor experiences, and research evidence (Nevo & Slonim-Nevo, 2011). However, an important piece of EIP, research, is often missing from child welfare practice (Horwitz et al., 2013). The use of research in child welfare has been shown to increase service user positive outcomes (e.g., Glisson, Hemmelgarn, Green, & Williams, 2013), as well as child welfare organizational factors (Collins-Camargo & Royse, 2010). This presentation will illustrate an evaluation of a novel EIP program that aims to increase individual child welfare worker’s use of research in practice.

Participants were randomly selected, at the team level, from one child welfare organization in Ontario, Canada. Participants attended five modules over a three-month period, for a total of 10 hours of dedicated learning time. Supervisors (n=15) and workers (n=50) attended separate sessions. Based on theory and empirical research, the curriculum focused on: 1) The role of evidence-informed practice in child welfare, promoting leadership and self-efficacy of using research; 2) Research methodology; 3) Linking research methodology to research questions; 4) Implications for practice; and 5) Sustaining the use of research in practice.

The intervention was evaluated using a pre- and post-test design. Pre and post measures include: EIP knowledge and frequency of use; attitude towards evidence-based practice; likelihood of adopting evidence-based practice; confidence in using research in practice; perception of barriers to using research in practice; frequency of discussing research; leadership use of research; relationship with supervisor; team cohesiveness; supervisor practice support; and number of times research was used in the previous month.

Thus far, findings have been positive, with significant changes from pre to post-test in key areas. Knowledge of EIP increased significantly (p<.001) from pre to post-test. Participants indicated a significant (p<.001) increase in confidence in using research after completing the EIP curriculum. Social work literature suggests that self-efficacy (the belief that one can set and achieve a goal) is an important piece to using research, thus, it is reasonable to posit that the same may be true in the child welfare context. Barriers to using research may be subjective and can influence a worker’s confidence and use of research. The significant decrease (p<.005) in barriers to using research is important and demonstrates that it may be the perception of barriers that is important.

There are limitations to this evaluation, including the use of self-report measures and the lack of a control group. Further, this is a pilot intervention, as it is one of the first of its kind. The findings of this evaluation cannot be generalized to the wider population, yet suggest important factors to consider when promoting the use of research in individual child welfare worker practice.
The relationship between Burnout and memories of educational parental practices of child and youth at risk care workers

Thursday, 15th September - 18:00 - Poster Session 2

Prof. Luiza Nobre Lima (University of Coimbra, Faculty of Psychology and Educational Sciences, Research Unit of the Cognitive-Behavioral Research and Intervention Center), Dr. Jessica Anciães (University of Coimbra, Faculty of Psychology and Educational Sciences), Dr. Alexandra Lino (University of Coimbra, Faculty of Psychology and Educational Sciences)

Burnout seems to affect, mainly, professionals that have to take care of others. Considering that memories of parenting practices are associated with the psychological adjustment of the individual, the aim of this research was to measure Burnout Syndrome among workers in residential care units for out-of-home placed children and youth and to study the relationship between this Syndrome and memories that these workers have about educational practices of their own parents.

The sample comprises 70 workers from the educational teams from residential care units, mostly women (87.1%), aged between 22 and 64 years. Burnout was assessed with the Maslach Burnout Inventory-Human Survey Services (Maslach & Jackson, 1981 Portuguese version Maroco & Campos, 2013) and the Memories of Parenting Practices were evaluated with the EMBU- Inventory for Assessing Memories of Parental Rearing Behaviour (C. Perris, L. Jacobson, H. Lindstorm, L. von Knorring, H. Perris, 1980, Portuguese version Canavarro, 1999).

Results suggested that Burnout is not present among workers of the educational teams; weak but positive correlations were found between the perception of rejection by the mother and emotional exhaustion and also between the emotional support provided by the father and the worker’s personal accomplishment. Further research is needed in order to clarify the role that memories about parents’ educational practices play on the professional performance of child and youth at risk care workers and to better identify the potential factors that contribute to the development of Burnout Syndrome among these same workers.
‘What happens after leaving care? – Insights from interviews with a group of Irish Care Leavers.’

Thursday, 15th September - 18:00 - Poster Session 2

Dr. Conor Mc Mahon (Tusla - Child and Family Agency - Ireland), Prof. Robbie Gilligan (Trinity College Dublin)

While there is growing international awareness regarding the lived experience of care leavers who are making the transition to adulthood, there is to date little such evidence from an Irish context. This poster presentation reports on findings from a pilot study of ten qualitative interviews with young Irish Care Leavers conducted in 2015. At the time of interview, most of the young people had been out of care for approximately five years. There will be a particular focus on the care leavers’ reported experiences pertaining to: education, training and work; stability in accommodation; contact with birth family and foster parents; and, current social support/networks.

This pilot study is part of a larger study tracking the progress of a cohort of care leavers. (Selected findings from the wider study were presented at EUSARF 2014). Some additional contextual data from this wider study will also be included via case studies of a number of young people in the interview sample. The poster presentation will include a consideration of some of the possible implications of the findings for further research and service provision.
Involving young people in research.

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Jade Ward (University of York), Ms. Jo Dixon (University of York), Dr. Sarah Blower (University of York), Ms. Heidi, Jade, Mia and Zoe - HP Young People (Stoke on Trent’s House Project)

This poster will highlight the benefits of including “peers” in research (in this case young people). It will draw on three studies, each of which included a strong participation element. The studies are based on evaluations of new services for young people on the edge of care, leaving care and at risk of homelessness. Young people’s participation included two groups working as reference groups, which involved advising the evaluation team on the design of the research, development of the research questionnaires and interviews and the creation of information leaflets. The third group participated as research participants, taking part in focus groups and one- to-one interviews, as well as involvement in disseminating emerging findings. Young people ranged from 13 years to 21 years old.

The poster will present young people’s experiences of contributing to these studies including: what they have gained, what they have learnt and how they have supported the research. The poster will also highlight the benefits to research when including young people in a way that goes beyond being the respondents to interview questions. It will also explore the benefits and challenges of working with young people from the perspective of the research team.

Benefits to young people – Young people identified key learning opportunities:

- Communication, interview and interpersonal skills – (we can use what we have done and when we go for interviews we will know how to present ourselves)
- Confidence
- Respect
- Making a difference (we feel like we are actually part of something that could make things better for other young people like us)
- Become more sociable.

Benefits to the research - By having a participation element to the evaluation young people can support and shape the study to ensure it is relevant and meaningful to young respondents. By providing lived experiences they can work alongside academic researchers to ensure that the evaluation is the best it can be for both parties. Participation also enables young people:

- to be at the forefront of the evaluation
- to provide insights to the interpretation of findings (something researchers may miss)

The poster will present feedback from the three groups on skills development:

Reference groups

- How to write interview schedules (‘we made sure the interview questions were ethical and suited to the age of the participants.’)
- Interview skills (‘We practiced the interviews to make sure they weren’t too long and to see if young people our age would be comfortable in answering the questions’)

416
• Skills in design and information sharing (‘information leaflets can be really boring so we removed a lot of the wording and wanted it to be bright colors’).

Participants

• How to think on the spot (‘it’s really hard to think of answers on the spot but it got easier and now I have a better way of knowing what to do in other interviews’)

• Team work (‘we have worked as a team to get this project up and running and its really good to meet everyone and work together’)

• Time management (‘there are a lot of meetings and we all understand how important it is to be on time otherwise everyone is left waiting around for us’)

Challenges of participatory research methods

Participatory approaches can be expensive and time consuming, however, the outcome for both young people and research staff is invaluable. By including young people, the research team can support them in learning valuable skills for later in life, and by working with young people researchers can learn and better understand the needs of the participants from the young people themselves.
Adolescents’ psychological adjustment and quality in residential care

Thursday, 15th September - 18:00 - Poster Session 2

Mrs. Joana Campos (Centre for Psychology at University of Porto | Faculty of Psychology and Education Sciences of the University of Porto), Mrs. Sónia Rodrigues (Centre for Psychology at University of Porto | Faculty of Psychology and Education Sciences of the University of Porto), Prof. Maria Barbosa-Ducharme (Centre for Psychology at University of Porto | Faculty of Psychology and Education Sciences of the University of Porto), Prof. Pedro Dias (Catholic University of Portugal, Centre for Studies in Human Development, Faculty of Education and Psychology)

In Portugal, more than 8000 Portuguese children and youngsters are currently in Residential Care (RC) and a large number of them are adolescents (56.1%) aged 12 to 17 years. The lack of studies on the quality of RC in Portugal, and the scarce information about how far the available services meet the real characteristics and needs of young people in care, makes it imperative to carry out research on RC quality. The use of an Empirically Based Assessment is crucial, since it enables the design of effective clinical interventions that are also empirically based. The Achenbach System of Empirically Based Assessment (ASEBA) allows the collection of information in several contexts (e.g. school, family) with more than one informant (e.g. caregivers, adolescents). This is a quick and cost-effective way to perform a complete assessment of the problem(s) presented by this population.

Five RC centres for children and young people were visited within an exploratory study of a nationwide assessment on the quality of the Portuguese RC system. Sixty-one youngsters (64% are female) living in those settings participated in this study. Data on RC quality was collected using the ARQUA-P and youngsters filled the YSR.

The present study is part of a larger study, and it aimed to: a) characterize behavioural and emotional problems displayed by 61 adolescents, as reported by themselves; b) examine gender differences in youngsters to the scales of YSR; c) examine the correlations between the evaluation of the adolescents in care and specific dimensions of the context (number of adolescents and ratio caregiver/adolescent).

In relation to the characterization of the behavioural and emotional problems displayed by youngsters, YSR revealed scores that highlight the presence of psychological problems and psychosocial difficulties that may indicate psychopathology in much higher rates than those found in normative population. The female youth present more psychopathology and more behavioural problems than male youth, as is corroborated by the literature. With regard to the context variables, the Total Problems and Internalizing Problems of YSR present significant negative correlations with the number of adolescents and also with the caregiver/adolescent ratio: decreasing number of adolescents per home is associated with increases in the difficulties and problems they present and adolescents living in homes with a lower ratio display more psychological maladjustment. These correlations are not supported by the literature and appear to contradict the theoretical assumptions and evidence of research. A plausible explanation for this result is the fact, in this study, that the smaller RC centres show willingness to accept adolescents who are not always accepted in other institutions, given their personal characteristics, life history and the severity of the problems previously experienced.

In Portugal, as in other countries, the prevalence of mental health symptoms and psychological problems is much higher in adolescents in RC. This fact deserves further validation and has implications for future policies regarding the RC and for the management and practices of the RC centres. Given these results, measures to ensure the creation of more units of specialized care should be prioritized,
as well as the integration of a greater number of Psychology professionals in RC. Furthermore, more refined screening processes and psychological evaluation should be developed and specific continuous training to all caregivers should be provided.
Effectiveness of a parent education program for at-risk families. The role of the implementation process

Thursday, 15th September - 18:00 - Poster Session 2

Dr. Lucía Jiménez (University of Sev), Dr. Victoria Hidalgo (University of Seville, Spain), Dr. Isabel López (University of Seville, Spain), Dr. Bábara Lorenc (University of Huelva), Dr. José Sánchez (University of Sevil)

In this poster the implementation characteristics of a parenting program for promoting positive parenting in at-risk context is presented (FAF). The FAF is a theory-driven, needs-based, and evidence-based positive parenting program originally developed for the Andalusian family preservation services. The implementation process of 34 trials of the FAF program with 155 participants was analysed, including cluster analyses to explore variability in implementation conditions from a comprehensive perspective. Results showed different implementation profiles that moderated the FAF effectiveness (namely lengthier interventions, higher program fidelity, and practitioners’ positive perceptions and satisfaction with the program). The relevance of examining implementation process across several trials is discussed in order to distinguish core and non-core FAF components, as well as the need for combining faithful and adaptable implementations that guarantee the ecologic validity of evidence-based positive parenting programs.
Economic evaluation in family preservation services. A comparative cost-consequences approach on three Spanish programs

Thursday, 15th September - 18:00 - Poster Session 2

Dr. Lucía Jiménez (University of Sev), Dr. Victoria Hidalgo (University of Seville, Spain), Dr. Isabel López (University of Seville, Spain), Dr. Lucía Antolin-suárez (University of Seville, Spain), Dr. Bárbara Lorence (University of Huelva)

In the last few years the emphasis on implementing evidence-based practices has been seeing great gains in impact (Spiel, 2009), and positive parenting movement has been permeated by this concern (e.g., EJDP special issue 1, 2012). As a consequence, researchers include standards of evaluation in order to assist practitioners and policy makers to determine which parent education programs are effective (Flay et al., 2005) and, consequently, where scarce financial and human resources should be focused. Apart from effectiveness evaluations and despite methodological guidance available, just a few programs in child welfare system have followed economic evaluations (Goldhaber-Fiebert et al., 2011). In this poster three programs implemented in family preservation services in Spain are compared: a child-, a parent- and a family-based program for families at psychosocial risk. A comparative cost-consequences approach is followed, presenting information about equipment, materials, and personnel. Results from this analysis showed that state agencies support costs for these programs, and the efficiency of these resources is highlighted. Differences on personnel costs are discussed and consequences for practice are offered.
Academic situation of children and young people in residential care: a descriptive approximation.

Thursday, 15th September - 18:00 - Poster Session 2

Dr. Susana Lázaro-Visa (Universidad de Cantabria), Dr. Iriana Santos González (Universidad de Cantabria), Dr. Amaia Bravo (University of Oviedo)

One of the greatest challenges currently facing children protection in our country is related to the academic development of children and young people living in residential care. The transition to adulthood, and more so, their future integration into the labour market requires the development of basic school skills which the children and adolescents acquire as their schooling progresses. Although in recent years there is more literature that pinpoints the difficulties an unprotected population has in the academic sphere, it is still necessary to broaden our knowledge about this matter (Montserrat, Casas y Bertrán, 2013; Pérez-Romero, 2016).

This is the aim of this work, in which we set out in a descriptive fashion, the main findings related to the academic sphere of a sample of children and teenagers in residential care. In the framework of a wider project in which we have been studying the needs related to the emotional and behavioural problems of children and adolescents in residential care in Spain we analyse highlighted aspects of the academic progress of this sector of the population.

The project involved the participation of 1226 children and teenagers selected from different autonomous communities in our country. Most (75%) of the subject group were aged between 12 and 18 years old, while the remaining 25% were aged between 6 and 11 years old. The majority (76%) were in children’s homes, 10 % were in transition to adulthood homes, whilst the remaining 14% were shared among different programs (such as, programs for severe behavioral problems or unaccompanied asylum seekers). In most cases, the main reason for entering in protection system was family maltreatment and average time in residential care was 42.6 months.

The findings related to their school situation were arranged in three areas of interest: school level (studies they follow, adaptations of curriculum, school years repeated and academic performance); attitudes towards learning at school (in terms of motivation); and behaviour in the educational environment. We also explore the relationship of these indicators in terms of gender and age of the children and young in care. The source of information for the research was provided by the residential care workers.

In general terms, preliminary results show reveal that more than half the participants (60.1%) have had to repeat a school year at some point, with 39.5% requiring individual curricular adaptations. Moreover, we find poor academic results in an alarming percentage, that of 62.2% overall.

The findings that we offer contribute to shed light on the academic situation in which the children and young in care find themselves, with important implications for the social and educational intervention that is carried out in residential care. As Montserrat and Casas (2010) point out, the low education level and premature dropout are factors related with social exclusion.
Descriptive study on the emancipation of young people in foster care of SOS Children’s Villages Spain

Thursday, 15th September - 18:00 - Poster Session 2

Mrs. María Jesús Rodríguez Costa (SOS Children’s Villages Spain)

A descriptive study whose general objective was to evaluate the degree of emancipation and integration acquired by young graduates, men and women, who have been through foster care programs of SOS Children’s Villages Spain is presented.

The methodology used for collecting information was the “semi structured interview” confronted with objective indicators obtained through observation of each of the persons interviewed. From a potential population of 930 possible people being tracked, there have been a total of 607 interviews, conducted by technicians from the Youth Programs of the different territorial SOS Children’s Villages in Spain during 2014. The young participants in the study had a mean age of 28.2 years and an average stay in foster care programs of the organization of around 8 years and a mean time of outflow of young people around nine years since leaving the SOS Children’s Villages. The study presents detailed data by sex, age, and geographical origin etc.

The most relevant results obtained on these young people from the follow-up interviews and from collecting information on those variables that the Emancipation Observatory (Youth Council of Spain) estimates, in his report of 2014, as favouring the processes of transition to adulthood are exposed. The global indicators analysed in young people are: data about housing, income, work, education, socio-cultural integration, health and dependencies. The study was conducted with young people from 7 autonomous regions, namely Andalucia, Aragon, the Canary Islands, Castilla La Mancha, Cataluña, Galicia and Madrid.

The study concludes with a comparative analysis of the information obtained from young SOS Children’s Villages’ graduates and data on normative values provided by the Observatory of Emancipation and the National Institute of Statistics, on those variables that have been studied, It can be concluded that the young SOS Children’s Villages of Spain’ graduates of both sexes, present a level of emancipation equivalent to other young people present today in Spanish society; having in some variables studied, a degree of emancipation above average.
Young carers – our care?!

Thursday, 15th September - 18:00 - Poster Session 2

Dr. Anne-Marie Huyghen (University of Groningen), Mrs. Jana Knot-Dickscheit (University of Groningen)

Context

A large group of children has chronically ill relatives. Part of them are young carers; children who take care of a family member suffering from: physical chronic disease(s) or disability(s) and/or chronic psychiatric complaints and/or severe addiction problems (Centre for informal care, 2004). The concerns of young carers mostly stay invisible, mainly because society doesn’t recognize these problems (NJR, 2011).

Not all young carers develop problems later on. What we do know, is that this is a group of vulnerable children. Children with parents with psychiatric disorders for example, have an increased risk at developing psychiatric problems later in life (Bol, Van der Zanden & Smit, 2014). To prevent the development of problems later in life, knowledge on young carers and the problems they encounter is needed.

Objectives

Little research has been done into young carers and there is lack of knowledge on experiences among young carers and the kind of support they require (NJR, 2011), for example from schools. Therefore three studies on young carers’ perspectives were performed. Study 1 aimed specifically at young carers and school drop out from the perspective of the care professional. Study 2 and 3 focused on the experiences, wishes and needs of young carers in general and regarding school specifically. Study 2 aimed at the perspective of young carers and their teachers, study 3 at the perspective of adults once being a young carer.

Methods

All three studies were set up in a qualitative way. Single measurements were done performing semi-structured interviews. Study 3 was retrospective. The interviews were recorded and transcribed, after which the responders checked the text. In the analysis a code was sought closest to the content of the specific text fragment (Baard, De Goede & Teunissen, 2001). To show relations and differences between the interviews, text fragments with connecting code(s) were grouped under the corresponding main codes. Codes with mainly the same content were put under each other, where with codes with different content space between the codes was created (Brink & Augustijn, 2015). More or less synonymous codes were grouped into one code.

(Preliminary) Results

Study 1: The definition of (young) carers is interpreted in various ways. Most responders find it important that young carers are identified; all responders find it important to know the cause of school dropout. The combination of young carers and truancy is mentioned by the responders. It’s suggested an increased awareness among care professionals towards young carers should be improved. It can be concluded that the definition of young carers is divers and health care professionals have little insight into young carers (Post, 2015).

Study 2: Young carers report to have limited problems in schools. The main problem they do encounter is being unable to concentrate. Young carers felt they received little support from school, and the degree of experiencing understanding from school varied. Teachers indicated there is no
policy regarding support for young carers, and suggested teachers should be more aware of them. Young carers indicated support could be improved offering more flexibility, adaptation of school rules and developing teachers’ knowledge (Goerres & Schipper, 2015).

Study 3: The effects experienced by young caregivers varied depending on the individual situation, however all young carers experienced an emotional impact. Many of the supporting factors are related to receiving ‘attention and appreciation’. Most of the young carers experienced their social network as being supportive. The experienced obstructive factors vary widely, although ‘lack of attention’ was noted most. The demand for (emotional) attention and appreciation seems an important aspect for young caregivers, improvement in individual support is needed in those areas (Brink & Augustijn, 2015).
Use of Youth-designed Board Game to express youths’ concerns and voices towards group home care experiences

Thursday, 15th September - 18:00 - Poster Session 2

Mr. Tsz chung Ng (Sheng Kung Hui St. Christopher’s Home), Ms. Choi Lin Londy Chan (Sheng Kung Hui St. Christopher’s Home)

Abstract:
In Hong Kong, out-of home care services have been developed from institution to small group home and foster care services since 1990s. Children and teenagers are removed from families due to multiple family problems. They may need to stay in out-of-home care from their childhood to adolescent stage because of limited improvement in their family situations. However, due to the wide age range (aged 4 to 18) of children and limited staff in small group homes, most of the staff emphasize on children’s daily care and discipline. Behavioral management to children and teenagers is widely used. However, without adequate opportunities for negotiation, teenagers tend to have low participation in group home living. There are also limited opportunities for teenagers to voice out their experiences and concerns on their group living.

In response to this situation, “Youth-designed board game” was launched in a small group home with 7 teenagers aged from 9 to 18 from July 2015 to March 2016. It aimed at supporting teenagers to share their experiences and concerns on their group home living, in order to enhance their self-confidence, empower them to advocate for improvement of service through sharing to all levels of staff of the organization. Two sets of board game were designed by teenagers with the themes as “Urge for more negotiation and decision making opportunities” and “Back home quickly”. The games were designed and printed in an attractive package and have fun to play. Players of the games include care staff and children. The teenagers presented their ideas and design in a conference, with participants of the children of other small group homes, the organization staff including the Chief Executive and other managerial staff, social workers and caring staff of small group homes. The teenagers also performed as trainers to teach all participants how to play the two sets of games. The games will be produced for more copies and the teenage designers will be invited to be trainers in other small group homes of the organization to teach players how to play and advocate their ideas through the games.

Qualitative feedback were collected from the participants of the conference and the teenage designers to evaluate the impact of the “Youth-designed board game programme”. The teenage designers shared that the design process was a very unique experience for them since they were able to share their experiences, feelings and concerns in an open and free platform. They stated the most important element was their voices being highly attended and respected, both in the group process and the conference. The findings showed that occupied negative emotions of the teenagers were released and hopes were enhanced after the group. Besides, self confidences of the teenagers were enhanced due to the successful production, conference presentation and appreciation from the staff and other children. We recommend that child care staff and organizations could create different platforms and adopt various means to listen to teenagers’ voices and empower them to participate in decision making in their daily living. Their voices in service development should be attended.
The experiences of young people in family-oriented care through life course approach: Nigeria and Portugal perspectives

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Temitayo Adeboye (Federal University of Agriculture Abeokuta), Prof. Maria Da Dores Guerreiro (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Prof. Ingrid Höjer (Göteborg University)

The clamour for children in care is a global issue that demands the attention of the global society from an international perspective. Aging out of care reveals poor outcomes (Osgood, Foster and Courtney, 2010; Bailey, et-al, 2011; Höjer & Sjöblom, 2011; Jones, 2014). A globalised systemic perspective of care living strategies can strengthen the social ecology of support (Pinkerton, 2011). The specific objectives unveil the past experience, explore the present experience and described the projected future pathways of the youth.

Methods

The study utilised comparative qualitative research strategy. The participants for the study includes 12 youth purposively selected, comprising of 9 youth in the process of leaving care and 3 care leavers between the age bracket of 19 and 30. With biographical interview, data for the study were from audio-recorded interviews and phone conversation using interview guide. The data was analysed using comparative content analysis.

Ethical considerations include confidentiality, informed consent and invasion of privacy.

Results and discussion

Three dimensions emerged based on participants’ experiences – the past, the present and future life. The past refers to the history of the youth before entry care with focus on biological family affiliation, cultural practices and causes of separation. Only 5 participants had no biological family affiliation and others were supported by social capital. Cultural practices include daily activities, with 4 living on the streets for survival and 6 schooling. The cause of separation was majorly economic constraint resulting in abandonment (6), lack of parental care (5); and ill-health of parent (1).

According to the principles of socio-historical and geographical locations in LCA, the event history shows that youth were born in Portugal and different African countries and experienced street life and schooling. This has helped to an extent to understand the cultural context and the events that characterised the period of youth’s birth. Poverty, parents’ sickness, neglect, orphaning, abuse, abandonment and parental separation exposed youth to vulnerability.

The present shows that participants were admitted into care as infants and school age children in Nigeria and Portugal respectively; two phases of childhood with a SOS family and youth; daily lives include good memoirs of childhood in both country; acquisition of entrepreneurial skills and movement in restriction in Nigeria. Future shows the projected pathways related to career, family-life and employment.

The LCA principles applicable are timing of lives (TOL), linked lives (LL) and human agency (HA). TOL are in three phases of transition - childhood, teenage and youth in preparing youth for adulthood. However, age is an important factor for any transition to occur. Thus, the available early help for vulnerable children is able to minimise the period of adverse experiences, leading
to improved outcomes (Munro, 2008). Youth are able to establish cordial relationship with SOS mothers in Portugal, than in Nigeria. HA and LL are interrelated. Daily life reveals the HA characterised by making choices influenced by cultural contexts, affecting their way of life and skills that can be acquired. The significance of secondary education cut across the two countries. With LL, the importance of growing up in a family is significant. This implies that through relationships established, the resources available and located within children’s environments can be harnessed to build a better life.

Future shows the projected pathways related to career, family-life and employment. Youth need help to make a progressive transition to adulthood. LCA principle of past shaping the future has both positive and negative impact on youth. Education and career pathways while the negative dispositions to marriage life. Thus, taken for granted future and late risers is indispensable. Unemployment remains a barrier but entrepreneurial skills is the way out.
ARQUA system: a new tool for evaluating quality in residential child care

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Silvia Pérez (University of Oviedo), Ms. Carla González (University of Oviedo), Ms. Alba Aguila (University of Oviedo), Dr. Jorge F. Del Valle (University of Oviedo)

According to the latest official data, in Spain there are 13,563 children and adolescents fostered in homes of protection (Observatorio de Infancia, 2016). This makes child protection be a matter of great importance, especially in the area of residential childcare. For this reason, it’s of great interest to know in depth the operation of these homes trough assessments that evaluate the quality of the practices that are being developed in them. These actions must be based on international quality standards of residential childcare: EQUAR (Del Valle, Bravo, Martínez and Santos, 2012). Currently, the Group of Research on Family and Childhood (GIF1) of the University of Oviedo, is being pioneer in Spain to design an instrument that allows to realize assessments of quality. These assessments must involve homes in different levels, composing for specific interviews for each profile (management, technical, educational and personnel services staffs and children) as well as assess the physical resources and its structure by an environmental observation. This makes the evaluation be integral. The main objective of this paper is to present the structure of a new instrument named ARQUA designed to evaluate quality of residential child care according the national Spanish standards.

Young people’s rights in care and psychological adjustment: the moderator role of educators’ social support

Mrs. Eunice Magalhães (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL.), Prof. Maria Calheiros (Instituto Universitário de Lisboa (ISCTE-IUL), CIS-IUL), Ms. Joana Patrício (ISCT)

Objectives: In this study we aim to analyze the relationship between youth’s perceived fulfilment of rights and their psychological adjustment, considering the potential moderating role of social support provided by educators in residential care.

Method: A sample of 366 adolescents (11-18 years old) placed in Portuguese residential settings (59 residences) participated in the present study. These adolescents filled out the Rights Perceptions Scale that assesses 4 dimensions of perceived rights (Participation and Protection: youth’s perceptions about their involvement and freely speech in care together with protection and security feelings; Respectful system practices and behaviours: youth’s perceptions about the professionals’ practices in the protection system, peers behaviours in care and perceived discriminatory behaviours associated with their placement in care; Autonomy and Contacts with family: youth’s perceptions about opportunities to be autonomous and to acquire skills for an independent life as well as to contact with their family; Normalization: youth’s perceptions focused on equal opportunities as their peers who are not in care, which normalize their life conditions).

Also, these adolescents completed the Questionnaire of Institutional Support that assesses three dimensions of functional support provided by educators in residential care (Esteem: it involves young people’s perceptions that they are valued by educators; Emotional/relational: it involves young people perceived concern, care and empathy from educators; Evaluative/informational: it involves young people perceived information, guidance or feedback provided by educators that can help them to solve a problem). Finally, youth’s internalizing and externalizing outcomes were assessed by the Reynolds Adolescent Adjustment Screening Inventory (Antisocial Behaviour: youth’s troubled behaviours and rules breaking; Anger Control Problems: youth’s oppositional behaviours; Emotional Distress: general distress, including excessive anxiety and worry; and Positive Self: difficulties of self-esteem and sociability.

Results: a set of moderating effects of social support provided by educators in care was found in the relationship between perceived rights and psychological adjustment. Enhancement and buffer effects of educators support were found. Results revealed that Evaluative/informational support seems moderate the relationship between Normalization and Antisocial Behavior ( = -.219, SE=.072, p<.05) and between Respectful system practices and behaviors and Antisocial Behavior ( = -.184, SE=.061, p<.05) and Anger control problems ( = -.236, SE=.047, p<.01). Furthermore, Emotional/relational support seems to moderate the relationship between Participation and Protection and Positive Self ( = -.185, SE=.085, p<.05). Esteem support seems to moderate the relationship between Autonomy and Contacts with Family and Antisocial Behavior ( = .168, SE=.046, p<.05) and Anger control problems ( = .183, SE=.033, p<.05). Also, Esteem support seems to moderate the relationship between Participation and Protection and Positive Self ( = -.311, SE=.101, p<.01) and between Respectful system practices and behaviors and Antisocial Behavior ( = -.159, SE=.053, p<.05).

Conclusions: Findings from this study strengthen previous evidence on the key role of social support for young people, suggesting that supportive relationships with significant adults in residential care positively impacts on their adjustment. Actually, different aspects of formal social support
(i.e., evaluative/informational, emotional/relational and esteem) revealed a moderating effect on the relationship between rights’ perceptions and all dimensions of psychological adjustment, except the emotional distress. These results have important implications for professional practice, namely, the significance of staff training in order to provide high patterns of quality in residential care.
The mentor of resilience in the child protection system

Thursday, 15th September - 18:00 - Poster Session 2

Ms. Anna Ciurana (University of Barcelona), Dr. Nuria Fuentes-Peláez (University of Barcelona), Dr. Crescencia Pastor (University of Barcelona)

Scientific literature indicates that children who are in the child protection system, particularly in residential care, have a range of specific and developmental needs.

From the resilience paradigm, social dimension has been considered as key element to build resilience. Recent empirical consensus in the literature recognizes the important role played by the presence of a significant person in this process of building resilience. This significant figure has been named Mentor of Resilience.

Similarly, different approaches in psychology and education have outlined the importance of interpersonal relationships for human development, appreciating that interaction is a core developmental ingredient. From the socio-educational perspective, the quality of the professional-child relationship is considered to be a key predictor of successful intervention.

Considering the adversity these children face, and taking into account educative and resilience contributions, it is relevant to consider the potential of significant figures as sources of support to enhance resilience.

This presentation is part of a larger study, so here we focus on these aims: 1) to understand the significant relationship between child in residential care and the social educator and 2) to set some practice guidelines in order to promote that social educator becomes a Mentor of Resilience.

This research is based on qualitative methodology, taking the interpretative paradigm to understand the phenomenon in complex perspective. Data were gathered in two phases, each of which had different participants and strategies. In the first phase, participants were be twenty former youth who had been long-time periods of his life in residential care. Data collection was conducted through the lifeline (LIVIFS), the ecomap (ECOFS) and in-depth interview (in-depth interview FIGSIG). The second phase focuses on three of the twenty participants, with which involved another in-depth interview (in-depth interview DESRESIL). Additionally, the three professionals, as selected by the youth as the significant figures in their formal network, were interviewed (in-depth interview PROFFS). Data was analyzed using content analysis based on bottom up and top down system. Atlas.ti v.6.0 software was used to support the analysis of the interview content.

The results indicate that despite their vulnerable situation, youth can identify figures of their social network that provided significant support during foster care. In the majority of the cases, the key significant figure within the formal network is the social educator of the residential care. In this regard, we focus on educational relationships with the social educator, capturing the significance of the relationship, and identifying educational and resilient content that professionals provide to encourage the resilience in children. Finally, we recommend a set of socio-educational guidelines for professionals who work with children in residential care, in order to provide a positive impact on their direct practice.

As conclusions, our results are consistent with other investigations, and they contribute in multiple areas: a) a new way to understand educational relationship, pointing out the significance, the promotion of resilience and the processes it can generate; b) the verification of the social educator as a key piece in child resilience success and c) the potential of the mentor of resilience.
Connecting research and evidence in child welfare practice

Friday, 16th September - 09:00 - PLENARY SESSION: Connecting Evidence, Research and Practice

Dr. Patricia Chamberlain (Oregon Social Learning Centre)

In the field of child welfare, research and practice are two disciplines with overlapping and shared goals that often fail to speak to each other in meaningful ways. In both research and practice the overarching goal is to improve the safety and well-being outcomes in the lives of vulnerable children and families.

To accomplish the shared goal of improving outcomes, researchers need to be continually pushed to translate their findings into practical clinical applications and recommendations for policy and practice. However, for reasons that are well documented and that we will hear about today, practitioners are often wary of the knowledge that research brings to the table. Innovations to advance the use of research evidence in to practice settings are needed. These will include strategies for communication that value both data and experiential knowledge, organizational and structural changes to improve the uptake and reach of research-based practices, and methods of evaluation that set up processes for continual quality improvement. It is through these types of process that child maltreatment research findings will be converted into action.

In case we become too self critical, we recognize that the gap between research and practice is not limited to the field of child abuse and neglect; in medical research, on average it takes 17 years for research discovery to make it’s way through the pipeline into real world practice. We have seen some progress in child welfare systems during the past decade with the growth of the field of implementation science. Increasingly, we have examples of how evidence-based intervention can be scaled up in real world child welfare systems. But significant challenges remain and we need strategies for creating a shared dialogue and culture between researchers and practitioners. Today we will hear about two examples of how this dialogue can happen.
Implementation of evidence based programs in Child Protection Services in Gipuzkoa (Spain)

Friday, 16th September - 09:25 - PLENARY SESSION: Connecting Evidence, Research and Practice

Prof. Joaquín De Paúl (University of Basque Country)

In this presentation, we will describe the implementation process of two evidence-based programs in Gipuzkoa’s Child Protection System (Basque Country. Spain). The project for the pilot implementation of the SafeCare and Incredible Years programs in Gipuzkoa is the first experience in Spain promoted by Child Protection Services for the implementation and rigorous assessment of evidence-based family treatment programs for children and families.

