First of all, welcome to Porto! It is the second largest in Portugal, after Lisbon, with 237,591 inhabitants. The history of Porto dates to 300 BC and Proto-Celtic and Celtic people were the first known inhabitants. It is a land of fishing, trading, shipbuilding, sailing expertise, overseas discoveries, cod dishes and “Francesinha” (a dish you should not forget to try!). As far as higher education is concerned, the University of Porto has approximately 28,000 students and is considered one of the 100 best Universities in Europe. We would like to invite you to go for a long walk along Porto’s historical downtown, considering it was proclaimed a World Heritage Site by UNESCO in 1996. You will surely see how beautiful it really is! Needless to say, the locals are extremely friendly and proud of living in such a wonderful place!

Welcome to EUSARF 2018 PORTO! Welcome to Alfândega do Porto!
Due to the expansion of trades over to the north of Portugal and after many conflicts between the bourgeois and Porto’s episcopal authority, Alfândega do Porto appeared as the entity of central authority (1254/1255). In 1320, D. Afonso IV commissioned warehouse and customs house to store goods. Approximately two hundred years later, D. João III decided to modernize the place, so that it could account for the commercial boom caused by the recent trade circumstances with Brazil. The new customs house, where EUSARF is taking place this year, was inaugurated in 1869. Thanks to the size of the building, Alfândega do Porto provides the necessary versatility to adapt to many events and serve numerous purposes. Security, acoustics, IT equipment and daylight are guaranteed in all the rooms. There are thirty-six thousand square meters of flexible space, wi-Fi coverage, 22 multifunctional rooms, some with built-in translation booths, waiting for you!

Does the “Douro Valley” mean anything to you? Well, it is a unique wine region in the northeast of Portugal. Mountains protect the valley from the influence of the Atlantic Ocean, and the soil, mainly composed of schist, helps shape the flavours and scents of the wine. Winters are dry and cold, causing hydric stress in vineyards, and summers are hot and full of resources, culminating in intense full-bodied wines. Is your mouth already watering? The history of the valley is long, since there are records of vineyards in this region going back to the Roman Empire. Are you somewhat curious?? At the Port Wine Tasting you will have the opportunity to learn more about the Douro and Porto and taste two kinds of Port wine, while enjoying a beautiful sunset by the river.

The Stock Exchange Palace - Palácio da Bolsa – has traces of diverse styles: eighteenth-century neoclassical, Tuscany architecture, and English Neo-Palladian. It was built across almost 70 years and its origin goes back to the night of the 24th of July of 1832. Porto was under siege of Dom Miguel I of Portugal, when a great fire broke out in the convent of S. Francisco, almost destroying it completely, as only the church remained behind. It was upon these ruins that traders built Palácio da Bolsa. Six main architects, dozens of engravers, plasterers, painters, gilders, mason bricklayer and hundreds of blue-collar workers, gave it their all build! Due to the time it took to get done and the quality required in the construction, Palácio da Bolsa became a real school for artists who worked at it. Annually, it attracts more than three hundred thousand visitors and is one of the most visited monuments in the North of Portugal. Our Gala dinner will be held in this elegant and exquisite place, combining past tradition and modern times. Be prepared for a night of glamour and joy!

Photos by Sara Ralha
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Dr. Amy Salazar (Washington State University), Ms. Lori Vanderwill (Wayne State University), Ms. Jessica De Larrowe (University of Washington), Dr. Angelique Day (University of Washington), Dr. Kevin Haggerty (University of Washington)

Different Adoption Practices for Different Families? Gay, Lesbian and Heterosexual Adopters and “Hard-to-Place Children”

Dr. Pedro A. Costa (WJCR, ISPA - Instituto Universitário), Dr. Fiona Tasker (Birkbeck, University of London), Prof. Isabel Leal (WJCR, ISPA - Instituto Universitário)

The Development of Ongoing Training for Carers and Prospective Adoptive Parents: Key Strategies to Maximise Engagement

Ms. Lisa Velickovich (University of Sydney and Barnardos Australia), Ms. Ruth Drennan (University of Sydney and Barnardos Australia)

Motivations and Decision-Making Process in Becoming an Adoptive Family: An Exploratory Study with Portuguese Adoptive Parents

Ms. Sara Ralha (University of Porto), Ms. Joana Soares (University of Porto), Ms. Silvia Fonseca (University of Porto), Ms. Inês Salgado (University of Porto), Ms. Sofia Pinho (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto)

Predictors of Adoptive Parents’ Parenting Stress in Families with Adolescent Children

Ms. Isabel-Sofia Costa (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Prof. Jesús Palacios (University of Seville), Ms. Joana Soares (University of Porto)

Adoption-Related Losses and Gains: The Adopted Child’s Point-of-View

Ms. Joana Soares (University of Porto), Ms. Sara Ralha (University of Porto), Ms. Catarina Botelho (University of Porto), Ms. Catarina Lopes (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto)

Contact and Identity Formation in Domestic and Intercountry Adoption: The Adoptee’s Perspective

Dr. Mariela Neagu (Department of Education, University of Oxford)
Child and Youth Care in Portugal: Towards Progress and Innovation

Wednesday, 3rd October @ 08:45: Opening Plenary Session (Venue: Arquivo)

Prof. Maria Barbosa-Ducharne (University of Porto)

The Portuguese child protection system is organized using a three-level bottom-up approach. Interventions start with community-based organizations for children, which develop preventive activities and identify children at risk. Commissions for the Protection of Children and Youth work with families in which children in danger have already been screened. Finally, the Family Court intervenes when all previous measures have failed or when the situation requires emergency action.

