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The project 'Family Group Conference When It's Urgent' was conducted between 2017 and 2022 (Slettebø et al., 2021). In the following we present the conclusions from both the main report and final sub-report of the project, which is a quantitative study of medical journals for 329 emergency cases handled by the Norwegian municipal child welfare services (CWS) in which family group conferences (FGC) in emergency cases (FGCE) were utilised.

The journal study was conducted during the autumn of 2021.

Project leader Professor Tor Slettebø at the VID Specialised University conducted the study, together with Veronika Paulsen, first researcher in the Social Research Department at the Norwegian University of Science and Technology (NTNU Trondheim), and with Professor Ulf Axberg at VID Specialised University, Oslo

'Family Group Conference When It's Urgent' Report

This summary has been retrieved from the 'Family Group Conferences When It's Urgent' report (Slettebø et al., 2021).

Findings:

FGCEs strengthen relationships in and around the child and family

The study shows that the use of FGCs in most emergency situations helps to strengthen relationships in and around the child and the child's family. This is maintained by children, parents, and people in the children's family and networks who participated in the FGCE, as well as by FGCE coordinators and caseworkers at the child welfare services. Transparency regarding the problems faced by the child and family enables people in the child's network to provide practical assistance and social support, which benefits both the child and parents. Several of these people expressed regret at not being able to help as much as they had intended to due to the Coronavirus pandemic. The FGCE enhanced both cooperation and the coordination of efforts made from both sides of the family on behalf of the child and parents. Members of the family and network not only played a supportive role when they were involved in the FGCE, but we also saw examples of how, when the family became aware of the child at risk, other members of the network began to care in different ways. For example,

in some cases a form of social control was adopted, whereby regular contact was made with the parents to hear how they were getting on with their child.

FGCEs work to prevent placements outside the home

Family group conferences in emergency situations work to provide measures that prevent out-of-home placements of children into unfamiliar settings, such as a state-run emergency institution or an emergency home. Such measures include having one of the parents move out of the home instead of requiring a child to do so or placing the child with a member of their extended family or from their relationship network. Findings from the survey show that these measures occur more often with the use of FGCEs than when the CWS handles emergency situations using ordinary methods. This was examined in more detail in a journal study conducted in the autumn of 2021.

There were several instances in which FGCEs mobilised support from other family members and thereby enabled the child to continue living at home. The utilisation of FGCEs may facilitate less-intrusive handling of emergency situations, contributing to the child having greater continuity in his/her life. At the same time, the question must be asked if it is safe for a child to remain living at home. Based on interviews with children, parents, and relatives over time, we have not found examples of children being harmed by remaining living at home, which reduces the need for out-of-home placements. About half of the parents in the follow-up study still had contact with the CWS, and they were happy to receive help from family therapists, parental guidance, relief services, and support groups. Several of the young people also received aftercare support. In other countries, a key goal of FGCs is for the family to be able to manage without government intervention (Hollingshead et al., 2017). We question such a goal, because the follow-up interviews showed that many of the children and parents still needed help after the FGC was completed. We believe that legitimate goals of family group conferences can be the participation of both children and parents, the careful handling of emergency situations, and continuity in the client-CWS relationship.

FGCEs generate better cooperation between families and child welfare services

Both the parents and the caseworkers emphasised that FGCEs facilitate more frequent and better cooperation between the CWS and the families. This is due to the fact that the model is resource-oriented, trust-based and focused on promoting the participation of both children and parents. It is therefore important that caseworkers adhere to FGCE guidelines. Criticism expressed by parents and members of the child's family and network has not focused on the

FGC model itself, but rather on planning an FGCE after an emergency placement had already occurred, something that could have been prevented if an FGCE had been held sooner. There were also examples of caseworkers not having confidence in a family's ability to find good solutions or leaving a family to fend for themselves after a follow-up FGC.

Some parents and family members were critical of the fact that caseworkers who had been present at the FGC were not given authority to approve the plan of action. This made family members question whether the caseworkers had sufficient competence. The question of the caseworkers' decision-making authority should be taken into consideration in the further development of the FGC model. At the very least, families should receive detailed information on the formal aspects of the FGC model at an early stage.

Child participation - the importance of follow-up family group conferences

One of the key questions in the study was the degree to which the cooperation of a child is ensured during an emergency family group council. We know that a child's influence tends to be limited during the proceedings of an FGCE, because the caseworker has the legal responsibility of ensuring the child's right to be heard. As a result, questions for the FGCE are usually posed by the caseworker. A child's limited participation in the first FGCE meeting is often compensated for in the follow-up FGC, where greater emphasis is placed on the child's inclusion. Children are clearly positive when it comes to participating in the FGCE, most likely because they may not understand the difference between FGCEs and follow-up FGCs. We believe that the positive feedback given by the children is due to the children's participation in the Nordic model. Follow-up FGCs are implemented differently in different countries, making comparisons between countries challenging. For example, in the state of New York in the US, a support person is offered to the parents, and not to the child (Lalayants et al., 2021). FGCEs are implemented in the Nordic countries in similar fashion.