Family preservation and reunification programs in the Basque Country Child Protection System receive a relevant amount of personal and economical resources and can be considered, with no doubts, as the better funded in Spain. However, if we analyze the efficacy and efficiency of this system of services it is difficult to have good news:

-Programs are mainly based on the provision (for every family) of home visits and psychological treatment.

-The intervention in cases of more serious abuse tends to be very prolonged in time.

-Family interventions in the most serious cases are usually carried out in very late moments of child development. Early interventions (below five years old child) are very rare.

-Family intervention programs can not be considered as structured or manualized.

-It is impossible to know effectiveness of family intervention programs. Public services and public institutions responsible for the protection of children and adolescents may not account for the effectiveness or efficiency of public resources.

We will describe the process by which public institutions responsible for child protection in Gipuzkoa decided to shift from current intervention programs towards more structured, focused, and short-term programs that have shown positive results in previous applications in other countries.

Issues related to programs adaptation, selection, and training of professionals and pre and post results obtained in the preliminary application of SafeCare and Incredible Years to a limited set of families will be presented.

Finally, the next step of the implementation process (pilot implementation with a randomized control trial design) will be described. We will discuss a significant number of issues that have been important throughout this process and that may be useful for administrations and institutions that wish to undertake a similar process.

Main conclusion: pilot implementation of SafeCare and Incredible Years only makes sense to improve the effectiveness and efficiency of Child Protective Services in Gipuzkoa if could be understood as the beginning of a long process. If these programs are successful, they should be maintained, expanded and integrated into the usual services, which will face new challenges (e.g. maintenance of fidelity, training and supervision of new professionals). The process can’t finish there, and it have to continue with the gradual implementation of new evidence-based programs, trying to create an integrated system capable of responding to the different types of children and families: "an effective response to the problem of child abuse would be facilitated by a more explicit focus in creating an infrastructure
supporting the most promising interventions and integrating/connecting them in ways that maximize their joint impact” (National Research Council, 2014, p. 276).

Anyone who knows the functioning of Child Protective Services in Spain and the characteristics of the relationship between municipal and specialized social services, will be agree that an experience of this kind is rare, as it is the commitment of both institutions to overcome the status quo, starting a process of real change (not merely cosmetic or unable to correct system limitations), with long-term perspective and following the path suggested by the scientific knowledge currently available: the implementation of evidence-based programs promoting early intervention.
Help, I need somebody; help, not just anybody; help, you know I need someone; help...! About child and family services research that we could learn from

Friday, 16th September - 09:50 - PLENARY SESSION: Connecting Evidence, Research and Practice

Prof. Erik J. Knorth (University of Groningen)

The young person who is addressed in the famous Beatles’ song Help! stands for a huge number of children and adolescents in need of support all over the world. In high-income countries approximately one in every four to five young people meets criteria for psychosocial problems (Verhage et al., 2014) and/or mental disorders with severe impairment across their lifetime (Merikangas et al., 2010). As a consequence, more than ever before there is a strong need for intervention programmes and services that, according to sound evidence, ‘work’. This means that young clients and their parents are effectively supported in better coping with or finding enduring solutions for the problems and disorders referred to above.

Against this background nowadays in an increasing number of countries child welfare professionals experience pressures to work according to the principles of evidence-informed practice (EIP). Gambirill (2008) updated the original medical scheme (Haynes et al., 2002) to a model of EIP in the child and family welfare field wherein practitioners, working with clients, are supposed to be fed by three sources of information: (1) clients’ characteristics and circumstances (including clinical state, risks and opportunities), (2) clients’ preferences and actions (including motivation, cultural affiliations or barriers), and (3) research evidence on psychosocial interventions. The question I want to reflect upon is: Regarding the third source, what evidence or knowledge on services could be valuable for practitioners, and what can be done to facilitate the learning from and incorporating of that evidence in practice?

Given this question I would like to comment on experiences and findings in a partnership in the northeastern part of the Netherlands (600,000 inhabitants): the academic Collaborative Centre on Care for Children and Youth (C4Youth), aimed at children and adolescents with emotional and behavioural problems and their families. An academic collaboration centre is a (knowledge-centred) infrastructure in which research, practice, education and policy engage in long-term collaboration to enhance the quality of care and treatment of vulnerable groups in the (local) society. The primary goal of C4Youth is to promote the exchange of knowledge between the realms of research, practice, education and policy (Knorth et al., 2011). Its second goal is to gather evidence on both the functioning of the entire chain of care for children and adolescents and on long-term outcomes, realized by the implementation of a longitudinal prospective cohort study called TakeCare (Tracing Achievements, Key processes and Efforts in professional care for Children and Adolescents Research). Van Eijk et al., 2013; Verhage et al., 2014). The study covers the fields of preventive child healthcare (PCH), child and adolescent social care (CASC), and child and adolescent mental healthcare (CAMH). The aim of this major study is not only to gather knowledge about the care and treatment offered to children and families but also to explore and share the implications of the evidence with all the parties concerned. Results regarding macro-, meso- and micro-levels of outcomes and implementation will be discussed.

Selected References

to the social-emotional development of three thousand children inside and outside care. Kind en Adolescent Praktijk, 10(4), 192-194 (in Dutch).


The connection between young adults’ future expectations before leaving care and outcomes after leaving care.

Friday, 16th September - 11:00 - Transitions to Adulthood from Care

Dr. Yafit Sulimani-Aidan (Bob Shapell School of Social Work, Tel Aviv University)

Aim: Studies of at-risk children and adolescents identify having positive future expectations as an important protective factor linked to positive psychosocial outcomes, resiliency, and lower rates of risky behaviors. However, little attention has been paid to the importance of future expectations for care leavers as adults. The aim of this study is to examined the future expectations of young adults who are on the verge of leaving care and the correlation between those expectations and the care leaver’s outcomes a year after leaving care in the areas of housing, educational achievement, financial status, military service, and overall life satisfaction. The study also examined whether care leavers’ expectations for the future predicted their outcomes after controlling for their demographic variables (e.g., gender, ethnicity, family status) and placement history (e.g., total number of placements and total length of stay in current placement).

Methods: In stage I, 277 young adults from 26 care facilities completed a self-report questionnaire in a group setting during last year in care. These young people represented 70% out of all youth aging out of care in the welfare system annually. In stage II, 85% of these participants (N = 236) were interviewed about one year after leaving care through structured phone interviews. The instruments tapped the young adult’s personal background (e.g. gender, ethnicity, and total placements, future expectations and outcomes after leaving care (e.g., educational achievement, financial status, wellbeing).

Findings: Results show that overall the young adults were quite confident about their future achievements. Nevertheless, one-quarter think or are sure that they will not attain a higher education or provide a good life to their children. Also a quarter of them have negative future expectations with regards to employment and mental health Regression analysis results show that after controlling for gender, ethnicity, parent status, total number of placements and length of time in current placement, there is a positive and statistically significant relationship between future expectations and three of the outcome measures: satisfaction with housing, educational achievement and financial status.

Implications and conclusions: The findings indicate the role of future expectations as a source of resilience and motivation for care leavers, and emphasize that positive beliefs about the future are an important component that produce positive outcomes among youth in care. Discussion focuses on the importance of designing programs that addressing care leavers’ self-perception and future outlook as the youth transition to adult life.
Evaluating an Intervention to Prevent Homelessness and Other Poor Outcomes among Youth Aging Out of Orphanages in Poland.

Friday, 16th September - 11:12 - Transitions to Adulthood from Care

Dr. Małgorzata Szarzynska (Opole University), Dr. Małgorzata Gocman (Opole University), Prof. Paul Toro (Wayne State University)

A number of recent studies (in the US, Poland and other nations) have documented that youth often experience homelessness soon after “aging out” of foster care. The present study evaluated an innovative new program that attempted to prevent such experience with homelessness, as well as other negative outcomes, after leaving state care. Building Resilience through Intervention, Guidance, and Empowerment (BRIGE) engaged youth in orphanages in southern Poland at age 17, prior to their expected “aging out.” BRIGE provided emotional and other support for multiple years during the transition to adulthood. BRIGE’s comprehensive focus involved flexibility, home visits, and a preventive orientation. Graduate students in psychology served as mentors and were each assigned 1-2 youth with whom they worked over at least 2 full years.

The first two cohorts of youth served by the pilot BRIGE intervention have a full 18 months of follow-up data (N=9). Structured interviews were done at baseline at age 17, and 6-month, 12-month, and 18-month follow-ups. All 9 youth exited the orphanage between the 6- and 12-month interviews. Other analyses compared the 9 BRIGE clients (at 18 months) to a matched sample from an earlier survey of orphanage youth not served by BRIGE or any other intensive program (N=18).

Significant (p<.05) linear effects, all showing improvements among the 9 BRIGE clients, were obtained in repeated measures ANOVAs on total monthly income and two measures of psychological distress (i.e., obsessive-compulsive and paranoid symptoms). While none of the BRIGE clients experienced homelessness during the follow-up period, 7 of the comparison clients did (χ² (1, N=27)=4.73; p<.05). A significant ANOVA (p<.01) showed that the BRIGE clients had more total income than the comparison group. Implications for future research, intervention, and policy will be discussed and the audience will be engaged in this discussion.

Key words: youth leaving foster care, prevention, homelessness, poverty.
The influence of informal social support on the lives of young people leaving state out-of-home care.

Friday, 16th September - 11:24 - Transitions to Adulthood from Care

Ms. Jacinta Waugh (Department of Social Work, Monash University)

This paper analyses the preliminary findings of a qualitative research project examining the informal supports available to young care leavers in their transition to adulthood. Of particular concern is the way care leavers use informal relationships to meet their basic needs. Supportive relationships are critical to all young people in the transition to adulthood. But positive, lasting relationships that form the basis of mainstream life are rare in the lives of care leavers. As a result they arrive at their notional independence far less prepared for its challenges than young people from the mainstream, for whom this transition tends to be a more gradual and managed process. Relatively little is known about the actual character of care leavers’ informal relationships, nor the specific ways that care leavers use them to meet their basic needs during their transition to independence. This research attempts to uncover some of the detail of their relationship with a community member who provides unpaid support. It examines the character, quality and pattern of interaction in the relationship with a person who they see as important to them. It aims to identify the factors in this relationship that assist in meeting the care leaver’s physical, financial and emotional needs. Ultimately, it aims to enhance existing and potential strategies for developing care leavers’ networks of informal, supportive relationships. This Doctoral research is being carried out in the Department of Social Work at Monash University, Australia.
Getting ready for leaving: improving young people’s experiences of preparing to leave residential care

Friday, 16th September - 11:36 - Transitions to Adulthood from Care

Dr. Leslie Hicks (University of Lincoln), Ms. Jenny Dagg (University of Lincoln), Mr. Nat O’Brien (Catch22)

Objectives

This session reports on an innovative intervention designed to enable improvements in young people’s experiences when preparing to leave residential care. Centering on 15 children’s homes/semi-independent provisions in the north west of England, the programme was funded by the Department for Education. Evaluation was designed as integral to the two-year programme and investigated the intervention at two points in time, with interim findings taken forward into the development of the second year of delivery.

Method

In line with the programme ethos of co-production, a participative approach was used to shape evaluation data collection tools and to gathering data. The evaluation encompassed a full range of perspectives from those involved in the intervention, including: young people; staff working in participating children’s homes/sites; staff involved in extensive training sessions; service managers and project liaison staff; and staff involved in delivering the intervention. Full ethical approvals were granted formally via the relevant ethics committee at the researchers’ host institution.

Results

Findings indicated positive developments in: overall planning and preparation for the future; developing more effective, accurate and accessible records of plans; levels of engagement by staff and young people in preparation; interprofessional practice; and the quality of individual lives. Planning was strengthened by being: joined-up and involving a full range of relevant personnel; accessible to young people; focused on individuals; and up-to-date and relevant, rather than generic. Young people’s ‘Pathway Plans’ needed to be: focused on young people as individuals; accessible to young people, by including shorter, less professionalised summaries; and up-to-date and relevant, not simply recording generic life events.

Training which engaged a ‘vertical slice’ of staff within a site enabled the development of ‘Leaving Care Aware’ organisations, where learning took place from the perspective of others, barriers and enablers were worked on jointly, and there was space to consider how services can work together to improve young people’s opportunities and well-being. Including the voices of young people in training sessions served to enable the consequences of practice to be more keenly recognised. Young people valued their voices being heard and accompanied by transparent action, since this avoided tokenism.

A central, open access and up-to-date website which served as a reference and resource point for young people and staff was pivotal as a source of policy/legislation/rights information to facilitate preparation for independence. Provision of a dedicated and experienced ‘preparation for adult life’ professional enabled staff and young people to develop creative and tailored transition strategies, and served to sustain motivation in this respect.

The emotional effect on staff of preparing young people to leave care was seen to be a potentially powerful barrier to progress which needed to be addressed and supported. This was particularly
important where staff found their value base to be conflicted, for example when beginning preparation with a young person whom they regarded as very vulnerable and ‘too young’. Not all staff had prior experience in helping young people to move on from care. Staff valued support in developing strategies and pedagogical approaches in direct work with young people.

Conclusions
Preparing to leave care increases intensity in already complex lives; settled periods are disrupted frequently and this may result in a tumultuous time for all concerned. Extra support for young people is required to enable positive development. Young people may need long periods of supported transition in order to move away from institutionalised care towards achieving a confident sense of agency sufficient to withstand the inevitable decrease in support.

The overall programme contributed towards offering a better understanding of what is needed to improve young people’s experiences of leaving residential care and to enhance their life chances.
Preserving and memorialising relationships: Exploring young people’s experiences of foster care through the lens of social capital

Friday, 16th September - 11:00 - Fostecare

Dr. Justin Rogers (The University of Bath)

This paper presents findings from a doctoral research project undertaken with young people growing up in foster care in the United Kingdom (UK). The concept of social capital underpinned the study’s theoretical framework. Social capital is a concept of particular relevance for young people in foster care, as they have experienced disruption to their social networks, when they are moved from their families and placed with carers. This network disruption can also be compounded with school moves and placement disruptions. In the UK a young person growing up in foster care has on average four placement moves.

The study adopted a qualitative approach in order to explore how the young people managed their relationships in their social networks and subsequently their access to social capital. To achieve this, visual research methods were utilised across two in-depth interviews with ten participants, which included drawing eco maps with the young people as well as photo-elicitation.

Findings demonstrate that despite the apparent disruption to their social networks, the young people in this study worked hard, often against the odds, to maintain their relationships, networks and access to their social capital. They achieved this in two key ways. Firstly, participants demonstrated their agency by maintaining their present relationships with their family and friends, often through what could be seen as ordinary practices but in the extraordinary circumstance of being in foster care. Secondly, these young people preserved relationships that had ended, or that were impaired, due to the experience of care. They often achieved this preservation through practices of memorialisation.

The paper will highlight implications for policy and practice, which include the need to recognise the value of young people’s personal possessions as they enabled young people to engage in practices to memorialise lost relationships that were important to them. Findings also reinforce the need to wherever possible, support young people in their attempts to preserve relationships across their networks, as this allows them to access social capital.
Which is the contact influence on foster care outcomes? Foster carers and professionals’ perspectives

Friday, 16th September - 11:12 - Foste Care

Ms. Vânia S. Pinto (InED; REES Centre, Department of Education, University of Oxford, UK), Dr. Paulo Delgado (CIEC-Universidade do Minho; InED-ESE Porto, Portugal), Dr. João M. S. Carvalho (CICS.NOVA.UMinho; InED; UNICES/ISMAI, Portugal)

Placement in foster care differs from the one in residential care, essentially because children are integrated in a family environment, which allows the development of a privileged relationship with a carer. Nevertheless, looked after children have the legal right to maintain contact with their biological family, as long as there is no risk associated with it. The organisation and occurrence of contact have better outcomes when relationships between foster carers, social workers, biological family and children are perceived as cooperative and when the different stakeholders are committed. There is a growing interest in research on contact in foster care, which may arise from understanding of the impact that it has on child’s development, well-being, placement stability, and individual plan care.

Considering the positive impact that contact with biological family may have on children and young people in foster care, this study intends to explore the association between outcomes of foster care and the existence, or not, of contact between children and young people and their biological family. It analyses the perception that professionals and foster carers have about children’s reactions during and after visits, difficulties and challenges in carrying them out, and placement outcomes. The questionnaires were completed between October 2013 and March 2014, and included almost all children and young people integrated in foster care in the Oporto District, in the Social Security Institute, I.P., and the Private Institution of Social Solidarity “Mundos de Vida”.

The questionnaire had two versions, one filled by fostering services teams and the other by foster carers. It was possible to collect information, from both participants, about a total of 212 children and young people. Through this questionnaire it was possible to collect data about children’s age and sex, duration of the placement, professionals’ frequency of contact with foster carers, evaluation of foster care regarding its outcomes, attitudes of parents towards foster carers at the beginning of the placement and now, characterisation of contact between child or young person and their biological family, difficulties towards contact occurrence, and professionals’ monitoring of the placement.

Children who had contact with their biological family were younger, and the longer they stayed in placement, the greater was the chance of losing contact with them. Professionals, when compared to foster carers, considered that there was a larger number of children and young people that had contact with their families, perceived a higher percentage of children and young people as expressing positive reactions during and after contact with their biological family, and considered a vaster number of cases where placement was successful.

It can be concluded that contact is understood as relevant for the promotion of biological parents’ emotional connection and the child’s identity construction, however it is not determinant for foster care outcomes in Portugal, where long term placement is dominant. Moreover, these data may indicate that there is a lack of communication between the different stakeholders involved in the foster care process, namely professionals from the fostering services teams, foster carers and biological family. Therefore, these differences need to be further analysed so that the implementation and monitoring of contact in practice can be improved.

Key Words: Foster care; Children’s rights; Children’s well-being; Contact with biological family.
Adversity and Adjustment in Children in Institutions, Family Foster Care, and Adoption

Friday, 16th September - 11:24 - Foste Care

Dr. Jesús M. Jiménez-Morago (University of Seville, Spain), Dr. Esperanza León (University of Seville), Dr. Maite Román (University of Seville), Prof. Jesús Palacios (University of Seville, Spain)

The main aim of this study was to identify the adversity profiles of children in different childcare placements, and to analyse the relationship with their subsequent psychological adjustment. The sample consisted of 230 children aged 4 to 10 years who were in different child protection placements (institutional care, non-kin foster care, kinship care and intercountry adoption), as well as a comparable control group. Information was collected from parent or caregiver interviews and with the Strengths and Difficulties Questionnaire (SDQ).

The results showed that children in the child welfare system had experienced significant adversity before their current placement, accumulating a considerable number of risk factors, especially among institutional care cases and international adoptees. Children in kinship care had experienced less adversity. After a period of time in their respective placements, children’s psychological adjustment was generally positive, but those living in institutional care exhibited the most problems and difficulties, followed by the non-kin foster care subjects. Finally, the degree of children’s early adversity, the initial age of current placement and its duration were found to be all related with children’s current psychological adjustment.

These results are discussed and compared with those obtained in previous research in Spain and elsewhere, with a high level of consistency. The results of the study also suggest diverse directions for professional intervention in child protection.
The backgrounds of children in out of home care in Wales

Friday, 16th September - 11:36 - Foster Care

Mr. Martin Elliott (Cardiff University)

There has been an unprecedented increase in recent years in the numbers of applications through the law courts in England and Wales to place children in out of home care (‘looked-after’ children). This increase followed the publication of a review in 2008 into the death of a young child, Peter Connelly, which became highly politicised. From a Welsh perspective, initial analysis of administrative data suggests that children in Wales are now on average one and a half times more likely to come into out of home care than their peers in England. Welsh local authorities also have some of the highest rates of children in out of home care of local authorities across England and Wales. Whilst having rates generally much higher than those of English local authorities there is also significant variation in rates between local authorities in Wales. Both the differences in rates of children in out of home care between England and Wales and the variation in rates between Welsh authorities clearly identify this as a policy area which requires urgent investigation in Wales.

Using a quantitative analysis of six years’ (2008 – 2014) routinely collected administrative data relating to every child (N=15,228) who has spent time in out of home care in Wales, the intention of the research is to explore these variations using both aggregate and child-level data.

The analysis of the data fits into five defined analysis strands. The following is a summary of each of the strands indicating which research questions they are intended to address

Aggregate level - Based on an analysis of publicly available administrative data what are the characteristics of the out of home care population in Wales at a local authority level?

Differences within and between local authorities over time - Based on an analysis of child-level data are there differences between Welsh local authorities in the nature of the ‘flow’ of children and young people in and out of out of home care over time?: and are there differences between authorities in the characteristics of children and young people (age profile, sex, legal status, reason for being placed in out of home care, etc.) in out of home care and do those differences explain variations in overall rates?

Social inequalities - Is there a correlation between indices of deprivation and out of home care rates at the level of small area geographies in Wales?

Re-entry to care / Cessation of care - What are the factors that predict children returning to care and/or cessation of a period in out of home care?

Child-level England / Wales comparison - How do the findings of the analysis of child-level data for Welsh authorities compare to data collected by a parallel study being undertaken in England?

The presentation will focus on early findings from two of these analysis strands, ‘differences within and between local authorities over time’ and ‘social inequalities’. Early analysis findings have included, identification of a relationship between the proportion of children of certain age groups entering out of home care within a local authority and that authority’s overall rate of children in care.
The population’s confidence in the child protection system - a survey study of England, Finland Norway and the U.S. (California)

Friday, 16th September - 11:00 - Comparing Child Protection Systems

Ms. Ida Benedicte Juhasz (University of Bergen), Prof. Marit Skivenes (University of Bergen)

This paper examines the confidence the population (N=4003) has in the child welfare system in four countries; England, Finland, Norway and the U.S. (California). We find that about half or less of the population reports having confidence in the system, which is slightly higher than the confidence in the civil servants in the same countries. The Nordic countries display more confidence in the child welfare system than the Anglo-American countries. The similarity between the countries is however greater than anticipated. As for independent variables that can shed light on differences in confidence level, we find three variables to be related to a higher confidence level, and these are a left wing political orientation, lower age, and higher education. This study contributes in filling a knowledge gap on studies about trust in the child welfare system, but we emphasize that we have studied an aspect of trust that rests on the population’s impressions of a system, and not their substantial knowledge about or identification with this system.
A qualitative comparison of three child protection systems in three countries

Friday, 16th September - 11:12 - Comparing Child Protection Systems

Dr. Laura Schwab Reese (Kempe Center, University of Colorado), Dr. Karen Albright (University of Denver), Dr. Richard Krugman (Kempe Center. University of Colorado)

Background:
Child protection systems (CPS) in the Belgium, the Netherlands, and the United States have historically differed in structure and function. From the early 1970’s, the CPS in Belgium and the Netherlands have been situated within the healthcare system. In contrast, the CPS within the United States has been situated within the criminal justice and human services departments, although there has been some variation in approach across states and counties. It has been anecdotally reported that these systems underwent significant changes over the past 25 years. To our knowledge, there has been no systematic comparison of the CPSs, nor have the trajectories of their evolution been studied. To address these limitations in the literature, we are conducting a qualitative study with administrators and front-line workers in the three countries, using Colorado as the representative state within the U.S. An in-depth understanding of the differences in systems and their evolution may provide an opportunity to learn from the strengths and weakness of each system.

Hypothesis:
In the absence of data on the short and long-term outcomes of each CPS, we hypothesize that changes in CPS policies and practices are driven by political responses to media and popular opinion, as well as by cultural norms and structural constraints.

Methods:
We conducted 73 in-depth, semi-structured interviews with national, state, and local administrators and CPS workers in Belgium, the Netherlands, and Colorado. We intentionally sampled administrators and workers from across geographical locations, including urban and rural regions in each location. Interviews were designed to examine administrators’ and workers’ perceptions of the structure and function of their CPS system; their perspectives on how and why the structure and function of their system has evolved; perceived strengths and weakness of the processes and outcomes of their systems; and the evaluation of short- and long-term outcomes within their systems. Interviews were conducted in either English or Dutch by members of the research team trained in qualitative data collection, digitally recorded, and transcribed verbatim. Each interview lasted approximately 60-75 minutes.

Transcription and, where applicable, translation of audio recordings of each interview is ongoing and expected to be fully complete by mid-June. Consistent with established qualitative content analysis methodology, we used an iterative process for the analysis that began with initial data collection and has continued through the coding process. To begin, we read transcripts multiple times in order to achieve immersion, then engaged in reflexive team analysis using an emergent rather than a priori approach. This emergent approach emphasizes respondent perspectives and de-emphasizes team speculations. Through this process, initial codes were established and applied to the transcripts. Throughout the coding process, we met regularly to discuss emergent codes, themes, and patterns, to confirm inter-coder reliability, and to triangulate data. We expect to complete the coding by the end of June and have preliminary analysis available to present in September.
Traditional versus standardized approach in Norwegian Child Welfare: a comparison

Friday, 16th September - 11:24 - Comparing Child Protection Systems

Mrs. Inger Kristin Hegdalsvik (Bergen University College), Dr. Per Arne Rød (Bergen University College)

Objectives

In recent years there has been an ongoing discussion regarding risk reduction technologies versus discretion as a human oriented judgment drawing upon administrative systems and different professional and systematic methods. Several countries have developed different frameworks to help and facilitate practitioners to make assessments.

In Norway, the term “traditional approach” is often used to describe the assessment work done by case-workers. The term is of the authors understood as a combination of regulations by law, guidelines for interventions and deadlines, certain national principles, knowledge of psychology, different municipalities’ decisions of how to make assessments, different methods, ethics and discretion.

Since 2007 a template “Kvello-malen” has been developed as an electronic template and implemented in about 60 % of the Norwegian Child Welfare services. The purpose is to help case-workers in child welfare services to improve assessment practice and systematize their work.

Two main questions in our study were: 1) is it possible to discover a difference in how utilizing of a standardized template or not influences the case-workers’ assessments, and 2) does it make a difference when it comes to final decisions?

Method

To gain knowledge of the case-workers’ working process related to transition of a referral and the initial work in an investigation, we chose focus group interview as a method. The sample consists of six focus groups with a total of 36 child welfare case-workers. These 36 case-workers were working in three different municipalities in three different cities in Norway. Each service is represented by two focus groups. One service had implemented the template. The population of the municipality and service that has implemented the template is 125,000 people.

The two services that had not implemented the template had been trained in how to use it, but had not implemented the template as a standardized mapping-tool in their service. Their population consisted of 46,000 and 37,000 inhabitants, respectively.

The case-workers were asked to assess the information given as a regular referral. They were first presented a vignette (case 1) constructed as a first referral. This vignette was constructed for the purpose of this study, and the study is descriptive in terms of looking at how professional social workers make decisions in the real world of practice. The case-workers in all six focus groups were instructed to carry out assessments as they usually do when they receive a referral. They were also asked to give a signal when they considered their discussion as completed.

After a short break, they were presented a new vignette (case 2) containing more information about the same children as in case 1, but with a summary of the first conversations with the family.

Results

An intention was to avoid a discussion of “what is the best approach.” Our objective was to eventually locate and consider strengths and weaknesses of the different approaches. Based on the
assessments of the vignette in the study, we found that the assessment process, in terms of traditional or standardized approach, was different in several areas. The caseworkers who assessed the referral in terms of a specific template, discussed according to stages of the template as a framework and a structure. The caseworkers who assessed according to a traditional approach carried out their discussions characterized as sequences of fragmented decisions. However, interestingly, the final conclusion regarding the children involved, turned out to be quite similar in all six groups.

Conclusion

The results of our study indicate that there are pros and cons regarding both approaches. Our conclusion from the present study points towards the importance of a combination of a consciousness standardization and an awareness of professional discretion.
Child visibility in families and child protection work across welfare contexts

Friday, 16th September - 11:36 - Comparing Child Protection Systems

Ms. Ida Bruheim Jensen (Faculty), Dr. Ingunn T. Ellingsen (University of Stavanger), Prof. Ingunn Studsrød (University of Stavanger)

Social workers of today work with complex families that may have multiple and intersecting problems on areas as drug/alcohol abuse, migration, mental health issues and child welfare (Kuronen et al., 2010). Comparative studies suggest that how social workers understand these families, may direct child protection work practices (Haugen & Kjörudottir, 2015; O’Neill & Gonzalez, 2015; Tembo & Olteadal, 2015). Moreover, different family-policy characteristics are prominent across countries; these may guide child welfare practices (Gilbert, 2012; Gilbert, Parton & Skivenes, 2011; Hantrais, 2004; Skivenes et al., 2014). This presentation focus on how children are visible in families and child protection work in the views of social workers and social work master students across national contexts. Among others, this topic may elicit crucial insight on children’s participation in child welfare interventions across national borders compound of diverse family-policy characteristics.

The objective of the presentation is twofold; first, preliminary findings from two data sources are presented. Second, the presentation deliberates differences and similarities between and within national contexts and discuss implications of these.

The relevant data material is: (1) focus group discussions among social workers in the three welfare contexts Mexico, Chile and Norway. Based on a vignette presenting a complex family case, social workers deliberate on how to approach the family and how they would intervene in their everyday practice. Thematic content analysis of child-focused statements investigate how children are visible in the discussions. Moreover, (2) data also derives from a dialogue seminar where social work master students deliberate on child visibility within the family and in child protection work practices in their home countries. The sample of master students represent a diversity of national backgrounds and can give insight to various understandings on the topic. The data material presented will serve as a pilot study for a PhD project at the University of Stavanger. The PhD project relates to the NORFACE project Family Complexity and Social Work in Different Welfare regimes. The NORFACE project seeks to compare social work with complex families across welfare regimes.

The preliminary results in the presentation will shed light on the interconnections between child visibility in families and child protection work. Moreover, results may elicit important insight and awareness of the potentials and barriers when it comes to including children in social worker’s everyday practice across welfare contexts.

References


Children’s Guardian in England and Child’s spokesperson in Norway: their objective and tasks in care order decisions

Friday, 16th September - 11:48 - Comparing Child Protection Systems

Ms. Marie Føleide (Centre for the Study of Professions (SPS) - Oslo and Akershus University College of Applied Sciences)

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Objectives

Child participation is an increasingly important policy topic in child protection proceedings and decision-making. Children have the right to be heard, as informed by article 12 of the Convention on the Rights of the Child. In General Comment 12, the Committee on the Rights of the Child acknowledge that the term ‘right to participation’ has become more and more common, despite not featuring as a term in the CRC. The Committee states that the term describes a process of ‘information-sharing and dialogue between children and adults’ (CRC GC 12: 5). It further states that, in order to implement article 12, there must be meaningful participation embedded in continuous processes. The study will present the objectives and formal framework of the Children’s Guardian in England and the Children’s spokesperson in Norway. The aim of this study is to present and compare the countries’ approach on child participation in care order proceedings.

Method

The study is based on document analysis of laws, guidelines and relevant literature in England and Norway. The most relevant laws are the Children Act 1989, Section 41 in England, and the Child Welfare Act 1992, Section 7-9 in Norway. Other vital documents are draft resolutions, bills, regulations and inspection reports. A description is given of the framework that the guardians and spokespersons operate within, and the terms of their qualifications and training. Instructions on their role, tasks, and their level of independence and impartiality are compared.

Results

England and Norway have different and diverging arrangements on how to present the view of the child, both in terms of children’s legal safeguards and participatory rights.

Conclusions

The findings of the study show an expansion of the requirements for documentation and participation of the child in child protection cases in both countries. The indication is clearer in England than in Norway, where there are clearer stipulations of the factors that need to be considered both in law and in practice (Archard and Skivenes 2010; Samonsen and Willumsen 2015). At its completion, the PhD research project hopes to contribute to a body of knowledge on children’s legal safeguards in child protection.
Strengthening Communities one biography at a time

Friday, 16th September - 11:00 - Preventive Interventions

Mr. Seamus Mannion (Youth Advocate Programmes Inc.), Ms. Doriemme Silva (Youth Advocate Programmes Inc.), Ms. Diana Matteson (Youth Advocate Programmes Inc.)

The model developed by the Youth Advocate Programmes is a response to the broad strategy of providing Community based support to high risk families and is part of National and International strategies of keeping young people out of institutional and residential care and supporting them integrate into their local communities. The model was developed as a response to a significant challenge for society of high risk youth and families who traditionally reject school, exhibit antisocial behaviour and end up costing the State/Local Authorities significantly.

The model combines the established practices of Wraparound, Mentoring, Family Support, Positive Youth Development and Restorative Justice in the context of offering a culturally competent intervention to people who may have challenging behaviour, have Mental Health difficulties, Autism, a disability or come from cultural minorities.

The model is based on the fundamental premise that everyone has strengths.

The intervention provides for a paid Advocate who comes from their local community to ensure cultural competency, who mentors the young person through their issues, builds a sustainable trusting relationship that impacts on the attitudes, behaviour and outcomes sought. The aim is to have the young person become an asset to rather than a drain on their community.

The Advocate will develop an Individualized Service Plan(ISP) for the youth based on the interconnected needs and strengths of the young person by mobilizing formal and informal supports within the youth’s natural community. The plan is tailored to the unique needs and strengths of each family. A respectful partnership is developed with the family members who are productive collaborators in the intervention, and the ISP.

The model is only achieved through an effective wraparound of the family and so the partners will mainly include family members, extended family, Social Services, local Health Agencies, Juvenile Justice or Probation, local community agencies and at times local employers. The Advocate assembles the key stakeholders to formulate the needs of the youth and family and ensure the services are wrapped around the family before the Advocate withdraws. When YAP is invited to intervene, they assess the situation and an Advocate will meet with the youth and thereafter for a determined number of hours per week in their home, school or community, normally between 10-15 hours. However the service is available 24/7.

The model is evaluated for short and long term outcomes through an outcomes system to measure its impact and through an outcomes booklet to help the youth see how they are changing their lives. These measurements are taken at the beginning and end of the service intervention across 4 domains, Self, Family, Education/Employment or Training and Safety/Offending Behaviour.

A recent longitudinal evaluation of the model by the NUI Maynooth concluded that the model had a statistically significant impact on the outcomes of the youth.