The three main guidelines of child protection action are the best interest of the child, early and adequate intervention, and family prevalence. It is assumed that the best interest of the child presupposes early family intervention or the child's permanency in a family context (birth, extended, foster or adoptive family). Despite this, in Portugal, data from 2016 show that 88.1% of the looked-after children were placed in non-specialized residential care facilities and only 3.2% in foster families. Furthermore, out of the children who returned to out-of-home care, 72% did so due to a failure in family reunification interventions.

The need for structural and functional changes in the Portuguese Child Protection system is, thus, evident. Above all, there is a need to deinstitutionalise children in out-of-home care. This means ensuring suitable alternative care solutions in a family context by implementing, improving and increasing family foster care, promoting positive practices for family preservation and reunification, besides a need to support successful adoptions. Furthermore, an accurate assessment of the child's needs and risks, as well as, of families' strengths enabling adequate and timely decision-making is critical for the child's permanency. Finally, there is a need to re-configure residential childcare institutions in order to provide specialized/therapeutic timely programmes for children's specific needs.

This presentation will discuss the main findings of two core studies conducted at the University of Porto on residential care quality and adoption. Upcoming projects on family preservation and reunification, promotion of family foster care at a municipality level and national monitoring of adoptive families and adopted children will also be presented. The aim is to bring a new light on the needs of child and youth care in Portugal and to show how research can contribute towards progress and innovation in child protection policies and practices.
Infants in the Justice System in England: Trends in Newborn Entry to Care

Wednesday, 3rd October @ 09:45: Infants, Toddlers, and Child Protection: Emerging Evidence and the Need for a Transdisciplinary International Network (Venue: Arquivo)

Prof. Karen Broadhurst (Lancaster University)

This paper presents new empirical evidence regarding an upward trend in the use of care proceedings in the lives of very young babies in England. Findings are based on analysis of de-identified population-level family court electronic data (2008-2017; n= 100,000+ children) undertaken by the Centre for Child and Family Justice Research at Lancaster University. As well as observing an upward trend in care proceedings issued within the first month of a baby's birth, the researchers also report that: a) local authorities and the courts are far more likely to take pre-emptive action to remove newborns, if mothers have previously appeared as respondents in care proceedings and b) very few of these babies will be reunified with their birth parents. Findings are also discussed in relation to regional variation in pre-emptive removal of infants.

The second section of the paper considers the range of searching questions that this research has prompted which include: whether intervention is proportionate, whether local authorities are making best use of the full range of possible preventative solutions, as well as the longitudinal outcomes of these cases for newborns. The polarization of debate is noted, given that some argue that an increase in early removal of infants reflects growing recognition of early intervention to prevent developmental harm, whereas others claim that this increase is a direct result of late intervention, because support during pregnancy is wanting, as are community placements for mothers and newborns. Reference is made to the new Nuffield Family Justice Observatory (England and Wales), which will address some of these questions at a national level by supporting far greater use of de-identified administrative data.

The final section of the paper considers the value of international debate, challenge and co-ordination of research efforts, to support effective evaluation and further development of policy and practice regarding newborns.
The objective of this presentation is to shed light on the seeming paradox that Denmark, Finland, Norway and Sweden altogether have quite similar rates of out of home placements of babies (0-11 months) as the USA. However, these four Nordic countries differ internally on how many babies that are placed out of home and are under public care. The reasons for regarding these phenomena's as puzzles, are that the Nordic countries and the USA subscribe to two different child protection systems with fundamental differences in underlying ideologies and the ways in which they address children at risk. The Nordic countries all subscribe to a child protection system that is family service oriented. The understanding has so far been that children placed out of home in the Nordic systems are dominantly teenagers with only few babies and young children. This stands in stark contrast to risk-oriented systems, such as the Anglo-American systems, that have a high threshold for intervention and a focus on mitigating serious risks to children’s health and safety. A consequence is that a majority of children placed out of home in the Anglo-American systems are babies and young children.

The presentation discusses trends, legislation and guidelines for the public responsibility for babies considered to be at risk in Denmark, Finland, Norway and Sweden. The criteria for decision-making on removals of babies follow the general criteria (except in Norway which sets specific criteria, eventually a higher threshold). Although families with infants are generally recognised as a specific group needing specific services (such as health care, child clinics, day care), which in the Nordic countries is provided by the welfare state, child protection removals are in three out of four countries approached by legislation and guidelines in the same manner as the removals of any child. Over the last decades, the knowledge of child development has increased. The knowledge-base of attachment theory, which emphasizes the importance of a secure base for infants, has been of importance in this process, both in education of social workers and in the actual child protection practice. Considering this, it is a matter of concern that there are no specific guidelines for child protection removals of infants.

The findings suggest that there might be a risk in the service-oriented child protection systems that the needs and rights of babies are still shadowed by the parents’ needs and rights. Thus, future research calls for examination of the formal reasoning for deciding on removing a baby from her or his parents. Do the assessment in child protection systems, as concerns placement of babies that cannot give voice themselves, rest on the child's or the parents' needs and rights, and how?
Aboriginal Infant Removals: Trends, Disparities and Challenges

Wednesday, 3rd October @ 10:15: Infants, Toddlers, and Child Protection: Emerging Evidence and the Need for a Transdisciplinary International Network (Venue: Arquivo)

**Dr. Melissa O’Donnell (University of Western Australia), Dr. Stephanie Taplin (Institute of Child Protection Studies, Australian Catholic University)**

Objectives: Removing a baby from their parents is the highest level of intervention used by any child protection system. Balancing the rights of parents to parent their child against the rights of the child to be safe and well is a complex issue. The removal of a child from their parents is traumatising, particularly in Australian Aboriginal communities where the history of the ‘stolen generations’ has led to intergenerational trauma. This study will determine where disparities in child protection involvement exist among Aboriginal and non-Aboriginal children, and in the characteristics associated with infant removals. Challenges faced by child protection and other agencies are discussed and opportunities for overcoming them.

