Learning From Family Group Conferencing

Citation for published version:

Link:
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Learning from Family Group Conferencing: Reimagining approaches and outcomes to child care and protection.
Children’s services are increasingly asked to take an outcomes-based approach, to ensure that they are improving outcomes for children and young people (hereafter children) and their families. This briefing reports on research that investigated outcomes following Family Group Conferencing (FGC), which is a rights-based approach that recognises the strengths of families, bringing family members together when there is a concern about a child. The findings have implications both for FGC practice and for children’s services more generally.

This research is timely. In Scotland, children’s services are being challenged to become more relational and find new ways to engage with children and families amongst a backdrop of financial constraint1. Featherstone and colleagues (2014) encourage changes to child protection practice, so that parents and children are viewed as partners in finding solutions rather than problems that need ‘fixing’. Families with care and protection needs are often caught in conflicting policy and practice expectations: family members are expected to take on responsibilities for care, while being positioned as ‘failing’. Family members may also have experienced personal trauma and a significant level of social work intervention themselves, which can make them tired and distrustful of social work intervention. Often this occurs at an intergenerational level.

It is within this rapidly changing Scottish legislative, policy and practice context that this study offers insight into the contribution FGC can make towards outcomes for children and families and towards broader child care and protection practice.

For the purpose of this briefing, the term ‘families’ is used as a broad term to include extended families and those with important relationships in children’s lives. Such people may include friends, stepparents, siblings, teachers, key workers, and others.

Key messages

• Family members feel supported, valued and individually acknowledged when empowerment and recognition are embedded in the FGC process. The process is as important to family members as the final outcome of an FGC.

• Individual family members’ capacities can increase through their involvement in the FGC process. Throughout the process individuals reported increased self-esteem, self-confidence and self-respect, which in turn contributed towards improved relationships, ownership of concerns and control over their own lives. Increased capacities can support family members to manage future crises and conflict if they arise.

• Children and their families were better able to reflect on their own situation and acknowledge others’ experiences.

• FGC can help improve relationships between some family members in the longer-term.

• FGC can help reduce the power imbalance between statutory social work services and children and families. The process helps family members and professionals reframe unproductive attitudes towards each other. In the longer-term, this can help reduce the need for social work services and/or improve working relationships between social work and family members.

• Through facilitated dialogue, consensus and cooperation, FGC can improve child protection decision-making and outcomes for children and their families.

• Children and families do not identify the same outcomes or long-term goals as professionals. **Outcomes important to family members should be given equal value to those identified for families by professionals.** Such an approach provides new information to better understand services’ quality and impact.

• Including grandparents, siblings, close friends, teachers, and others in child care and protection processes adds value and understanding about outcomes for children.

• The research has lessons for both FGC practice and wider child care and protection practice in terms of **improving the way that professionals work with families** to shape and understand families’ experiences of support.

**What is Family Group Conferencing?**

Also known as Family Group Decision Making (FGDM), Family Group Conferencing began in New Zealand in 1989. It is a rights-based, strengths-based approach that brings family members together where there are concerns about the child. The practice was such a success that the model has been exported worldwide. In Scotland, Children 1st pioneered its use almost 20 years ago.

A principle of FGC is that families are asked to help develop their own solutions. This way of working acknowledges that families know themselves better than anyone else. Family members are encouraged to support each other and are enabled to take back responsibility for themselves—helping to address families’ feelings that statutory services make decisions for families rather than together with them. An independent FGC Coordinator works to bring the extended family together to explore issues affecting the child and support family members to find their own resolutions to keep the child safe, healthy and happy.
There are four distinct stages of FGC:

- **Referral**
  - Decision to hold conference
  - Appointment of independent Coordinator

- **Preparation**
  - Identification of family members and significant others to participate
  - Decision to use advocates or supporters

- **FGC meeting**
  - Information sharing
  - Private family time
  - Family plan
  - Share concerns, explain duties, set out tasks of Family Group Conferencing
  - Professionals and Coordinator withdraw leaving family three tasks: to agree a plan; to make a contingency plan; to agree how to monitor and review the plan
  - Coordinator and professionals rejoin the meeting, agree the plan unless there is a risk of significant harm and resources are negotiated

- **Monitor and review**
  - Monitoring to be provided by family and/or professionals
  - Possible review conference

Guidance on Section 12 of the Children and Young People (Scotland) Act 2014\(^2\) specifically mentions FGC as an example of ‘good practice’ in supporting family decision-making when a child is at risk of being accommodated by social services. Since FGC began being offered to every child at risk of becoming accommodated in Edinburgh City Council in 2016, the local authority has seen a decrease in the numbers of children in the care system and an annual saving of just over half a million pounds (City Edinburgh Council, FGDM 2016 Team Report). Other local authorities report significantly reduced numbers of children on the child protection register and substantial cost savings (Harris et.al. 2018, unpublished).