Model was also highlighted in Peer Review funded by the European Commission, 2015. The publication aimed to identify effective solutions and strategies for social inclusion of different disadvantaged groups. The YAP model is included in the 31 good practice models from all across Europe which emerged following a highly structured and critical examination of over 290 good practices.
In conclusion the critical factors to the success of the model are:
1. Matching an Advocate to the Youth (provision of a trusting relationship)

2. The training provided to the Advocate and support by the line manager.

3. The Never Give Up attitude of staff (No eject/No reject approach)

4. Family feel listened to and supported .

5. Adaptability of the model and flexibility of staff

6. 24/7 support as so many issues arise with families out of office hours.
IDE-AS in action. Participative practices of evaluation in the home-care intervention field

Friday, 16th September - 11:12 - Preventive Interventions

Dr. Sara Serbati (University of Padua), Dr. Andrea Petrella (University of Padua), Prof. Paola Milani (University of Padua)

This paper describes the relevance of evaluation criteria and participative practices in the improvement of home-care interventions (that in Italian sounds Intervento Domiciliare Educativo - IDE, since the name of the project IDE-AS in action) responding to problems connected to child-neglect. The project is focused on the Municipality of Trento (Italy) and the aims are I) to introduce new participative methods of evaluation based on tools both quantitative and qualitative and II) to identify effective practices and analyse them with practitioners and families since the results of evaluation tools and through other qualitative tools. A local Foundation (CARITRO) funded the IDE-AS project and in order to carry out it, the Municipality of Trento is supported by Labrief, a research unit within the University of Padua (Italy) concerned with action-research in the field of family education.

The methodology is based on PIPPI program (Program of Intervention for Prevention of Institutionalization). The project is organised according to different phases and developed through different research tools. Since it’s an action-research programme, in the first phase particular attention is paid to training meetings for social workers and educators. The scientific group together with the social workers select ten families (Target Families, TF). The TF have been selected according to some requirements, such as the age of the child (4-14 years old) and the existence of problems related to parenthood (child neglect, vulnerability) and of a cooperative and non-conflictual environment between parents and social services.

With the TF new participative evaluation criteria in the care planning and in the interventions are introduced and applied. The assessment and care planning of home-care interventions is conducted in three different times (T0, T1, T2) with the fundamental involvement of parents, children, teachers, psychologists or psychiatrists, social workers and educators. This participatory evaluation is carried out through: (1) our Italian adaptation of the British Framework for the Assessment of Children in Need and their Families, including (1a) the related questionnaire to measure family-functioning and (1b) the grid useful to build the shared assessment and care plan. Moreover they are used (2) SDQ and (3) MsPSS questionnaires, that measure respectively children’s behavior and families’ social support, and (4) Protective Factors Scale and (5) Multidimensional Self-esteem Test.

The tools are filled by different targets (parents, children, home-care workers), replicated in the different times (T0, T1, T2) and analysed through a specific software. The ten TF are compared with ten families in which home-care interventions are organised according to local conventional standards, using the same questionnaires (1a, 2, 3, 4, 5). Moreover, the project asks to practitioners of TF (and particularly to home-care workers) to collect the detailed actions conducted with children and families through the completion of an Interventions with families grid.

Finally, the project provides a specific and detailed focus on two families through in-depth interviews, in order to detect the effectiveness of the interventions and to analyse the relationship established among family members and practitioners.

Periodically the researcher holds a withdrawing session in order to conceptualize and write down ideas since all the material gathered (care plans, questionnaires, intervention grids, interviews).

456
These preliminary insights are given to the team of practitioners and to the families’ group as feedback for further analysis.

Results The project lasts two years and now it is at its starting point; the presentation will analyse the partial results and actions collected after the first phase of the research (T0).

Conclusions The action-research is expected to provide more findings and recommendations in order to promote cooperative and participative practices of evaluation within social services and to reinforce effective practices in the field of home-care intervention.
Adapting a Promising Multi-Faceted Child Maltreatment Preventive Intervention - Grandparent Family Connections (GFC)

Friday, 16th September - 11:24 - Preventive Interventions

Dr. Pam Freeman (University of Maryland, Baltimore), Dr. Diane Depanfilis (Hunter College), Dr. Fred Strieder (University of Maryland, Baltimore)

Objectives: Grandparents are increasingly the primary caregivers to grandchildren, with approximately 5.5 million children under the age of 18 living with a grandparent in the U.S. This paper will: 1) present intervention adaptations required to meet the needs of grandparent caregivers; 2) compare the results across treatment conditions on family risk and protective factors, child behavior, and child well-being; and, 3) demonstrate how assessment measures can be integrated into a program informing clinical practice and research.

Methods: Targeted families included grandparent caregivers who were caring for grandchildren between the ages of 5-11 years residing in Baltimore City, specifically targeting Baltimore’s Westside Empowerment Zone. Eligibility criteria for the program included: (a) a referrer’s concern that at least one of the 19 neglect subtypes (e.g., unsafe housing conditions, inadequate supervision, inadequate/delayed health care), was occurring at a low level (not yet reportable to CPS) or a perceived risk for one of these subtypes; (b) at least two additional risk factors for neglect related to the child (e.g., behavior problem; physical, developmental, or learning disability; more than three children) or the caregiver/family (e.g., unemployment/overemployment, mental health problem, drug or alcohol problem, domestic violence, homelessness); (c) no current CPS involvement; and, (d) willingness to participate in the program. Although families were permitted to have prior involvement with CPS, families were excluded from the program if they were involved with CPS at the time of the referral.

Using an experimental dismantling design, 120 intergenerational families were randomly assigned to either no treatment (i.e., Information & Referral) or one of three Family Connections intervention groups: (1) FC intervention for three months (FC3); (2) FC for six months (FC6); or, (3) FC for six months enhanced with legal and health services intervention (FC6+). All intervention groups were assessed for risk and protective factors, child behavior, and child-well-being at baseline, at the end of services, six months following the end of services, and 12 months from baseline. The no treatment group was assessed at the same intervals as FC3. Multi-level models were used to account for the nested structure of the data (i.e., observations nested within individuals) because the intraclass correlation ranged from 0.55 to 0.73 based on unconditional models.

Results: While child behavior scores decreased for all treatment groups in the expected direction, changes were small and not statistically significant between treatment conditions; however, significant changes were found for risk and protective factors, and overall child well-being for the treatment condition that received Family Connections for six months (FC6).

Conclusions: Grandparents who assume a caregiving role often report increased distress, social isolation, depression, and deteriorating health following the addition of children to their households. GFC targets intergenerational families at risk for neglect and responds to their unique strengths and needs, through the identification, development, and delivery of services tailored to grandparent caregivers thus mediating the negative consequences of caregiving and promoting family well-being. Based on the results of this paper, for grandparents caring for grandchildren, treatment conditions
lasting for six months provides the most benefit for reducing risk factors, increasing protective factors, and enhancing both child behavior and well-being.
Availability of preventive measures before the out-of-home placement

Friday, 16th September - 11:36 - Preventive Interventions

Dr. Tarja Heino (National Institute for Health and Welfare)

The research makes visible who are the children placed out-of-home today in Finland. The presentation focuses on two questions: What kinds of services and support interventions the child and family received before the child placed outside the home? In what ways these community-based services were not sufficient, appropriate or available for use?

Main data includes: 1) survey conducted on individual children (N=410). This data consists of institutional knowledge, and it is based on documents, knowledge and assessments available for the social workers (N=116) from eight municipalities who answered the questionnaire. 2) Recorded research conversations with the research partners in seven workshops. The quantitative data were processed with statistical methods. The qualitative data were typified.

Nearly all children had received some service (98 %) prior to placement outside the home. While 15% of the children had received all the services deemed necessary by a social worker, as many as 85% had not received some of the services deemed necessary by a social worker. Variation was big.

Altogether 85% of the children, who were placed outside the home during the study period, had been placed outside the home also the previous year, and nearly every other child had been in emergency placement.

The most common service received by the child and family prior to placement outside the home was support through the school and student welfare services as well as through family work at clients’ home. One in three families received financial support through child welfare services, and one in four families received support for the child’s hobbies.

There were variations in the availability of services the child needed. The most common availability problem concerned the services of support persons, support families or peer groups: the social worker deemed such a service necessary for the child, but the service was not available. The availability of family and individual therapies as well as treatment of substance addiction was quite poor. There were also cases where the child would have needed the services of a professional support person, peer group or family therapy, but these services were not even offered. Peer group activities were not sufficiently available for parents.

15% of the children did not receive the service they needed because either the child or the parents refused the service. This concerned especially individual therapy for the child and young person as well as other forms of therapy, but also treatment of parents’ substance addiction, psychiatric care, and rehabilitation for the whole family. Parents also lacked the motivation to join peer groups.

The social workers evaluated the effectiveness of the services received by the children (assessed if the service had helped the child by improving its situation). Support from school has worked for better for most of the children, also home-help services, family work, supportive child daycare, monetary support and vacation and camp activities had helped the children and improved their situation. Anyhow, these were not always enough.

In 40% of the cases the child would have needed more time from social worker. Working with the family as a whole was devoted the most time, followed by documentation. The larger family seemed
to get less involved in case work. The case load was big, and 47% of the cases were emotionally very stressful.

It was just not the individual child and family matters that matters, but also community factors connected to social work. Municipality level were deemed to have impaired the social workers’ conditions to deal with the child’s case in 40% of the cases, while in 15% of the cases they had improved the conditions.
The art and science of implementing evidence-based child maltreatment preventive intervention in the real world

Friday, 16th September - 11:48 - Preventive Interventions

Prof. Diane DePanfilis (Silberman School of Social Work, Hunter College)

Objectives: Evidence based practices in child welfare have received a great deal of attention in recent years. However, implementing a well specified intervention in the real world is complex. Many interventions have initially been determined to be efficacious in controlled settings, not in the real world. Bridging to the realities of often attached to public and private child welfare systems that mandate policies and procedures outside of the actual practice requires careful consideration. Furthermore, the workforce in child welfare systems has a mix of educational backgrounds and often workers do not have advanced degrees. This could be challenging to implement some evidence-based practices that require higher levels of education or skill. This paper emphasizes the art and science of implementing evidence-based practice in the real world of child welfare and applies the National Implementation Research Network’s active implementation framework to a large-scale effort of implementation of an efficacious child maltreatment preventive intervention in a major U.S. city.

Methods: Collaborative partnerships were formed to support implementation activities related to a strong leadership structure across eight preventive programs. Strategic staged implementation activities were installed and supported to develop and sustain support for organizational systems including using assessments of organizational culture and climate and convening community advisory committees. Finally, capacity was built to continue to build competency via supervisory coaching, local training teams, and a supervisory learning community. All activities were intended to build and sustain high fidelity to the intervention.

Results: Some stage based activities worked better than others. Competing demands on agency leadership, turnover of case planners and supervisors, and limitation of agency resources to build strong infrastructure were identified as barriers. However, vision and overall commitment of leadership to stick together through difficult times has ultimately resulted in sustained implementation of the preventive intervention with medium to high fidelity (average of 70% to 92% for most intervention components). Key ingredients to success were: a cross-agency implementation team that met monthly; high competence among a core group of supervisors who could be developed as trainers; individual and group coaching for supervisors during the first two years of implementation; and weekly individual and group supervisory coaching provided to case planners.

Conclusion: Attending to the complex environment of a child welfare system is essential to install, support, and sustain the effective implementation of evidence-based practice in child welfare. Implementation activities should be staged and tailored to the unique strengths and needs of implementation sites over all stages of implementation.
Using interrupted time series data to assess the efficacy of the CARE program model for residential care.

Friday, 16th September - 11:00 - Residential Care

Dr. Elliott G. Smith (Cornell University), Dr. Charles Izzo (Cornell University)

The current study examined the impact of a setting-level intervention on the prevention of aggressive or dangerous behavioral incidents involving youth living in group care environments. Eleven group care agencies in a southeastern U.S. state implemented Children and Residential Experiences (CARE), a principle-based program that helps agencies use a set of evidence-informed principles to guide programming and enrich the relational dynamics throughout the agency. All agencies served mostly youth referred from child welfare. The 3-year implementation of CARE involved intensive agency-wide training and on-site consultation to agency leaders and managers around supporting and facilitating day-to-day application of the principles in both childcare and staff management arenas. Agencies provided data over 48 months on the monthly frequency of behavioral incidents most related to program objectives. Using multiple baseline interrupted time series analysis to assess program effects, we tested whether trends during the program implementation period declined significantly compared to the 12-months before implementation. Mixed effects negative binomial regression models were constructed to carry out the analyses, adjusting for between-agency variability at the start of the intervention and over time. Results showed significant program effects on incidents involving youth aggression toward adult staff, property destruction, and running away. Effects on aggression toward peers and self-harm were also found, but were less consistent. Staff ratings of positive organizational social context (OSC) predicted fewer incidents, but there was no clear relationship between OSC and observed program effects. Findings support the potential efficacy of the CARE model and illustrate that interventions at the setting level may contribute to preventing coercive caregiving patterns and increasing opportunities for healthy social interactions.
Evaluation of therapeutic approaches to social work in residential child care settings

Friday, 16th September - 11:12 - Residential Care

Prof. Geraldine Macdonald (University of Bristol), Dr. Sharon Millen (Queens University, Belfast)

Following a regional review of residential child care in 2007, the five health and social care trusts in Northern Ireland introduced ‘therapeutic approaches’ in a number of children’s homes with the aim of improving staff skills and outcomes for young people. This evaluation focused on the five therapeutic approaches developed in response to the recommendations of the Regional Review – Social Pedagogy, Children And Residential Experiences (CARE), Sanctuary, Model of Attachment Practice (MAP) and Attachment, Self-Regulation and Competency (ARC).

Objectives: The evaluation aimed to provide: a description of each approach and the reason for selecting it; details of how each approach works in practice and the resources needed to make it happen; views of different stakeholders (including staff and young people) on how the approach works in practice; early indications of whether the approaches are effective/ineffective and why; evidence of organisational/contextual factors that help or hinder the successful implementation and evidence of what is needed to continue each approach.

Methods: The study comprised three phases: (i) a scoping review of the five therapeutic approaches; (ii) qualitative research on experience of implementation and (iii) investigation of impact.

Results: Staff reported improvements in their knowledge, skills, competence and confidence. Implementation of the approaches made a difference to how staff felt, to their morale and their practice. Young people reported changes that reflected these claims by staff that life was less confrontational, children were better understood, relationships improved and fewer serious incidents were happening. Factors for effective implementation included the provision of training and supporting materials, and wider systems working in a supportive manner.

Conclusion: There were a number of similarities across the models in terms of core concepts and essential skills. Whilst the study was unable to address whether one model was better suited than others the evidence strongly supports the value of providing staff with a framework and the necessary tools to do their job and an organisational context that allows a positive approach to children and young people.
Implementing Whole Home Training for Residential Children Homes in the UK context- RESuLT.

Friday, 16th September - 11:24 - Residential Care


This presentation will describe the implementation of a 10 week whole team training, with additional supervision training for Residential Child Care Workers (RCCWs) in England.

RESuLT is an evidence informed training that teaches social learning theory methods, basic neuroscience about the effects of early neglect and adolescent brain development, and focuses on relational skill building.

This presentation will describe how consistent child focused practice can be enhanced through a whole home training,

Children’s homes are undergoing major national reform in the UK and RESuLT is intended to be one programme designed to enhance skill development for residential childcare workers. In addition to providing a shared practice language and methods of working, the training aims to enhance staff communication and motivation at work. RESuLT aims to raise awareness of the effect of RCCWs behaviour and group process on the young people in their care.

The training is rooted in the practice of the staff team and each week RCCWs are expected to practice their learning in the home. RESuLT provides 10 weekly half-day sessions for a children’s home team, plus two half-day supervision sessions for managers, helping them incorporate the learning into practice. The training is delivered by two facilitators, one from the Residential Child Care Sector and the other from Child and Adolescent Mental Health Services (CAMHS).

RESuLT focuses on the ‘Doing, thinking and feeling’ triad of the group process in children’s homes. It promotes the idea that ‘every exchange is a potential intervention’ in children’s homes – an opportunity for children to re-learn helpful relational interaction.

The training has now been delivered to 400 residential childcare workers. Facilitators across the UK from CAMHS and social care agencies are working towards accreditation as RESuLT facilitators. An independent evaluation of RESuLT by Ipsos Mori and the Universities of Loughborough and Bristol reported in Summer 2016.

This presentation will describe the factors which have influenced successful implementation and outline some of the challenges that we have faced. There will be a description of the implementation stages required to provide a fertile ground for evaluation to take place. One such example is ‘How to ensure that the training is delivered as intended’ to safeguard some measure of standardised practice across the UK. To that end the presentation will show some quantitative and qualitative analyses of the application of the RESuLT Fidelity Measure for the 2015-2016 cohort of RESuLT training (RCCWs n=120)

Finally, we will hear from some of the Staff and Young people who have experienced the RESuLT training.
Residential care as a 'permanence' option: a case study

Friday, 16th September - 11:36 - Residential Care

Prof. June Thoburn (University of East Anglia, Centre for Research on Children and Families),
Prof. Gillian Schofield (University of East Anglia Center for Research on Children and Families)

The England Department for Education regulations require that all young people in care must have a ‘permanence plan’. A group care placement is generally used as a ‘last resort’ after usually more than one family placement (adoptive or foster) has not worked out, and is usually seen as a short term measure. Although in the guidance residential care is not included in the list of permanence options, it is recognised that for some young people it can offer ‘security and a sense of belonging’. This paper summarises a case study of a voluntary sector agency providing longer term care in six small children’s homes, and provides outcome data on 65 former residents, aged between 18 and 30.

There is considerable current interest in the ability of group care to contribute to healing the harm suffered by young people subjected to trauma and maltreatment in the family home, often compounded by multiple or poor quality placements in care. The emphasis is often on the model of therapy provided and the ‘therapeutic regime’ for young residents with different needs and behavioural challenges (Whittaker et al, 2015). For several years too, the EUSARF conference has heard papers on providing young people in care with a ‘sense of permanence’. This paper brings these two themes together by describing and evaluating the ways in which one agency has sought to provide ‘a sense of permanence’, stability and ongoing ‘family’ membership (both during and after their stays in the homes) to young people aged mostly between 10 and 15 when they moved in and around 18 when they moved on.

Looking at the different aims of residential care proposed by Ainsworth and Thoburn (2015), ‘care and upbringing’ would fit better with these combined aims than ‘residential treatment’. However, whilst any therapy needed to address the particular issues confronted by residents is sought from community services, it is the day to day parenting provided to each young person which responds to the different ways in which each carries the scars of earlier experience.

Descriptive data are presented from records and questionnaires completed by care workers and by the agency’s moving on service. Drawing on information about income, employment, accommodation, physical and mental health, social support, partner relations, new families, and criminality, and using an approach to assessing wellbeing adapted from Stein et al (2012), ‘researcher rating’ measures of outcomes for the 50 young people about whom there was adequate information.

This mainly quantitative data is enriched by a qualitative analysis of the experiences of a sub-sample of 20 young people and of their residential carers and ‘moving on’ support workers. The paper focuses on what the young people and their carers had to say about how a sense of belonging and family membership was provided both during their stay and after they moved on. These stories are linked to increased resilience, achieved through the combination of close relationships and constructive activities which supported better outcomes than would be expected, given their histories.

We conclude that this case study demonstrates that, for those young people for whom this is the appropriate placement option, and especially when funding is available to support continuing ‘family membership’ after transitioning to adulthood, residential care can provide a sense of permanence and family membership to young people. We argue that the therapeutic impact of being ‘part of a (different sort of) family’ should not be overlooked when considering models of residential therapy.

As such, it addresses two conference themes: Therapeutic Residential Child Care, and Transitions to Adulthood from Care.
Costs of child welfare interventions

Friday, 16th September - 11:00 - Costs of child welfare interventions

Ms. Lisa Holmes (Loughborough University)

This symposium comprises a series of five complimentary papers that explore not only the costs of child welfare interventions, but also how different methodological approaches can be used to evaluate and explore the quality of child welfare systems.

Drawing on a series of empirical studies carried out both in the UK and the US the symposium contributions examine complex issues in relation to how the research evidence can inform value for money debates about child welfare interventions and how the findings from the studies can inform policy and practice.

The first paper provides the context for the session, including an overview of the methods that have been used in the international comparative studies that form later contributions; the paper also provides some examples of how cost effectiveness studies have been used to inform child welfare policy and practice. The second contribution focuses on understanding time use activity data to cost child welfare interventions in relation to child welfare workers capacity, experience and a quality service response. The third paper also focuses on time use data, providing a comparative analysis of two time use studies in the US. An exploration of the costs associated with the implementation of new evidence based programmes and interventions forms the basis of the fourth paper, including illustrative examples from both the US and UK. The final paper centres on a conceptual framework and method to explore the costs of children’s trajectories through child welfare systems.
The role and use of cost effectiveness studies for child welfare decision making for both policy and practice

Friday, 16th September - 11:12 - Costs of child welfare interventions

Ms. Jennifer Haight (Chapin Hall at the University of Chicago), Ms. Lisa Holmes (Centre for Child and Family Research, Loughborough University)

Child welfare services operate with finite resources and need to make decisions about when and how to intervene to produce the best possible outcomes for vulnerable children and their families. This session considers the role and use of cost effectiveness studies to inform policy and practice decision making.

Over several years the Centre for Child and Family Research, Loughborough University and the Chapin Hall Center for Children at the University of Chicago have been collaborating on a number of research projects to develop an internationally comparable (across the UK and US) conceptual framework, methods and analyses to inform the development of cost effectiveness studies and to provide an evidence base for policy makers and senior child welfare managers to make strategic decisions about whether child welfare practice, or specific interventions offer value for money.

This overview presentation introduces the research background and outlines the different methods that have been used to collect time use data that are used for unit cost estimations. These methods include focus groups, verification questionnaires and web-based surveys and the completion of event records (diaries) by child welfare workers.

The session will consider how knowledge about organisational costs associated with workforce issues, such as the recruitment, retention, training and turnover can be attributed to and associated with specific interventions and working environments. These considerations will encompass not only child welfare case workers, but also foster carers and those working within children’s residential care, thereby covering all workforce components of the child welfare system. Connecting these workforce components, the role-specific efforts, and the outcomes those efforts yield, widens the opportunity to be evidence informed in making both structural and programmatic decisions in systems that seek to improve child and family outcomes.

The presentation will also focus on how the methods and findings to date have been used to inform child welfare policy and practice, and to shape further research into the application of time use evidence into decisions about system capacity and structure. These include:

1) An exploration of the ‘hidden costs’ of service provision such as the different referral and assessment routes to access a range of services and interventions;

2) The costs of the contracting and commissioning processes, and as such the relationship and cost comparisons between public and private agencies in the child welfare system;

3) The proportion of time child welfare workers spend on direct work with families compared to administrative activities, whether this time use can be re-configured, and whether there is a relationship between proportions of time spent and quality of case work;

4) The extent to which outcomes based contracts which are developed to reward strong performance can be structured to reflect practice and policies which are shown to be cost-effective and associated with improved outcomes.
5) Case studies of jurisdictions in the United States which have taken advantage of Title IV-e waivers that allow flexibility in the use of entitlement funds previously available only to offset the costs of out-of-home care. Time use data collected in these jurisdictions may be used to support re-investments of federal and state funding into those case practices and policies that are associated with strong outcomes – including improved prevention as well as more timely permanency.

Taken together, these areas reveal the important ways that the research evidence collected through cost-effectiveness studies can be targeted to promote thoughtful program, policy and practice innovations designed to improve both the structure (the workforce architecture) and the functional components (role-specific work activities) of a child welfare system.
Attitudes and allocations: The relationship between workers’ perspectives about their jobs and time spent on casework activities

Friday, 16th September - 11:24 - Costs of child welfare interventions

Ms. Kerry Price (Chapin Hall at the University of Chicago), Dr. Sara Feldman (Chapin Hall at the University of Chicago), Dr. Fred Wulczyn (Chapin Hall at the University of Chicago), Dr. John Fluke (Kempe Center for the Prevention and Treatment of Child Abuse and Neglect), Dr. Dana Hollinshead (Kempe Center for the Prevention and Treatment of Child Abuse and Neglect)

Objectives: This study brings together two streams of research, each of which has the potential to inform and improve the capacity for (cost) effective implementation of evidence-informed programs and policies in the child protective services environment. For decades, scholars have studied the characteristics of workers and the extent to which personal qualities and perceptions influence a range of outcomes, such as worker burnout, job retention, and case-level outcomes. Various approaches have also been taken to better understand how workers use their time on the job; the potential here is to better align time allocation with system values (more time with families, less time on administrative tasks) and to ensure workers have the training they need to be effective in the time allotted. In this study we explore the relationship between child welfare workers’ perspectives and attitudes about their work and how they allocate time to an array of case-specific tasks. We hypothesized that workers with more negative worker attitudes will report time use patterns that are different (higher or lower) than the time use patterns reported by their less negative peers. That is, we hypothesized that workers’ attitudes about/perspectives on their work would be associated with the time they take to carry out casework activities.

Methods: An online staff survey was administered to 209 child welfare workers and supervisors (both in-home and foster care) and other administrators across four regions within a large Southern state in the U.S., with a 65 percent overall response rate. Respondents were presented with field-tested scales measuring their attitudes about child welfare work, perspectives on supervision and other aspects of their job, and perception of their own skills, amongst other scales. Using a method developed by researchers at Loughborough University, England, focus groups and an online survey were used to estimate the time workers spend on a comprehensive set of case-related activities. Time use data was collected from 309 workers across the same four regions, representing 100 percent of recruited workers. The resulting datasets were then linked, providing a full view of workers’ time use patterns and work-related attitudes and perspectives. After adjusting for non-response and other record matching issues, the linked dataset contains both attitudinal and time use data for 115 unique child welfare workers.

Results: Workers were asked to assess their proclivity towards child safety or family preservation. Case carrying and male staff appear to be more inclined towards a child safety orientation; regional variations were also evident. Findings from the time use study suggest that workers spend a fairly high proportion of their time on administrative tasks such as scheduling conferences, setting up family visits and documenting casework contacts. Workers are also spending a considerable amount of time monitoring family visits. Overall, communicating with family members, either in person or over the phone, accounts for about 30 percent of a worker’s time maintaining one case during a typical month. Analyses will be presented addressing: (1) the hypothesized relationship between time spent in direct contact with families and workers’ orientation towards family preservation; (2) the length of time one has been involved in child welfare work and its relationship to time spent
on administrative activities; and, (3) the association between confidence in local services and time spent on administrative tasks.

Conclusions: The results of this study suggest that worker level attitudes and characteristics may have an impact on the way workers’ use their time. Future research will extend the analysis presented here by considering the extent to which worker attitudes and perceptions and time use patterns influence key case outcomes, and potential cost effectiveness of different elements of the child welfare system.
How child welfare workers spend their time: A comparison of two US child welfare systems

Dr. Sara Feldman (Chapin Hall at the University of Chicago), Ms. Kerry Price (Chapin Hall at the University of Chicago), Dr. Fred Wulczyn (Chapin Hall at the University of Chicago)

Objectives: There are a host of methods currently being used to understand how much time it takes child welfare workers to execute the various functions of their job, such as journaling (time logs), shadowing, and random moment surveys, to name a few. Each of these methods has in common the use of the worker as the unit of analysis. In a major departure from this tradition, the method used for the current study – the Cost Calculator for Children’s Services, or CCICS (developed by researchers at Loughborough University, England) – takes as the unit of analysis a single child, asking the question: how long does it take to complete the necessary set of casework activities for one child? The focus on the child as the unit of analysis allows for an understanding of the time allocations (and related costs) associated with particular groups of children (i.e., babies versus teenagers) or for particular types of experiences (i.e., reunification versus adoption). Another major strength of the CCICS method is its conceptual framework: a core set of eight activity clusters or “processes” that are used to organize the tasks workers are required to do. This structure has been shown to be applicable across child welfare service systems in a number of countries. In this study we compare findings from two CCICS studies conducted for two separate U.S. child welfare systems. The two systems differ in important regards, such as the extent to which they rely on private agencies for the provision of foster care services; the presence of a major urban center; and, their staffing structures. We explore patterns in the data and consider the policy implications both in terms of observed consistency in time use patterns and differences in the amount of time workers spend on key casework activities.

Methods: First, participant observation and interviews were used to better understand each system’s processes of care, local terminology, and staff roles. Focus groups were conducted to confirm the researchers’ understanding of the system and to generate preliminary time use estimates. Focus group data informed the development of a series of web-based time use surveys, which were administered to frontline and supervisory staff. Survey data were verified (establishing their feasibility) through the use of administrative, child level data. Time use data were then compared at the item and process level. An independent samples’ Student’s t-test was used to assess for statistically significant differences in the time workers from each jurisdiction spent on activities associated with each of the eight casework processes.

Results: Survey data for 601 unique child welfare workers are included in this analysis (n=206 in one jurisdiction; n=395 in the other). Workers from the two jurisdictions spent remarkably similar amounts of time on certain tasks, such as those related to non-court case reviews, legal activities, and activities related to discharging a child from foster care. There were some notable differences as well; for example, in the time workers spend developing the initial permanency plan; managing an unplanned placement change and maintaining a case on a monthly basis.

Conclusions: These findings offer additional evidence of the applicability of the eight processes as a way to organize the various tasks associated with work in child protection services. Findings from this study suggest that child welfare policies and system structures can have a strong impact on how workers spend their time on key casework activities. In the next phase of the work, these time use data will be linked with children’s administrative records, allowing for the consideration of the relationship between time use patterns and child-level needs and outcomes.
The Cost of Implementing New Strategies (COINS): examples from the US and UK

Dr. Lisa Saldana (Oregon Social Learning Center), Mrs. Samantha McDermid (Lo), Mr. Mark Campbell (Oregon Social Learning Center)

Objectives
This presentation will describe the Cost of Implementing New Strategies (COINS) method and provide examples from collaborations occurring within the United States and United Kingdom. When agencies, states, or other entities decide whether or not to implement a new practice they are faced with considering the costs of delivering that practice along with the costs associated with going through the implementation process itself. This can be daunting, especially when implementation costs are likely to differ not only across evidence-based practices (EBPs), but also between different implementation strategies, and contexts. Although leading frameworks include conceptualization of implementation process costs, such costs are unstudied.

Child welfare agency decision-makers are particularly challenged to provide the highest quality services with limited resources and multiple competing policy initiatives and demands. Opportunity costs must be considered against the uncertainty of future benefits. Knowing when different types of costs can be expected during the implementation process could prove critical in helping decision makers map out a clear fiscal plan to ensure proper and timely resource allocation. Thus, standardized methods for assessing implementation costs that take into consideration different contextual landscapes are critical.

Method
The COINS method was developed to address the gap in standardized assessment of implementation costs. Implementation processes have been defined for a range of EBPs using the Stages of Implementation Completion (SIC). The SIC is an observational assessment of agencies adopting new EBPs, with items spanning 8 stages from Engagement in the implementation to Achieving Competency in the delivery of the EBP. The COINS method was developed to operationalize the costs and human resources necessary to accomplish these activities at each of these stages.

Three varieties of costs must be measured within each stage of the SIC to evaluate the total cost of implementation: (1) Direct cost of the implementation services to the site, including fees charged by the EBP purveyor; (2) indirect costs of site personnel time that is spent conducting the implementation (i.e., doing things that do not directly produce client services, and which will not be necessary once implementation is complete); and (3) ancillary costs made up of the actual infrastructure (and other) investments that are required for implementation.

Using a mixed approach of assessment of budgets, fixed fees from EBP developers, and qualitative interviews with agency leaders attempting to adopt EBPs, COINS data will be compared across a range of EBPs and contexts. A case example from the UK will be detailed to illustrate the challenges of collecting such data, yet the value in having a standardized structure for doing so.

Results
The COINS method demonstrates success in differentiating between implementation strategies as well as EBPs and is successful in detailing the amount of human resources necessary for successful implementation. The COINS method has been used successfully to explore the costs associated with
the introduction of social pedagogy into UK foster care (the Head, Heart, Hands Programme). Cost information has been gathered and categorized according to the three varieties of costs outlined in the COINS method.

Conclusions

Strategies such as COINS could help clarify what resources are needed and when, decreasing the potential for both under- and overestimation of resource needs. This strategy also could inform decision-makers who already have sunk costs, and are weighing the value in continuing or not. COINS might lead to more informed decision-making rather than following the assumption that all implementation activity costs are “equal.” Furthermore, the experience of using the COINS method for the Head, Heart, Hands, social pedagogy programme has indicated the transferability of the approach to the UK context and also for a programme with philosophical roots, rather than an EBP.
Costing a child’s journey through the child welfare system from in home to out of home care

Friday, 16th September - 12:00 - Costs of child welfare interventions

Ms. Lisa Holmes (Centre for Child and Family Research, Loughborough University), Mrs. Samantha McDermaid (Centre for Child and Family Research, Loughborough University), Ms. Clare Lushey (Centre for Child and Family Research, Loughborough University)

This session will focus on an approach to cost children’s trajectories through the child welfare system, capturing the services and support they receive both while placed away from home and during the time that they are supported in their families.

Since 2000 researchers at the Centre for Child and Family Research, Loughborough University have been carrying out a programme of research to explore the relationship between the needs, costs and outcomes of child welfare services. A key output from this research programme is the development of a purpose designed software tool: the Cost Calculator for Children’s Services (CCICS). The tool produces a series of analyses to explore the costs of different trajectories for children in out of home care, showing variations for children with different needs and circumstances, and for different placement types. The analyses also include exploration of outcomes according to needs, circumstances and service response.

Research and development is currently underway to extend the tool and the conceptual framework that underpins it for children and young people in receipt of child welfare services while remaining with their families. The tool is also being extended to follow the care experiences of young people up to the age of 25, to explore their transitions from care and longer term outcomes. This research is being carried out in partnership with a local authority children’s services department in England (North Yorkshire) to develop a model to support adolescents (No Wrong Door), funded by the Department for Education’s Innovation Programme.