Methods: Data from the Australian Institute of Health and Welfare and linked Western Australian government data is used to examine disparities between Aboriginal and non-Aboriginal children in child protection involvement.

Results: Nationally, Aboriginal children are ten times more likely to be placed in out-of-home care than are non-Aboriginal children, and this disparity starts in infancy. Infants were removed from parents with high levels of risk and Aboriginal infants were more likely to be removed from women with substance-use problems and from remote, disadvantaged communities. A number of recommendations have been put forward by Aboriginal organisations, and, if implemented, would target many of the vulnerable families that are subject to child protection referrals. We need to ensure that current child protection practices do not cause additional trauma and distress and work in partnership with families to support them and their needs.

Conclusions: Aboriginal infants of vulnerable parents have a high rate of removal and, while there are many complexities to be understood and challenges to overcome, there are potential strategies. The disparity between Aboriginal and non-Aboriginal infant removals needs to be seen as a priority requiring urgent action to prevent further intergenerational trauma.
A Cross-Country Comparison of Policy and Practice

Wednesday, 3rd October @ 09:45: Listening to the Voice of the Child in Child Protection Decision-Making
(Venue: Infante)

Dr. Mónica López López (University of Groningen), Dr. Susanne Witte (German Youth Institut), Mrs. Helen Baldwin (University of York)

Objectives

This presentation focuses on the participation of children in child protection decisions and draws on two studies undertaken within the research project Hestia (funded by Norface), which compares policies and responses to child abuse and neglect in England, Germany and the Netherlands. Firstly, we analyze the policy and the public discourse regarding children's participation in the three countries using Bouma's participation model to guide our examination. Secondly, we focus on the practice of including children in decisions of investigations into suspected child abuse and neglect based on an analysis of 1200 child protection cases. Finally, we conclude by contrasting policies and practices of participation in each country and deriving further implications.

Method

A case file analysis from investigations into suspected child maltreatment and neglect was conducted in three countries. In total, 1207 case files were analyzed by trained abstractors using a standardized coding scheme. Reliability testing yielded acceptable results. Case files were analyzed in terms of the characteristics of the referred children and their families, the handling of the investigations as documented by the social workers, and the decisions made at the end of the investigation in terms of risk of significant harm and need for support. Participation was defined rather broad, including being present at the decision-making conference, being asked about his or her opinion on measures, or being able to choose between measures. To compare cases between countries the Modified Maltreatment Classification System was used.

Results

In 175 cases (15.4%), there was some documentation of the involvement of the index child in the decision-making process. The involvement of children in the decision-making process differed significantly between countries. Germany had the highest number of cases with participation (22.2%), followed by England (13.0%); the Netherlands had the lowest number of cases (8.0%). In the three countries, participation in decision-making was associated with age of the child. Older children were more likely to be included in decision-making. For England and Germany, no other significant predictors emerged on the level of the child and the case. For the Netherlands, a chronic health condition of the child increased the likelihood of participation in decision-making as well as suffering more type of abuse or neglect. In the second model, involvement of the caretaker in the decision-making process was included as predictor. This was a significant predictor in all countries. The bivariat analyses showed that children were almost only included in the decision-making process when their caretaker was included. However, caretakers were included even though the child was not.

Conclusions

Participation of children has become more prominent in the law and policy in England, Germany and the Netherlands. However, the three countries differ on how children's views should be incorporated in decision-making processes. Moreover, it is surprising how low the rates of involvement of children in the decision-making process are. The age of the child determines the involvement of children in the decision-making process in the three countries.
Participation of Children under 12 in the Decision for Out-of-Home Care: Attitudes and Practices of Judges in the Netherlands

Wednesday, 3rd October @ 10:00: Listening to the Voice of the Child in Child Protection Decision-Making
(Venue: Infante)

Ms. Anne Steenbakkers (University of Groningen), Ms. Mariëlle Bahlmann (Defence for Children), Prof. Hans Grietens (University of Groningen)

Objectives

Internationally, the right of children to participation in the decision for out-of-home care is safeguarded in Articles 12 and 9 of the United Nations Convention on the Rights of the Child (CRC). The CRC and General Comment 12 state that there should be no age limit regarding which children can participate, but that ‘the views of the child [should be] given due weight in accordance with the age and maturity of the child. In the Netherlands, the right to participate in these decisions is regulated in policy and the national law. When a family judge has to decide whether a child should be placed in out-of-home care, children of twelve years and older are automatically invited to provide their viewpoints to the judge. Children under the age of twelve ‘may’ be invited by the judge. In practice, this ‘may’ principle is often applied as a strict age limit for participating in these judicial proceedings. Since the participation of children in out-of-home placement decisions has been linked to positive effects on children and the stability of the placement, this is a worrisome practice. The aim of this study is to understand the attitudes and practices of Dutch family judges regarding the participation of children under 12 years old in the decision for out-of-home care. An increased understanding of the viewpoints of judges can provide important insights into how these practices can be improved and what obstacles exist.

Method

Thirteen family judges from different courts in The Netherlands were interviewed about how they view and approach the participation of young children in the out-of-home placement decision. The semi-structured interviews focused both on their current practices and on what is necessary to improve these practices in the future. The interviews were transcribed and then coded openly and grouped in themes by employing thematic analysis.

Results

The findings illustrate the different rationales of Dutch family judges to invite or not invite children under the age of twelve, and which factors influence this decision. Moreover, judges articulate the different ways in which children can participate in the judicial decision, from direct participation in court to more indirect forms of participation such as through a guardian ad litem. Finally, the findings show what obstacles judges experience in the participation of children and what they need for these obstacles to be ameliorated.