Some of the family members and the FGCE coordinators questioned whether too much emphasis was placed on the participation of children and young people. An example of this is when a child was not able to assess the negative consequences of the choices he/she had made, or when certain people were not being invited to the FGCW when their presence and contribution might have been beneficial to the child.

Organising an FGCE against the wishes of a child has sometimes resulted in unfortunate outcomes. In some of the cases, we received the impression that the CWS' decision to find an emergency placement rested solely on a child's description of violence at home. We question

such a participatory practice, when too much responsibility may have been placed on the child. The FGCE coordinators often did not have sufficient time to prepare a child for the FGCE they were to participate in.

FGCE challenges when participating families come from minority backgrounds

Families with minority backgrounds sometimes found the emphasis on child participation in an FGCE to be strange and unfamiliar. Children with minority backgrounds agreed with this, stating that it was unusual for them to participate equitably with adults.

The use of an interpreter is important if families from minority backgrounds are to meaningfully participate in an FGCE. Interpreters should be given information regarding the content and principles of the model in advance of an FGCE, information which can be difficult to obtain due to lack of time.

The cultural competence of the FGCE coordinators is vital when working with minority families. Scepticism towards the CWS among families from minority backgrounds requires FGCE coordinators to work consciously and actively to build a safe framework in advance of the meeting.

Positive FGCE experiences are often made in the context of a specific case

Positive experiences associated with FGCEs seem to be related to the nature of a specific case, such as whether it was truly an emergency or not, the reason for the FGCE (whether it was due to the challenges of the child, or due to those of the parents), the level of motivation to participate, the amount of time used in preparation for the FGCE and for the follow-up meeting, and the strength of the desire to prevent the child's placement outside the home.

A limited timeframe for the FGCE creates hope

One of the objections expressed by the children regarding ordinary family councils was the inordinate amount of time between the decision to hold a family group conference and when the FGC was held (Slettebø et al., 2016). Informants in our survey were positively surprised when an FGCE had been quickly concluded, which created hope for change in a difficult situation. Limited time in an emergency can paradoxically contribute to concerted efforts from a child's family and relationship network. Time pressure can result in greater commitment to finding solutions that are more protective of the child. This is an example of how adjustments to the FGC model in emergency cases do not necessarily diminish the quality of the FGC efforts. We assert that, in most cases, the utilisation of an FGCE

contributes to ensuring protection for a child while maintaining the child's relationship with parents and family.

Time constraints may, however, limit opportunities for relationship building

The findings of the survey highlight the importance of information, participation, the facilitation of FGCEs, and the emphasis on a family's unique resources. These conditions are also important for ordinary family group conferences. While time constraints in emergency cases promise change, they may also limit the potential for adequate casework, relationship building, and proactive conflict resolution. Time pressure impacts adequate planning and the framing of pertinent questions for the FGCE, discussion on who should participate in the meeting, and the relaying of relevant information to the participants. Challenges associated with the use of an FGCE appear to be compensated for by holding an ordinary FGC soon after the FGCE. Our conclusion is that the participation of children and parents needs to be facilitated in an appropriate manner, taking into account time constraints, the nature of the emergency, and the need to protect the child.

Should a situation always be classified as an emergency, or should some FGCEs be downgraded to the status of an ordinary FGC?

Based on the reported experiences of important stakeholders, we questioned whether the criteria for an emergency placement were always fulfilled. In several cases, families had been in contact with social services over an extended period, with a 'triggering event' ultimately leading to an emergency placement and/or FGCE. There were concerns about whether conditions for intervention had been fully met when such measures were implemented long after the CWS had been informed of a child's vulnerability to danger or risk of injury.

In several of the cases, convening an FGC as an ordinary meeting, rather than an emergency meeting, would have facilitated better preparation and implementation of the FGC. In some cases, an FGCE should not have been held at all. In situations where the police are involved, or when there is a risk of evidence being lost, the appropriateness of conducting an FGCE must be evaluated. The survey indicates that stronger expertise and practical experience are required in dealing with situations characterised by dramatic events that may have a detrimental effect on the life and health of both child and family.

Important prerequisites for emergency family councils

Findings from the study indicate that several factors are essential for the success of FGCEs. For example, it must be determined as to what defines an emergency. Managers must encourage caseworkers to use FGCEs. Attitude-changing efforts should be directed toward managers and caseworkers alike. There is also a need for experienced case workers who are available to give advice on the preparation of an FGCE and ensure that the FGCE model is adhered to. Other important prerequisites for FGCEs are emphasising the resources found in the family, the need for experienced and flexible FGC coordinators, and follow-up FGCs that are held soon after the initial FGCE. Furthermore, alternative measures must be considered when a child and/or parents oppose an FGCE.

Conclusion

Based on this study, it is our conclusion that, while the use of FGCEs requires a minor adjustment to the original model, the quality of the work of family group councils is not compromised.