This session will build on other papers within the symposium and will focus on the child level data items that are being used to carry out the longitudinal analyses. The work to bring together different data sets to capture needs and outcomes data that is held by a range of different public sector agencies will also be explored. These include data from child welfare, education, police and youth offending services. Examples of the analyses that are produced will be presented, along with future plans for development of the tool. Findings from the No Wrong Door evaluation project will also be included to illustrate the potential cost savings associated with increased stability for adolescents along with reductions in offending and other risk taking behaviours.
Understanding the complexity of the matching decision making in out-of-home care

Ms. Kirti Zeijlmans (University of Groningen), Dr. Mónica López (University of Groningen)

Despite the potential influence of matching decisions on the course of a placement, matching remains an understudied topic in child welfare research. Matching is a complex decision-making process in which a child welfare professional tries to predict which placement will result in the best outcome. A good fit between the foster child and the placement setting has the potential to mitigate the impact of an out-of-home placement. This symposium addresses matching by analyzing two levels of decision making. The first two presentations are devoted to general matching in placement decision making, thus the matching between a child and different types of out-of-home care, as for example foster care, kinship care or residential care. The next two presentations are on matching in family foster care, thereby focusing on the match between children’s and foster families’ characteristics. For both levels of matching, this symposium provides a general discussion of the decision-making process and an instrument to further develop the field of matching. The final presentation concludes the symposium by providing an insight in a practice framework on matching from Basque county, which serves as an example to show how research and practice can influence each other in a beneficial way. Including five presentations originating from five countries (Australia, Belgium, Finland, the Netherlands and Spain), the symposium offers a unique opportunity to have an intercultural exchange on the topic of ‘matching decision making’ in research and practice.
Plans and surprises: matching children and substitute homes

Friday, 16th September - 11:12 - Understanding the complexity of the matching decision making in out-of-home care

Prof. Tarja Pöö (University of Tampere), Dr. Rosi Enroos (University of Tampere), Dr. Riitta Laakso (University of Tampere)

Objectives

When matching children and substitute homes, social workers consider a variety of issues such as the needs, rights and wishes of children and their parents, the nature and form of the substitute homes, the professional and legal norms and the principles of child protection policy, and how they match. At the end, the choice of a substitute home is the result of complex judgements and decisions. Good and careful planning is seen as being the key to successful matching. 'Making plans', the objective of this study, is often, however, challenged by surprises.

Methods and results

Based on qualitative interview data with social workers (49), substitute carers (16) and children in care (17) in Finland, we study the planning element of matching. The analysis is twofold. First the organisational forms for matching are presented in order to demonstrate the idea of how planning is thought to be done best. The forms (the holistic model, the model of experts and the centralised model) include different understandings of good matching and the planning required. Secondly, based on the experiences of practitioners, substitute carers and children, we examine the child entering a new (substitute) home. The grass-root experiences of matching highlight that surprises are unavoidable. The types of surprise encountered in the front-line practice are then analysed.

Conclusions

It is argued that the human element of matching, should not be ignored or seen only in terms of failure. Instead, it should be seen as an integral part of matching. These implications for policy and practice will be discussed.
Factors influencing decision making about placement in out of home care: Development of the Child Placement Questionnaire

Friday, 16th September - 11:24 - Understanding the complexity of the matching decision making in out-of-home care

Ms. Jenna Meiksan (Australian Centre for Child Protection, University of South Australia), Ms. Marie Iannos (Australian Centre for Child Protection, University of South Australia), Prof. Fiona Arney (Australian Centre for Child Protection, University of South Australia)

Background
Determining out of home placements for children is a major challenge in the Australian out of home care sector, which is under increasing pressure due to difficulties recruiting and retaining enough carers to support the higher numbers of children remaining in care longer. Despite these challenges and the known importance of identifying optimal placements for children, the decision making processes that lead to placement remain poorly understood. No quantitative Australian research exists that examines this decision.

Objectives
This study aimed to develop a measure based on the theory of planned behaviour in order to examine the intention of child protection practitioners about placing children in out of home care.

Method
The resulting measure, the Child Placement Questionnaire (CPQ), examines practitioner intention according to the theoretical domains of the Theory of Planned Behaviour; attitudes, subjective norms and perceived behavioural control. The CPQ was evaluated by experts and pilot tested with 53 child protection practitioners working in the Australian out of home care sector. Individual items were reviewed for their relevance, and responses to open-ended questions analysed in order to refine the measure.

Results
Responses on the pilot measure revealed strong positive intention to place children in kinship care placements, but highlighted pragmatic constraints such as limited time and resources on placing children in the intended way. Participant responses indicate partial support for the application of the Theory of Planned Behaviour to child placement decision making.

Conclusions
A brief measure has been developed to measure factors influencing child placement decisions. Further refinements to this measure, including additional exploration of the organisational and systemic context in which decisions are made, could inform modifications to national and international policy and practice that lead to improved placement outcomes for children.
Matching decision making in family foster care: Experiences of matching professionals in daily practice

Friday, 16th September - 11:36 - Understanding the complexity of the matching decision making in out-of-home care

Ms. Kirti Zeijlmans (University of Groningen), Dr. Mónica López (University of Groningen), Prof. Hans Grietens (University of Groningen), Prof. Erik J. Knorth (University of Groningen)

Objectives

Studies on matching decision making in family foster care have shown different characteristics of the child and the foster family that could or should be the focus of the decision making process, such as ethnicity, temperament or attachment style. However, the pool of foster carers with which a child can be matched is limited and it can be hard for practitioners to decide which of the characteristics that are mentioned in the literature (cf. Zeijlmans, López, Grietens, & Knorth, 2016) should be prioritized in matching a child with a foster family. Therefore, it is important to know how professionals make their decisions and which factors have an influence on this matching process.

Method

Using a qualitative design, semi-structured interviews were conducted with 20 professionals who make the matching decisions in foster care organisations in the Netherlands. These professionals originated from 17 organisations in the Netherlands. Each interview lasted approximately 90 minutes and focused on the method of matching they used, the characteristics they considered, and also the differences they saw between themselves and colleagues. Examples of recent cases were asked to clarify and illustrate their answers. After the interviews were transcribed, the researchers analysed the data by using a thematic analysis focused on the process of decision making.

Results

The results show that matching decisions are not only influenced by case factors, but also by personal, organisational, and external factors (cf. Baumann et al, 2013). Each professional aims to act on behalf of the child’s best interest, but the characteristics that they consider to ensure that the matching results in a good placement are often based on their own judgement and experience. Especially the lack of resources, such as time and potential foster carers, has a great influence on the matching process and presents the practitioners with a constant struggle. The mechanism used to match in these difficult conditions could be described as a spiraling process in which the practitioner continuously searches for a foster family that is closest to the perfect match. Interestingly, the practitioners all describe matching as the process of choosing a substitute family; however, in practice, there often was not much of a choice and the steps that they took were more related to providing a good start of a placement.

Conclusions

Due to the obstacles that professionals face while making a matching decision, the personal and organizational factors can exert a great influence on the outcomes of matching. Matching has the potential to be more than choosing the best foster carer for a child by identifying the potential risks of a match that might need more training or supervision later. More research on the complexities of matching should be conducted to help practitioners with this task.

References

Matching in Flanders: research with the Assessment Questionnaire Foster care Situations -Revised

Friday, 16th September - 11:48 - Understanding the complexity of the matching decision making in out-of-home care

Ms. Skrallan De Maeyer (Vrije Universiteit Brussel), Prof. Johan Vanderfaellie (Vrije Universiteit Brussel), Dr. Frank Van Hole (Pleegzorg Vlaams Brabant en Brussel), Mrs. Laura Gypen (Vrije Universiteit Brussel), Ms. Laurence Belenger (Vrije Universiteit Brussel)

Objectives:
In the Flemish foster care practice, objective instruments to assist the matching process are lacking. The need for an instrument designed for that purpose is high. Based on the theory of Street and Davies (1999), we developed the Assessment Questionnaire Foster care Situations (AQFS-R). Street and Davis (1999) suggest that a matching instrument must assess everyday behaviors, attitudes and/or skills of foster parents and children. This study reports on the preferences of (aspirant) foster parents measured with the AQFS-R.

Method:
With the AQFS-R (aspirant) foster parents behaviors, attitudes and skills are measured using 24 vignettes describing foster children in a foster care situation. Each description contains a unique combination of five foster child and foster care situation factors and is therefore multidimensional. They are based on breakdown research: gender (boy or girl), age (-6 years, 6-12 years or 12-18 years), problem behavior of the child (internalizing or externalizing problems), extra workload (the need for extra care for the child, no extra work or with extra work) and collaboration with the parents (good or bad). For each vignette (aspirant) foster parents are asked, on a Likert scale from 1 to 7, if they are willing to foster the child described in the vignette. The higher the score (max 7) the more they think they are able to foster the child.

Results:
The AQFS-R was completed by 139 aspirant foster parents and 314 foster parents. The (aspirant) foster parents take every factor into consideration when judging the vignettes (main effect for every factor is significant, p<.005). As a group, aspirant foster parents and foster parents prefer foster care situations with a girl, age under 6 years, with internalizing problems, with extra work and with a good collaboration with birth parents. When clustering the answers of the aspirant foster parents as well as of the foster parents, three profiles can be distinguished. A first group, the AFA (able to foster all children) group, scores all vignettes almost similarly. It can be assumed that those foster parents consider themselves able to foster most foster children described in the vignettes. The second group, the PFT (prefer to foster toddlers) group, thinks they are only able to foster children between 0 and 6 years. Finally the third group, the DOS (depending on situations) group, indicates that on one side they are not being able to foster adolescents (older than 12 years) but on the other side this group lacks a clear preference for the other factors.

Conclusions:
The AQFS-R can help Flemish foster care workers in assessing (aspirant) foster parents’ preferences for foster children. Three clear profiles, AFA, DOS and PFT, can be distinguished. The predictive validity of the AQFS-R is currently researched, and results are expected soon.

References:
Understanding the complexity of the matching decision making in out-of-home care-Gipuzkoa’s framework for matching: family selection, knowledge of child’s characteristics and needs, and a good precition of the mutual impact and interaction if matched

Friday, 16th September - 12:00 - Understanding the complexity of the matching decision making in out-of-home care

Mrs. Cristina Achicarro (Centro LAUKA de Estudios e Intervenciones Psicológicas, SL), Mrs. Cristina Herce (Centro LAUKA de Estudios e Intervenciones Psicológicas, SL), Mrs. Ana Rivero (Centro LAUKA de Estudios e Intervenciones Psicológicas, SL)

Objectives:
As the team responsible for the selection of foster families and the corresponding matching proposals, we must not only make a good screening of which families can do a good job as fosterers, but at the same time we must obtain updated information of the child’s life path, characteristics and needs, so we make matching proposals with high probability of success.

This working model must be integrated into a theoretical framework that guides all the actions and decision-making. In the case of Lauka Center, which manages the technical support to the foster family care service in Gipuzkoa, its reference is based on the paradigm of the child good treatment versus child maltreatment, children’s needs theory, attachment and loss, trauma and dissociation, neuroscience knowledge, personality and family systems functioning.

In the selection of families and matching process, although good techniques and measuring instruments are required, professionals with deep training in the above mentioned theoretical framework are essential. They must be able to identify the needs of children oriented to foster care; the weaknesses and the strengths of applicant families in regards to the relevant variables for the foster care; help foster families to understand what would be their role as resilient tutors; and finally, and promote decisions and proposals that identify which aspects are the strongest and the most vulnerable.

In this presentation, the framework from the Lauka Center is explained to provide a possible framework to organise this process in practice.

Results:
The selection process for families implies the attendance to an initial training session, to submit the required documentation and to attend various interviews that include the completion of different tests. For the professionals, on the other hand, it involves a very thorough analysis of the collected information that ends with an assessment report which includes: a description of the main results in the relevant legal criteria; the final statement of “Suitable or Non Suitable”; the case profile to which the family would be more suitable; the strengths and weak points of the family (when suitable); the resources that should be provided in the short or long term after a placement.

On the other hand, professionals will know the children in person and study the children’s characteristics and needs.

Our matching model, which has sequenced steps, implies a compatibility study between the possible child and the possible family, which analyses the variables considered sensitive, or even critical, and
it has two crucial moments: when the family receives the “first screening call”, and the following “matching proposal interview”.

Finally, our model involves an analysis of the outcome of the matches, where we focus on knowing what has happened when a fostering is successful, is interrupted or ceases, and whether we can say that the matching has been satisfactory or not.

Percentage of assessments in which families receive a “suitable” (85%) or “non suitable” (15%) result will be reviewed, as well as the percentage of matches that have been successful or ceased.

Also, the main variables used when considering a matching will be raised and which variables are considered to have had greater influence in the cessation of the fostering.

Conclusions:
The presentation will end with some of the main conclusions the team has drawn, which have to do with both the selection of families, as with the variables that must be specifically controlled during the matching process, and that are the result of the analysis of the evolution of the foster family cases constituted after their matching.
Developing autonomy and resilience in care leavers: practices and evaluation processes

Dr. Luisa Pandolfi (University of Sassari)

The international literature defines care leavers as young people who, after coming of age, leave residential care, such as those facing the difficult transition from a protective environment to autonomy. The importance of support policy and practice for care leavers is testified to by a number of comparative international studies on the subject (Stein, Munro 2008; Dixon 2008). International research also explores which factors in young people’s experience of care tend to be protective or create risks for a successful transition (Dixon J., Wade J., Byford S., Weatherly H., Lee J., 2006; M.Stein M., 2012).

The research project “Crossing the bridge: evaluation analysis and interpretation tools of social inclusion projects” fits in with this theoretical framework. Initiated in 2010 and concluded in 2012, it was co-financed by the ‘PO Sardegna FSE 2007-2013’ and the Regional Law 7/2007: “Promotion of scientific research and technological innovation in Sardinia”. A follow-up study was carried out in 2014.

Sardinia is the only Italian region with specific regulations concerning young people leaving care in the form of law, no. 4, art.17 2006 “Experimental programme to promote social inclusion projects for care leavers”. Such regulations allow for special care and individual education projects for care leavers up to 3 years after their departure from residential care.

Anchored in Grounded Theory, an in depth qualitative analysis was conducted in the initial project mentioned, starting from the following objectives:

1. to highlight the stakeholders’ (care leavers’, social and educational workers’ and residential carers’) perspectives and life experiences;
2. to identify protective factors contributing to the promotion of resilience in care leavers as well as potential negative factors;
3. to investigate strengths and weaknesses of current regulations so as to enhance the use of resources and their effectiveness.

Research methods involved a narrative semi-structured interview conducted with 65 interviewees (23 care leavers, 19 tutors, 14 social workers, 9 residential care staff) including records, transcripts and analyses, and codification of data according to theme (groups and sub-groups) and categories.

The follow-up study carried out in 2014 involved the same subjects sample.

Research has highlighted the following protective factors that contribute to increased resilience in care leavers: preparation and gradual departure from residential care; financial support; shared and coherent planning; education and training, employment prospects; relational network and continuity, sense of belonging; intermediary assessment; educational support; personal self-esteem and awareness (Pandolfi L., 2015).

Data collected suggest the need for further and in-depth analysis of the quality of the activities and practices implemented to support young people in residential care in becoming autonomous.

Our current research developments are focused on the following objectives:
• individuation of a quality standards system and guidelines concerning the work of residential care to develop resilience and autonomy in young people based on recognition and documentation of experiences, good practices, problems and resources in residential care service;

• design, validation and testing of innovative processes of self-evaluation, evaluation and improvement of the quality and effectiveness of educational interventions in a significant sample of residential care provisions;

• listening to young people in residential care and care leavers, in order to learn their views and feelings and to promote their rights to provision and ensure their participation;

• implementation of innovative tools for day to day work in residential child and youth care.
Hearing a different story? Expressing identities and continuities through music for young adults previously in care

Friday, 16th September - 12:42 - Transitions to Adulthood from Care

Prof. Janet Boddy (University of Sussex), Dr. Jeanette Østergaard (SFI - The Danish National Centre for Social Research)

Research with young people leaving care has consistently shown the challenges they face, with risk of disadvantage and instability extending into adult lives. Yet not enough is known about positive experiences and pathways, and the things that make a positive difference for young people. This paper draws on work conducted for Against All Odds?, a mixed methods cross-national (England, Denmark and Norway) project funded by the Research Council of Norway (PI: Elisabeth Backe Hansen), which aims to build a more nuanced understanding of positive outcomes for young people leaving the care system, including attending to what “doing well” means to young adults who have experience of living in care.

The Against All Odds? project as a whole combines cross-national policy review, analysis of administrative data, and multi-method qualitative longitudinal interviews with young people and adults (aged 16-30 years) with care experience and who were (or had recently been) in education, employment or training. The analyses presented here focus on one component of the first wave of qualitative interviewing in Denmark and England; in the second of two interviews (which took place at least a week apart), participants were asked to share a piece of music which has positive associations for them. This approach built on the sensory methodology of Sarah Wilson’s work with young people who are looked after, which highlights the importance of music to her participants, ‘as a source of encouragement, to cheer themselves up and blank out upsetting thoughts, but also to explore complex experiences or feelings’ (Wilson 2013, p6).

Our paper considers the ethical and methodological contribution of the approach, whereby music as a sensory space facilitates the sharing of reflections that were not brought forward in the more ‘conventional’ dialogue of the first interview. By giving participants the space to choose music to bring to the second interview, they gain control and can plan what they share. In the context of a multi-method approach, participants’ discussions of their musical choices reveal how they make sense of complex experiences through childhood and beyond, and complex identities as ‘care leavers’.

Drawing on case examples from Denmark and England, we consider the affordances of music for understanding participants’ sense-making and their understanding of continuities and identities, as they use music to reflect on key relationships, critical moments, and possible selves. In this way, work with music contributes to wider theoretical understandings of care leavers’ transitions into adult worlds, addressing their individual lifeworlds and biographical temporalities, including critical moments in the intersections of past, present and future in their lives. Music as a method allows the researcher to hear different stories, enabling participants to articulate the nuance and complexity of their lives in ways that provide an alternative to what Steedman (2000) has termed ‘enforced narratives’: the ‘terrible tales’ told about people whose lives are marginalised and stigmatised. To understand the potential of care systems to contribute to good outcomes for young adults we need to move beyond a problematising lens and engage with the complexity of lived experiences through the care system and in transitions into adult worlds.

References

Perceptions of “doing well” among young adults formerly placed in care

Friday, 16th September - 12:54 - Transitions to Adulthood from Care

Dr. Elisiv Bakketeig (Norwegian Social Research, Oslo and Akershus University College of Applied Sciences), Dr. Tonje Gundersen (Norwegian Social Research, Oslo and Akershus University College of Applied Sciences)

Care leavers across Europe are at risk for poor outcomes. This includes indicators as education, mental and physical health and homelessness as well as unemployment, dependence of social assistance and crime (Backe-Hansen, Madsen, Kristoffersen, & Hvinden, 2014; Berlin, Vinmerljung, & Hjern, 2011; Jackson & Cameron, 2011). However, there is a need to move beyond a problem-oriented focus and increase our knowledge about those who are doing well. This knowledge can provide important insights in relation to the provision of timely and relevant services. Hence, in this paper we address the issue of former child welfare youth that are doing well in spite of their at times massively adverse life experiences.

This paper draws on data from the project Against all odds which is a cross-national and mixed method study (Norway, Denmark, England) financed by the Norwegian Research Counsel. Here we will present results from the Norwegian part of the study.

Our aim in this paper is to elaborate on what doing well means to young Norwegian women and men with former placements in care, based on a series of in-depth interviews with young adults at different ages. Are their perceptions of doing well in accordance with traditional normative indicators for doing well, for example getting an education, a steady income, and a place to live, having a family and friends, or are other elements of life perceived as more or equally important? How can we understand their perceptions of a good outcome? How do their life experiences influence their perceptions of what is important in their adult life, and do their perceptions change over time?

We base our preliminary analyses on life course interviews with teenagers and young adults, from a sample of 24 individuals aged 16-18, 21-24 and 26-29 respectively. Criteria for inclusion has been that they are in school (theoretical or vocational), are taking further education (beyond compulsory school) or are employed. They have all experienced placements in residential or foster care, or both, of at least three years’ duration. Theoretically, we will draw on Bronfenbrenner’s theory (1979) of ecological systems. This theory includes examination of various systems that influence individuals and families, and each level interacts with each other.

Our analyses suggest that the traditional indicators of doing well (education, job, being able to support themselves, family) are, not surprisingly, reflected in young adults’ subjective assessment of their own life trajectories. However, other elements are also highlighted as important, for instance the significance of feeling safe, of stability and belonging, which they have been deprived of because of their earlier life experiences. This indicates a need for a more differentiated view when defining positive outcomes among young adults who have experienced out-of-home placement(s).
Care Leavers from Foster Care – Young People on their Way from Care to Adulthood

Friday, 16th September - 13:06 - Transitions to Adulthood from Care

Mrs. Carolin Ehke (University of Hildesheim)

Care Leavers, (young) people who lived in foster or residential care, are a vulnerable group mostly experiencing bad conditions and outcomes on their way to adulthood. In Germany, care often ends at the age of 18, although there is a legal basis which guarantees the extension of care. In comparison, youth in Germany lives at home until the age of 25 on average. Furthermore, care leavers often have critical educational pathways, achieve lower educational attainment, are more often homeless and dependent on drugs and alcohol and more prone to suffer from mental illness. Finally, they get married earlier and become parents at a young age. Although care leavers are disadvantaged in Germany they have less financial, structural and social support than their peers.

Compared to international studies and research projects, German research is lacking a fundamental involvement in the topic. Especially longitudinal studies and larger surveys on care leavers from foster care are almost missing. Moreover, research often does not focus on the perspective of the addressees; to date, studies mostly include surveys and interviews with foster parents or employees from youth offices or fostering services, not with care leavers themselves.

Based on the analysis of the research situation in Germany, my PhD – presenting results on the EUSARF-Conference – aims at obtaining new data on care leavers from foster care focussing on the addressees’ perspective: the young adults. Using problem-centred interviews (Witzel 2000) I ask care leavers (approximately 18-25 years) how they experienced their transition from care to adulthood. The following topics are included in my questionnaire: support while living in foster care, support after leaving foster care, family/doing family, independence. Additionally, I carry out a small quantitative survey at the end of the interviews asking the care leavers about the ten most important people in their transition to adulthood and how they were supported (financially, emotionally, practical everyday life, etc.). In this regard, my theoretical concept is „social support“ (Nestmann 2010). The author describes social support as an important criterion for coping with critical life courses and transitions in lifetime. My analysis is based on the Grounded Theory Methodology (Strauss/Corbin 1996).

My previous evaluations show that care leavers from foster care experience ambivalent relations in their transition out of care into adulthood. Relations to more or less important people are more a burden than a relief. If they receive social support they often name other significant people, like bosses at work (e.g. at their vocational training). But getting help from these people mostly happens incidentally/by chance. This is one of the main reasons why in this presentation I will argue that care leavers need continuous and reliable relations in the whole process of leaving care.

Literature:


490
Foster care breakdown: The role of attachment, behavior difficulties and violence

Prof. Carmen Paniagua (University of Seville, Spain), Prof. Jesús Palacios (University of Seville, Spain), Dr. Jesús M. Jiménez-Morago (University of Seville, Spain)

Foster care breakdown is typically the consequence of a combination of circumstances in which the foster family, the fostered children and the professional intervention each make their own specific contribution. Although no single factor sufficiently explains adoption breakdown, this presentation focuses on one of the most significant factors in the process leading to a definitive separation, namely the children involved, their problems and difficulties.

In the two-year period between 2012 to 2013 there were 4078 children in foster care in Andalusia, a region of southern Spain, of which 3036 (74.5%) were in kinship foster care and 1042 (25.5%) in non-kinship foster families. In all of the 116 cases analysed the foster-care breakdown occurred in this time period. According to their relative weight, the majority of the breakdown cases happened in kinship (62.1%) and the rest (37.9%) in non-kinship care; 55.7% were girls and 44.3% were boys. The average age of the children was approximately 7 years old when the placement began to fail, being similar for kinship and non-kinship cases.

The data show that the children’s problems involved attachment difficulties, behavioural problems and violence towards the foster family. There were no statistically significant differences between kinship and non-kinship families with respect to these factors. In general, some of these circumstances (i.e., attachment difficulties and behavioural problems) were present since the beginning of placement, although in many cases they were interpreted as transient problems of mutual adaptation typical of an initial stage, and therefore no professional action was taken. Problems escalated at the onset of adolescence, when most unwanted separations took place. Some of these difficulties were of a more relational than personal nature, as in many cases attachment problems and violence were also observed in the caregivers. The implications for professional intervention in foster care derived from this combination of problems will be discussed as part of this presentation.
A meta-analysis on disruptions of foster care: directions for further development

Friday, 16th September - 12:42 - Foster Care Breakdown

Mrs. Carolien Konijn (Spirit Youth Care in Amsterdam)

Authors (I did not succeed in adding the second and third author in the format).

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Objective.

Foster care has proven preferable compared to institutional care for the well-being of children who are not able to grow up in their own homes (Roy, Rutter, & Pickles, 2000). However, disruptions of foster care placements often occur. Between 20% and 50% of children in long term foster care experience a premature ending of their stay (Minty, 1999). In 2006 Oosterman and colleagues have published a meta-analysis of 26 studies examining risk and protective factors for placement breakdown in foster care. The present meta-analysis is a replication and extension of the study of Oosterman et al., examining risk and protective factors for disruptions in foster care over the past 25 years using new meta-analytic techniques. The association with disruptions will be examined for factors in the background of the foster child such as the age, reasons for out of home placement, characteristics of the biological parents and family, placement history and behavior problems. Also factors related to the placement will be studied such as kinship care, foster parent’s biological children, characteristics of the foster parents (age, competences, motivation and attitude) and the role of the biological parents during placement.

Method.

A three-level approach to meta-analysis is used in which effect sizes extracted from the same study (i.e., dependent effect sizes) can be modeled. In this way, all available effect sizes can be used, so that all information can be preserved, and maximum statistical power can be achieved.

Results and conclusions.

At the moment of submitting this abstract the analyses are still in progress. On the EUSARF conference in September the results will be available.
Children in Care in Ireland: factors associated with time in care, number and types of placement

Friday, 16th September - 12:54 - Foster Care Breakdown

Ms. Donna O'Leary (Child and Family Agency, Ireland and University College Cork), Prof. Alistair Christie (University College Cork), Mr. Tony Fitzgerald (University College Cork)

Background: Taking children into state care for reasons of abuse or welfare presents social workers with a number of challenges. The system operates under the principle that children should be maintained or reunited with their families. However, little is known about the amount of time children are likely to spend in care, once they have entered care in Ireland, or about the nature of the placements they are likely to have. Social workers do not have such practice based evidence to support their decision making and planning of care pathways for children and for their work with families.

The aim of this research was to examine factors associated with the amount of time spent in care, and placement movements, once a child was admitted to residential or foster care.

Methods: This research is based on a retrospective cohort study of all children, aged between 0 and 18 years, who had foster or residential care placements for reasons of abuse or welfare, in a southern region of Ireland, any time between 2002 and 2012. The region has 5 of the 32 Social Work Departments in the Country serving 14% of the total child population (163,388 and 1,148,687) and 15% of the adult population (501,146 and 3,439,565). The social work departments operate common national policy under a single governance structure.

Primary data relating to their entire history in care up to this time period was extracted from a regional administrative data base. This data was matched to street level deprivation scores compiled using census data (HP), adding information on socio-economic factors to the research data.

Multiple regression analysis was applied to examine independent factors (1) associated with placement frequency and moves. Event history analysis was used to explore unique child related factors (2) and area related factors (3) associated with total amount of time in care, and number of placements for children on whom there was 16 years follow up.

Findings: This paper will present the results of this original research and outline the methodological strengths and challenges of using administrative records as a basis for research to support social work practice and policy development. The research forms the basis for international comparisons.

(1) age at first admission, gender, deprivation score, social work department, family type, reason for care, legal basis of care

(2) age at first admission, gender, family type, deprivation score

(3) geographical location of social work team (urban / rural)
Managing endings in foster care placements – what happens when things ‘go wrong’?

Friday, 16th September - 13:06 - Foster Care Breakdown

Mr. Jim Rose (The Fostering Foundation (UK))

Background:
Therapists recognise the importance of endings; preparing the client for the ending of therapy or even ensuring they are properly prepared for a significant break, such as a vacation. Sometimes, events overtake the process and an ending occurs without preparation. Maybe illness or a sudden change of circumstances means that therapy cannot continue. In some cases, the client may simply stop coming without explanation, providing much soul searching and wondering for the therapist.

With children in foster care the significance of a placement coming to an end is no less significant, requiring just as much thought and preparation. When a placement is disrupted by events or ends without due planning, there are consequences to be considered for the foster carer, for the child and for the professionals involved.

The importance of successfully managing transitions for children in care, whose lives have often been punctuated with episodes of loss and changes in their living arrangements, is well documented. Traumatised children respond best in a stable and consistent environment that provides appropriate and caring boundaries sufficient to contain their inevitably high levels of anxiety and the acting out which may go along with this. A loving environment, in the context of a secure relationship with adult foster carers, challenges earlier experiences of failed care from those adults whom they should have been able to rely on and trust. Such relationships are as important for the wellbeing of these children and young people, perhaps more so, than any particular treatment modality or intervention.

Coming into foster care is usually a result of some trauma, often persistent and long-lasting over years. Nevertheless, it still represents a break and a separation from known family and carers with an accompanying sense of loss. In the worst cases, this experience is repeated over and again as children are moved from placement to placement, sometimes with little or no preparation or planning.

Research suggests five factors that appear to cause frequent placement moves:

• a change of social worker
• over-optimistic expectations
• placement breakdown, particularly for teenagers
• any policy or practice which generally discourages children from remaining fostered after the age of 17
• the child’s level of emotional disturbance and motivation to remain in the placement also appears to be a key factor.

Objectives:
The presentation will offer ideas and further consideration of the reasons for placement breakdown and unplanned endings of foster care placements based on the experiences of an independent fostering agency working in four areas of England. From this experience practical suggestions will be made as to how the risks associated with unplanned and frequent changes of placement may be mitigated by increasing and developing resilience in both foster carers and the wider professional networks.
Methods:

A literature review of relevant research material plus a series of semi-structured interviews with foster carers, social workers and children who have been in the care system.

Results:

The presentation will feedback on the outcomes of the interview schedule indicating the main reasons for placement breakdown and any examples of practice that were found to be particularly helpful.

Conclusions:

The critical importance of stable and loving placements for children presenting with a range of emotional and behavioural needs is well evidenced. Sustaining such placements is often challenging and stressful for both foster carers and their supporting social workers. These challenges are not only to do with the exhausting and demanding nature of the children’s presentation, but are compounded by the systemic difficulties of financial constraints and competing organisational hassles. Building resilience is vital for the healthy development of children and young people.
Dignifying families at risk: How a change in caseworker approach changes user perspective, agency and perception of self

Friday, 16th September - 12:30 - Improving Professional Practice and Cooperation

Dr. Anne Marie Villumsen (VIA University College)

Through the voices of families at risk, the aim of the presentation is to display how a change in caseworker approach and municipal organization can dignify families at risk and create change in the families’ experiences of collaboration and of self. Qualitative interviews forms the basis.

In Denmark, the number of out-of-home placements and the number of children at risk have been relatively stable during the last 40 years. The number of children at risk is stable at approximately fifteen percent, while the number of children placed in out of home care is at approximately one percent. At the same time, parents’ long-term unemployment (as well as other significant risk factors) coincide with children’s failure to thrive, i.e., they either receive preventative measures or are placed in out-of-home care.

In short, these figures could indicate challenges in the professional efforts to change the life circumstances and development of a number of children and families at risk.

In Denmark, the municipalities are organised in highly specialised sectors. This means that in a family struggling with unemployment as well as children’s failure to thrive, each adult will be assigned one or more caseworker(s) from the relevant departments specialised in unemployment, financial assistance, or child protection, and will most likely also be assigned professionals related to the initiatives launched by the different municipal departments. It is in no way unrealistic for a family of two parents and two children to be assigned 10 different professionals from the municipality. At the same time, collaboration between the sectors is weak, leaving the families at risk with multiple professionals with differing plans of actions and thereby no coordination of initiatives and support provided to the family.

In order to address these challenges, one Danish municipality has launched an initiative specifically targeting families assigned to both the department of employment and that of child protection (some are also assigned to other departments): The number of case-workers per family is reduced from approximately four or five to one and at the same time the municipality introduced a new approach to casework. The purpose of this initiative is to enable parents to begin in either employment or education as well as the chil-dren and family to start thriving.

According to the participating 32 families at risk, these changes in casework approach and organization has several significant outcomes:

1) The flexibility of having just one caseworker to relate to and the fact that she/he is easily accessible is of great importance for the collaborative relationship.

2) This change in casework approach makes it personally relevant for the families, as opposed to feeling oblivion. The municipality is no longer ‘a thing’. It becomes a real person (providing the possibility of a relevant collaborative relationship).

3) More importantly, the specific approach combined with the accessibility provides the families with an experience of being comprehended - within their context. The families very well know
that occupation and family life are intertwined. Now, they feel that their caseworker knows it
too. As a result, the families feel they have re-gained their dignity because they do not have
to defend, explain or beg whenever they are in need of support.

Agency is a very noteworthy part of this change in casework approach because the families now
feel they are able to influence how their problems are defined and how they are to be resolved. A
significant contribution to dignifying families at risk.

Overall, the great learning potential lies in giving voice to families at risk - before, during and after
we try to help them.
Challenges in interagency cooperation – workfare and child welfare as different points of departure

Friday, 16th September - 12:42 - Improving Professional Practice and Cooperation

Prof. Torunn Alise Ask (University of Agder), Dr. Solveig Sagatun (University of Agder)

Relevant for topic: Interagency cooperation or: Children and poverty

Background

Although a rich country, an increased number of children are living in relative poverty in Norway. The consequences of recession for children, also in wealthy countries, are well documented (UNICEF 2014).

Low income families are often users of multiple social welfare services. These services have lacks and failures. Investigation about child poverty from The Office of the Auditor General (2014) states that the measures towards children and parents are too few, they are not good enough and the efforts done are not coordinated.

The scope of the paper is on the professionals in two services: The Labour and Welfare Services (NAV) and the Child Welfare Services (CWS). We will describe and analyse some processes and interventions in a small scale project that aimed to better and develop cooperation between NAV and CWS in their efforts towards children and parents in low income families. Dimensions regarding knowledge development, service development and organisational development are central.

The project is part of a larger one: “Innovation and Service Development through evolving Forms of Collaboration” (2013-2016), co-funded by the Norwegian Research Council.

We ask:

- How do different institutional backgrounds and mandates influence practices in working together with children and parents in marginalised low income families?
- What can promote and what may inhibit innovative ways of collaborative working across agency borders on different levels in NAV and The CWS?

Child poverty and challenges in low income families can be mentioned as “wicked problems”: There is more than one explanation to the problems and the solutions to them are not true or false scientifically spoken, but they may be good or bad. From some points of views the services and practitioners themselves may be looked upon as both part of the problems and the solutions to deal with and to overcome the issues concerned.