Conclusion

This study illustrates why children under the age of twelve are often not invited to participate in the out-of-home placement decision in the Dutch judicial system and provides guidance on how this practice can be improved, both regarding policy reform and the need for tools and training.
The (Teen)Age-Divide: How Child Protection Case Workers in Norway and the United States Draw the Symbolic Boundaries around Age in Relation to Children’s Participation

Wednesday, 3rd October @ 10:15: Listening to the Voice of the Child in Child Protection Decision-Making (Venue: Infante)

Prof. Katrin Križ (Emmanuel College)

This study analyzes children’s rights to participation in administrative proceedings from the perspectives of the street-level bureaucrats who work in public child protection agencies in Norway and the United States (California). Drawing on qualitative interview data with a total of 60 caseworkers employed in public child protection agencies in Norway (n=24) and California (n=36), I analyze how children’s right to participation in child protection-related decisions is understood and implemented in everyday child protection practice. The focus of this study is caseworkers’ interpretation of Article 12 of the 1989 United Nations Convention on the Rights of the Child, which established children’s participation in “judicial and administrative proceedings”, including those that relate to child protection. These proceedings may involve decisions about removing children from their home, the choice of foster care placements, and parental visitation. In analyzing this data material, which focuses on what children’s participation means to caseworkers, I will employ Lamont and Molnár’s (2002) work on symbolic boundaries: symbolic boundaries are defined as “the conceptual distinctions made by social actors to categorize objects, people, practices, and even time and space” (Lamont & Molnar, 2002, p. 168). Using this theoretical platform, I will examine how child protection workers create symbolic boundaries between those children who they think have the right to participate in decisions (and have their opinion taken seriously), and those children who they do not consider participants. I will show that in both countries, workers understood pre-teens (older than 10 years) and teens as participants. They did so by drawing on two narratives: (1) the narrative of teenagers as defiantly powerful (through their potential to successfully resist the system’s intervention) and, in the case of the Californian sample, (2) the narrative of teenagers as lying, manipulative and ego-driven. This study thus demonstrates the significance of cultural narratives about children’s power for everyday front-line child protection practice related to children’s participation.
Positive parenting, as the REC (2006) of Committee of Ministers to Member States on Policy to Support Positive Parenting suggests, requires the participation of children and youth, in intervention processes as well as evaluation processes.

Here we present the results of the evaluation of the “Learning together, growing as a family” program (Amorós et al., 2011, 2015) from the children’s perspective.

The “Learning together, growing as a family” program is targeted to at-risk parents and children from 6 to 11 years old, with a preventive focus on promoting positive parent-child relationships. This a group program not only for parents but also for their children, based on positive parenting.

The overall objective of the program is to promote the development of healthy family ties to enable positive relations between parents and children. The specific objectives aim to improve development of parenting skills, skills to set norms and rules within the family, communication skills and problem solving abilities, improve family organization, strengthening healthy habits and positive lifestyles, enhancing the relationship with school, skills to regulate the use of social media, internet and mobile at home, the promotion of joint participation in family leisure activities as well as their shared values and beliefs, and the promotion of the formal and informal support.

The program consists of 14 weekly structured sessions aimed at parents and children separately, and 14 joint sessions. In six modules and one follow-up module (each module has two sessions for parents, two sessions for children, and two sessions for the family). An evaluation process forms part of the program, ensuring it is evidence based.

Methodology

Art-Based research (ABR) is the methodology we used to give voice to the children. This innovative data capture methodology allows us to amplify the children's voice not only as they participate in the program but also how they evaluate it. We use ABR during group interviews.

Thanks to the collaboration of “Obra Social La Caixa” and more than 80 other supporters of the Caixa Proinfancia program, “Learning together, growing as a family” is supporting families in various Spanish cities, including the 10 largest cities which have the most serious child poverty issues. The sample is composed of 86 children who were participating in 18 semistructured group interviews across Spain.

Results

The results revealed that after their participation in the program, children are more aware of their parents' needs. They are better able to recognize their role within the family as well as their parents' role and they are more capable of taking on responsibilities (according to their age) and respecting the family house rules. This is also helped by the fact that the children feel more involved, more listened to and more valued by their parents. So, they are empowered by the program's group sessions.

The results also confirm that the children are capable of identifying areas of improvement in parental competencies, and that they act as a catalyst promoting positive change in the family, particularly with regards to parental competencies.

Conclusion

The use of Art-Based Research methodology is an adequate methodology to give voice to children at age between...
6 to 12 years old.
The impact of the children’s voices and of their participation is very evident as the results demonstrate. We risk losing a valuable source of information and an important source of motivation for positive parental changes if we do not listen carefully to the voices of children.
Qualitative research on or with care leavers has increased during the last years. And most of those recent studies are based on open questionnaires, interviews, or peer-interviews (see Mendes & Snow 2016). But in contrast to childhood studies, the question of alternative, less powerful forms of communication for data collection is asked much less here. This is partly due to the age of the care leavers, which is usually between 16 and 23 years (or significantly higher in re-constructive studies (Schütze 2004)). It looks as if research addresses young people in transitions to adulthood methodologically more as adults than as children: with good reason or in the absence of alternatives?

This presentation will use examples from different care-leaver research studies in Switzerland to show that it is worth critically questioning mentioned assumptions. Researchers bear a great ethical responsibility (Keller, Strahl, Refaeli, Zhao 2016). But what often threatens to be forgotten: language is not only used to exchange or collect content. The way of use of language first establishes the condition as to which content is coming up - and which is not. Further it establishes the condition as to which intended and non-intended consequences are triggered during and after the language-based data gathering. Finally language as a powerful medium might exclude specific groups, topics, feelings or experiences.

