

# **Family Group Conferencing in child welfare**

## **Summary**

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## Summary

In the Netherlands, the model of Family Group Conferencing (FGC) is increasingly used for decision-making in child welfare. Whereas in regular care the child protection worker is responsible for drawing up a care plan, in FGC a coordinator helps the family to gather all parties with an interest in the wellbeing of a child and its family to make a family group plan that is meant to ensure and support active responsibility of the family and its social network.

From January 1, 2015 a Dutch law has been implemented in the Netherlands that requires youth care organizations to offer parents the opportunity to develop a family group plan, in voluntary as well as in compulsory care (Child and Youth Act, 2015). The current research project was conducted to answer the question *“Does the implementation of FGC result in improved protection of children and adolescents who have been placed on a supervision order, and which characteristics affect the results of FGC?”*. Five studies were performed to 1) determine what can be concluded about the effectiveness of FGC from available national and international research (literature study), 2) investigate the experiences with FGC in the Netherlands and the content of the family group plans (two qualitative studies) and 3) examine the short-term (three months) and longer term (one year) results of FGC in the Netherlands (two quantitative studies).

### Research design

For the literature study<sup>1</sup>, we searched for all available studies on the effectiveness of various types of FGC in child welfare. We included all controlled studies in which the results of FGC were compared to the results of regular care.

The qualitative studies and the quantitative study on the short-term results of FGC were performed in collaboration with various certified youth care organizations in the Netherlands. In the participating organizations, families in which a child was placed on a supervision order between February and December 2014 were offered a family group conference (type of FGC varied across organizations). Data were collected through questionnaires filled out for parents and child protection workers immediately after the supervision order was issued (baseline) and three months after a care plan had been drawn up.

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<sup>1</sup> Available since 2015 at [www.wodc.nl](http://www.wodc.nl).

To examine the results of FGC when compared to regular child protection care, data from 84 families who completed a family group conference (experimental group; conference resulted in an approved care plan) were compared to data from 85 families in which a child was placed on a supervision order but who were not offered a family group conference (control group). To investigate the practical experiences with FGC, interviews with parents, children, members of the social network, child protection workers and FGC-coordinators were conducted in a subsample of 17 families. To investigate the content of the family group plans, approved family group plans from a subsample of 36 families were analyzed.

The longer term results of FGC (one year after a care plan had been drawn up) were examined by case file research. For this study, case files were selected from families in which a supervision order was issued in 2012 or 2013. Families were included if it was explicitly stated in the case files that a family group conference was completed (70 families; experimental group) or if the opportunity to organize a family group conference was not offered (70 families; control group).

### **Literature study**

The search for relevant studies resulted in the inclusion of 16 eligible studies, based on data from 13 independent samples. The majority of these studies were performed in the United States, where various types of Family Group Decision Making models have been implemented. There is a remarkable lack of robust research allowing for causal inferences on the effectiveness of FGC.

Meta-analyses indicate that overall FGC is not more effective than regular care in improving the safety of the children in de family, preventing out of home placements and shortening the period of involvement of youth care services. According to prospective studies (for which families are followed over time), FGC even results in more reports of child maltreatment and more and longer out of home placements when compared to regular care, whereas retrospective studies (for which information is obtained retrospectively by case file analyses) demonstrate the opposite. When compared to regular care, FGC does seem to increase the chance of kinship foster care placements and faster reunification with parents for children who are placed in foster care.

### **Practical experiences with FGC and content of the family group plans**

The interviews confirm that for families who have completed a family group conference and drew up a family group plan, stakeholders are generally satisfied with the

atmosphere during the conference. Family members feel listened to, experience support from the members of their networks and feel content with the collaboration. Not all family and network members appreciate the family group plan as their own plan (as opposed to a plan of the child protection worker), or as an appropriate plan to solve the problems in the family (if the plan does not address the underlying problems in the family). In families characterized by conflict, for instance in the case of a high-conflict divorce, the various stakeholders are less positive due to tensions and limited collaboration during the conference. In such families, as well as in families with a restricted social network, child protection workers and FGC-coordinators seem to perceive less opportunities to complete a family group conference.

Our results further show that, on average three months after the conference, most family group plans are not carried out as intended. Reasons mentioned by stakeholders are that the plan was no longer relevant because of out of home placement of the child or that parents did not agree with the plan afterwards. In addition, according to some parents, members of the social network and child protection workers, the family group plans promoted daily support for parents in taking care of their child, but did not focus on the underlying problems that should be solved first.