Methods

Qualitative interviews with parents and some children (> 12 years) in ten families, and interviews with their responsible practitioners in the services, are conducted. In NAV the practitioner is mostly named “supervisor”, but in the CWS they are named “contact person” or “child protection worker”. There have been workshops with the supervisors / contact persons and their leaders and meetings in the project team with practitioners and professional leaders from the services. All these are documented and used as data.
Data are produced and interpreted within frames of practice oriented research. The researcher is seen as an actor who participates actively in cooperation with practitioners and others involved. It is a learning process for all parts.

So what?

Our results so far are preliminary. We are still in the phase of analysing data.

From the parents’ and children’s stories we see that important elements and nuances in their everyday lives become invisible in their cases, in both services. NAV’s rhetoric “work pays” and a rather tough “work-line” to be followed lay stress to minimize social benefits. It also seems to minimize the practitioners’ vocabulary to influence decisions. The CWS obligations often results in scrutinizing the relationship between child and parent(s), at the expense of more material conditions for the family.

Different discourses challenge boundaries between rights and duties, as well as require and challenge professional judgment. Attention towards the children may act as “bridging” between the services and this creates an arena for sharing knowledge and developing competences and reflexive consciousness about spaces for agency. The role of the middle managers (the “in-betweens”) is crucial to catch up and support these everyday innovation processes.
Collaboration experiences in multi-sectoral networks for vulnerable youth: A multiple case study

Friday, 16th September - 12:54 - Improving Professional Practice and Cooperation

Dr. Sarah Dufour (Université de Montréal), Dr. Louise Lemay (Université de Sherbrooke), Mrs. Catherine Jauzion-Graverolle (Université de Montréal)

Objectives: The AIDES initiative is a social innovation that aims to improve collaboration between professionals and organisations concerned with the well-being and safety of children with complex needs who are neglected or are at risk of being neglected. The intervention practice was implemented in the province of Québec (Canada) and was modelled on the British Common Assessment Framework. This paper focuses on the collaboration experiences of six local health and social services networks implementing AIDES.

Method: The method was based on a multiple cross-case study in which six local health and social services networks implementing AIDES constituted the cases. Focus groups were conducted with members of each of the six networks at two times: at the beginning of the AIDES implementation in their regions (n=44 participants) and 14-20 months later (n=40 participants). The groups were composed of members of organisations from school, daycare, community, and health and social services milieus. In both focus groups, participants shared their views on their current partnership within the AIDES initiative around the following themes: 1) the diversity of partners mobilised within the AIDES initiative, 2) power relations between partners, and 3) co-construction of action. Their comments were transcribed verbatim and then submitted to qualitative content analysis. The cases were then analyzed separately and compared.

Results: Analysis provided in-depth understanding and illustration of differing partnership experiences of AIDES implementation. Areas of convergence and divergence between cases are presented according to the facilitators and barriers to AIDES implementation and their development over time.

Conclusions: The study highlights critical elements to consider in implementing and maintaining significant changes in partnership between organisations providing assistance to vulnerable children and their families. Social innovations that do not consider such elements are likely to compromise the deployment and sustainability of collaborative practices with families.
A generative welfare is needed for shaping the new welfare

Friday, 16th September - 13:06 - Improving Professional Practice and Cooperation

Dr. Cinzia Canali (Fondazione Zancan), Dr. Tiziano Vecchiato (Fondazione Zancan)

Objectives:

We developed an approach called “generative welfare”, a “welfare” system that, after collecting fiscal resources and while redistributing them, becomes able to re-generate them and get a return out of them, by systematically making users responsible for individual and social outcomes. Such an approach was firstly proposed in 2012 in the report on poverty and social exclusion. The leading idea is “I cannot help you without you”: this would potentially allow the welfare system to become more effective in helping people, also creating a more solidary society.

The issues related to the “generative welfare” approach inspired a research involving a group of families in poverty.

Method:

Families were selected according to three main criteria: 1) having one or more minor children; 2) being poor in economic terms; and 3) facing difficulties in at least one of the following areas: family, work, health, education, house, justice.

Interviews were conducted with “vulnerable” families, aiming at collecting information through a semi-structured questionnaire (open-ended questions and Likert scales) with respect to:

a. the main difficulties the family is facing and the level of severity of these problems;

b. any type of support received by the family from public administrations and private organisations and the perceived utility of such support, as well as any type of support the family needs but is not receiving and the severity of not having received such support;

c. the “intangible” resources (strengths, i.e. capabilities, competences, knowledge, ...) that one or more members of the family possess and are using or could use either for the benefit of their family or for the benefit of other people (friends, neighbours, others) who are in need of help.

All answers collected were recorded and processed anonymously.

Results:

The research involved 277 families in 7 cities (Turin, Milan, Florence, Rome, Naples, Bari and Palermo). It turns out that work-related problems affect almost 9 out of 10 households. Household and health problems affect more than half of the families, while family problems concern more than one third (38%) of households. More than 1 in 5 families (21%) exhibit justice problems, slightly less than 1 in 6 express education problems. As regards support received by families, it turns out that almost 3 out of 4 families receive economic support. More than 6 in 10 households state they receive material goods. Lower shares of the interviewed families receive services of some type.

Besides focusing on the problems of the families and the different forms of support they can count on, the research also investigated the strengths that each family may possess, although to a different extent. These resources may first of all be used “inwards”: capabilities, knowledge, competences that are or could be employed by parents or children to help their own family. The vast majority of
families (87%) claim to possess one or more of these kind of resources. Some resources may also be employed for the benefit of other people/organisations outside the family (“outward” resources).

Conclusions

The research highlighted the importance of recognising capabilities, competences, knowledge that people possess and may employ for the benefit of themselves, their own family and the whole society. A key role in valuing the resources of “vulnerable” people should be played by professionals (e.g. social workers).

Professionals working with vulnerable families may start new “generative” practices requiring them to analyse the various resources of “the poor” – both parents and children – instead of mainly (or exclusively) focusing on their needs. This would lead to a more “generative” and more sustainable welfare system, as well as to communities relying on higher levels of solidarity and mutual support.
Interprofessional collaboration in Finnish residential child care; challenges for child protection and health care practitioners working together

Friday, 16th September - 13:18 - Improving Professional Practice and Cooperation

Mrs. Eeva Timonen-Kallio (Turku University of Applied Sciences)

The aim of my presentation is to present experiences and perceptions generated in the child protection and mental health care collaboration. The main interest is to investigate the Finnish situation; how practitioners with different professional orientations in two different systems reflect the chances for working together. The focus on investigating the interprofessional collaboration ‘on the borders’ is empathically in the child protection and foster care perspective. Many children taken into care tend to be in need of psychiatric treatment as well as child protection services, and thus the professional expertise of both systems must be coordinated in their care. However, it is widely known across Europe that collaboration between child protection services and mental health services is not working well and the outcomes for looked after children are poor. In spite of drastic need for knowledge, interprofessional collaboration between residential workers and mental health practitioners is poorly explored in international research. Most importantly, very little is known about shared expertise in multi-agency teams between these systems. Based on the analysis of interprofessional focus group interviews (eight interviews with 17 practitioners) in Finland, it is claimed that both sides have unrealistic expectations and perceptions of the other professional grouping and its facilities to help high-need children. The study also indicates that the collaboration assumes an equality of status and responsibilities between the professionals that does not always exist amongst residential child care practitioners and mental health professionals. The analysis suggests that the concept residential child care work itself needs more empirical research to strengthen the interprofessional competencies and enhance child-centred integrated care.
Comparing the Effectiveness of Functional Family Therapy and Multisystemic Therapy Using the Propensity Score Method

Friday, 16th September - 12:30 - Family Intervention

Ms. Hester V. Eeren (Viersprong Institute for Studies on Personality Disorders (VISPD)), Dr. Lucas M.A. Goossens (Institute for Medical Technology Assessment, Erasmus University Rotterdam), Ms. Aurelie M.C. Lange (de Viersprong), Prof. Ron H.J. Scholte (Radboud University Nijmegen), Prof. Jan J.V. Busschbach (Erasmus Medical Centre), Dr. Rachel E.A. Van Der Rijken (de Viersprong)

Objectives: Governments and youth care organisations want to make informed decisions about their investments in youth interventions. Therefore, evidence for the effectiveness of interventions is becoming more and more important. Nowadays various databases provide information about the evidence-base of interventions. For instance, Functional Family Therapy (FFT) and Multisystemic Therapy (MST) are both known as Blueprints models for healthy youth development and have been proven to be effective in reducing antisocial and delinquent behaviour. However, little is known about their relative effectiveness, that is, whether one intervention would outperform the other in a direct comparison. Comparing evidence-based interventions with one another is a next step in evaluating effectiveness, because it may provide insight into what intervention works best for whom instead of only showing that it works. Therefore, the objective of the present study was to compare FFT and MST on their effectiveness and their target populations.

Method: Because we followed regular clinical practice and did not randomly allocate adolescents to one of the two interventions, we used the propensity score method to control for observed pre-treatment differences between the two target populations and balance the treatment arms. In total, 697 adolescents were assigned to either FFT or MST between January 2009 and June 2014 and completed the primary outcome measure (i.e., externalizing problem behaviour reported by the parents and measured with the Child Behaviour Checklist: N = 275 FFT; N = 422 MST). Secondary outcomes were the proportion of adolescents that were living at home, were engaged in school or work, and did not have police contacts during treatment. Data was gathered within Routine Outcome Monitoring of De Viersprong, institute for personality disorders and behavioural problems in the Netherlands. In addition to the full sample, treatment effects were estimated in two subsamples of youth with and without a court order.

Results: Looking at the full sample, the treatment effect regarding externalizing problem behaviour was not significantly different between the two interventions. MST was, however, significantly more effective in increasing the probability of being engaged in school or work after treatment. Within the subsample of youth without a court order, MST was significantly more effective in reducing externalizing problems than FFT. Because balance was not achieved in the sample of youth with a court order, the relative effectiveness of MST and FFT could not be compared in this subgroup. FFT and MST cases in this subsample were probably not fully comparable.

Conclusions: Some significant differences in the effectiveness of FFT and MST were found in the Netherlands. This study also revealed that the target populations of FFT and MST were largely comparable, but that a particular subgroup could not be matched. This result, once more, underlines the importance of controlling for baseline differences when comparing interventions on their effectiveness in regular clinical practice. Using the propensity score method seems to be a feasible and useful approach for this type of research.

Friday, 16th September - 12:42 - Family Intervention

Ms. Anne-Fleur Vischer (University of Groningen, the Netherlands), Prof. Hans Grietens (University of Groningen), Prof. Erik J. Knoth (University of Groningen), Dr. Wendy Post (University of Groningen)

Objectives - Given the rapid and significant physical, affective and cognitive development of babies and toddlers and the complete reliance and dependency on their caregivers, the experience of replacement after a failed reunification may be especially harmful for them. In many cases, within a limited time frame after out-of-home placement, a key decision on family preservation needs to be taken. Findings on failed reunification indicate adverse outcomes in the context of permanency planning. In order to prevent children from further harm, a thorough understanding of the decision-making process is imperative. Using the Decision-Making Ecology (DME) as a framework (Baumann et al., 2013), the current study explores how family-, parent-, and child-related factors are associated with the professional decision regarding family preservation.

Method - Our sample derives from the Expertise Centre for Treatment and Assessment of Parenting and Psychiatry in the Northern part of the Netherlands (Vischer et al, 2016). This Centre provides a kind of a ‘last resort’, assessment-based intervention to families who are aiming either to be reunited with their young child (0-2) or to avoid an (permanent) out-of-home placement. The characteristics of 57 families were investigated through extensive file analysis by using a coding system, based upon two Dutch categorizing instruments on treatment goals and type of problems children and adolescents in youth care (Konijn, Bruinsma, Lekkerkerker, De Wilde, & Eijgenraam, 2009; Reith, Hofman, Stams, & Van Yperen, 2008). Some examples of the variables studied are type of service use within a family, type of psychological problems of the parents, functioning of the child and characteristics of the relationship of caregivers (e.g. violent, unstable). Group differences were studied using regression analysis for exploring which predictors determine the decision on family preservation.

Results – Differences between families whom are given a final chance to stay together (‘go’) and families for whom a separation decision (‘no go’) was being made have been explored. The ‘go’ group existed of 29 families, for the remainder families (28) out-of-home placement of the child was decided. Differences were found, among others factors, in the type of service use, characteristics of the relationship of parents, neglect in childhood of parents and learning (dis)abilities. Regression analyses indicated some typical predictors.

Conclusion - In the presentation we will discuss the outcomes of our study, especially by reflecting on the meaning of identified predictors of the ‘go - no go’ decision, including the impact this might have for the current assessment procedure and decision-making processes as applied by the practitioners at the Expertise Centre.


Targeting Supervisors to Create Child Welfare System Change: A State-Initiated Rollout of the R3 Supervision Model

Dr. Lisa Saldana (Oregon Social Learning Center), Ms. Janet P. Davis (Oregon Social Learning Center), Dr. Patricia Chamberlain (Oregon Social Learning Center)

Objectives
Numerous empirically supported behavioral health preventive interventions show improved outcomes for high-risk children and families, yet few are assimilated into public service systems enough to have a measurable public health impact. R3 was born out of a request by a large child welfare system (CWS) to train their workforce in the use of evidence-based principles in their every day interactions with families. R3 draws from three areas of reinforcement shown across child and family EBPs to produce positive outcomes: Reinforcement of (1) effort, (2) relationships and roles, and (3) small steps toward goal achievement. The aim of R3 is to expose families to these three Rs in each interaction with their caseworkers to bolster positive progress toward completing CWS treatment plans and to yield a significant public health impact by improving system-level outcomes related to child permanency and placement stability.

A supervisor targeted implementation strategy was used to maximize the potential reach across the system, while working under the real-world limitations of training and coaching capacity. Supervisors have the greatest influence over the behavior of caseworkers, and are well situated to shape interactions between caseworkers and families.

Method
A recent state-initiated rollout of R3 is underway in the United States providing a real-world opportunity to evaluate the R3 strategy and examine potential system level impacts. Observation-based, rapid, fidelity monitoring and feedback facilitates the potential for efficient system-wide behavior change. Through developer-system partnership, full day supervisor and half-day caseworker R3 trainings were rolled out by state region. Each region was trained fully within the same week, with multiple concurrent training sessions occurring.

Following training, supervisors met a minimum of once monthly with their supervisee caseworkers for group supervision. Group supervision sessions were video recorded and uploaded to a secure fidelity monitoring web-based system for review by an R3 expert coach. Expert coaches provided monthly observational monitoring and fidelity rating, written feedback, and virtual consultation coaching. Supervisors were coached to use R3 in their interactions with caseworkers and to support the caseworkers to use R3 with their families.

Results
Four cohorts of child welfare staff including regional leadership, supervisors, and caseworkers were trained in R3 strategies and principles between September 2015 and February 2016 (n = 355). Lessons learned regarding system collaboration and large-scale rollout will be shared, including workforce considerations (e.g., inability to take entire workforce offline for training, meeting supervision policy requirements) and the need for flexibility to address system contexts. While supervisors and caseworkers reported high levels of satisfaction with the training, both groups reported ambivalence toward implementing the R3 supervision approach, with anxiety about being recorded and lack of
time for an additional meeting being cited as the most frequent concerns. Qualitative reports from
supervisors following the initiation of coaching suggest a majority of supervisors increased their level
of engagement in and positive feeling toward implementation of R3 once the group supervisions and
coaching was underway.

This presentation will include results from 6-month post-training supervisor feedback collected from
brief phone interviews. Moreover, change in fidelity scores from baseline to 6-months will be de-
scribed.

Conclusions

The R3 supervisor strategy was developed to improve interactions between families and the child
welfare system. Improved interactions and feelings of support have the potential to lead to increased
collaboration toward child welfare treatment plan completion. By infusing evidence-based strategies
into everyday interactions between child welfare staff and the families they serve, there is an increased
potential for quality and timely service plans to be achieved ultimately leading to improved child
and family outcomes.
Family complexity in child welfare - A comparative study on family intervention

Friday, 16th September - 13:06 - Family Intervention

Dr. Ingunn T. Ellingsen (University of Stavanger, Faculty of Social Science, Intitute of Social Work), Prof. Ingunn Stadsrod (University of Stavanger, Faculty of Social Science, Intitute of Social Work), Ms. Ida Bruheim Jensen (University of Stavanger, Faculty of Social Science, Intitute of Social Work)

Social workers around the world deal with family complexity in their everyday practice. How social workers understand family and family complexity will possibly influence their assessments and discretions leading to decisions about intervention. Children’s welfare constitute an important policy area in many countries. However, orientations may vary from a focus on child protective and risk oriented approach to a broader family welfare approach (Khoo et al 2002; Gilbert et al. 2011; Samsonsen, 2016). In our presentation, we will direct attention to how social workers in the child welfare/protection services in two different welfare contexts (Norway and Mexico) reflect upon family and family complexity, and furthermore how their assessments and discretions in relation to a specific case lay ground for decisions about interventions in the family. The study aims to explore social workers discretions leading to intervention (or lack of intervention), as well as similarities and differences between the two countries.

The study is part of a larger research project: Family complexity and Social Work in different welfare regimes. The project is funded by NORFACE/Welfare State Future and the overall aim is to compare family policies and family-based social work in four different welfare regimes; de-familialised, partly de-familialised, familialised and re-familialised welfare states (Hantrais, 2004). Data will be collected from four services areas: 1) child welfare, 2) drug/alcohol abuse, 3) migration and 4) mental health.

The current study has a case study design, which is concerned with the complexity and the nature of the case at stake (Stake, 2013; Bryman, 2003). The vignette used in the study describe a complex family situation involving issues related to the four above mentioned service areas. Vignettes has been recognized as a powerful tool to investigate professional decision-making (Kriz & Skivenes, 2013) and judgements (Smithson, 2000). The vignette study approach will be combined with a focus group method, which allows the participants to respond to each other’s views and a dynamic exploration of attitudes, beliefs and reactions in a way that may be difficult in one-on-one interviews (Bryman, 2003). Directed content analysis (Hsies & Shannon, 2005) will be applied to explore how social workers reflections and discretions to the case, and how they would approach the family and intervene to the case described in the Vignette. The analysis will be directed by Hantrais’ (2004) welfare regime typology. Data collection period is from January 2016 to April 2016.

Preliminary findings will be presented with focus on social workers discretions and assessment leading to interventions, as well as similarities and differences between social workers both within- and across the two welfare regimes. Practical implications of social worker’s conceptions, leanings and discretions influence on social work practice with complex families in child welfare/protection will be discussed.
Success and failure in identifying abusive or neglectful parents who have the capacity to change

Friday, 16th September - 13:18 - Family Intervention

Prof. Harriet Ward (Loughborough University), Dr. Georgia Hyde-Dryden (Loughborough University)

Introduction
Evidence concerning the impact of abuse and neglect in the early years points to the importance of taking swift and decisive action when very young children are suffering, or likely to suffer, significant harm. The decisions made by professionals who have safeguarding responsibilities will have long-term consequences for the life chances of both children and parents concerned. Yet such decisions are exceptionally complex and often balanced on a knife edge. This paper draws on data showing the trajectories of children who were identified eight years ago as living in circumstances likely to cause them significant harm and explores the factors that led to successful (and unsuccessful) identification of parents who had the capacity to make sufficient changes to provide them with nurturing homes.

Methodology
The study traces the decisions made by professionals and their influence on the life pathways and developmental progress of a cohort of babies identified as being at high risk of harm from abuse or neglect, from before birth to their eighth birthdays. Forty three babies from ten local authorities were traced until they were three; 37 until they were five and 36 until they were eight. Data have been collected from annual in-depth interviews with birth parents and carers; interviews with children aged seven and over; interviews with teachers and social workers, children’s social care files; parent, carer and teacher completed Strengths and Difficulties Questionnaires, and the National Pupil Database.

Key Findings
By the time the children were eight over half of them had been abused or neglected at some point in their lives, and about a third of the sample were still experiencing maltreatment. There were almost eight times as many children displaying emotional and behavioural difficulties that were scored in the ‘very high’ range as would be found in a normative population.

Children’s wellbeing was related to parents’ ability to overcome the factors that had placed them at risk of significant harm as infants. By the time the children were eight, nine (25%) parents (or sets of parents) had succeeded in overcoming risk factors and sustaining changes that had been made since before the children’s first birthdays; eight parents (of nine children) who had made similar changes had not succeeded in sustaining them and 18 (50%) parents had only made minimal changes.

Discussion
The paper will explore the factors that contributed to parents’ success in overcoming risk factors and sustaining changes. These included the nature of primary risk factors such as substance misuse, domestic abuse or mental health problems; the daily challenges of poverty, ill health or poor housing; the stage parents had reached in the process of change; the availability and nature of informal support networks; and the availability of both personal and public resources. Particular attention will be given to factors that influenced professional assessments of parental capacity to change. These were shaped by the extent to which parents were perceived as being determined to change, often related to the quality of their relationship with the practitioner. While many assessments were
meticulous, they were rarely based on objective, standardised information. Assessments that proved to be overoptimistic were often influenced by common errors of intuitive decision-making including inadequate or inaccurate information and a tendency to be influenced by first impressions and/or to ignore the child’s point of view. Organisational factors such as a rapid turnover of staff and overwhelming caseloads also meant that difficult decisions were often postponed.
The power issue on the negotiation process of discharge – perceptions of children in care, caregivers and social workers

Friday, 16th September - 12:42 - Children and Young People Voices

Prof. Mooly Wong (The Chinese University of Hong Kong)

This presentation will report a research study aims at exploring the power issues when negotiating discharge among children placed in residential childcare services, their caregivers and the residential childcare social worker in a Chinese context. It will highlight a) the perceived roles and power distributions of children, the caregivers and the residential childcare social workers and b) the strategies utilized by the children and the caregivers in response to the residential childcare social workers while striving for their own purposes will be highlighted. The design of the study is qualitative. A total of 8 children (from 7 families, with two children being siblings), 7 caregivers and 7 residential childcare social workers were recruited for the study. The data were collected by in-depth interviews, supplemented with the method of photo elicitation for children and analyzed by themes of the stories told by the informants. The results indicated that children had strong sense of powerlessness when they negotiated the discharge with adults, including their caregivers and the residential childcare social workers. The caregivers found that they had some say in the discharge but their views had to be endorsed by the residential childcare social workers. The residential childcare social workers did not deny that they had paramount power to make the discharge plan: they perceived their role as that of an assessor and an enable. Indeed, the findings revealed that the residential childcare services were, in the stories of children and the caregivers, a disciplinary force. The residential childcare social workers “gazed” them through the mechanisms such as case review meetings and home leave, and these observations became the grounds to measure the children’s suitability for discharge. The children and the caregivers utilized strategies such as compliance and resistance in response to the power of the social workers. This study concluded that residential childcare services as part of the array of Hong Kong’s child welfare services, adopted the work approaches as discipline and supervision for the children, and as punishment, blaming and risk minimization for the family. As a consequence, it was extremely difficult for social workers and families to establish a collaborative relationship in the services. It was suggested that a) residential childcare social workers should use their power flexibly based on situations and b) residential childcare services should adopt a work approach that emphasized on the well-being of children and families.
THE «COLLECTIVE LISTENING» AS A TOOL FOR THE EMERGENCE OF THE VOICE OF THE CHILDREN IN OUT-OF-HOME CARE

Friday, 16th September - 12:54 - Children and Young People Voices

Dr. Silvio Premoli (Catholic University of the Sacred Heart, Milan), Prof. Valerio Belotti (Università degli Studi di Padova)

The voice of boys and girls, users of out-of-home child protection services must be heard and their participation promoted (Premoli, 2012), as the Convention on the Rights of the Child (UN, 1989) requires. It is, on the one hand, to promote citizenship and give value to those young people who are experiencing greater difficulties and, second, to receive from them, the top experts of residential and foster care, improvement recommendations. If all this happens in a collective dimension, and not just through individual interviews, shows a huge surplus at all levels.

The Italian Ministry of Labour and Social Policy and the National Centre for Documentation and Analysis on Childhood and Adolescence implemented a national survey on children living in out-of-home care.

The survey included two research lines: a quantitative sample survey, and a qualitative, focused on the lived experience from the point of view of children. Specifically, the interest of qualitative research is aimed at understanding which representations children and young people have of their lives outside the birth family and their history of alternative care. From the outcomes obtained we can find directions and recommendations for the system of residential and foster care.

The qualitative inquiry involved the creation of focus groups for each of the following groups, with adequate representation of foreign people and balanced female/male rate:

- Children in residential care (aged 11 to 17);
- Children welcomed in foster care (aged 11 to 17);
- Young people (aged 18 to 21) in residential care transition to adulthood.

The focus groups were equally hosted in Milan, Rome, Firenze, Bari.

The focus groups were managed, according to the methodology of “collective listening”, by two professionals acting as a facilitator and a researcher. The facilitator promoted reflexivity, dialogue and narratives through creative and recreational activities, while the researcher was writing an ethnographic diary on what happened. The group of children in RC and the group of children in FC in each city met.

The methodology of ”collective listening” (Belotti et al., 2012) is based on a simple idea: to bring together boys and girls in out-of-home care allows them to express their vision of the experience outside their birth family, to recognize themselves in the experiences of others (feeling less different and less alone), to earn a collective point of view, which can be turned into a public initiative. Young people, then, shall speak and communicate their thoughts to educators, social workers, psychologists, administrators, politicians, officials, policy makers, offering ideas to improve child welfare services.

A code of ethics, known by the participants, ensured their free participation and privacy.

The most important topics emerged:

514
• Differences, similarities and prejudices between FC children and RC children and “Community”
• The importance of stability and reliability of the care giver (parent or social pedagogue)
• The rules and the rights in the children’s home
• My first day in out-of-home care
• The child involvement in the alternative care
• The experience of being unaccompanied foreign minors
Outcomes in Kinship Care in Western Australia: what young people say.

Friday, 16th September - 13:06 - Children and Young People Voices

Mr. Murray Davies (The Viewpoint Organisation), Mrs. Judith Garsed (Department for Child Protection and Family Support)

Objectives

To share an analysis of reports by young people in out of home care that predict ‘safe and settled’ placements and the attainment of positive well-being outcomes.

To share a comparison of responses from Indigenous and non-Indigenous young people in kinship care, foster care and residential care

To show how the analysis informs strategies to shape and improve practice

To demonstrate how young people in kinship care are involved in decision making about their care combining reflective practice and new media technology

Method

Sharing the analysis of a sample of responses from over 600 young people informing the development of a model detailing predictors related to being ‘safe and settled’ and the link to wellbeing outcomes.

Sharing a comparison of responses from 2000 young people in kinship care, foster care and residential care, differences in their self-assessments and the implications for practice and strategic planning

Presenting the importance of involving young people in kinship care in decisions about their care; the approach in Western Australia using new media technology to engage and involve Indigenous and non-Indigenous young people; and the importance of reflective casework practice to help young people develop their understanding of their circumstances and enable them to contribute to their individual plans

Results

Participants will have had the opportunity to consider a model detailing predictors related to young people being ‘safe and settled’ and achieving wellbeing outcomes while in out of home care and the differences between kinship care and other placement types. The importance of involving young people in in kinship care in decisions about their care, and an approach in Western Australian will have been discussed.
Working with Foster Care and the use of Family Group Conferences. Children and adolescent’s experiences.

Friday, 16th September - 13:18 - Children and Young People Voices

Mrs. Anne-Kari Johnsen (The Arctic University of Norway, Regional Centre for Child and Youth Mental Health and Child Welfare), Prof. Astrid Strandbu (The Arctic University of Norway, Regional Centre for Child and Youth Mental Health and Child Welfare)

Objective: Family Group Conference is a resolution model, which can be used by the Child welfare services. The intention behind the model is to increase the impact of family decision-making in child welfare processes. It is possible for children, parents, and others from the child’s network to participate in the Family Group Conference. However, it is the child’s situation which is to be the center of the discussion. In Norway, Family Group Conferences were introduced at the end of the 1990s, and the implementation of the model has had high governmental priority. In the autumn of 2011, the research project Use of Family Group Conferences in Foster Care was initiated. In this project, data was collected from 92 child welfare cases, including 114 children. 91 \% of these children were present during Family Group Conferences. The aim of the current study was to explore children and adolescents’ experiences of participation in Family Group Conference when foster care is involved.

From the children and adolescents perspectives, are Family Group Conferences a good way to solve problems within the family? Do Family Group Conferences contribute to create some predictability in children and adolescents’ lives?

Method: Data was collected through semi-structured interviews of 22 children and adolescents in the age of 7-17 years, 12 girls and 10 boys, from 18 Family Group Conferences.

Results: Children and adolescents reported that they lacked information about different aspects related to Family Group Conferences. Nevertheless, they had an idea of what the aim of the proceedings was. The children’s involvement and degree of decision making before and during the Family Group Conference varied. Despite stress and negative emotions ahead of Family Group Conferences, none of the children expressed regrets regarding their participation. Children and adolescents did not report any traumatic incidents from the meetings. The meetings were described by several as boring.

After the meetings, negative emotions seemed to be about what was going to happen in the future. Family Group Conferences seem to have a somewhat limited function when it comes to creating predictability, especially for the youngest children. Most of the children in this study wanted to participate in Family Group Conference even though it seemed unclear to what extent, or in what way, their participation could be beneficial for them or their situation.

Conclusions: The main finding is that sufficient and adequate information seems to be crucial when facilitating for children and adolescents participation. There is room for some improvements regarding sharing information with children before and after Family Group Conferences. There were no indications that children and adolescents participation were harmful to them, even though some children expressed feeling pressured to participate. However, there are still questions related to long-term outcome of Family Group Conferences that remains unanswered.
Evidence-based positive parenting programs: A prevention strategy for at-risk families.

Friday, 16th September - 12:30 - Evidence-based positive parenting programs: A prevention strategy for at-risk families

Dr. María José Rodrigo (University of La Laguna)

In Europe there is an increasing use of parenting programs aimed at strengthening and empowering families and communities in the context of family preservation services, inspired by the Council of Europe Recommendation (Rec2006/19) on Policy to Support Positive Parenting. The prevention focus is on increasing parenting skills and social support to avoid unnecessary displacement of children from their homes in families at psychosocial risk. Parenting skills should also be promoted in the process of family reunification when children are already in foster care. Parental support is intended to be provided in non-judgmental, non-stigmatizing, participatory, inclusive, needs-led ways that require that parents be placed at the very center of the services. However, there is still little evidence available on the parenting programs targetted to at-risk families that have demonstrated effective prevention impact when subjected to rigorous evaluation in Europe. The aim of this symposium is to illustrate some of the evidence-based parenting programs implemented and evaluated in Spain and Portugal, which is an important step toward introducing the evidence-based movement in the domains of child and family services. Presentations will provide evidence on the effectiveness of several positive parenting programs, delivered through partnership schemes involving universities and autonomous and local agencies, aimed at family preservation and reunification in Spain. Taking a broader scope, the symposium will also provide information on the variety of types of parental support services available in educational, health, child protection and social services in Portugal. The evidence provided would help to increase our knowledge of how parenting support is delivered in Spain and Portugal, stimulating discussions on the future challenges that need to be addressed to continue the current expansion of evidence-based programs.
The Family Education and Support Program: A psycho-educational intervention to promote positive parenting with families at risk

Friday, 16th September - 12:42 - Evidence-based positive parenting programs: A prevention strategy for at-risk families

Dr. Lucía Jiménez (University of Seville, Spain), Dr. Victoria Hidalgo (University of Seville, Spain), Dr. Bárbara Lorence (University of Huelva), Dr. Susana Menéndez (University of Huelva), Dr. José Sánchez (University of Sevil)

Congruent with an evidence-based philosophy, the Family Education and Support Program (Formación y Apoyo Familiar, FAF in Spanish) is a theory-driven, needs-based and rigorously evaluated parenting program. It is aimed at promoting positive parenting for families at psychosocial risk. It was designed to be applied by family preservation services (FPS), consisting of a two-year group intervention guided by a psychologist. This program integrates psycho-educational and community models and it is based on participative and experiential methodology. For effectiveness purposes a quasi-experimental design has been followed, including a pretest-posttest evaluation controlling for a comparison group, as well as process evaluation with implementation records and observational measures. It has been replicated through several trials in Spain and Peru. In this presentation a comprehensive overview about the program and its results is presented, focusing on relevant information about implementation characteristics and family profiles that benefit more from this intervention.
Evidence-Based Parenting Program to Develop Emotional Competences

Friday, 16th September - 12:54 - Evidence-based positive parenting programs: A prevention strategy for at-risk families

Dr. Raquel-Amaya Martínez-González (University of Oviedo)

Objective: The main objective of this study is to gain evidence on to what extent parents can benefit from taking part in the Program-Guide to Develop Emotional, Educational and Parenting Competences devoted to enhance emotional and parenting competences (Martínez, 2009). Method: Information was analysed from 259 parents participating in 26 editions of the Program-Guide delivered in 26 urban and rural municipalities placed in central, east and west areas of Asturias (Spain). The parents’ educational background was taken as possible moderator variable of the results. A pre-experimental correlated pretest-posttest design was carried out with short-term measures. Factors affecting both the internal and external validity of the design were taken into account. The Emotional and Social Parenting Competence Scale included in the Program-Guide was applied in the first and the last sessions as pretest and posttest. The Cronbach Alpha of the total scale once applied to the 259 participants was .727 for the pretest and .814 for the posttest. For the purpose of this presentation a selection of items of the dimensions “Strategies to solve conflicts and to negotiate” and “Strategies to fix coherent norms, limits and consequences to promote positive discipline” were analyzed. Repeated measures analysis for matched groups was performed through SPSS; significant statistical differences were checked in the extent parents gained the parenting competences under study. The effect size was calculated through R2 and Cohen’s d.

Results: The results obtained shown significant statistical differences between the pretest and the posttest in the items analysed (p < .05). The effect size ranged from medium-moderate to large.

Conclusions: Evidence was gathered of the effectiveness of the Program-Guide when delivered by trained professionals from social services and education with groups of parents with children of diverse developmental stages. Prevention efforts through delivering parenting programs should be invested to promote healthy family functioning and child well-being.
The Moderating Role of Quality of Neighborhood on the Effectiveness of a Home- and Group-based Parenting Program.