I will begin with an obvious challenge of foreign language and translators by describing an interview-situation with a young migrant in transition out of residential care. The second challenge which will be presented might be less obvious. It appears from an ethically motivated intervention, when explaining and signing a contract together with the young care leavers (or their legal guardians) before data gathering. By comparing and reflecting parallels of those two chosen research experiences, I will finally try to work out how to deal with ethical challenge concerning (mis)communication, (mis)understanding and (mis)trust as far as language-use in research is concerned. The critical attitude of the social sciences towards non-linguistic data will also be considered. To make experienced leaving care processes visible without excluding or overseeing important issues: shouldn’t we waive to textualise and intellectualise adulthood methodologically?
Ethical Issues and Proposed Ways to Address them while Conducting “Life Story” Interviews among Care Leavers

Wednesday, 3rd October @ 10:00: Leaving Care Research: Ethical Challenges and Future Needs (Venue: D. Maria)

Dr. Tehila Refaeli (Ben Gurion University)

Conducting research among vulnerable groups, such as young people who grow up in care facilities, raises many challenges for researchers. For example, they have to invest significant effort to find this population and convince them to participate. This challenge can lead to the ignorance of ethical questions during the interviewee recruiting and approval processes. However, as social work researchers, our first obligation is to the participants' well-being. This presentation will reflect some of the main ethical questions which arise in research among care leavers in Israel.

The aim of the study was to examine care leavers' experiences in transitions, and specifically, the transition from military service to civilian life. The research project included 16 life story interviews with young people who had aged out of residential facilities four years earlier.

Some of the main ethical issues that were raised will be presented. One issue is how to ask care leavers for their cooperation while avoiding treating them as a group of poor, weak victims who deserve mercy. My way to overcome this problem was to ask them to be interviewed as experts in the process of leaving care, explaining how their experiences could be useful for other care leavers as well as for social services. In addition, asking about their strengths and abilities during the interviews can help address this issue, and rather than referring to their weakness, reflect on their strengths. Another issue of ethical recruitment is offering a reward to the interviewee that will be sensitive but will not be a “bribe” considering their known difficult economic situation. One way to deal with this issue is to offer a gift card for a small amount of money, but not for a grocery store. During the interviews, a further ethical issue is important. When seeking narrative information from care leavers, the interviewer can provoke traumatic memories. However, as researchers, we cannot offer to provide therapy afterward. There are some ways to deal with this issue, a few of which will be presented. One option is, if the interviewee becomes upset during the interview and expresses hard feelings by crying or raising their voices, I would suggest the possibility to stop or take a few minutes' break. In addition, at the end of the interview, I would give the participant a list of social services that can provide emotional and practical support.

The presentation will include the issues mentioned above and some other important ethical issues concerning the study of care leavers. Issues which are relevant to any study in social work focusing on a vulnerable group. Some practical solutions will be offered to deal with ethical issues. However, the most important implication for further research in social work is the need to put a spotlight on each step and substep of the study, looking for ethical questions that might arise, and to plan ahead how to address each one of them.
Young people leaving public care are less likely to have graduated and be employed, they are more likely to receive financial assistance benefits, and they tend to have more physical and mental health problems, compared to their peers without a child welfare background. When presenting the results from my PhD-research, where I studied the support for care leavers (Oterholm, 2015), I have often started with an introduction about the difficult situation for care leavers.

In presenting research about young people leaving care, we often highlight their challenges to underline the importance of support and the need to improve aftercare. An introduction to the situation of care leavers in the beginning of a presentation, will emphasize the significance of the support given and how it is organized. The latter was an important point in my PhD project, exploring different institutional logics in child welfare services and social services for adults.

My experience is that a problem oriented introduction works well in order to capture the attention of case workers, managers, employees in directorates and politicians. And it leads to a better understanding of the need to improve the support for care leavers.

However, this approach has some disadvantages. Pointing at care leavers challenging situations can contribute to stigmatization of young people leaving care. Stigmatization which could lead to young people with a care background feeling as though they are transformed from a whole person to a bundle of challenges and problems. It can contribute to a feeling of being different and devalued by others, and eventually by themselves.

In my presentation I would like to discuss this ethical dilemma of how we present care leavers situation in our research, and explore alternative strategies for how to deal with this dilemma. Still, if not fronting the challenges we can undermine the young people's difficulties and society’s special responsibility towards them. As researchers we also have a responsibility to point to societal challenges. Adequate support for young people when leaving care is important to them as well as to society.

Some alternative approaches I would like to put forward in my presentation is:

- Pointing to the challenges of the systems instead of the challenges of the young people. For instance, in Norway the decision of aftercare is at the discretion of social workers in the municipalities, which leads to situations being treated differently depending on the municipality the young person live in.
- Seeing care leavers’ situation in light of how and when other young people leave their parental home, as well as the support parents usually give, which young people “aging out” of care also need
- Emphasizing the fact that not all care leavers struggle and highlight the conditions that enabled for example success in higher education.
- Focus on care leavers resources
- When presenting research, be aware of different ways of choosing the numbers we give attention, highlighting the numbers of young people who do not have special problems, for example 70 percent had not been registered as unemployed compared to saying that 30 percent had been registered as unemployed.

This paper discusses standards of qualitative research methods, specifically ethical issues around researcher reflexivity and self-involvement in the research process. Worldwide, there are increasing numbers of published articles regarding leaving care. In addition to research-based articles, comparative analyses, and reviews, more and more articles of care leavers and care leavers associations can be found. These articles may involve care leavers in the design, analysis, and writing of these articles; this involvement is often seen as controversial within academia, particular due to concerns about objectivity in the research process. While some may see these publications as relevant scientific work, others perceive them as interesting self-reports but without fulfilling the necessary requirements of rigorous scientific inquiry. These views also differ between countries, where the prevailing research philosophy and culture may allow for self-involvement in the research process.