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\(^2\)http://www.gov.scot/Publications/2016/12/6827

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The Research: Reimagining Family Group Conferencing ‘Outcomes’

The research centred on the following question: What contribution does FGC make to longer-term outcomes for looked after children at risk of being accommodated and their families, who have been involved in the process? Family members and professionals identified relevant outcomes, and how and why these outcomes linked to FGC processes. Children in this study were all looked after children ‘at risk’ of being accommodated.

The retrospective research involved 11 families who had undertaken FGC 12 months (or more) prior to being involved in the study, and was conducted in five local authority areas across Scotland. Families were involved because children were at risk of being accommodated away from their...
current homes. All of the families were involved with social work services for a number of reasons. Data was gathered using 61 in-depth interviews with family members (including ten children and young people) and professionals, and an analysis was undertaken of relevant FGC related files. For more information on the research design and ethics please see full documentation of Dr Mitchell’s research at the Edinburgh University Resource Library: https://www.era.lib.ed.ac.uk/handle/1842/31278

Of the eleven families that took part in the research, seven were single parent households (one of which involved a separated LGBTI couple), two households had kinship care arrangements and two households had both parents living together with the children. One FGC did not involve the biological parents but foster carers who looked after two siblings, while the older sibling was in supported accommodation. In 10 out of the 11 FGC, siblings were involved in the original FGCs meeting. Eight FGC meetings included extended family/social networks (grandparents, step parents, uncles, aunts, great aunts or friends) in their meetings.

Key findings from the research

The research found:

• The time FGC Coordinators spend helping families to prepare for the FGC meeting helps to build relationships, hope and trust while also allowing for thorough risk assessments and safety planning.
• FGC can help address perceived imbalances of power between families and statutory services.
• Ensuring families are part of their own solutions reduces the likelihood that families become dependent on services and allows outcomes to be achieved at the families’ own pace.
• Professional outcomes and personal outcomes can be different; each are important when understanding and defining outcomes.

In the longer-term FGC contributes towards:

• Improved child safety and (in some cases) improved safety of other family members.
• Family members’ increased sense of control of their lives.
• Increased commitment of the family network to finding sustainable solutions and building relationships.
• Improved family functioning and relationships between family members.
• Improved use of professional support in the longer-term, resulting in reduced or no further contact with social work.

The process itself is an important part of establishing long-term positive outcomes for families

The way in which FGC is carried out matters to families both in terms of the way they experience decision-making practice and their opinions of the final outcomes.

The inclusive space created, and language used, throughout the FGC process are important for children and other family members to feel part of the meeting and that their views matter. This leads to family members’ increased sense of hope, and a focus on families’ strengths and the identification of solutions that both family members and professionals feel a commitment towards.

When empowerment and recognition are embedded in the FGC process, family members feel supported, respected, valued and individually recognised (and acknowledged). These experiences help enhance individual family members’
confidence and self-esteem. Consequently many family members feel prepared, informed and supported to take more control over their own lives, working in partnership with social work. This leads to an increase in skills (particularly communication skills), improved knowledge of their situation, and an increased sense of control and input in decision-making.

Some of the family members reflected on how they found the FGC process helpful to change and improve personal relationships and more effectively manage stressful relationships, using the skills they developed at the original meeting. An FGC can therefore contribute towards diffusing hostilities and improving relationships within families in the longer-term.

FGC supported families that were labelled ‘hard to reach’ or ‘hard to engage’ with social work services and saw an improvement in family members’ longer-term quality of life outcomes.

Children and their families can feel disengaged and excluded, particularly if they feel that agendas and strategies to support them are driven forward solely by statutory agencies rather than together with family members. The research showed that improved partnership working through FGC contributes to a more productive relationship between social work services and family members and/or a reduction in the need for social work engagement.

The research showed that the different stages, and in particular the first stage of the FGC process, are particularly important to embed principles of inclusion and empowerment and ‘set the tone’ for families’ involvement in the FGC meeting. FGC Coordinators often spend considerable time supporting families before the meeting. This investment regularly results in family members feeling hopeful that change can occur alongside establishing trust between all parties (family members and professionals), while allowing risk assessments and safety planning to take place.

This first stage also supports extended family members to engage in the process and provide their additional knowledge, support and resources, which previously may not have been acknowledged or available.

FGC can help to address a perceived imbalance of power between the family and statutory services

The research shows that FGC can reposition negative attitudes between family members and social work services, facilitating a more equitable balance of power through positive working relationships. Family members and professionals considered this to be different to other social work interventions.