Friday, 16th September - 13:06 - Evidence-based positive parenting programs: A prevention strategy for at-risk families

Dr. María José Rodrigo (Universidad de La Laguna), Dr. Miriam Alvarez (Universidad Francisco de Vitoria), Dr. Sonia Padilla (Universidad de La Laguna), Dr. Sonia Byrne (Universidad de La Laguna)

In the field of early child maltreatment prevention, there is an increasing concern about the importance of evidence-based parental intervention to help parenting in vulnerable parents. Early intervention programs are specifically recommended to start intervention as soon as possible. Individual variables are usually proposed to moderate program effectiveness. The present study examined the moderating role of quality of neighborhood on the effectiveness of the group- and home-based version of the Growing Up Happily in the Family Program for at-risk parents with children between 0 and 5, delivered through local social services in Spain. Program outcomes were parenting attitudes, parenting sense of competence and parenting stress. In the group program, the participants were 133 parents who attended the program in 10 Social Services from the Autonomous Communities of Castile and Leon, Canarias and Catalonia. In the home version, the participants were 96 parents referred by the municipal social services of Tenerife (Canarias). Participants, in both programs, were mainly mothers, young, half of the participants lived in a two-parent family, lived in urban areas, had primary education, were on welfare and unemployed, and half of the participants were in low-medium risk situation. Results showed that, after the program, parents living in neighborhoods with higher socioeconomic levels, higher security, and higher cohesion-integration reported better results in parental attitudes in the group version. Parents living in neighborhoods with lower socioeconomic level and less physically preserved, but with higher security and higher cohesion-integration reported better results in parental attitudes in the home version. Parents living in neighborhoods with higher socioeconomic level, higher security and more community resources reported less parenting stress and more sense of competences in the home version. These findings illustrate how quality of neighborhood not only shapes parenting but also affects the intervention context in a way that at-risk parents get more benefits from the program.
The Child Protection System: A Parental Competences Program during the process of Fostering and Family Reunification

Friday, 16th September - 13:18 - Evidence-based positive parenting programs: A prevention strategy for at-risk families

Dr. M. Angels Balsells (University of Lleida (Spain)), Dr. Crescencia Pastor (University of Barcelona), Dr. Nuria Fuentes-Peláez (University of Barcelona)

Objective:

One of the challenges in the Child Protection System in Spain is to assist reunification processes. The training programs to improve the parenting are part of this assistance, but in our Spanish context we don’t have such type of resources.

This paper presents the results of a research realized in Spain, focus on specific training needs that serve to support a program that promotes positive parenting in the process of reunification within the Child Protection System. And, present the program build according the evidence based programs standards.

Method:

The study was conducted with 63 professionals with experience in residential or kinship foster care, 42 parents (34 were reunited and 4 were in process) and 30 children between 12 and 20 years old (21 were reunited and 9 were in process). Data collection was gathered through focus-groups and interviews, and it was analyzed by the technic of content analysis.

Results:

The results indicated specific needs in the family reunification process related to five major issues: type of foster care, visits and contacts, preparing returning home, earlier days at home after reunification and consolidation of the reunification. (Balsells, Pastor, Amorós, Mateos, Ponce y Navajas, 2014; Balsells, Pastor, Mateos, Vaquero y Urrea, 2015)

These needs were transformed into educational objectives to build a program to support the acquiring of specific parenting skills for family reunification.

The program is based on three pillars: a) the specific needs for the exercise of parenthood during the process of kinship foster care or residential care; b) the process of family resilience referring to a family who has successfully achieved the reunification after the intervention of the Child Protection System; c) and the participation of those involved, and especially the children whose interests are linked to know their family problems, the characteristics of intervention (child protection measure) and the potential changes in their lives. (Balsells et al., 2010; Fuentes et al., 2013; Mateos et al., 2012).

The intervention approach of the program is an individual-group methodology, which attends at the same time parents and children. The design includes the evaluation.
Surveying positive parenting interventions in educational, health, child protection and social services: A Portuguese study

Friday, 16th September - 13:30 - Evidence-based positive parenting programs: A prevention strategy for at-risk families

Prof. Ana Almeida (CIEC-Universidade do Minho), Prof. Orlanda Cruz (Universidade do Porto)

Gathering information on the variety of types of parental support in Portugal can provide relevant data on its scope, organisation, modes of delivery, funding and, envision how effectively are parent needs being covered. Parent support services include the provision of information, advice, education and counselling on child care and parent-child relations. The majority of these provisions is carried out in universal accessible resources such as schools units, health and social services in the family community. Like in many European countries, positive parenting has become an issue in family policymaking, however no systematic survey has supplied us with knowledge about such interventions. Aiming at overcoming this lack of information, we conducted a survey to get essential information on positive parenting actions being implemented with a psychoeducational frame in the sectors of education, health and social services. An online questionnaire was specifically developed addressing the modes of delivery, scope, organizational setting, length and regularity, and professional profiles. Participants were psychologists, social workers, healthcare professionals (e.g., nurses, paediatricians) pedagogues at work in guidance and counselling services in public schools, health centres, ONG and communitarian social services and child protection agencies. The results allow to map positive parenting interventions by sector and region in Portugal identifying trends from flexible less-structured to evidence-based practices. In the discussion we highlight the possible impact of the present study to boost parenting policy and family needs assessment.
Implementation Science and Decision Making in Child Welfare

Friday, 16th September - 12:30 - Implementation Science and Decision Making in Child Welfare

Dr. John Fluke (Kempe Center for the Prevention and Treatment of Child Abuse and Neglect),
Dr. Matt Davis (University of Utah)

Implementation Science has evolved to represent an important framework for developing the capacity of child welfare agencies to advance the effective installation of promising and evidence based practices. The intent of this symposium is to present examples of applied research from the states of Utah and Florida that put implementation science into action in a variety of contexts. The presentations will cover variability in decision making by child welfare workers, effective organizational factors that lead to sustained change, processes for implementing evidence-based programs and practices successfully, a structure for continuous quality improvement which is guided by ongoing program assessment and consultation, and more effective feedback by using technological advances to enable real time program and agency data dashboards for use in continuous quality improvement efforts.
The role of Decision Making in Implementation Science

Friday, 16th September - 12:42 - Implementation Science and Decision Making in Child Welfare

Dr. John Fluke (Kempe Center for the Prevention and Treatment of Child Abuse and Neglect)

A major aspect of implementation science theory is the concept of implementation drivers, in particular, leadership, organization, and competency (Fixsen, Blase, Naoom & Duda, 2015). The role of decision making in child welfare is pivotal to addressing all three implementation drivers in the context of child welfare, and especially in the area of competency. Professional judgments and decisions in child welfare cases are difficult and complex, often based on ambiguous, partial, and contradictory information. These decisions have serious consequences not only for the child, but for the entire family. Yet, decision making in Child Welfare is characterized by low reliability, considerable variability across casework staff and organizational work units, and errors, especially false positive errors. This variability in decision making behavior renders high fidelity implementation of practices in child welfare contexts problematic. Examples abound of apparent errors where CPS did not act when it should have, or acted when it should not have. CPS decision makers at all levels from direct practice to agency administration can benefit from taking advantage of the knowledge gains and progress regarding decision-making research. Theoretical developments based on this research, such as the Decision Making Ecology (Fluke, Baumann, Dalgleish, & Kern, 2104) have important implications for research in implementation science and consequently the application of implementation science in effective program and practice installation. This presentation will provide examples of applied research based on decision making and implementation science theory that help to articulate hypotheses and explain how context and decision maker behaviors impact child welfare decision making and the implications for effective program implementation.
In-Depth Organizational Evaluation of Child Welfare Agencies

Dr. Mary Armstrong (University of South Florida)

Currently, services research has a body of research around organizational culture and how to effectively assess organizational status and change capacity. This session will present a mixed methods evaluation approach to understanding and assessing sustainable change capacity in child welfare programs and agencies. The focus will be on evaluation methods that identify effective organizational change implementation strategies that improve outcomes for at-risk children and their families.

Systems theory and implementation science provides the theoretical framework for this evaluation approach. Child welfare services involve multiple, formal and informal, interconnected components – never just one organization. Systems change is a purposeful transformation of the ways in which organizations function and interact with one another on behalf of children and families. Implementation Science is the study of methods to promote the integration of research findings and evidence into policy and practice.

This presentation will introduce participants to strategies for conducting in-depth assessments of child welfare agencies using a participatory research approach. Data collection methods will be reviewed including assessment of organizational culture and climate through staff surveys; assessment of interagency collaboration levels using a standardized instrument, interviews and focus groups with agency leadership, case managers and supervisors; observations of case managers in court and during home visits; review of child and family outcome data; case record reviews, and focus groups with key external stakeholders including judges, Guardian ad Litems, and treatment providers. Data analysis methods will be shared including triangulation of the findings. Challenges and limitations of the evaluation will be presented including dealing with resistance by leadership and/or line staff, sharing “bad news”, and maintaining rapid feedback. The presentation will conclude with lessons learned including the importance of establishing boundaries around the scope of work, clarity about roles (evaluator vs consultant), dealing with unexpected findings, and the importance of individual and shared reflexivity.
Implementing Evidence-Based Programs

Friday, 16th September - 13:06 - Implementation Science and Decision Making in Child Welfare

Ms. Melissa Johnson (University of South Florida)

There is an ever increasing focus on evidence-based programs and practices in the health and human services fields. Over the past decade, this interest in evidence-based practice has gained significant momentum in the child welfare and children’s mental health service sectors. More than ever before, expectations, especially from funders, are that service agencies will utilize practices that have demonstrated efficacy and effectiveness. While the benefits of using evidence-based programs and practices seem evident, research suggests that evidence-based practice is often poorly understood and agencies frequently struggle with implementation. The result is that agencies fail to achieve the full potential of evidence-based practices and the positive outcomes for children and families associated with them. Building upon the previous presentation’s introduction to implementation science, this presentation will delve deeper into the processes for successfully implementing evidence-based programs and practices.

In particular, this presentation will discuss critical supports and strategies for overcoming barriers and ensuring successful implementation of evidence-based practices. Implementation often requires extensive periods of knowledge acquisition, skill development, coaching and consultation, as well as adequate funding and structural supports, for sustainable practice changes to be achieved. The role of agency leadership in creating an environment that supports the implementation of evidence-based practice will be highlighted. Additionally, the importance of practice fidelity and the incorporation of ongoing monitoring, evaluation, and continuous quality improvement processes will be discussed, as well as some of the limitations to evidence-based practices and ways these limitations may be addressed.
Using Implementation Science and Continuous Quality Assurance to Increase Program Effectiveness

Friday, 16th September - 13:18 - Implementation Science and Decision Making in Child Welfare

Dr. Matt Davis (University of Utah), Ms. Mindy Vanderloo (University of Utah)

Due to barriers in accessing information, time constraints, and limited funds, treatment providers struggle to implement and sustain evidence-based programming. We will present an approach to implementation science and continuous quality improvement designed to enable programs to consistently incorporate evidenced-based programming to better serve and improve outcomes for children and families involved in child welfare services. This process centers on the idea that a program, much like the children and families it serves, is able to improve more reliably and rapidly when provided with: 1) timely feedback on current functioning which results in actionable insight; 2) strategies that incorporate principles of learning which structure the change process; and 3) extensive motivational support. The evaluation and improvement process presented in this session puts these ideas into practice by addressing the following evaluation activities: engagement, structured assessment, personalized feedback, collaborative planning, and ongoing technical assistance.

The approach will be illustrated with a four step process which focuses on: 1) the target population; 2) evidence-based components; 3) changes in participant attitudes and behaviors; and 4) changes in system outcomes, such as reduced neglect and abuse. We have found this process to assist programs in meeting their own goals of improvement, as well as help move the program to better align with the goals and vision of the child welfare agency. It also has helped identify areas that need improvement across providers and motivated the agency to provide additional resources to address these areas. Finally, this has helped the agency to identify and address problems within their system that have inhibited treatment providers’ ability to adequately addressing treatment needs.
Using Technology to Develop Effective Continuous Quality Assurance Mechanisms

Friday, 16th September - 13:30 - Implementation Science and Decision Making in Child Welfare

Mr. Michael Tanana (University of Utah)

A major challenge in implementation science and program evaluation is providing rapid, useful feedback. Traditional feedback methods are too slow to use effectively with implementation science and continuous quality improvement evaluations. Often, by the time the data is analyzed and conclusions written, the feedback is too late for it to have a meaningful impact on the implementation of a training program. Furthermore, traditional approaches are labor intensive, thereby limiting the scale at which evaluation can take place because only a small selection of programs can be evaluated without expending a large amount of resources.

During this presentation, methods for using technology to improve the evaluation process will be presented. We have developed approaches for leveraging technology to regularly process large databases and automatically analyze outcomes. Rapid feedback is made available to agency directors, program directors, and case managers using interactive web based dashboards that include graphs and interactive data visualizations. Administrators and staff can explore important process indicators such as risk assessments for all children at program entry and outcome indicators including the average length of stay, custody closure reasons, and permanency rates. As this data is processed automatically, there is essentially no extra effort in analyzing and providing feedback to a large number of programs. Agency directors can then examine program functioning at the level of an individual program or compare programs system wide. The end goal in using technology to facilitate implementation and evaluation feedback is to enable social service providers to have easily accessible and actionable data when making decisions designed to improve outcomes for children and families.
Challenges for 'global' thinking and practice in child welfare

Friday, 16th September - 15:00 - PLENARY SESSION: Diversity, Migration and Child Welfare

Prof. Tarja Pösö (University of Tampere)

'Diversity' is not new in child welfare, as diverse issues and troubles, groups of children and families, communities and professional responses have characterised child welfare for a long time. Diversity related to migration, however, does need special attention as it challenges child welfare to think and respond both at the global and individual levels of children and families, their needs and rights. The meaning of diversity becomes too narrow if it is only seen in terms of cultural diversity.

This session addresses migration in a broad sense: it recognises that children and families migrate for a variety of reasons. Children do not typically make the decisions about migration but sometimes they migrate on their own. When they do, the very notions of dependent children become challenged. For child welfare, migration poses fundamental questions about children’s agency, dependency, vulnerability and their right for protection, which in their depth and intensity are new across so many countries. Children may be active and skilful agents in migration but they may also be the most vulnerable and abused group in migration. Needs for new psychosocial interventions emerge as do new ways to implement them. For example, close and meaningful social relations may spread across many countries and in order to support the child’s well-being those transnational relations should be included in the intervention.

The recognition of children’s rights as a paramount principle asks child welfare to think globally as the rights are not bound to a concrete nation state – neither the one left behind or the country being migrated to. The term ‘global child protection’ has been suggested to support new thinking and practice in child welfare.
Children in transnational families: Intersectional perspectives on serial migration and language brokering

Friday, 16th September - 15:25 - PLENARY SESSION: Diversity, Migration and Child Welfare

Dr. Anne Phoenix (University of London)

The current global concern with migration has sharpened consciousness that families and children are centrally implicated in processes of migration. This has fuelled recognition that within and across countries, we are all interlinked in what Avtar Brah has called ‘diaspora space’. Yet, while there is a general acknowledgement that most societies have become more diverse over time, there is generally little recognition of what this diversity looks like for migrant children and families or the implications for child and adolescent welfare.

This paper focuses on two areas where migration status and other forms of diversity intersect, but that are frequently overlooked: serial migration and language brokering. Serial migration, where family members migrate at different times frequently means that children spend years living away from their birth parents before rejoining them. In language brokering children, who may or may not have migrated themselves, interpret and translate for parents who do not speak the local language. The paper aims to throw light on what diversity means for children, constructions of childhood and parenting by exploring children’s experiences of these transnational family practices in intersectional and psychosocial perspective.
Asylum-seeking children in Spain: needs and intervention models

Friday, 16th September - 15:50 - PLENARY SESSION: Diversity, Migration and Child Welfare

Dr. Amaia Bravo (University of Oviedo)

The arrival of numerous unaccompanied asylum seeking children (UASC) for the past 20 years has been a challenge for the child welfare system in Europe. Childcare resources and professionals have made a big effort to adapt services and procedures to the specific needs of these children.

There is a clear interest in international research for going in depth in the meaning of this migrant process and its ethical, political and practical implications in child care systems.

Interpretation and implementation of United Nations Convention on the Rights of the Child (UN-CRC, 1989) regarding the recognition of these children as ‘children first and foremost’ has been unequal among European countries. There are important differences in the ways of facing the tension between child care principles and migrant control interests.

The name of ‘unaccompanied asylum seeking children’ has been used to described a complex phenomenon, including all the migrant children travelling without the company of a guardian but with many differences regarding to their origin, reason for migrating and needs. While conflicts and insecurity in the country of origin are the reason for making this long trip to some countries, the lack of economic resources is the main motivation for children arriving to others, such as the Spanish case. For some of them the concept of refugee makes sense, with its legal and emotional implications, but for others the status of admission in the new country takes different forms.

Nevertheless, there is a common debate in this field about which are the best practices in some key aspects of the care intervention: age assessment, how to assess and meet their needs, specific responses for placement, education, transition to adulthood and social support. Main conclusions of different researches point out the need for further support for the transition to adulthood and attention to their emotional distress to favor the adaptation of these vulnerable children to the host country.
Characteristics of children in foster care, family-style group care, and residential care: A scoping review

Friday, 16th September - 16:30 - Foster Care

Mrs. Harmke Leloux-Opmeer (Horizon Youth Care and Special Education), Dr. Chris H.Z. Kuiper (Horizon Youth Care and Special Education), Prof. Evert M. Scholte (Leiden University)

When risky child and family circumstances cannot be resolved at home, (temporary) out-of-home placement may be an alternative strategy. To reduce the risk of breakdowns and to affect positive prognostic placement outcomes, care professionals need to have information about the child, family, care history, and social-cultural characteristics at admission to out-of-home care. However, to date, information on case characteristics and, especially, similarities and differences in these characteristics across the three major types of out-of-home settings (namely foster care, family-style group care, and residential care) is largely lacking. A scoping review is used to compile and compare characteristics in school-aged children of average intelligence, and their families, at the time of their admission into foster care, family-style group care, and residential care. A scoping review technique provides a broad search strategy and ensures sufficient coverage of the available literature. To systematically report similarities and differences in characteristics at admission to one of the three main settings of out-of-home care, an adaptation of the developmental framework of Kerig, Ludlow, and Wenar (2012) is used.

Based on the 36 studies included, there is consensus that normal intelligent children in care demonstrate severe developmental and behavioral problems. However, the severeness as well as the kinds of defining characteristics differ between the three types of care considered. In addition, the review identifies several existing knowledge gaps regarding relevant risk factors.

In the oral communication, the main similarities and differences in case characteristics between children in foster care, family-style group care and residential care will be presented.
Results of SOP, an intensive support program to improve collaboration between birth and foster parents

Friday, 16th September - 16:42 - Foster Care

Ms. Laurence Belenger (Vrije Universiteit Brussel), Prof. Johan Vanderhaeghe (Vrije Universiteit Brussel), Dr. Frank Van Holen (Vrije Universiteit Brussel / Pleegzorg Vlaams-Brabant en Brussel), Ms. Skrallan De Maeyer (Vrije Universiteit Brussel), Mrs. Laura Gypen (Vrije Universiteit Brussel)

Objectives:

When a child is placed into family foster care, a good collaboration between birth and foster parents must be established. A good collaboration between both parties is associated with more stable foster placements. Nevertheless, this collaboration is not always easy and conflicts may arise. Internationally, these conflicts are an important cause of placement breakdown. Awareness about the importance of a good collaboration rises, as does the need for an effective manualized intervention to prevent or help overcome cooperation issues. The current study presents the short-term results of an intensive support program, named SOP (Samenwerking Ondersteunen in Pleegzorg), especially developed to improve the collaborative relationship between birth and foster parents.

Method:

To evaluate the effects of the SOP-intervention a randomized controlled trial (RCT) was designed. Four out of five foster care services in Flanders participated. Thirty foster care placements with a poor cooperation were recruited. The intervention group (n = 17) received the SOP program; the control group (n = 13) was assigned to a seven-month wait-list while receiving care as usual. For both groups, the collaboration between birth and foster parents was measured at three points in time: before inclusion in the RCT, after the RCT and after a three months follow-up period. The three involved participants (birth parents, foster parents and foster care worker) were asked to assess the collaboration. The overall collaboration was rated on 5-point scale (1 = very poor collaboration, 5 = very good collaboration). Additionally, different subscales of collaboration were rated (arrangements, feedback, listening, disagreements, perception, contribution and role clarity). Missing data were completed using multiple imputation. A multiple linear regression analysis was performed for each subscale to determine intervention-effects, while controlling for pre-intervention score and type of placement.

Results:

A short-term intervention-effect of SOP was found for the overall score of collaboration as rated by the foster parents and foster care workers. Furthermore, positive short-term effects of the SOP-intervention were found on the different subscales of collaboration. The involved persons experienced improvements in different ways. Looking at the scores of birth parents, there was progress in making agreements, listening, perception, and contribution. The scores of foster parents showed progress in feedback, listening, perception and contribution. According to the foster care workers, birth and foster parents improved on feedback, perception, contribution and role clarity.

Conclusion:

The short-term results are promising and indicate that support from the SOP-intervention improves the working relationship between birth and foster parents. Although the three involved parties have different views on which aspects of collaboration improved, all parties agreed that the SOP-intervention is effective in improving some aspects of collaboration.
A framework for moving children from long-term foster care to adoption

Dr. Susan Tregeagle (Barnardos Australia, Adjunct Senior Lecturer University of Sydney), Ms. Lynne Moggach (Barnardos Australia), Prof. Harriet Ward (Centre for Child and Family Research, Loughborough University)

In New South Wales, Australia, children permanently removed from their parents’ care because of child abuse and neglect can, in certain circumstances, consent to their own open adoption or have the Court dispense with their birth parents’ consent. Care legislation encourages decisions about restoration or kin care placements prior to consideration of adoption or guardianship to the Minister. All adoptions are ‘open’.

The objective of the Australian Open Adoption Outcomes research is to evaluate the adoptions undertaken by Barnardos Australia under this legislation. The research examines the timeliness of permanent placement, the nature of those families coming forward to adopt, the families losing their children and the characteristics of children adopted from care. This original long-term study examines the entire cohort of adoptees for twenty six years (including detail on those who have died or are unable to be found). The current thrust of the research is to understand the life outcomes of adoptees.

The method has been an examination of Court files for 210 children and analysis of specific time periods in relation to social work practice. Analysis of findings of questionnaires and standardised testing on life outcomes is currently underway. A qualitative study has been undertaken by University of Wollongong of sense of identity amongst younger adoptees and further qualitative research is being designed.

Between 1987 and 2013, Barnardos Australia has assessed the possibility of open adoption for 500 children in foster care who can never safely return home to family of origin. Over half of these children have subsequently been adopted and half have stayed in long-term foster care. The study, to date, has shown success in finding adoptive families who have continued to treat these young people as part of their family into mid-adulthood. Open adoption has been shown to be suitable for children of a range of ages and behaviours, and sibling groups.

Placement with a permanent adoptive family varies with the age of the child and, for all age groups, can be achieved well before finalisation of the adoption order. Open adoption takes on average 4.4 years to finalisation; with children under two taking only 4.5 months to move permanently into their new family and children 5-9 years, 8 months. There have been a few breakdowns of placements during the pre-adoption placement; nevertheless these children have gone on to be adopted by subsequent families. Placements have occurred in a most timely manner when children were referred internally.

The paper will report on the characteristics of children, adoptive and birth families and the types of consents used to achieve the adoption. The children overwhelmingly suffered neglect or emotional abuse. Many birth families were heavily dependent on legal and illicit substances with a high proportion of psychiatric disability, but interestingly came from a wide range of ages - including some parents in their forties. One third had had other children previously removed from their care due to child abuse and neglect.

In NSW, Australia, all adoptions are open and family contact continues for adopted children throughout their childhood. Initial results will be presented on the overall value of these relationships to children.
This research shows that the NSW model allows timely moves of children into legal permanency through open adoption. The ‘sequential approach’ of separating care decisions from long-term care and adoption has proved successful in moving older children, those with challenging behaviour and larger sibling groups. The conclusions that can be drawn from this research have implications for 30,000 Australian children who have been in care for more than two years, 44% of whom entered care under five years of age.
Does foster children’s poor school performance cause later psychosocial problems? Evidence from national registry data

Ms. Hilma Forsman (Department of social work, Stockholm University), Dr. Lars Brännström (Department of social work, Stockholm University), Prof. Bo Vinnerljung (Department of social work, Stockholm University), Prof. Anders Hjern (Centre for Health Equity Studies (CHESS), Stockholm University/Karolinska institutet)

Objectives: Research has shown that children in out-of-home care are a high-risk group for economic, social and health related problems in young adulthood. Foster children’s poor school performance has been identified as a major risk factor for these poor later life outcomes. Aiming to support the design of effective intervention strategies, the objective of the research in this presentation was to examine the hypothesized causal effect of foster children’s poor school performance on subsequent psychosocial problems, here conceptualized as economic hardship, illicit drug use, and mental health problems, in young adulthood.

Method: Using the potential outcomes approach, longitudinal register data on more than 7,500 Swedish foster children born 1973-1978 were analyzed by means of doubly robust treatment-effect estimators. The effect of poor school performance was estimated by means of inverse-probability-weighted regression-adjustment, a method that utilizes observed confounding factors to make exposure and outcomes independent once we condition on observables. Additionally, endogenous treatment-effect estimators were used to control for potential influence of selection on observables.

Results: The results show that poor school performance among children in out-of-home care has a negative impact on later psychosocial problems net of observed background attributes and potential unobserved confounding factors, suggesting that the estimated effects allow for causal interpretations.

Conclusions: Foster children with poor academic achievements should be regarded as a high-risk group for future adverse outcomes. Since it has been shown that successful prevention programs typically address modifiable risk factors, promotion of school performance may be a viable intervention path for policymakers and practitioners interested in improving foster children’s overall life chances.

Keywords: Foster Care; School Performance; Causal Effect; Longitudinal; Cohort Study
Family group conference in foster care: The role of the coordinator

Friday, 16th September - 17:18 - Foster Care

Dr. Ketil Lenert Hansen (UIT The Arctic University of Tromsø), Prof. Astrid Strandbu (The Arctic University of Norway, Regional Centre for Child and Youth Mental Health and Child Welfare), Dr. Renee Thornblad (UIT The Arctic University of Tromsø)

Background:
Family Group Conference (FGC), is a decision making model developed in New Zealand, and adapted for use in European child welfare. Two factors have been identified in previous research studies that make FGC function according to its purposes: (1) All participants must be informed about FGC and have an understanding of his/her role and (2) the family coordinators must maintain their role throughout the decision making process. In this paper, we focus on the role of the coordinator. More specifically, we explore whether training and guidance of the coordinators and the number of cases who have completed FGC has implications for the coordinator’s collaboration with the people involved in FGC. We are especially interested in whether training and guidance of the coordinators and numbers of FGCs conducted effects the coordinator’s facilitation of children’s involvement.

Objective
When practiced in Norway, there is a stated aim that the child participates in the FGC. This challenges public and private actors when it comes the balance of the child’s rights of both participation and protection. The following problems are addressed in the present study: 1) is there a significant relationship between the coordinator’s training, received guidance, and number of FGCs completed and the level of collaboration with the actors involved in the FGC? 2) Do the coordinator’s training, received guidance, and number of FGCs completed affect the coordinator’s facilitation of children’s participation?

Method
Data was collected in the period 2011-2015 parallel to a systematic implementation of FGC in child welfare in Norway. The data consists of questionnaires completed by case managers and coordinators in 92 FGCs, involving 114 children.

Results
The analysis is due to be completed by spring 2016. Our preliminary results show that over 91% of all children were present at the FGCs. 98% of the children between 10 and 20 years were present at the FGCs. 74% had been placed in out-of-home care. At the time when the FGC was arranged, 65% of the children were living outside their homes. Few of these were living in kinship care. Based on the case manager’s assessment, 88% of the cases were serious or very serious child welfare cases. Close to 60% of the children had parents with psychological illness.

The involvement of children in FGC requires good facilitation from the coordinators. In our study, many of the coordinators had little or no experience working with the model. The cases in our sample were contributed by 48 coordinators. More than 50% of these had no or few experiences with FGC. Future research will explore whether training and guidance of the coordinators combined with the number of FGCs they conduct has an effect on collaboration with the actors involved as well as facilitation of children’s participation.

Discussions

538
In the presentation, we discuss the coordinator’s role in FGC in foster care. The role of the coordinator is organized and practiced differently within different countries and we will show how the role is organized in Norway. Furthermore, we will show who the coordinators are; what type of education, training, and guidance they have received; and to what degree the coordinators are satisfied with the training, guidance, and their role as coordinators. Moreover, we will discuss how the coordinators experience the involvement of children in the decision-making process.
Judgments and Decisions in Foster Care – The Professionals at Stake

Friday, 16th September - 16:30 - Decision Making in Child Welfare

Dr. João M. S. Carvalho (University Institute of Maia), Dr. Paulo Delgado (ESE-IPP), Prof. Rami Benbenishty (Bar-Ilan University), Dr. Bilhah Davidson-Arad (Tel Aviv University), Ms. Vânia Pinto (University of Oxford)

Judgments and decisions made by child welfare professionals have a crucial role in child protection because of the major impact they have on the lives of children and young people at risk and their families. There is evidence that judgments and decisions made by professionals are influenced by expected attitudes on the context of their child welfare system (Davidson-Arad & Benbenishty, 2010; Martin, Peters, & Glisson, 1998). Therefore, decisions about the most effective interventions cannot be completely derived from global professional theory and practice, since they need to vary based on the local context (Benbenishty, Osmo, & Gold, 2003; Benbenishty et al., 2015). Given these circumstances, it is important to examine how professionals in different country contexts and with different attitudes make these important judgments and decisions.

This study focuses on child protection’s professionals in Portugal and examines how their attitudes are associated with their judgments and decisions related to foster care placement and family reunification in face of a case vignette of child maltreatment.

The vignette describes in detail the case of an alleged maltreated child (Diana). This case was presented randomly to the participants in one of four versions (2×2): crossing, in the first part, the mother’s wish toward removal (against or not) and, in the second part, the child’s wish regarding reunification (against or not). The sample was constituted by 200 professionals of the main Portuguese regions, (50 per each version) that work directly or indirectly with children at risk. Therefore, we used the approach proposed by Benbenishty et al. (2015), through which we assessed decisions, whether to place the child in foster care and whether to reunify her with the biological family, on the basis of a series of judgments (e.g. substantiation of alleged abuse and neglect, risk assessments), that were influenced by the characteristics of the case, the decision making context, and mother’s and child’s wishes. We also used the “Child Welfare Attitudes Questionnaire” in order to measure what the professionals thought, in general, about foster care promoting children’s development and well-being; residential care promoting children’s development and well-being; reunification; children’s participation in decisions; and parents’ participation in decisions.

Apart from the general concordance at the level of the risk, more than half of the practitioners thought the child should be removed from home. With regard to reunification decision, we found that only about 8% thought the child should be reunified with her family, after being in successful placement for two years.

We conclude that there were different approaches to the case based on different professionals’ attitudes that can be classified in two groups: one more pro-removal and other anti-removal. These groups presented somehow different risk assessments and intervention recommendations, and their decisions where significantly influenced by the mother’s and child’s attitudes. Furthermore, we have done comparisons with studies made in other countries, concluding that the country context can be an important factor that leads to different outcomes. Our findings indicate that the Portuguese professionals tend to be more pro removal compared to the other countries, nevertheless quite similarly to Spain. Implications for both practice and research are presented.
What could be effective ways to improve decision-making in child maltreatment cases?

Friday, 16th September - 16:42 - Decision Making in Child Welfare

Ms. Cora Bartelink (Netherlands Youth Institute (N.Ji))

Background. Child abuse and neglect seriously affect a child’s healthy development and should therefore be identified in time. On the other hand, it is also important not to falsely identify unsafe situations, because false accusations may be traumatic and harmful to families. Assessing and deciding on child maltreatment cases is difficult, due to both the characteristics of the decision situation and professionals’ limited cognitive resources to process big amounts of information. Risk assessment instruments have been developed for professionals in child protection, to improve their assessments of children’s safety and risks related to abuse and neglect. In The Netherlands, the LIRIK (Light Instrument Risk Assessment Child Safety) was constructed as a tool for professionals in youth care to reach explicit conclusions about the actual safety of children and possible risks in the family situation in a structured way.

Purpose. We conducted two studies that present insights into the reliability and validity of the LIRIK in comparison to unstructured professional judgment (Bartelink, De Kwaadsteniet, Ten Berge, Witteman, & Van Gastel, 2015). In a reliability study, professionals made safety and risk assessments for 12 vignettes, with (n=36) or without (n=43) the LIRIK. In a validity study, we compared professionals’ safety and risk assessments for 370 children, made with or without the LIRIK, with outcomes on child maltreatment investigations, child protective orders and out-of-home placement in case files six months later. In addition, we conducted a literature review to find promising ways to further improve decision-making in child maltreatment cases (Bartelink, Van Yperen, & Ten Berge, 2015).

Key findings. Agreement on safety and risk assessments were poor to moderate in the LIRIK and control group (Krippendorff’s alphas of .19 to .48 with the LIRIK; 25 to .46 without). Differences between groups were small and inconsistent. Agreement on the presence of signs and risk factors of maltreatment was also poor. The predictive validity for safety and risk assessments was poor, both with the LIRIK (rs between -.01 and .37) and without (rs between .04 and .44).

Implications and recommendations. Other risk assessment instruments similarly have been found to show limited reliability and validity. These findings raise important questions about the value of risk assessment instruments. Other ways to improve professional safety and risk assessment should be studied. We assume that a combination of strategies is needed to improve decision-making on child maltreatment cases. In our literature review, indications were found that shared decision-making with parents and children, team decision-making and feedback to professionals about the accuracy of their assessment may lead to better assessments. Some studies suggest that shared decision-making with parents and children could have a positive impact on treatment outcomes. Methods such as motivational interviewing, solution-focused therapy and family group conferencing can help practitioners to make the preferences of clients explicit and stimulate them to cooperate. These methods have in common that they focus on the clients’ perspective on the problem and the possible solutions, they empower clients by seeing them as experts of their own life and by asking them for solutions, and they support self-efficacy. Although team decision making can be biased too, it may be helpful for increasing transparency and discussing normative aspects and professional experiences and boundaries. In line with this, the systematic provision of feedback about the accuracy of assessments can create better learning opportunities and lead to better assessments.
Making decisions in the child’s time frame: reforms of care proceedings in England and its effects

Friday, 16th September - 16:54 - Decision Making in Child Welfare

Prof. Judith Masson (School of Law, University of Bristol), Prof. Jonathan Dickens (University of East Anglia, Centre for Research on Children and Families)

The paper will present findings from the first part of a 30 month study designed to examine the impact of the care proceedings reforms on the legal process and outcomes for children 1 – 5 years after the court decision.