To that end, this paper reflects on different scientific positions within Germany and the US on research standards and self-involvement. The paper will highlight the opportunities and challenges of “getting close to the field”. To explore this topic fully, the paper will discuss the 1) discourse on research approaches, particularly around participative research processes, 2) experiences of the researchers engaged in participative research and 3) the experience of doing care leaver research as a fellow care leaver.

In Germany, the scientific community highlights the quality standards of doing research. Important issues concerning validity, objectivity and reliability of research give favor to research where the researcher has distance from the field. This alienation is thought to allow the researcher to discover new insights and findings in social phenomena. In the United States, qualitative research is still seen as a weaker form of evidence to support large scale policy change; participant involvement in the research presents added challenges and increased scrutiny, though many helping disciplines are supporting such approaches as a matter of social justice. From the researchers’ experiences, there were benefits to self-involvement in the research process. Because the participants saw the researcher as sharing an important identity, there was more candor and trust during the interview process. The researchers were also more familiar with the nuances of answers, which allowed for deeper and richer follow-up questions that may have been missed by others without similar shared experiences.
Due to the recent upsurge in interest in youth leaving care, and the recent increase in published articles, we have done a systematic review of the research to provide an overview of the existing literature and point at future research needs. After searching 9 databases, applying inclusion and exclusion criteria and eliminating duplication, our review is based on 64 articles published between 2016 and 2017. Our goal is to explore the principal themes and questions treated in the literature on the transition to adulthood as well as to summarize the future research directions proposed in these works. The analysis of research questions and future research directions resulted in four main topics: 1) policy, program and services; 2) transition trajectories and markers; 3) social network and social support; and 4) subpopulations.

The research shows that both policy and practice needs to acknowledge the diversity of individual differences, individual needs and individual challenges to a greater extent than today. Policy tends to have a “one-size-fits-all” focus, which underestimates the need for individual solutions. One theme stands out as especially promising for promoting better outcomes and individual solutions although it is less investigated from a research point of view: youth participation. Indeed, there are relatively few studies addressing how processes of youth participation can influence the transition process, contribute to later outcomes and promote better solutions. Studies on this topic are needed and should include consideration of the role of participation in ensuring a balance between dependency and independence, as well as how it can contribute to the experience of agency and access to social capital.

Our review shows that despite the explosive growth in the research and publications on leaving care, much remains to be done and a lot of questions remain to be answered. Also, it is important to keep in mind that a range of methodologies and theories are needed to address these pressing questions. We suggest that particular attention should be paid to research conceptualisation and the greater use of theories such as sociological theories (e.g. social policy and sociology of education) (Berridge (2007), attachment theory and resilience (Stein, 2006), conceptual frameworks for cross-country comparisons (Pinkerton, 2006), and the use of human development theories such as ecological systems model and life course theory. We reflect upon if and how such approach can frame better research design, that takes into account the multidimensional challenges as well as the complexities of the transition to adulthood from care. Research planned in this way can then inform policy as well as intervention in a more efficient way.

Through our presentation we want to highlight the main issues that have been treated in research as well as the main findings of these studies, to provide both a basis for formulating future research and a foundation for propositions to expand the field. The presentation of this broad picture can also expand policy makers’ and practitioners’ knowledge of the multiple and interdependent issues faced by care leavers, thus giving ideas and input to develop good practice.
Transgender and gender diverse youth are becoming increasingly visible internationally, and greater attention is being paid to supporting them not just via supporting adult affirmation of gender identity but also providing support for coming out or “social transition” for adolescents. At the same time, trans youth often face stigmatization, and in some places face legal or structural barriers to affirming their identities, as well as challenges with family and community acceptance and integration. Practices vary widely between countries and locales, ranging from highly systematic approaches such as the “Dutch model” of care for trans youth to other locales where services are nascent. Practice models and outcome data from outpatient care for trans youth, with focus on applications of the Dutch model in Europe and North America will be provided. Challenges and limitations to this model of care, and emerging best practices, will be investigated, including increasing cultural awareness of non-binary, genderqueer, and gender fluid youth, and addressing the emerging challenge of serving youth who are both autistic and transgender. The role of minority stress and family acceptance in managing risk of suicidality and other negative outcomes for trans youth will be examined. Unique strengths of high acuity care models such as residential treatment and boarding school programs will be examined in terms of supporting youth identity development and self-actualization, as well as supporting families as holistic units, and how these skills can be applied to empowering trans youth and their families. We will examine experiences supporting trans youth and their families from several member agencies of the Association of Children’s Residential Centers (ACRC) and share best practices from ACRC’s 2015 position paper on serving gender and sexually diverse youth.
Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) youth are a marginalized population in out-of-home care[1]. As a result, our LGBTQ youth have experienced their safety being put at risk, trauma exposure, re-traumatization, disparities in accessing resources, and languishing in care at disproportionately higher rates than non LGBTQ youth.

The needs of gender variant and transgender children and youth in care have come to light primarily in the past decade, despite the State of California passing The Foster Care Non-Discrimination Act, AB 458, in 2003. This was the first Assembly Bill to address the rights of LGBTQ youth in foster care in the United States and has incited treatment and care reform across the State. Transgender and gender variant youth have particular needs in residential centers, such as placement in gender aligned programs, guidance in regards to dating, dress code guidelines, and specialized medical care to name a few.

In 2011, Hathaway-Sycamores Child and Family Services, Los Angeles County Department of Children and Family Services, and other providers, joined the Los Angeles LGBT Center in the R.I.S.E (Recognize Intervene Support Empower) project of the Permanency Innovations Initiative (PII) assigned by the U.S. Department of Health and Human Services. This project focused on the rectification of out-of-home care, tactically meeting the safety, well-being, and permanency needs of our LGBTQ youth and their families. The project developed two core intervention protocols, Coordinated Care Team (CCT) and Outreach Relationship Building (ORB), to develop best practice guidelines to promote positive permanency outcomes.