FGC helps reframe the power dynamics between statutory agencies and families by:

- utilising a broad conceptualisation of ‘family’ and this broader family network in finding solutions
- opening up dialogue between all participants
- involving the child in decision-making
- ensuring the meeting’s agenda is primarily set by family members
- recognising the families’ strengths and capacities (by family members and professionals)
- giving family members an opportunity to see strengths in others and their contribution to finding solutions amidst what are often very difficult personal situations
• giving the social worker the opportunity to see families operate in a different way

• allowing the FGC Coordinator to facilitate partnership working within families and between professionals and families

• safely supporting family members to express emotion.

Addressing the balance of power between families and professionals consistently throughout the delivery of a FGC helped families and professionals to feel hopeful of change, trust the process and work together to achieve change. This does not deny the authority of social work or statutory services but rather ensures that families feel listened to and included and that their feelings, experiences and strengths are acknowledged, valued and respected. When attention is paid to taking all views, opinions and thoughts into account and to the language used to support all participants, the research showed that there is significant impact on long-term outcomes of family members. This is particularly apparent in terms of families’ communication skills, confidence and capacity to influence decision-making.

Two sets of outcome frameworks are presented in the research and are set out in the Annex. These help us understand the outcomes experienced by family members and professionals and their inter-connectivity.

Keeping children safe must be prioritised. At the same time, involving children and their families in defining outcomes helps ensure families feel ownership over realistic and achievable solutions. Ensuring families are part of their own solutions will reduce the likelihood that families become dependent on services and ensure outcomes are achieved at the families’ own pace.

Combining the two sets of outcomes gives an improved picture of what contributes to outcomes for children and families.

Professional outcomes and personal outcomes can be different

Currently, outcomes tend to be determined by policy-makers and professionals. This research suggests that outcomes important to children and their families should be considered as well. The research found that children, families and professionals can have different ideas of what outcomes are. Who defines the outcomes and to what purpose, are key elements of the power balance between families and professionals.

Use of advocates

Advocacy can support people to ensure their views are heard. Advocacy can thus maximise children’s and other family members’ participation in the FGC process and the resulting benefits. However, in this research, advocacy was not consistently available for children or other family members. The lack of advocacy can have an impact on the empowering elements of FGC for children and their families.

Reviewing FGC

The research showed the review stage was not consistent for FGC. Some families did not have reviews. Other families did not receive the services or other resources that had been identified in the action plan. These gaps weakened the empowering elements of the FGC, for children and their families, and negatively impacted on their longer-term outcomes.
The research found FGC has value beyond the individual child, impacting on other family members and drawing on their own strengths. Capturing the perspectives of those involved in FGC allows us to appreciate fully the impact and contribution of the FGC process.

**Implications for broader child care and protection practice**

This research identifies how FGC can have a positive impact on broader childcare and protection processes.

- Child care and protection practice needs to address power imbalances between statutory services and families so that families feel included, supported and acknowledged.

- Processes are important for families. Family members feeling that they understand what is happening, are prepared for meetings and are empowered and included in decisions that affect them can be as important as their longer-term quality of life outcomes.

- Having empowerment and recognition embedded in child care and protection approaches can assist professionals to build trust and effective partnerships with family members who use child protection services.

- The research has demonstrated the value of taking into account the strengths and solutions that lie within a child’s whole family network, which may go beyond parents. Including grandparents, siblings, close friends, teachers, and others in child care and protection processes adds value and understanding about outcomes for children.

- It is important to understand the mechanisms, including the contexts that are linked to outcomes. An enhanced understanding of why families find themselves in a particular situation can challenge practice that positions individuals and families who use child care and protection services as ‘failing’.

- A broader conceptualisation of outcomes in child care and protection services is needed: encompassing outcomes identified by both those using and those providing the service. The outcome frameworks presented in the Annex reflect a broader understanding of outcomes and have potential for application in child protection policy. It is recommended the outcomes frameworks are piloted to consider how these would operate and be meaningfully measured in practice.

- Personal and professional outcome frameworks can be used to report multiple, complex and longer-term FGC outcomes to family members, professionals, funders and policy-makers.

- Existing tools and systems can be adapted to include the reporting of outcomes by children and families as well as the organisations that support them. For example child planning templates used in childcare and protection services could be changed to consider ‘personal’ and ‘professional’ outcomes specifically.

- All child care and protection services, including FGC services, should review the use of advocacy services and identify any gaps in supporting families to feel included.

- It takes time to build and maintain relationships. Although there is an initial investment of time required to build these relationships, resource constraints should not prevent this from happening. This initial time helps break down power imbalances and ensure family members feel supported by someone they trust; the quality of the relationship makes a difference.