The child welfare system in England is dominated by law and legal process (Dickens 2005) – approximately three-quarter of children in the care system on census day have been committed by the courts; judges and lawyers have a major role in shaping decision-making processes for entry to care, care plans on entry and the use of kin-care through proceedings for abused and neglected children. Despite concerns that court decision-making processes were too lengthy for young children, who were most likely to be subject to them, repeated attempts to reduce their duration failed.

By 2012, the average length of the court process to determine the plan for the child was over 60 weeks. Although this could be seen as ensuring a thorough examination of all the options, it also prolonged instability for children in temporary placements, and resulted in decisions by default if parents ceased to engage with long, stressful proceedings. In 2014, new legislation set a maximum duration for these cases of 26 weeks. Proceedings were re-cast, requiring more pre-application preparation and more focused social worker evidence, and limiting the appointment of (external) experts. There was a substantial implementation programme; timely case completion is closely monitored. The average duration of care cases is now approximately 28 weeks; almost 60% cases exit from the legal process in 26 weeks. The presentation will address in what ways, and to what extent, the reduction in the length of care proceedings has impacted on decision-making and the decisions made for children.

Method

The study uses a two-sample method, comparing proceedings in 2014-15 with an earlier sample collected by the same team from the same local authorities in 2009-10 (Masson et al 2013). Each sample includes approximately 200 care proceedings cases (300 children) filed by 6 local authorities in England and Wales. Data are extracted from applications, written evidence, records of the process and orders, and include information about the child’s family and the children’s service involvement with them. These data allow comparison of the decision-making process and the orders made.

Results

The presentation will focus on the following questions:

1) Have the increased demands on local authorities bringing proceedings resulted in delays in making applications to court?

2) Have shorter proceedings impacted on the court process, for example, resulting in more contested final hearings?

3) Are orders comparable to those granted in 2010?

Conclusions

Concerns were raised before the reform that 26 weeks was too short a time to make life-changing decisions for children and families fairly; that the time-limit would simply shift delay to before (or
after) the proceedings (McKeigue and Beckett 2008); and that shorter proceedings would place more demands on professionals, social workers, lawyers and judges. This paper will report preliminary findings on whether those misgivings appear well-founded.

References


Decision support in case management for high risk families

Friday, 16th September - 17:06 - Decision Making in Child Welfare

Ms. Mirte Ferrer (Youth Protection Amsterdam Area), Ms. Inge Busschers (Youth Protection Amsterdam Area & Amsterdam University of Applied Sciences), Mr. Marc Dinkgreve (Youth Protection Amsterdam Area)

Accurate safety and risk assessments are essential for intensive case work with high risk families. The level of intensity of the intervention should match a child’s risk of child maltreatment. Risk assessment is the essential first step in intensive case work with these families. Assessment contains distinct aspects: 1) immediate child safety (safety assessment), 2) predicting future child maltreatment (risk assessment) in order to determine intervention urgency and intensity, and 3) identifying targets for interventions in order to individualize case planning (needs assessment).

Several methods for risk assessment and case planning exist, such as clinical judgment – where the scoring of risk factors is done in a subjective way - and actuarial risk assessment, where factors are scored according to a fixed algorithm, meaning that professionals use the same objective scoring rules, regardless their expertise (e.g., Dawes et al., 1989; Gambrill & Shonsky, 2000). Many studies have consistently shown that actuarial methods perform better than clinical judgment in risk assessment.

At Youth Protection Region Amsterdam, case workers (bachelor level social workers) did not perceive their risk assessment tool as supportive in their decision making process, they regarded them as burdens or checklists without any clinical relevance. In this paper we show what it takes to develop a risk assessment tool, according to the principles of evidence based practice. We created a tool with high feasibility and credibility for professionals, to use in daily practice.

To strengthen case workers in their decision making, an actuarial risk assessment instrument was developed. We followed the principles of evidence based practice. Researchers, case workers and psychologists gathered and combined scientific knowledge, empirical evidence and clinical expertise. Input of case workers and psychologists was essential to increase the instrument’s feasibility and credibility. Via train-the-trainer workshops all professionals started working with the new tool. In daily practice, the psychologist in the team support the case workers in the decision making process during weekly case meetings. A continuous evaluation takes place of the use and usefulness of this decision making supporting tool.

More than a year after the introduction of the instrument, evaluation showed that all 300 case workers use the instrument in daily practice and in the weekly case meetings to support the decision making and case planning. The ecological validity of the tool is considered high. Next to the direct relevance for case workers to use the outcome for individual cases, the instrument is used for continuous feedback loops and learning purposes on team level. Currently, based on knowledge and experience, more steps are taken to strengthen the decision making in case work with high risk families. At the same time, youth and child care organizations in Amsterdam and other parts of the Netherlands, have decided to start the enrollment of the new instrument in their daily practice as well. During the conference we will give an update on the results.
Decision maker perceptions of the optimal out of home placement

Friday, 16th September - 17:18 - Decision Making in Child Welfare

Ms. Jenna Meiksans (Australian Centre for Child Protection, University of South Australia), Prof. Fiona Arney (Australian Centre for Child Protection, University of South Australia), Dr. Sara McLean (Australian Centre for Child Protection, University of South Australia)

Background
It is well known that matching children to the optimal out of home placement is fundamental for their safety, stability, and their long-term outcomes in a range of areas, including health, mental health and education. Despite this, little is known about the decision making processes that lead to placement or how varying decision maker beliefs about what constitutes the optimal out of home placement may influence this decision.

Objectives
The aim of this study was to identify what decision makers consider to be the optimal out of home placement, and understand how this may influence their decisions about where children are placed.

Method
This study forms part of an ongoing program of research that seeks to identify and measure the factors influencing decision making about where children are placed in out of home care. As part of this study child protection practitioners and legal practitioners working in the Australian out of home care sector completed an online survey regarding their perception of the optimal out of home placement, and the facilitators and barriers to achieving this placement in their practice. Qualitative analysis of survey responses was carried out using a grounded approach.

Results
There was considerable variation on responses, with participants describing the optimal out of home placement in a number of different ways. Some participants defined the optimal out of home placement by its characteristics or by the characteristics of the caregivers. Examples included a safe, stable or loving environment, or a placement with carers well trained in responding to complex behaviours and who relate positively to the child’s birth family. Other participants defined optimal by type of out of home care, considering kinship, foster or residential care to be the optimal placement for children. These varied definitions were also reflected in the diversity of facilitators and barriers identified to matching children to the optimal out of home placement.

Conclusions
Variation in decision maker perception of the optimal out of placement may influence decisions about where children are placed in out of home care. Identifying and understanding this variation will be important for the development of a workforce that has a shared goal when making decisions about where children are placed. This will ultimately contribute to improved understanding of the placement decision, and the development of policy and practice that leads to the consistent placement of children in out of home care.
Taking notice of children in child protection practice when assessing risk: An Australian example

Friday, 16th September - 16:30 - Assessing Risk

Prof. Morag McArthur (Institute of Child Protection Studies, Australian Catholic University), Dr. Tim Moore (Institute of Child Protection Studies, Australian Catholic University)

Objectives

Although substantial progress has been made to enable children and young people to exercise the right to participate in decision making processes that affect them barriers still remain in the context of child protection that restrict children’s participation. This presentation reports on the findings of the first stage of a research project aimed at building a more child centred child protection system. It answers the question of how and to what extent children’s views are taken into account in decision making in child protection processes.

Methods

The study design was adapted from an international study by Skivenes and colleagues (2012). An online survey was completed anonymously by 216 child protection practitioners in multiple states and territories across Australia. Using a series of case studies practitioners were asked to identify the level of risk to the child in particular circumstances, what they would do to respond to the circumstances, whether and how the child’s views would be ascertained and how much weight the child’s views would be taken into account in the decision making. In-depth interviews with a sample of 15 social workers (face to face and telephone) were also carried out to provide a more nuanced view about children’s participation, the methods and tools that are used to support children’s participation and what current practice barriers exist for meaningfully engaging children.

Findings:

In implementing the Skivenes et al study design particular modifications were required to better reflect the context of child protection practice in Australia. The need for changes to the case studies reveals amongst other factors (e.g. language) the different construction of risk in Australian child protection systems. Taking these changes into account preliminary findings indicate that practitioners are committed to hearing from children and that they say they take the child’s needs and wishes into account when making decisions about what to do. The level of risk, age of the child and experience and confidence of the practitioner are key factors in whether children’s views are taken into account. The qualitative component provides a picture of practitioners’ attitudes to children with regards to children’s competence.

Implications

This project aims to inform the further development of child centred practice that will assist children to participate in appropriate and meaningful ways. The study provides direction for the types of support practitioners may require to fully engage children in decision making processes. These Australian findings also provide a comparison of child welfare policies and practices in societies with differing child welfare systems (Norway, England and California; Skivenes et al 2012).

Friday, 16th September - 16:42 - Assessing Risk

Mr. Oyvind Tefre (Bergen University College)

This study employs a vignette survey method to examine and compare how child protection workers in Norway, England and the United States (California) assess the risk level for an infant subjected to neglect by a mother with a possible intellectual disability (ID). The research objectives are; first, to establish whether the assessment of risk level varies between countries, and second, to compare the justifications workers give for their assessment.

Parents with an ID or borderline ID and their children are a particularly vulnerable group that, although small, is disproportionately represented in child welfare. Studies from several countries show children of ID parents are more likely to grow up in foster care compared to children in the general population.

The study examines how 297 child protection workers react to a vignette with clear indicators of infant neglect (Norway n=102, England n=97, U.S. n=98). Workers rated risk on a five-point scale, from very low risk to very high risk. They were then asked to provide an open ended answer to what case specifics were important to their risk assessment. The open-ended answers were then subject to a qualitative analysis, to establish risk justification categories, that could then be compared across countries.

Which dimensions of the case do workers focus on? Is parental ID an independent reason for concern, or are they more concerned with parental behaviour? Do they consider the child’s vulnerabilities? Finally, do workers consider potential aid from the family network?

The three countries have different child welfare orientations: Norway is a family-service and child-focused system, California is a child-protection system, and England is a child-protection system with some family-service characteristics. There are also differences in the countries’ applied assessment tools. Norwegian workers rely on their professional discretion in assessments. California employs a strict actuarial assessment tool, whereas England uses a consensus-based Assessment Framework. These central differences lead us to expect important cross-country differences in how workers assess and justify risk. If this is the case, we ask whether the differences are due to differing views or approaches to working with parents with an ID, whether the tools function to focus workers’ attention on certain dimensions of cases, and whether there may be wider systemic differences in welfare orientation that may provide plausible explanations.

Key findings show that workers across all countries agree that this is a high-risk case. However, reasons behind the assessments vary across countries. Californians display a greater range and more uniform reasoning compared to the English and Norwegians, and pay more attention to mother’s cognitive functioning, and child age and health. English and Norwegians are generally more similar, but Norwegians pay very little attention to social and environmental factors and the English are less attentive to the mother’s cognitive functioning.

Two primary conclusions can be drawn from this study: First, the combination of parental ID and infant neglect generates a uniform response of serious risk. This indicates that some types of neglect may be more universally accepted as cause for concern.
Second, despite similarity in risk assessment, there are clear differences among countries in how workers justify risk. It is likely that U.S. child protection’s emphasis on averting risk is triggered by child age, health issues, when combined with the caretaker’s poor parenting skills and an intellectual disability. These factors are emphasized in the assessment tool employed by Californians.

Our findings support earlier studies that find that parental ID and concern about neglect are red flags to workers. This result is indicated by the strong emphasis on the mother’s abilities shown by workers from all three countries and the relatively weaker focus on the child’s particular vulnerabilities.
Prevalence and risk factors of child neglect in the general population

Friday, 16th September - 16:54 - Assessing Risk

Dr. Clement Marie-Eve (Canadian research chair on violence against children, Universite du Quebec en Outaouais), Dr. Annie Berube (Université du Québec en Outaouais), Mrs. Claire Chamberland (Université de Montréal)

Objectives: Child neglect is a major public health problem. It is the most frequently reported and substantiated form of maltreatment in youth protective services, and its effects are the most harmful to children. Yet, very few studies have documented its extent and risk factors in the general population. This study aims at documenting the annual prevalence and risk factors of child neglect in the general population according to child age and parental gender.

Methods: A sample consisting of 3298 mothers and 1104 fathers of children between 6 months and 15 years old responded to a telephone survey. The prevalence of neglect was documented using the short version of the Parent-Report Multidimensional Neglectful Behavior Scale for three child age categories.

Results: Annual prevalence rates vary between 20.6% (95% CI 18.2-23.1) and 29.4% (95% CI 26.6-32.4) depending on the children’s age. Although statements do not vary by parent gender, the factors associated with neglect depend on whether they are reported by the mother or the father. Mothers present more mental health problems, while fathers struggle more commonly with difficulties related to their life context.

Conclusions: Measuring neglect in the population presents numerous challenges. Nonetheless, this study made it possible to document the extent of neglectful behaviours in the general population. The results confirm that the risk factors related to neglectful behaviours are similar to those documented in studies concerning situations of neglect reported to the authorities. Other studies are needed to better understand how this phenomenon is manifested in the general population.
What makes an Expert in Risk Assessment in Child Protection?

Friday, 16th September - 17:06 - Assessing Risk

Prof. Mark Schrödter (University of Kassel), Dr. Pascal Bastian (University of Mainz)

Objectives
In child protection research it is still not known, what factors contribute to professional expertise in risk assessment. Moreover, it is controversial how to empirically identify good or correct risk judgements. This preliminary study conducted with 1,200 social work students explores the relationship between personality, knowledge and skills and the quality of judgements in risk assessment in child protection.

Method
Based on fictional vignettes participants estimated the risk of child maltreatment and neglect. Vignettes were constructed in factorial design. Participants are free how to do the assessment (by intuition, by application of a risk assessment tool, etc.). Individual quality of judgements in risk assessment was calculated with a coherence measure developed by James Shanteau and David Weiss (CWS-Expertise-Index). Participants also completed a self-report questionnaire on personality, judgements styles and conducted a knowledge and risk literacy test.

Results
Findings show that there is a significant positive relationship between the coherence of risk judgements and formal education, competence in probabilistic reasoning, conscientiousness in using prediction strategies, not using some formal risk assessment tool and risk assessment format (frequency vs. logical concept of probability). Apart from impulsivity there was no relationship to other personality constructs like rational vs. intuitive judgement or analytic vs. prototype judgement style.

Conclusion
Results show that professional judgement can be trained, since it depends less on thinking styles rooted in personality but rather on general education and competence in probabilistic reasoning as well as on adequate representation of risk in the prediction task. There are limitations of the study. First, the sample so far only consists of students. To assess the influence of social work experience and of different prediction strategies professionals use in daily practice the study has to be conducted with professionals of different experience levels. Second, judgements are based on fictional vignettes, not on real cases. Therefore, only judgement coherence but not judgement accuracy could be measured. The authors plan a study addressing these issues.
Understanding the evidence on the educational progress of young people in care

Friday, 16th September - 16:30 - Understanding the evidence on the educational progress of young people in care

Prof. Judy Sebba (Rees Centre, University of Oxford)

The education of children in care is an international challenge given the low outcomes reported across many countries (e.g. Flynn, Tessier, & Coulombe, 2013). There has been relatively little research using robust designs to identify the factors that contribute to the universally observed poorer outcomes of young people in care. The development of national databases within which the characteristics of young people in care can be identified and their patterns of educational progress tracked, has created previously unchartered opportunities in some countries. This symposium describes mixed methods research from England (Sebba et al., 2015), Canada and Northern Ireland that encompasses secondary data analysis, interviews with young people in care and key adults in their education and a randomised control trial of a widely used intervention. In so doing, it identifies some important factors contributing to the poor outcomes noted and suggests what might be done to improve these.

Furthermore, the symposium demonstrates the importance of robust research designs being employed to evaluate contributing factors and approaches. It also highlights the role of young people’s perspectives in helping us to understand the ‘how’ and ‘why’ of the processes that led to these findings. Furthermore, young people’s views are contextualised in wider theoretical perspectives that might increase our understanding of some of the similarities and differences between the education of young people in care and their peers.


Educational Progress of Looked After Children in England: Linking Care and Educational Data

Friday, 16th September - 16:42 - Understanding the evidence on the educational progress of young people in care

Dr. Nikki Luke (Rees Centre, University of Oxford)

Aims and Objectives:

Children who are, or have been, in care are one of the lowest performing groups in terms of educational outcomes internationally (Flynn, Tessier, & Coulombe, 2013). In England, data from the Department for Education (2014; the most recent statistics available) showed that at the end of Key Stage 1 (age 7 years), 71% of children in care achieved the expected level in reading, compared with 90% of all children. In writing the figure was 61% compared to 86%, and in maths it was 72% compared to 92% of all children. At the end of Key Stage 2 (age 11 years), the gap widens: 48% of children in care reached the expected academic level in English and mathematics, compared with 79% of all children.

Whereas the attainment gap for children in care is well established, less is known about the factors that facilitate or limit educational progress for these young people. Little detailed statistical analysis beyond the DfE (2011, 2013) contribution has been undertaken in England to pinpoint the key factors associated with looked after children’s lower attainment, although such work is better established in the US and Canada.

This mixed-methods study (Sebba et al., 2015) investigated the relationships between young people’s experiences in the care system and their educational attainment and progress in secondary school. It used a combination of large database analyses and qualitative interviews to identify the factors that facilitate or limit educational progress for these young people. This presentation will focus on the quantitative findings, identifying the key factors linked to young people’s educational attainment and progress and the potential for the resulting evidence to inform policy and practice.

Methods:

The quantitative strand of this study explored the relationship between educational attainment and progress, young people’s care histories and individual characteristics by linking the English National Pupil Database and the data on Children Looked After for the cohort who completed exams in 2013. Outcomes for children with different characteristics and the relationships between outcomes and placement type and stability, school stability and length of time in care were explored.

Key findings:

The presentation will cover the key factors that were associated with young people’s educational attainment and progress. These included individual characteristics such as gender and special educational needs, stability both in care and in education, and types of provision such as residential placements and special schools. Identifying the relationships between care experiences and educational progress will enable schools and services for children and young people to better support their education and improve outcomes.

References


Educational Progress of Looked After Children in England: Young People’s Perspectives

Friday, 16th September - 16:54 - Understanding the evidence on the educational progress of young people in care

Prof. David Berridge (University of Bristol)

Corresponding and Presenting Author: Professor David Berridge, School for Policy Studies, University of Bristol, England, david.berridge@bristol.ac.uk

Conference Theme: Education and Qualifications of Young People in Care

Format: Oral Communication

There is longstanding concern in many countries about the overall poor educational attainments of children in care (‘looked after’). A major, mixed methods study in England has recently investigated this problem, examining care and educational factors linked with educational progress in secondary schooling (broadly 11-16 years of age) (Sebba et al, 2015). It did this by linking two national educational and children in care databases. Overall conclusions from this quantitative analysis included that the care system generally acts as a protective factor educationally; and that educational progress is associated with duration of care, school and placement stability, school effectiveness, special educational needs, and pupil attendance and exclusion.

A qualitative phase was also undertaken (Berridge et al, 2015). This entailed semi-structured interviews with 26 high- and lower-progress young people who had completed their GCSEs (General Certificate of Secondary Education, usually taken at about 16 years of age). With their permission, it also included interviews with their (foster) carers, social workers and teachers. Interviews with young people were undertaken by specially trained care-experienced young adults (‘care leavers’).

This conference presentation includes reanalysis and more in-depth exploration of qualitative data obtained from young people’s interviews. It will also discuss the theoretical implications of these findings.

Young people’s perspectives gave insight into how experiences with their birth families prior to separation impacted on their learning. They described a range of problems in school. There was strong consensus that entry to care benefited their general welfare and progress at school, although this took time to develop. Although helpful in some circumstances, continuing birth family contact or involvement in their lives could be a source of tension.

An important conclusion from the research concerned the ways in which young people managed their circumstances and dealt with adversity and stress in their lives. We saw this as an expression of agency. The high-progress group described how they had engaged with learning once certain preconditions were met: particularly experiencing permanence and security in living arrangements, and birth family problems being addressed. They then explained how individual teachers could make a difference to their learning and contribute to progress. These ‘preconditions for learning’ give a further insight into inter-professional working.

These findings will be set within a theoretical framework to help understand young people’s experiences and responses. In particular this will discuss the ‘new’ sociology of childhood, which positions children as actively constructing their own lives and seeking to ameliorate their circumstances, rather than being subject purely to adult interventions (eg Prout and James, 1990). The presentation will
also link this with resilience theory, in which young people strive to achieve successful outcomes despite early adversity (eg Rutter, 2012).

References


28 June 2016
What risk and protective factors predict educational success among young people in care?

Friday, 16th September - 17:06 - Understanding the evidence on the educational progress of young people in care

Dr. Nicholas Tessier (School of Psychology & Centre for Research on Educational and Community Service (CRECS), University of Ottawa), Dr. Robert Flynn (School of Psychology & Centre for Research on Educational and Community Service (CRECS), University of Ottawa), Mrs. Aoife O’Higgins (Rees Centre for Research in Fostering and Education, University of Oxford)

The educational outcomes of children in care, as they prepare for and eventually complete the transition out of care, have been the subject of a growing body of research. Despite the progress made, no unified theory of risk and protective factors associated with educational outcomes has yet arisen from the longitudinal, cohort, and cross-sectional studies conducted with youth in care. Although researchers have suggested many pre-care or in-care experiences as influences leading to the lower educational attainment frequently seen in children in care, O’Higgins, Sebba, & Gardner’s (2016) systematic review was the first to attempt to identify from the international literature the full range of predictive factors that would enable a relatively complete model of the educational achievement of children in foster or kinship care to be established.

From the results of this systematic review, the present authors performed two hierarchical regressions, one cross-sectional and the other longitudinal, of the generalizability of many of the risk and protective factors identified by the systematic review. Using secondary analysis of data drawn from the Ontario Looking After Children (OnLAC) project, the cross-sectional sample consisted of 3,662 young people aged 12 to 17 years who were residing in out-of-home care in Ontario, Canada. Within this cross-sectional sample, six factors were found to be significantly related to higher educational success: gender (female), higher caregiver educational aspirations, higher youth educational aspirations, longer time with current caregiver, more internal developmental assets, and more positive mental health. On the other hand, six factors were found to significantly predict lower educational success: neglect as a reason for coming into care, being held back a grade or more, more learning-related difficulties, ethnic minority status (Black), exhibiting a greater number of behavioural problems, and soft-drug use (cigarettes, alcohol, marijuana).

The longitudinal sample was composed of a subsample of 962 young people from the cross-sectional sample who had also been assessed 36 months later. Results revealed a statistically significant decline (-0.8 SD) in educational success over the three years between T1 and T2. Overall, three factors predicted higher educational success at T2: gender (female), having more internal developmental assets, and having more positive mental health, whereas only one factors, soft drug use, was found to predict lower educational success at T2. The way that these risk and protective factors may impact young boys and girls differently was also explored. Lastly, the implications for policy and practice will be discussed, including what factors to target for systematic assessment and early intervention and what factors could benefit from additional programming and support.

References

Effects of a book gifting programme for foster children: RCT of The Letterbox Club in Northern Ireland

Dr. Karen Winter (Queen’s University Belfast), Dr. Jennifer Mooney (Queen’s University Belfast)

Objectives
This paper will first share findings from the RCT (Mooney at al., under review); second, reflect on the findings using qualitative data gathered from a process evaluation; and third explore what a modified intervention premised on a clearly defined theory of change might look like.

Method
There were two stages to the research:
• Stage 1: RCT involving 116 children in foster care in Northern Ireland between the ages of 7-11 years old;
• Stage 2: a process evaluation involving in-depth interviews with the programme designer, 20 foster carers and 11 foster children.

Measures
Stage 1
The Neale (1997) Analysis of Reading Ability (NARA) that measures the accuracy, comprehension and rate of reading in pupils from the ages of 6 to 12 years.

Elementary Reading Attitude Survey (McKenna and Kear, 1990): Pupils self-reported their own enjoyment of reading for leisure and in school. Pupils rated each aspect on a 4-point scale using four Garfield the cat pictures.

Data analysis
Stage 1
Linear regression (for continuous outcome variables) and binary logistic regression for the single question measures (i.e. Do you like school? and Do you like reading?) were used for the trial element of the study. For each outcome variable, the child’s post-test score was the dependent variable and the child’s respective pre-test score and a dummy variable indicating whether they were in the intervention or control group were added as independent variables. The exploratory analysis of the differential effects of the programme for subgroups (age, gender, type of care and level of achievement) was undertaken by extending these basic models with the addition, in each case, of a variable representing the subgroup and an interaction term between that subgroup variable and the dummy variable for intervention/control group membership.

Stage 2
Thematic analysis of qualitative data organised around the carer/child engagement with and enjoyment of the parcel from its arrival at the foster carer’s house.

Results
The presentation will present the results from Stage 1 and Stage 2, focusing on the impact of the book gifting scheme on the literacy skills of children in foster care and highlighting findings from the process evaluation that help contextualise and make sense of the RCT findings.

Implications
Will be discussed on 3 levels: evidence based interventions and looked after children (Flynn et al., 2010; Osborne et al., 2012); interventions and logic models; future policy and research priorities for children in foster care.

References


Chairperson and discussant of symposium: Next steps in research in improving the education of children in care

Friday, 16th September - 17:30 - Understanding the evidence on the educational progress of young people in care

Prof. Judy Sebba (Rees Centre, Department of Education, University of Oxford)

The symposium has described three pieces of research on the education of children in care. Luke and Berridge’s papers provided findings from the investigation of the relationship between young people’s experiences of the care system and their educational outcomes. By complementing statistical analyses of datasets with in-depth interviews of young people and those important to their education, this study was able to identify some key factors such as placement changes and exclusion that are strongly associated with outcomes. Similarly, secondary data analysis and longitudinal data analysis in Canada enabled Tessier and colleagues to identify risk and protective factors associated with the educational outcomes of children in care. Finally, Winter and colleagues used a randomised trial in Northern Ireland to test the efficacy of the Letterbox Club, a widely used book-gifting scheme that until now has been subjected to evaluations limited to pre- and post-test designs.

Our theme in this symposium concerns the need for more robust research designs if we are to make progress in improving the educational outcomes of children in care. Seven years ago Stevens et al. (2009), reported an analysis of 625 studies on children’s services in which robust designs were rarely used - randomised trials and systematic reviews each accounted for less than 1% of the studies, quantitative dataset analysis 3% and longitudinal analyses 12%. Have we made progress since that time? There seems to be more studies employing secondary data analysis, longitudinal data analysis (though rarely the more expensive prospective studies) and mixed methods perhaps?

Further analysis is needed to explore some of the questions that the studies reported in this symposium have identified in order to understand ways of improving outcomes. What are the educational experiences of those who move in and out of care and how does this relate to the different ways in which we conceptualise stability? What is the role of behaviour in the education of children in care and how might engaging young people further in its measurement help to prevent or address difficulties? What can be done to address the needs of young people who enter care in their teens often with a poor educational trajectory? What risk and protective factors have been shown to have an impact on changing a young person’s educational trajectory?

The importance of complementing much-needed larger scale quantitative research with the perspectives of young people has been demonstrated, for example, the young people provided perspectives on the on-going influence of the birth family that the researchers might otherwise have missed. Research which explores these young people’s experiences within the wider theoretical perspectives of attachment, resilience or childhood might increase our understanding.

Finally, there is very little robust research on the effectiveness of interventions to enhance educational outcomes of children in care (Forsman and Vinnerljung, 2012). Recent interventions suggest that training foster carers in paired reading (Osborne et al., 2010; Vinnerljung et al., 2014) might be a promising way of addressing some of the limitations identified in the Northern Ireland RCT. More robust evaluations of educational interventions are needed if we are to progress in addressing the outcomes of children in care.


Child protection across borders: comparing policy and systems

Friday, 16th September - 16:30 - Child protection across borders: comparing policy and systems

Prof. Nina Biehal (Dept. Social Policy and Social Work, University of York), Dr. Mónica López (University of Groningen)

Child protection has become an important aspect of child welfare policy in most Western countries. Its heightened importance is the result of a growing recognition of children’s rights, rising expectations about standards of parental care and responsibility and growing concern about the social exclusions of vulnerable and disadvantaged children. However, although many families are drawn into the child protection system there has been very little comparative research on this aspect of welfare states.

This symposium aims to analyse the nature and impact of variations in child protection systems through a comparison of four quite different welfare states: England, Germany, the Netherlands and the US. These four countries reflect somewhat different orientations regarding child protection as well as variation in indicators of child wellbeing for the general population of children.

In the symposium, wider assumptions about the role of the state in family life will be discussed (including those regarding the rights of parents), as well as the ways different welfare states seek to balance children’s rights to protection (under the UNCRC) and parents’ rights to family life (under the Human Rights Act).

Through this comparative symposium, we expect to generate new insights into child protection policy and practice and so have a significant impact on future developments in child welfare internationally.

This symposium is a collaborative product of HESTIA research project (www.projecthestia.com) developed by researchers at the University of Groningen, the University of York and the German Youth Institute, and funded by NORFACE (7 European Framework Programme).
Developments in child protection in England

Friday, 16th September - 16:42 - Child protection across borders: comparing policy and systems

Ms. Helen Baldwin (Dept. Social Policy and Social Work, University of York), Prof. Nina Biehal (Dept. Social Policy and Social Work, University of York)

Objectives

This paper presents a review of developments in child protection law, policy and practice in England over the past few decades, with particular focus on approaches to balancing the rights of children and parents, through the provision of protective and preventive services. This review forms part of the Hestia research project – a comparative study of policies and responses with regard to child abuse and neglect in England, Germany and the Netherlands.

Method

The authors undertook a review of legislation, statutory guidance and research literature on child protection in England. This material was analysed according to a conceptual framework developed for the wider comparative study. Changes in child protection practice over time were examined through the analysis of official statistics on referrals and admissions to care, for reasons of abuse or neglect.

Results

The past few decades have seen shifts between preventive approaches to child protection that place an emphasis on the preservation of family autonomy and more interventionist approaches oriented towards the needs of children and their rights to protection. These shifts have in part been driven by high profile inquiries into child deaths due to abuse and neglect, which have led to changes intended to improve the effectiveness of the child protection system. The Children Act 1989 aimed to achieve a balance between protecting children and supporting families. It set a clearly defined threshold for compulsory intervention in family life and introduced the key principle that the child’s welfare is paramount. It also gave local authorities the power to provide family support for ‘children in need’ to promote their development and their upbringing by their families.

This emphasis on family support was reflected in a fall in the number of children entering care from the early 2000s. A higher proportion of children were instead being supported at home through family support interventions and ‘child protection plans’. However, there was a rise in the total number in care at any time, as the children who were placed in care tended to be those with more serious problems and therefore remained in care longer. Subsequent legislation and policy has aimed to strengthen protection while placing further emphasis on prevention, through early intervention, integration of children’s services, use of professional judgement and a focus on child outcomes.

Over the past 15 years or so, there have also been policy developments regarding the placement of children in care, with increased attention to permanency planning and timely decision-making. This has been prompted by research highlighting a lack of long-term planning and the detrimental impact of repeated exposure to abuse or neglect on children’s psycho-social development. Changes to court processes have also been made in attempt to prevent delays in decision-making and reduce costs associated with the rise in referrals that followed the high profile death of a baby in 2007. However, in the context of austerity, it is as yet unclear whether sufficient support is being provided to parents to help them to make the changes needed to avoid compulsory intervention.

Conclusions
This review identifies several key features of the child protection system in England, and highlights shifts in policy and practice that reflect changing political ideologies, as well as financial and media pressures. It provides important insights into the changing roles of families and the state, and forms the basis for comparisons with child protection systems in other developed countries.
The challenge of balancing the rights of parents, children and the state in Germany

Friday, 16th September - 16:54 - Child protection across borders: comparing policy and systems

Dr. Susanne Witte (German Youth Institute)

Introduction
Following serious cases of child maltreatment, the public discussion in Germany had not only focused on the perpetrators but also on the actions of the social workers, which could not prevent the maltreatment. At the same time, in some cases the state authority has been criticized for intervening into the life of families – especially in cases where a child was placed outside the home. Balancing the rights of parents, children and the state are not only challenges for the individual case worker, but also for overall policies and the legal framework in child protection.

Research question
What key principles are used in the German legal framework and policy to balance children’s and parent’s rights as well as the relation between state and private life?

Method
The development of the legal framework and policies on child protection in Germany are analysed in the context of the public discourse in the most recent years. A special emphasis is put on the right of the state to intervene into family life in order to ensure the best interest of the child.

Results
In Germany, the term child protection is used in a broad and a more narrow sense: the first, including also low threshold preventive measures, the second, referring to cases in which a child is at risk of being maltreated. Yet, the two approaches are linked, with a high value of offering help and support to families in which the well-being of the child is endangered. Only in cases where help has been offered unsuccessfully or where help is very likely to not prevent child endangerment, compulsory intervention in the parental rights is possible. Legal regulations on the handling of investigations following reports about (suspected) maltreatment stress the importance of working together with the family furthermore, but also facilitate the collaboration between different professional groups in order to ensure the protection of the child. Further supported by the media coverage of fatal child abuse cases, the regulations regarding child endangerment have shifted to a slightly more interventionist approach compared to a more preventive approach and a focus on early help in the 1990s. Nevertheless, the German child protection system aims to help parents to adequately raise their children as growing up within his or her own family is seen as an important aspect of child well-being.

Discussion
Law and policy provide a framework for the practical work with families and children; yet in Germany stemming from the federal structure of the political system as well as provision of support by the state authority as well as non-governmental organizations, there is a diversity of support measures and approaches in different regions, strength but also a weakness of the system.
The role of the state in child protection in the Netherlands

Friday, 16th September - 17:06 - Child protection across borders: comparing policy and systems

Ms. Helen Bouma (University of Groningen), Dr. Mónica López (University of Groningen), Prof. Hans Grietens (University of Groningen), Prof. Erik J. Knorth (University of Groningen)

Introduction

For years now, the role of the state in intervening in family life has been a point of discussion in the Netherlands. Public debates on the protection of children and the rights of parents are often based on serious cases of child maltreatment which occurred in the media. Whereas the child protection policy from the 1960s to 1980s was criticised for too early and too much intervening and for using a patronised approach, the policy of the 2000s was criticised as too late and too limited intervening in risky child rearing situations. The right and responsibility of the state to intervene in family life is mainly characterised by finding a balance between children’s rights to protection (article 19 UNCRC) and parental rights in family life (article 8 ECHR). Systems are often classified in terms of the extent to which they have a child protection orientation versus a family support orientation.