Interviews further demonstrate that some parents experience an increase in autonomy in solving the problems in their family, while an equal proportion of parents does not. Parents point at the complexity of the problems in their family to explain the absence of a change in autonomy. It should be mentioned, however, that the short research period (stakeholders were interviewed on average three months after the conference) may also explain the limited change in autonomy. According to members of the network, parents seem more motivated to work on their problems.

Analysis of the family group plans indicates a large variation in the information included in the plans. In a specific type of FGC, the so-called Eigen Kracht-conferenties, family group plans are developed following a predetermined format. When compared to plans developed during other types of FGC, Eigen Kracht plans generally contain more information about the stakeholders, the needs of the family that should be addressed and the communication among stakeholders during the implementation of the plan.

Of the family group plans that contain a description of the needs of the family that should be addressed (81 percent), four in five plans actually address all needs. Needs that are not addressed vary in nature and severity. Most decisions described in the family group plans pertain to supporting the parents (28 percent) and the communication between parents, or between parents and their children, members of their social network and professionals (32

percent). Remarkably few decisions directly relate to the safety of the children in the family (5 percent). Although part of the decisions may indirectly contribute to increased safety, our findings suggest that in at least some families, FGC is not used to draw up a plan to solve the problems that have resulted in the placement of a supervision order, but to increase assistance by the social network in the daily care for the children in the family.

## **Results of FGC**

Results from the short-term quantitative study indicate that in only 41 percent of the families that were provided the opportunity to organize a family group conference, a conference took place and a family group plan was drawn up. The average time to a conference or to the decision to cancel the FGC-approach was, respectively, 18 (range 0-77) and 28 (range 0-81) weeks after the supervision order had been issued. When compared to the average time used to develop a regular care plan in the control group (10 weeks, range 0-37 weeks), FGC seems to result in an extended period of time before decisions are made about the care that is needed to address the problems in the family, at least in some families. As supervision orders are issued because the development of a child is seriously threatened, this extended period may challenge the urgent need for decisions about care to improve the safety of the child. It should be mentioned however that in some of the families in this study, a regular care or safety plan had been developed prior to the family group plan. It is possible that the involved child protection workers considered this necessary to guarantee the safety during the preparation of the family group conference.

Results of this study further indicate that, on the short-term, FGC does not outperform regular child protection care in terms of reducing child maltreatment and the use of professional care. Because of the low number of families in which placements decisions were made, differences between the methods in terms of this outcome measure were not tested. None of the examined characteristics affected the results of FGC.

The use of FGC-types in which a separate coordinator is assigned requires an additional investment varying between €2460,- and €4000,-. When no separate coordinator is assigned and instead the regular child protection worker supports the family in organizing a conference, the costs do not deviate from the costs of regular child protection. On the short-term, FGC seems to result in higher costs for professional care (including the costs of the family group conference) when compared to regular child protection care. Because we did not weigh the costs to the effects, no conclusions can be drawn about the cost-effectiveness of FGC.

Findings from the quantitative study on the longer term results of FGC are in agreement with the short-term results: FGC does not outperform regular child protection care in terms of reducing child maltreatment and the use of professional care. Again, differences between the methods pertaining to placement decisions were not tested due to the low number of families in which one or more children were placed out of home or back home. Results from this sub study further indicate that although overall FGC does not affect the duration of the supervision order and whether or not a supervision order is continued after a year, it more often results in a continuation of the supervision order in minority families than in non-minority families. None of the other examined characteristics affect the results of FGC on the longer term.

### **Implications and recommendations**

Although FGC seems as effective as regular care in the protection of children that have been placed on a supervision order, the results of the current study lead to the following implications and recommendations for the use of FGC. First, as both child protection workers and FGC-coordinators seem to perceive less opportunities to complete a family group conference in families characterized by high conflict and/or a restricted social network, tools are needed to increase the chances of completing a family group conference in such families, provided that the safety of the child is guaranteed. Second, we need to increase our understanding in what families, child protection workers and FGC-coordinators need in order to organize a family group conference within a reasonable period of time. Third, families and their social network may profit from tools that enable them to draw up a clear family group plan to address the problems that have resulted in a supervision order. As the child protection worker has to approve the family group plans, additional attention from the child protection worker in this area is warranted. Finally, children and their families may benefit from improved monitoring and evaluation of working with the family group plans. As a first step, family group plans should clearly describe the decisions made as well as the person responsible for safeguarding the implementation of the plan.