In order to examine the impacts of the RISE project, a mixed method study was conducted using quantitative and qualitative evaluation. More specifically, the effects of the CCT, were assessed through qualitative evaluation to determine whether youth participants experienced decreases in heterosexism and transphobia to achieve “improved well-being, reduced family rejection, and increased family support” (PII Evaluation Team, 2016). Results demonstrated that youth felt supported in their identity and communicating with their families about their identity. Quantitative assessments included evaluation of staff knowledge and self-reported competencies in working with LGBTQ youth. These results revealed that on average, scores increased across 13 of 19 knowledge domains (Children's Bureau, 2016). In addition, the Children's Bureau report indicates that 79% of respondents reported using the knowledge they acquired in training during their daily work (2016). Additional outcomes noted within Hathaway-Sycamores, specifically, included youth creating forum to reduce isolation and create community by sharing their personal stories and daily challenges in group care; staff felt better equipped to address youth needs and was less reactive; families received support needed to understand their child; and more youth began disclosing their sexual orientation and gender identities due to feeling safer and supported.

In summary, the objective of the residential treatment programs' culture transformation and participation in the R.I.S.E project was to improve services to LGBTQ youth and their families where they feel respected, valued and safe in our care. Participating organizations' commitment to change included incorporating self-assessment, training, coaching, advocacy, agency policy change, and honoring youth and family voice throughout the process. Participating agencies became positioned to engage LGBTQ youth by using best practice principles and recognizing the diversity of identity and experience affecting youth and families. Empowering youth to find and use their voice further informed our ability to provide culturally relevant, family-focused, youth-guided, and permanency-driven care to our transgender and gender variant youth. Limitations to this work and additional findings will be discussed.
Learned in Building an Affirming Treatment Center, School and Family Connections for Transgender and Gender Variant Young People

Wednesday, 3rd October @ 10:15: Redefining Residential Care: Ensuring Competent Residential Interventions for Youth with Diverse Gender and Sexual Identities and Expressions (Venue: Ribeira I)

Dr. Peter Myers (Sonia Shankman Orthogenic School)

Within the United States there has been a dramatic increase in the number of open and self-identifying transgender and gender variant youth among the general population. There has been a similar increase within child welfare, special education, and residential treatment settings. This increase has been rapid, especially in the last 10 years, and has caught many professionals and programs unprepared and uninformed on best practices for serving transgender youth and their families. The rights of transgender and gender variant children and adolescents in the United States have been both supported and denied by various local, state, and federal levels which has complicated the advancement of their protection within larger systems of education and intervention. This complication and confusion make it ever so more important to examine best practices in terms of establishing a non-discriminatory, affirming, and supportive milieu for these highly vulnerable youth, as well as for all of the students within the setting. Additionally, it is imperative that child welfare, special education and mental health services become well versed in offering interventions that are prescriptive to the needs of transgender and gender variant young people that recognizes each of their uniqueness and serves to support the individual and family in a manner that is affirming and not pathology based and that is open to understanding gender in ways that are not limited by binary thinking. Because family and school are two of these most prominent domains in which youth experience their lives, for transgender and gender variant young people these two settings are instrumental in the formation of their gender identities. This presentation provides an overview of best practices as it relates to schools and treatment programs creating a supportive and affirming milieu regarding gender. It also examines in what ways can parents and programs work on behalf of these youth, in particular how family therapy can foster greater understanding and ultimately acceptance of a transgender or gender non-conforming family member. Emphasis will be given to how parents and schools can collaborate with each other to foster adaptive and healthy identity development. The presenters will share their lessons learned from their evolving experiences in becoming a safe haven for transgender and gender variant youth and their families will working within a child mental health and educational setting.
Ensuring Competent Residential Interventions for Youth with Diverse Gender and Sexual Identities and Expressions

Wednesday, 3rd October @ 10:30: Redefining Residential Care: Ensuring Competent Residential Interventions for Youth with Diverse Gender and Sexual Identities and Expressions (Venue: Ribeira I)

Ms. Kari Sisson (Association of Children’s Residential Centers)

The provision of residential treatment has been a topic of debate for decades. This is at least partially because children and youth referred to residential treatment are those who evoke exquisite combinations of compassion, concern, fear, and frustration, for parents, caseworkers, providers, and public officials. We agonize over the disruption of their childhoods and the overwhelming stress or trauma they have experienced. Residential treatment at its best offers hope that these children can heal in a safe environment and develop skills that will enable them to cope as they mature into adults. In the face of emerging evidence that both in-community services and residential treatment are critical in a comprehensive system of care, the discussion has drilled into a myriad of nuances and details at the practice and program level. The need for a new paradigm about the role and best use of residential treatment is clear and present.

For over sixty years ACRC has supported the field through intensive focus on advancing programming and practice for this extremely vulnerable population. We have developed a series of monographs through a process of synthesizing the best thinking and practice in the field based on the belief and knowledge that the practices that have come to define residential treatment need to be re-examined and changed in light of what we have learned about helping children and families most effectively. The redefining residential series is dynamic as we continue to develop papers based on topics of interest to the field. Our 13th position paper Ensuring Competent Residential Interventions for Youth with Diverse Gender and Sexual Identities and Expressions, shines the spotlight on the unique challenges and opportunities providers are faced with when serving lesbian, gay, bisexual, transgender, questioning, intersex, and two-spirit (LGBTQI2-S) youth in residential care and prompting this rich discussion.
A Holistic Approach to Child Development: Factors Influencing Overall Development in Children in Care in Ontario, Canada

Wednesday, 3rd October @ 09:45: Development of Children in Care (Venue: D. Luís)

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

Background
Child development is complex and definitions and categorizations are not universal. This can make a cohesive approach difficult for the many parties who have a responsibility to support and encourage development in young children in out-of-home care. In order to align policy priorities and simplify decision-making, it is perhaps more appropriate to take a holistic approach to child development, to recognize the interconnectedness of domains, and to promote development as inclusive and continuous.