Objectives

This presentation aims to address how the state tries to balance these parental and children’s right on intervening in family life under the new Youth Act, which has been in force since 2015.

Method

Based on the literature and the framework developed by Wulczyn and collaborators for analysing child protection systems, a framework for policy analysis was designed for this study. This framework includes the definition of child maltreatment, relevant legislation, values and principles in legislation, policy, and available national statistics. Based on this framework, recent developments in child-protection policy were examined by analysing national legislation and the policy document governing the operation of the Dutch child protection system. In particular, the new Youth Act and its Memorandum were scrutinised in order to examine the values and principles in Dutch law regarding the role of the state in the protection of children.

Results

Many of the values and principles found in Dutch legislation and policy documents arise from the UNCRC; its articles, including governmental responsibilities for child protection, are repeatedly referenced in the Memorandum of the Youth Act. This Memorandum emphasises that all children should be able to grow up healthy and safe, develop their talents, and participate in society according to their abilities. Parents are primarily responsible, but the government is obliged to intervene when these components are not being satisfied. Care relationships are seen as the starting point in such an intervention: State intervention should focus on salvaging and reinforcing the family’s and children’s own strengths. The Dutch child protection policy therefore focuses mainly on prevention and early detection of child rearing problems, with the goal of avoiding the need for expensive specialised care and compulsory child-protection measures; restricting or ending parental authority is seen as a last resort.

Discussion

The emphasis in the Dutch child protection policy is on strengthening the family as a whole and using compulsory child protection measures as a last resort. However, how this should be done exactly, is not described in national legislation; municipalities are responsible to specify this. A
study in the practice field handling cases of child maltreatment could give more insight in the actual responses to reports of child maltreatment.
Does Policy Variation Drive Child Welfare Outcomes: The Case of Adoption

Friday, 16th September - 17:18 - Child protection across borders: comparing policy and systems

Dr. Fred Wulczyn (Chapin Hall at the University of Chicago)

Introduction

In the U.S., responsibility for child protection policy is divided between federal and governments. The federal government sets an overarching policy framework; states are free to elaborate on the federal. The interaction between state child protection policy and the federal framework gives rise to considerable variation. State leadership wants to protect children but the children identified as needing protection are a matter of the normative context.

Objective

In this paper, we explore policy variation and its impact on child level outcomes. Our focus is on adoption. Adoption is an option states use when children will not return home. Before a state agency can proceed with adoption, efforts to reunify the child with the parents must be pursued. Known as the diligent or reasonable efforts requirement, a state agency cannot proceed with adoption without showing what was done and how those efforts affected the decision to adopt. Over time, the federal government has looked for ways to lower the reasonable efforts standard. There are several reasons why that has happened. Suffice it say, there are circumstances in which it makes sense to move children more quickly down the adoption track. As described, this is an area where states have been able to elaborate on the federal policy scheme.

Method

Our goal in this paper is describe state policy variation and assess whether policy variation accounts for variation in how long it takes to adopt children from foster care. To do this, we lay out state policies and identify which policies are strong relative to what we find in other states. We then use that policy distinction to the study the impact of policy on the timing of adoption. Our hypothesis is that states with strong policies will have faster adoption rates. To conclude the presentation, we discuss the results and what can be done to target adoption policy more effectively.
Comparing child protection policy in three European countries

Friday, 16th September - 17:30 - Child protection across borders: comparing policy and systems

Prof. Nina Biehal (University of York)

Objectives

The Hestia study (2015-17) aims to compare child protection policy, systems and practice in England, Germany and the Netherlands. This presentation will present a comparative analysis of child protection policy and systems in these three countries.

Method

This analysis is based on the Hestia team’s detailed review of policies, national statistics and the policy literature in each country.

Results

As rich European nations, the three countries have much in common. All provide specialised child protection services which are located within a framework of universal and preventive services. In all three countries, ‘what counts’ as child maltreatment has undergone similar shifts since the 1960s and developments in policy and systems have often been prompted by child deaths from maltreatment and the impact of the media attention these have received. More recently, the scope of child protection activity has widened to include domestic violence, child trafficking, female genital mutilation and, especially in England, child sexual exploitation and radicalisation.

There are also differences, for example in legal definitions of the harm to which the state should respond. Although the legal threshold for compulsory state intervention is ‘significant’ or ‘serious’ harm in all three countries, there are differences in the way this is conceptualised and in the degree to which the impact of harm on the child is prioritised in law relative to other considerations.

Differences in the relation between the family and the state are reflected in the balance between the provision of preventive and protective services. All three countries provide family support services and emphasise the need for early intervention, but there is currently a greater emphasis on voluntary intervention in Germany and the Netherlands than in England. The relation between the family, the state and the market also varies, in terms of the relative responsibilities of state and independent agencies. Germany and the Netherlands have long-standing traditions of subsidiarity, whereas England has a more integrated service framework with more direct provision and oversight by local authorities, although there has been a recent push for greater privatisation of child welfare services largely driven by wider political considerations.

All three countries are situated on a continuum between balancing the needs and rights of children with the rights of parents to freedom from intrusion by the state. The UNCRC has been ratified in all three, but its focus on the rights of children is balanced by policy attention to the rights and responsibilities of parents. There is also a shared view regarding the desirability of keeping children within their family or wider kinship network. However, in England the law states that the welfare of the child must be the paramount consideration and a more child-centred approach is evident in the policy emphasis on child development and on achieving permanence. While there is serious attention to protecting children from harm in both Germany and the Netherlands, law and policy in these countries suggests that the balance between a child-centred approach and a concern to protect
families from unwarranted intrusion by the state tends towards a greater emphasis on the rights of parents, especially in Germany.

Conclusions

Features of child protection policies and systems in the three countries overlap and they have faced similar challenges over time. All three seek to find a balance between a desire to keep children within their families and to protect them from serious harm. The balance achieved at any point in time has been influenced both by the force of circumstances, notably high profile child deaths, and by the legacy of historical child welfare regimes and attitudes to state intervention.
Training principles in the child and youth care field:
Implications for theory, practice and research

Friday, 16th September - 16:30 - Training principles in the child and youth care field. Implications for theory practice and research

Prof. Shlomo Romi (School of Education, Bar-Ilan University), Prof. Emmanuel Grupper (Ono Academic College)

In this symposium we will discuss some up-to-date issues related to the training principles which should play a major role in the field of Child and Youth Care. The presenters are researchers from different countries, each with long standing experience in professional education in their various academic realms.

We will begin with three guiding principles for the field of Child and Youth Care, and these also form the professional training template (Three guiding principles structuring the field of Child and Youth Care and their application to training – Shlomo Romi). The first principle is that the field is an eclectic one, with knowledge derived from many disciplines. No single discipline alone can explain the many aspects of children and youth at risk. The second principle is the unique arena in which most Child- and Youth Care activities take place – nonformal education. The third principle is the integration of “education” and “therapy,” an integration can best be seen in the interaction between the concept of therapy and the actual care work. The second presentation (Professional development and agency change: Lessons learned from training in agencies and academia – Jim Anglin), is about a re-orientation of mission and focus for both formal education and proposed agency training, as well as new forms of partnership between these two sectors. However, neither the academic “trickle-up” theory nor the agency-based practitioner training can ultimately create the organizational cultures required in dealing effectively with the complexities of Child and Youth Care work.

The third presentation (The problematic of training effective professionals capable of intervening with a large variety of individuals and communities who are experiencing challenges – Emmanuel Grupper), will focus on the complexity of the field and the new challenges for educators and welfare social agents aiming to include marginalized individuals and populations. However, the distribution of tasks – who is responsible and capable of doing what? – is still vague and often creates misunderstandings and difficulties among practitioners in the field. This complexity is also reflected in the training programs for professionals in different countries.

The final presentation (Practical training for social work students: Harnessing theoretical knowledge and practical experience – Clara Bombach), provides an introduction to the purpose and design of practical training modules at the academic level (through the example of ZHAW). It also outlines the experiences of the supporting professionals and the students at the interface and (limited) translatability of theoretical knowledge and practical experience.
Three guiding principles structuring the field of Child and Youth Care and their application to training

Friday, 16th September - 16:42 - Training principles in the child and youth care field. Implications for theory practice and research

Prof. Shlomo Romi (School of Education, Bar-Ilan University)

Three guiding principles underlie the structure the Child and Youth Care field.

First, this is an eclectic field, with knowledge derived from many disciplines. No single discipline, with its own set of concepts and theories, would suffice to explain the many aspects of children and youth at risk. Encompassing the body of knowledge – and establishing methods of training, professional facilitating, and research – requires working in a great variety of disciplines. Among these are developmental and social psychology, education, social work, sociology, anthropology, criminology, law, and economics – with the latter playing a major role in contemporary work.

The eclectic nature of Child and Youth Care has theoretical and applied implications, especially on planning the professional training of workers who will require resources that one discipline alone – as taught in colleges and universities – cannot provide. Even if the actual training is affiliated with a single track of studies, planning it requires interdisciplinary knowledge, a complex task as evident by the many specialized training programs worldwide.

Eclecticism leads to complexity, and acknowledging this includes the realization that there is no order to this complexity, nor is it necessarily accepted by all practitioners. At times training programs develop simultaneously in several disciplines without proper interfacing, perhaps because of competition or over-professionalization in some disciplines (especially the more established and prestigious ones), “usurping” more generalized disciplines. Child and Youth Care work is a relatively young discipline, and the confusion around duties and definitions is part of its growing pains. An outcome of this situation is the lack of an accepted setting for certification of Child and Youth Care workers in Israel, and therefore, a lack of a legal standard for such professionals.

Another manifestation of these growing pains and complexity is the lack of an accepted definition of youth at risk. Distress and risk situations are broadly defined – both in theory and in practice – and consensus is elusive.

The second organizing principle is the unique arena in which most Child and Youth Care activities take place – nonformal education. While the gap between formal and nonformal education is narrowing, there are differences in their characteristics. The nonformal dimension demands pedagogical insights that differ from those in formal education, especially regarding the difference between relationships of residents with care workers in the former, and teacher-student relationships in the latter. Furthermore, Child and Youth Care involves voluntary activity, with the volunteers being both the young people themselves and some of the workers. In addition, Child and Youth Care involves creating an educational environment that will allow the young people a proper moratorium – “time out” – for establishing their identity.

The third organizing principle is integrating “education” and “therapy,” an integration best seen in the interaction between the concept of therapy and the actual care work. In psychology, psychiatry, and social work, therapy refers to looking into the client’s situation, being committed to specific ways of work, and a requirement to be licensed to do so. These elements are all part of the work of caring for children and youth, and by the very nature, of this work, these interventions are more eclectic and “softer” than the approach taken by social workers and psychologists. The educational-therapeutic
interventions characteristic of programs for children and youth in distress and at risk include aspects focusing on education, together with techniques and interventions from the therapeutic professions. The field of Child and Youth Care is indeed challenging and eclectic – much as are the children and young people with whom we work.
Professional development and agency change: Lessons learned from training in agencies and academia

Friday, 16th September - 16:54 - Training principles in the child and youth care field. Implications for theory practice and research

Prof. Jim Anglin (School of Child and Youth Care, University of Victoria)

Symposium moderator Prof. Shlomo Romi has outlined three principles basic to the training of child and youth care workers: a) complexity and multi-disciplinarity, b) practice in non-formal settings and c) the convergence of educational (or developmental) and therapeutic goals. As Prof. Romi points out, cutting across these several dimensions is the fact that child and youth care is still a young and evolving profession, with diverse educational pathways and few agreed upon definitions of our clients, purposes, methods and unique disciplinary characteristics.

This presentation draws upon the presenter’s experiences over a career in university teaching as well as more recent involvement in studying processes of training for organizational change and quality improvement in child and youth care agencies. On the basis of this experience, a re-orientation of mission and focus for both formal education and agency training is proposed, as well as new forms of partnership between these two sectors.

Traditionally, academics educating future practitioners in child and youth care have hoped that by producing highly skilled, knowledgeable, ethical and self-reflective graduates, over time this “production” of new workers would gradually transform the cultures of government departments and private-sector agencies. Competent line-workers, after a suitable period of time, would be recognized for their potential and would gradually move into key middle management and senior executive positions bringing a renewal of the cultures of practice with them.

In agencies, on the other hand, recognizing that the majority of line-workers do not have post-secondary credentials, agency leaders have supported in-service training to equip workers to do the jobs assigned them. The focus has been largely on skill development and job-related training. Thus, both academic and agency settings have been focusing on the development of individual practitioners to the neglect of organizational change initiatives.

However, neither the academic “trickle-up” theory nor the agency-based practitioner training can ultimately create the organizational cultures required for dealing effectively with the complexities of child and youth work. First, agencies are governed and their cultures formed from the top down, as documented by Anglin (2002). There is a “flow of congruence” from the leaders and leadership team downwards through the organization to the clients. If the culture is inconsistent or dysfunctional, bringing in skilled new post-secondary educated workers, generally to lower level positions, will not change the culture. Eventually, after largely ineffective efforts to change their working context, they either conform, reluctantly, or leave the organization. Second, the minimal training that can be supported by agencies themselves tends to focus on the job readiness of individuals, and there is not the vision, appetite or resources for agency-level transformation initiatives.

However, recent research is offering a new paradigm whereby an academic institution partners with agencies on an intensive and ongoing basis to bring research-based knowledge and practice wisdom to the task of quality improvement across an entire agency or program. This approach is not about training line-workers, it is about creating principle-based organizations. The locus of training and the focus of training is the agency itself. Rather than depending on a “trickle-up” strategy, this approach brings transformative training to every staff person in the agency, whether office clerk,
maintenance person, clinician, line-worker or Executive Director. Early evaluation results indicate important improvements in agency quality overall, including organizational culture and climate, line-worker attitudes and behaviors, youth perceptions of staff, reductions (in the order of 50%) in critical incidents, and in at least in one agency, similar reductions in the use of medications by the residents. Integrating theory, practice, training and research through formal academic and practice agency partnerships appears a promising direction for enhancing program development and quality for clients.
The problematic of training child and youth care professionals capable of intervening with a large variety of people experiencing challenges

Friday, 16th September - 17:06 - Training principles in the child and youth care field. Implications for theory practice and research

Prof. Emmanuel Grupper (Ono Academic College)

Many researches along with position paper and policy declarations like the UN charter on children’s rights (1989) and UN declaration on the rights of people with disabilities (2009), have been published in the last thirty years. This knowledge and change of orientation presents new challenges for educators and welfare social agents aiming to include people who are living in the margins of society and are excluded from its main stream. However, the distribution of tasks – who is responsible and capable of doing what? – is still vague and often creates misunderstandings and difficulties among practitioners in the field work. This complexity is reflected also in the training programs for professionals in different countries.

In many countries, the profession – social pedagogy; social education; child and youth care, to name only a few, is defined according to the target population. One tendency, prevailing in many European countries, is to look at all excluded populations as the target population of these professionals. A different orientation, practiced at least in Israel, and some other countries, is to focus the scope of these professionals’ activities mainly on children and young people being excluded or at risk of becoming excluded.

While stating large populations of excluded people we usually mean: children and youth at risk situations, school drop outs, delinquent youth, homeless and drug addicts. However, also categories like migrants (youth and adults as well), physically and mentally handicapped (without any age distinction). Elderly people as well are considered to be part of the target population of social educators and child and youth care workers in those countries.

The focus of this presentation is the reflection how such policy decisions are influencing and shaping the training of professional workers. Those who adopt the first attitude should ask themselves what kind of professional education programs might fit for preparing workers towards such a large variety of individuals and communities who are experiencing challenges. Is there a sufficient common denominator that could enable curriculum developers to elaborate effective training programs? Such programs that at the end are expected to supply societies with competent field workers who are able to cope effectively with such complex challenges.

In Israel, which is a relatively young country, investing a relatively high amount of resources in child and youth development, the second conceptualization of the field is prevailing. Therefore, Child and youth care workers should be trained towards being capable of empowering and initiating inclusive processes adapted to children and youth. Until recently, the distinction was between children (0-12) and youth (12-18). Since the beginnings of the third Millennium, a new category of “young adults” (18-25), are emerging as a new group-age that is also in need of specialized services. The new phenomena of “emerging adulthood” creates a new category of young people who are in great need of specialized services in order to ensure their inclusion in main stream of society. Being consistent, our training programs are meant to educate professionals whose competences are geared at working with different age groups of young people. This doesn’t mean other populations of excluded and marginalized people should be left alone without adapted services by other professionals, trained to
supply their specific needs. However, we believe that focusing the training programs on children and young people, making it the core of the child and youth care profession, is extremely important also as a message of society towards her young people. This will hopefully be reflected in creating well designed and coherent training programs that should prepare competent child and youth care workers towards meeting the needs of their future youth clientele.
Practical training for social work students: Harnessing theoretical knowledge and practical experience

Friday, 16th September - 17:18 - Training principles in the child and youth care field. Implications for theory practice and research

Mrs. Clara Bombach (ZHAW Zurich University of Applied Sciences)

The ZHAW Zurich University of Applied Sciences offers two practical training courses/sessions for social work students in order to introduce them to practical work in different fields of interest whilst studying. The practical training takes place in either Switzerland or abroad. Students are accompanied in close cooperation with qualified professionals. The latter are trained for their supporting role and meet students for close exchanges on several occasions during practical training.

This presentation aims at giving an introduction into the aim and design of practical training modules at ZHAW. It also outlines the experiences of the supporting professional and the students at the interface and (limited) translatability of theoretical knowledge and practical experience. In this context it is discussed to which time, under which conditions and with what kind of preparation and follow-up work the practical training becomes a sustainable and lasting experience. The presenter seeks to answer the question of how the students must be supported in order to gain from the experiences, embed them and reflect them within the theoretical knowledge.

Conditions for harnessing theoretical knowledge and practical experience are preparation, company and reflection based on a trustful relationship between the student and the supporting professional. The aim for the student is to become an expert of his or her own learning. Observation, naming, description, acting and justification have to be reflectively interpreted in their particular orientation framework (see Bohmsack 1997). This is trained not only during practical work but also during studying social work in general.

In the “unique arena” of child and youth care activities (see principle two of Prof. Dr. Shlomo Romi’s presentation in this symposium), implicit and explicit knowledge are both considered to be resources to accomplish everyday work. Different training models in the field of social work (e.g. ISIBINDI project in South Africa) show how these resources can be gainful in order to reach superior goals. Concurrently, ongoing research in which the presenter is involved shows that implicit everyday knowledge without explicit translation into the “Lebenswelt” of clients leads to an imbalance in power. This can be the case when e.g. everyday knowledge determines the process of decision making. It then becomes “expert knowledge” that is no longer accessible to the client.

The experiences and impressions of the students will be illustrated in citations from the evaluation of the practical trainings. Additionally, interviews with professionals (e.g. director of residential care home) will be shown. It appears that the answer to the question concerning competencies of child and youth care workers differ from one perspective and/or cultural background to another. At the same time it is conspicuous that there are similarities and continuities over time. An ongoing study on biographical trajectories after residential care, in which the presenter is also involved, shows that (former) children in residential care in the 1960s as well as today point out the importance of the willingness of the employees at the residential care home to form relationships and personal exchanges on an eye to eye level.
Author Index

Achúcarro C. 483
Adebowye T. 427
Aquí A. 207, 396, 429
Abrams K. 448
Almeida A. 523
Alrouh B. 159
Alvarez M. 521
Anciães J. 414
Andreassen T. 211
Andries C. 282
Anglin J. 31, 37, 573
Anthony R. 347
Antolin-suárez L. 421
Armstrong M. 526
Arnau L. 74, 77, 313, 399
Arney F. 478, 545
Arrubarrena I. 48
Ask T. 499
Asumeng M. 13
Attar-Schwartz S. 64
Auger S. 54
Axford N. 168, 170
Backe-Hansen E. 114
Bagdonaité-Stelmokienė R. 179
Bakketeig E. 489
Balagüé Gea F. 312
Baldwin H. 218, 289, 562
Balsells M. 317, 351, 522
Barbero Vignola G. 72
Barbosa-Ducharne M. 196, 202, 203, 255, 392, 418
Barlow J. 158
Barroso R. 196
Bartelink C. 541
Bastian P. 550
Batstra L. 246, 353
Bazalgette L. 373
Beckett C. 127
Belderson P. 238, 241
Belenger L. 227, 401, 481, 534
Bellonci C. 133
Beloki U. 194
Belotti V. 514
Beltman D. 296, 340
Benbenishty R. 29, 64, 67, 152, 338, 540
Bengtsson M. 266
Bernaards C. 236
Bernedo I. 197, 320
Berrick J. 258, 260, 319, 381
Berridge D. 554
Berube A. 549
Bessa Costa S. 203
Biehal N. 218, 561, 562, 568
Biesel K. 69, 359
Bjornstad G. 168
Bjorknes R. 279
Blankenstein A. 25
Blower S. 416
Boddy J. 80, 92, 487
Bombach C. 89, 577
Bouma H. 565
Brady E. 271
Bravo A. 48, 129, 343, 344, 396, 422, 532
Bristow G. 14, 132
Broadhurst K. 159
Broerse J. 198
Bruheim Jensen I. 451, 510
Brännström L. 537
Downey L. 132
Dowse L. 21
Drew H. 375
Dufour S. 501
Dworsky A. 313
Dæhlen M. 151
Eenshuistra A. 97
Eeren H. 505
Ehlke C. 490
Eiberg M. 110
Ellingsen I. 354, 451, 510
Elliott M. 446
Ellison S. 367
Eltink E. 17
Enell S. 19
Enroos R. 477
Eronen T. 115
Evers S. 164, 167
Fargas Malet M. 377
Farmer E. 232
Feldman S. 470, 472
Fellmann L. 177
Ferić M. 302
Fernandes A. 286
Fernandez E. 84, 379, 380
Fisher P. 161
Fitzgerald T. 494
Fluke J. 339, 470, 524, 525
Flynn R. 102, 103, 105, 109, 139, 556
Forrer M. 544
Forrester D. 284
Forsman H. 537
Frederiksen S. 142, 397
Freeman P. 458
Freeman V. 303
Fuentes M. 197, 320
Fuentes-Peláez N. 314, 317, 432, 522
Foleide M. 453
Gabriel T. 89
Gabriel T. 87
Ganne C. 305
García-Moya I. 186
García-martín M. 197, 320
Garrido M. 346
Garsed J. 516
Gilligan R. 22, 74, 77, 415
Gocman M. 363, 439
Goemans A. 137
Golding L. 159
González C. 48, 207, 396, 429
González P. 410
Goossens L. 505
Grami M. 100
Graça J. 408
Greenberg B. 139
Greeson J. 307
Grietens H. 81, 95, 246, 353, 354, 479, 506, 565
Grietens H. 300
Grupper E. 570, 575
Guerreiro M. 427
Gundersen T. 489
Gypen L. 227, 401, 481, 534
HP Young People H. 310, 416
Haight J. 468
Halfpenny N. 130
Hanrahan F. 80
Hansen K. 538
Hansen G. 236
Hanson L. 70
Harder A. 93, 95, 97
Knorth E. 296
Knot-Dicksheit J. 300, 424
Kojan B. 277
Koller-trbović N. 63
Konijn C. 17, 493
Kor K. 128
Kremer I. 164
Krugman R. 448
Kuiper C. 174, 533
Laakso R. 115, 477
Lancôt N. 234
Lange A. 326, 328, 505
Larsson B. 238, 241
Lausten M. 142, 397
Laverge C. 6
Lee J. 84
Lee J. 367
Lehto-Lundén T. 178
Leipoldt J. 95
Leloux-Opmeer H. 174, 533
Lemay L. 501
Leonieke B. 122, 236
Lerum A. 280
León E. 145, 146, 445
Lindberg H. 30
Lino A. 414
Llosada-Gistau J. 46, 312
Loch E. 130
Lolo M. 312
Lorence B. 420, 421, 519
Lostracco J. 109
Luke N. 371, 552
Lundström T. 60
Lunz M. 335
Lurie J. 275
Lushey C. 229, 475
Lwin K. 286, 413
Lydersen S. 135
Lynch A. 284
Lázaro-Visa S. 422
López M. 337, 476, 479, 561, 565
López I. 420, 421
Ma J. 385
Macdonald G. 464
Magalhães E. 430
Mangold K. 336
Mannion S. 454
Marie-Andree P. 6, 54, 273
Marie-Eve C. 549
Marinho S. 255
Marion É. 28
Markkola P. 86
Martin W. 33
Martin K. 132
Martins A. 392
Martin E. 129, 410
Martínez-González R. 520
Masson J. 542
Matheson I. 75
Matousek O. 79
Matteson D. 454
Maurovic I. 65
Maurović I. 18, 302
Mc Mahon C. 22, 415
McArthur M. 214, 263, 546
McDermid S. 91, 473, 475
McLean S. 132, 545
McLeod B. 324
McSherry D. 369, 377
Mckenzie R. 132

582
McQuarrie T. 159
Meakings S. 56, 58, 254, 347
Meetoo V. 368
Meiksans J. 478, 545
Melkman E. 29, 152
Menéndez S. 519
Messmer H. 177
Michael E. 139
Mihić J. 302
Milani P. 315, 456
Millen S. 464
Miller M. 139
Millet L. 132
Mireia F. 309
Mirosavljević A. 63
Moentjens G. 236
Moggach L. 52, 190, 535
Mollidor C. 116, 217
Monteiro Fonseca S. 203
Montoya J. 220
Montserrat C. 44, 46, 384
Moonen X. 25
Mooney J. 557
Moore K. 303
Moore T. 214, 546
Moreno C. 145, 146, 186
Moreno-Maldonado C. 186
Morpeth L. 163
Morpeth L. 168, 170
Mosca S. 3, 8
Mosteiro A. 194
Munro E. 368
Munro E. 360
Murray S. 39
Mølholt A. 268
Naert J. 248
Navajas A. 351
Neagu M. 388
Neil E. 53
Newlands F. 284
Ng T. 426
Nieuwhoff R. 349
Nilsen H. 224
Nobre Lima L. 414
Nunno M. 32
Nygård R. 222
O’Brien N. 441
O’Higgins A. 556
O’Leary D. 180, 494
Ohlson C. 170
Ormen N. 224
Oterholm I. 148
Ottaway H. 56, 58, 117, 347
O’Sullivan E. 40
Padilla S. 521
Pagé G. 54
Palacios J. 145, 146, 184, 251, 256, 445, 492
Palaio C. 216, 365
Palareti L. 290
Pandolfi L. 485
Paniagua C. 184, 186, 188, 256, 492
Park K. 154
Pastor C. 317, 432, 522
Patrício J. 404, 408, 430
Paulsen V. 403
Pazlarova H. 79
Perry I. 180
Peters U. 332
Petrella A. 456
Peñarrubia M. 146
Serbati S. 315
Serbati S. 456
Shelton K. 56
Shelton K. 58, 347
Sica M. 382
Silva D. 454
Silva C. 143, 406
Sirbu I. 390
Sità C. 315
Sjöblom Y. 333
Skauge B. 277
Skilbred D. 298
Skivenes M. 447
Skivenes M. 259
Sköld J. 82
Smith E. 463
Snieskienè D. 230
Soares J. 203
Sobremonte E. 194
Stams G. 17, 329
Steenbakkers A. 354
Stein M. 112, 334
Stelmazuk W. 118
Stohler R. 89
Storhaug A. 277, 345
Storø J. 250
Strahl B. 272
Strandbu A. 517, 538
Strieder F. 458
Strijbosch E. 329
Stroobants T. 10, 282
Studsrød I. 83, 451, 510
Sulimani-Aidan Y. 438
Sullivan S. 33
Swift S. 159
Szarzynska M. 363, 439
Sánchez J. 420, 519
Sánchez-Queija I. 188
Sersdal L. 124
Tanana M. 529
Tavares A. 208
Te Meerman S. 246
Tefre Ø. 547
Tessier N. 556
Thiery N. 305
Thoburn J. 466
Thompson A. 307
Thornblad R. 538
Tillard B. 3, 8, 220
Timmerman G. 85
Timonen-Kallio E. 504
Tjelllaat T. 94, 275
Tonk G. 387
Toro P. 363, 439
Tregeagle S. 535
Triana-Pérez B. 200, 201
Tunnard J. 159
Turcotte G. 6, 54
Turcotte M. 234
Turcotte D. 6
Turney D. 125
Turpin A. 286, 413
Tysnes I. 150
Undheim A. 99, 135
Van Assen A. 300
Van Brandenburg M. 329
Van De Poel S. 361
Van Der Helm P. 329
Van Der Rijksen R. 25, 326, 328, 505
Van Der Steen S. 354
<table>
<thead>
<tr>
<th>Name</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Van Geel M.</td>
<td>137</td>
</tr>
<tr>
<td>Van Hattum M.</td>
<td>324</td>
</tr>
<tr>
<td>Van Holen F. 120, 141, 172, 227, 282, 401, 481, 534</td>
<td></td>
</tr>
<tr>
<td>Van Horn J.</td>
<td>326</td>
</tr>
<tr>
<td>Van Os C. 296, 340</td>
<td></td>
</tr>
<tr>
<td>Van Santen E.</td>
<td>357</td>
</tr>
<tr>
<td>Van Yperen T. 163, 166</td>
<td></td>
</tr>
<tr>
<td>Van den Bruel B. 10</td>
<td></td>
</tr>
<tr>
<td>Vanden Berge A. 10</td>
<td></td>
</tr>
<tr>
<td>VandenBerg G. 164</td>
<td></td>
</tr>
<tr>
<td>Vanderfaeillie J. 10, 120, 141, 172, 227, 282, 481, 534</td>
<td></td>
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<td>Vanderfaeillie J. 401</td>
<td></td>
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<tr>
<td>Vanderloo M. 528</td>
<td></td>
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<tr>
<td>Vanschoonlandt F. 120, 141, 172</td>
<td></td>
</tr>
<tr>
<td>Vecchiato T. 382, 502</td>
<td></td>
</tr>
<tr>
<td>Vedder P. 137</td>
<td></td>
</tr>
<tr>
<td>Veerman J. 349</td>
<td></td>
</tr>
<tr>
<td>Velho C. 216, 365</td>
<td></td>
</tr>
<tr>
<td>Vermulst A. 349</td>
<td></td>
</tr>
<tr>
<td>Villafuerte-Diaz A. 188</td>
<td></td>
</tr>
<tr>
<td>Villumsen A. 243, 497</td>
<td></td>
</tr>
<tr>
<td>Vinnerling B. 537</td>
<td></td>
</tr>
<tr>
<td>Vis S. 193</td>
<td></td>
</tr>
<tr>
<td>Vischer A. 506</td>
<td></td>
</tr>
<tr>
<td>Wade J. 218</td>
<td></td>
</tr>
<tr>
<td>Wall G. 132</td>
<td></td>
</tr>
<tr>
<td>Warburton J. 116</td>
<td></td>
</tr>
<tr>
<td>Ward E. 238</td>
<td></td>
</tr>
<tr>
<td>Ward E. 241</td>
<td></td>
</tr>
<tr>
<td>Ward H. 153, 511, 535</td>
<td></td>
</tr>
<tr>
<td>Ward J. 310, 416</td>
<td></td>
</tr>
<tr>
<td>Wassell C. 2, 123</td>
<td></td>
</tr>
<tr>
<td>Watson D. 49</td>
<td></td>
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<tr>
<td>Waugh J. 440</td>
<td></td>
</tr>
<tr>
<td>Webb R. 62</td>
<td></td>
</tr>
<tr>
<td>Weber S. 356</td>
<td></td>
</tr>
<tr>
<td>Wedeles J. 286, 413</td>
<td></td>
</tr>
<tr>
<td>Welch V. 2, 123</td>
<td></td>
</tr>
<tr>
<td>Westlake D. 284</td>
<td></td>
</tr>
<tr>
<td>Wetzel M. 177</td>
<td></td>
</tr>
<tr>
<td>Whittaker J. 209</td>
<td></td>
</tr>
<tr>
<td>Wijedasa D. 362</td>
<td></td>
</tr>
<tr>
<td>Wiklund S. 212</td>
<td></td>
</tr>
<tr>
<td>Wilkins M. 232</td>
<td></td>
</tr>
<tr>
<td>Winter K. 23, 107, 557</td>
<td></td>
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<td>Wise S. 204</td>
<td></td>
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<tr>
<td>Wissink I. 329</td>
<td></td>
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<tr>
<td>Witte S. 564</td>
<td></td>
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<tr>
<td>Wolf K. 88</td>
<td></td>
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<tr>
<td>Wolff R. 359</td>
<td></td>
</tr>
<tr>
<td>Wong M. 385, 513</td>
<td></td>
</tr>
<tr>
<td>Wubs D. 353</td>
<td></td>
</tr>
<tr>
<td>Wulczyn F. 154, 567</td>
<td></td>
</tr>
<tr>
<td>Wulczyn F. 470, 472</td>
<td></td>
</tr>
<tr>
<td>Young J. 127</td>
<td></td>
</tr>
<tr>
<td>Zalović T. 18</td>
<td></td>
</tr>
<tr>
<td>Zanon O. 315</td>
<td></td>
</tr>
<tr>
<td>Zavala M. 185</td>
<td></td>
</tr>
<tr>
<td>Zeijlmans K. 476, 479</td>
<td></td>
</tr>
<tr>
<td>Zeilstra C. 17</td>
<td></td>
</tr>
<tr>
<td>Zeïra A. 67</td>
<td></td>
</tr>
<tr>
<td>Zevulun D. 292, 296, 340</td>
<td></td>
</tr>
<tr>
<td>Zijlstra E. 292, 294, 296, 340</td>
<td></td>
</tr>
<tr>
<td>Zydziunaite V. 179</td>
<td></td>
</tr>
<tr>
<td>Østergaard J. 487</td>
<td></td>
</tr>
<tr>
<td>Øverland Risøy S. 279</td>
<td></td>
</tr>
<tr>
<td>žIžak A. 65, 302</td>
<td></td>
</tr>
</tbody>
</table>
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