- The independent FGC Coordinator plays a significant role in managing the interface between the family members and professionals within the FGC process. This is a skilled and important role within the FGC process and impacts on personal and professional outcomes.
Annex

### Personal Outcomes

<table>
<thead>
<tr>
<th>Process Outcomes:</th>
<th>Learning and Change Outcomes:</th>
<th>Quality of Life Outcomes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• I feel recognised as an individual</td>
<td>• I have improved clarity regarding my situation</td>
<td>• I feel safe and secure</td>
</tr>
<tr>
<td>• I am listened to and respected</td>
<td>• My skills have improved</td>
<td>• I am settled where I live</td>
</tr>
<tr>
<td>• I have a say in decisions affecting me</td>
<td>• My self-confidence, self respect and/or self-esteeem has improved</td>
<td>• I have positive relationships with important people in my life</td>
</tr>
<tr>
<td>• I am able to work with and trust professionals</td>
<td>• My personal relationships have improved</td>
<td>• I feel I have more control over my life</td>
</tr>
<tr>
<td>• I understand the concerns being discussed</td>
<td>• I am better able to work with professionals</td>
<td>• I am able to make decisions that influence my life</td>
</tr>
<tr>
<td>• I am informed</td>
<td>• I feel I am a better person</td>
<td>• I see people and feel included</td>
</tr>
<tr>
<td>• I feel supported</td>
<td>• I feel things are moving forward</td>
<td>• I communicate well with people around me</td>
</tr>
<tr>
<td>• My friends and family are involved (if I choose)</td>
<td>• I set goals and can reflect on them</td>
<td>• I no longer have social work involved in my life</td>
</tr>
<tr>
<td>• I feel safe to be involved</td>
<td></td>
<td>• I am able to ask for help when I need it</td>
</tr>
<tr>
<td>• I know my rights in this situation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Professional Outcomes

<table>
<thead>
<tr>
<th>Practice Outcomes:</th>
<th>Learning and Change Outcomes:</th>
<th>Organisational Outcomes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The child’s views are heard</td>
<td>• I have improved knowledge of the family structure and dynamic</td>
<td>• Child is safer</td>
</tr>
<tr>
<td>• Adult family members’ views are heard</td>
<td>• I have observed family members having increased ownership of concerns</td>
<td>• Child rehabilitated home OR child sustained contact with family OR kinship care</td>
</tr>
<tr>
<td>• Family members have a clear understanding of social work/professionals' concerns</td>
<td>• I have observed family members communicating more effectively</td>
<td>• Family’s increased sense of control over life and ownership of concerns</td>
</tr>
<tr>
<td>• Child and family members are actively engaged in planning for the child’s future</td>
<td>• I have improved knowledge and understanding of the child’s family network’s strengths and capacities</td>
<td>• Increased commitment of family network and family functioning</td>
</tr>
<tr>
<td>• Family members have developed a practical and appropriate plan to safeguard the child</td>
<td>• I have observed family members’ skills increase</td>
<td>• Family functioning well with good relationships, clear boundaries and roles</td>
</tr>
<tr>
<td>• Family members are involved in setting life goals</td>
<td>• I have observed family members increasingly meeting the needs of each other</td>
<td>• Child and family members use professional services appropriately and timeously</td>
</tr>
<tr>
<td></td>
<td>• I am able to work effectively with family members</td>
<td>• Effective partnership working between social work and family</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Reduced need for professional care</td>
</tr>
</tbody>
</table>

Outcomes Defined by the Organisation for the Service User:

- Child is safer
- Child rehabilitated home OR child sustained contact with family OR kinship care
- Family’s increased sense of control over life and ownership of concerns
- Increased commitment of family network and family functioning
- Family functioning well with good relationships, clear boundaries and roles
- Child and family members use professional services appropriately and timeously
- Effective partnership working between social work and family
- Reduced need for professional care

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Learning from Family Group Conferencing
Acknowledgements:

Dr Mary Mitchell undertook this research and the project overall was a collaboration between Children 1st and the Centre for Research on Family and Relationships (CRFR) at the University of Edinburgh.

Thanks to all the young people and family members who agreed to participate in this study. Thanks also to those people involved in the National FGDM Steering Group, FGC Coordinators and other professionals who helped develop and participate in the research.

Thank you to Economic Social Research Council for funding the research and Children 1st (www.children1st.org.uk), The Centre for Research on Families and Relationships (www.crfr.ac.uk) and the University of Edinburgh for supporting the research. The research was supervised by Professor Kay Tisdall, Professor Lynn Jamieson and Dr Autumn Roesch-Marsh at the University of Edinburgh.

This paper was produced jointly by Dr Mary Mitchell and Professor Kay Tisdall at the University of Edinburgh and Chloe Riddell at Children 1st.

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