The conclusion is that FGCEs:

- Mobilise social support and social control in the child's family and network.
- Prevent unnecessary emergency placements.
- Help ensure that acute situations are handled with greater care.
- Promote the participation of children.
- Facilitate the development of a plan of action that the family has faith in.
- Promote trust and cooperation between the CWS and the family.
- Must be followed up with an ordinary FGC and that help is offered to the family as needed.
- Are recommended by children and their families.

Overall presentation of the main recommendations

- There is a need to refine the term emergency, so that situations that are not acute should not be dealt with as an emergency.
- The use of FGCEs should be promoted due to the above-mentioned benefits of the model.

- CWS managers and employees require better competence in the handling of emergency situations, with a greater understanding of the negative effects on the child, the family, and the reputation of the CWS when a situation is not correctly handled.
- FGCEs should generally not be used in cases where children are witnesses of or exposed to violence and abuse.
- An FGCE should be held as early as possible, preferably before an out-of-home placement is considered.
- If a child has already been placed outside the home, an ordinary FGC should be held instead, and preferably sooner than what occurs under current practice.
- Follow-up FGCs must always be convened after an FGCE.
- Appropriate help must be offered to the child and family by the CWS following an FGCE and follow-up FGC.
- FGCEs must be subject to systematic evaluations and used as a basis for further organisational learning.
- Greater cultural awareness is needed in all stages of an FGCE, from the recruitment of FGCE coordinators to the implementation and follow-up of the meeting.

Sub – report Journal Study 2021 (published September 2022)

We will now present the main findings from a study comparing emergency cases in which ordinary emergency decision-making was used, with cases in which an emergency family council was held. The sub-report of the project is a quantitative study of medical journals for 329 emergency cases handled by the Norwegian municipal child welfare services (CWS) in which family group conferences (FGC) in emergency cases (FGCE) were utilised.

The findings are to be viewed in the context of the summary of findings from the qualitative study presented at the beginning of this report.

It must be stressed that the study of patient records does not provide a basis for generalisation. Nevertheless, we believe that the survey identifies some important trends. The lack of studies on the use of FGCs makes it difficult to compare the findings with other research.

Overall, findings from the study of patient records support the findings from the qualitative interviews and demonstrate that the use of family councils in acute situations leads to greater mobilisation of relatives and networks, which better facilitates less-intrusive solutions for children in emergency situations. The findings from our study show that the use of family councils in acute situations creates impetus to find solutions among relatives and networks, leading to a decrease in the use of government measures in both the short and long term. The use of emergency family councils also appears to contribute to making the acute situation less dramatic and traumatic, and thereby reduces levels of insecurity in children and parents. This is related to the fact that children can be with someone they know, while providing them and their parents with more information and greater understanding of what is about to happen. This creates a greater sense of control and predictability for both children and parents, which reduces the levels of stress in the acute situation while preparing them for a possible relocation.

Finally, we would like to mention that the qualitative study also identified challenges in the use of emergency family councils, particularly when suspected violence and/or abuse is involved. In such cases, ordinary family councils should be considered, as well as 'shuttle councils' adapted to CWS cases involving violence and high levels of conflict. We are also critical of the use of family councils when children lack trust in the adults in the family and thus do not want to partake in an emergency family council.

Recommendations

Based on the findings in the journal study, we have developed certain recommendations for professional practice and further research. These must be seen in the context of recommendations given in the main report and in the interim Report Number 1 from the project, which include the importance of follow-up family councils and an assessment of the suitability of a case to the use of an emergency family council.

Recommendations for the Development of Practice:

- The term ‘emergency’ requires further clarification.
- Families should be offered the option of an FGC earlier in the process.
- There is untapped potential for the use of FGCEs for children of all ages.
- A follow-up FGC should occur in all cases in which an FGCE is held, unless there are good reasons for why this should not occur.
- Findings from the study indicate that emergency cases should consider emergency family councils, or other measures to mobilise relatives and networks.

Recommendations for further research and development work:

- More research is needed into children’s experience of stress, uncertainty and worry in connection with emergency family group conferences when compared with ordinary emergency cases.
- More research is needed into the impact of family group conferences, especially in the long term. Our study has a small sample size and must therefore be interpreted with caution. By improving the statistical basis for emergency work by the child welfare service, it will be easier to monitor the effects of family group conferences. At the same time, this must also be illuminated through qualitative studies that obtain qualitative dimensions of impact, such as participation, cooperation with the family, and social support.
- There is a need to develop a better statistical basis for the emergency work conducted by the child welfare services. When registering emergency family group conferences, a distinction should be made between different forms of family group conferences, i.e. whether this is an emergency family group conference based on emergency clauses, an emergency family group conference as an auxiliary measure, an emergency family group conference as a preventive measure, or an emergency family group conference

carried out before or after a placement. As part of the statistical basis, the use of follow-up family group conferences should also be registered, and whether the action plan has been approved by the child welfare services.

<https://youtu.be/TRGRFSL0uMQ>