Objective
This presentation explores the developmental assessment of young children living in out-of-home care using the Ages and Stages Questionnaires® Third Edition (ASQ-3™; Squires & Bricker, 2009). Since 2016, the ASQ-3 has been integrated into the Assessment and Action Record (AAR-C2-2016; Flynn, Miller, & Desjardins, 2016), the core instrument of the Ontario Looking After Children (OnLAC) needs assessment and outcome monitoring project. Phase I of this study sought to examine and explain the relationship between the five domains of development measured by the ASQ-3 (communication, gross motor, fine motor, problem solving, and personal-social). Phase II aimed to provide decision-makers, including practitioners, caregivers, and policy-makers, with evidence of demographic, risk, and protective factors affecting overall development for children in care.

Method
Phase I. We performed an exploratory factor analysis using a cross-sectional sample of 1,459 children aged eight months to five years living in out-of-home care in Ontario, Canada, in an attempt to further simplify ASQ-3 data and discover any underlying factors affecting subscale scores.
Phase II. We conducted a 3-step hierarchical regression using a subsample of 1,097 children aged one to five years to examine the effect of possible predictors on overall development.

Results
The factor analysis indicated that there was a single underlying construct reflected in the five ASQ-3 domains, which justified the creation of a composite score of overall development (α = .85). Higher scores on the composite measure indicate a higher level of overall development.
The follow-up regression model was significant and explained 34% of the variance in overall development. Increased literacy-promoting activities, the child's positive view of his/her abilities, and kinship placement were significant protective factors, and gender (male), social-emotional difficulty, and a higher number of other children living in the placement were significant risk factors. The child's age was not a statistically significant predictor of overall development.

Conclusion
The results of this study suggest that a simplified, holistic approach to child development is appropriate for use with young children in care. The domains of development measured by the ASQ-3 are tightly-tied; by promoting protective factors and addressing risk factors, decision-makers in a child's life have the opportunity to positively shape his/her developmental outcome across all domains.
Adversity and Caregiver-Reported Executive Functions in Family Foster Children

Wednesday, 3rd October @ 10:00: Development of Children in Care (Venue: D. Luís)

Mr. Pablo Carrera (University of Seville), Dr. Jesús M. Jiménez-Morago (University of Seville), Dr. Maite Román (University of Seville)

One of the most active current streams in adoption and foster care research is the study of psychological and neurobiological mediators of early adversity on later adjustment and adaptation. Among these mediators, executive functions (EF) have received considerable attention in recent years. EF are higher-order cognitive skills essential to goal-directed behavior, top-down regulation of behavior, cognition, and emotion, and flexible adaptation to various contextual demands. Furthermore, EF deficits are especially related to externalizing problems and academic adjustment, areas especially affected in adopted and foster children.

Although research on adopted children’s EF has grown exponentially in the last decade, few studies have analyzed EF development in children in foster care. Children in family foster care may differ in the early adversity experienced and post-placement history from the mostly studied post-institutionalized children in intercountry adoption, and, consequently, their development may be different. Additionally, recent accounts refer to the differential association of distinct aspects of early adversity —threat and deprivation—on EF and other areas of development, a hypothesis that have not been yet extensively tested.

We intend to contribute to these questions by analyzing the difficulties in executive functions shown in everyday behavior in a sample of children in family foster care, as reported by their foster caregiver. We also study preplacement and post-placement factors that could be related to EF development, as number of placements, history of maltreatment, or age at entry into care. We'll also test the possible effect of distinct aspects of early adversity on various aspects of EF.

The sample studied is comprised of 50 children in non-kin foster care between 4 and 9 years-old (M = 84.66, SD= 19.71; 26 girls, 52 %) from the provinces of Seville and Cadiz (South of Spain), with no significant disability and at least 5 months in their current placement at the time of assessment (M = 26.18, SD= 24.67).

We used the Behavior Rating Inventory of Executive Functions to assess EF difficulties in everyday behavior as reported by the main caregiver. This questionnaire provides several subscales and two main indexes, the Behavioral Regulation Index and the Metacognition Index. The information on pre- and post-placement history was collected through data collection sheets filled by case workers.

Preliminary analyses show that the sample don't present a very high degree of difficulties in executive functions. However, they do show a higher score than the standardization sample of the measure and a sizable minority of them are in the clinical score range. We expect that the analyses with pre- and post-placement variables will add to the scientific knowledge about development and adaptation in this population.
The Development of Social Competence in Children Who Grew Up in Residential Care: A Longitudinal Analysis from Early Childhood to Adolescence

Wednesday, 3rd October @ 10:15: Development of Children in Care (Venue: D. Luís)

Ms. Isabel Cáceres (University of Seville), Dr. Maite Román (University of Seville), Prof. Carmen Moreno (University of Seville), Prof. Jesús Palacios (University of Seville)

Social relations and interactions with peers are critical aspects of children's life and they acquire a fundamental role in adolescence. Some studies have found that children who were exposed to long experiences of institutional care might present difficulties in their relationships with peers. Palacios, Moreno & Román (2013) found that, in early childhood, children growing up in institutional settings presented significant difficulties in their social skills and relationships with peers. It is of extreme importance to study to what extent those difficulties in early childhood might persist across their late childhood and adolescence.

The objective of this study is to analyse the development of social competence in children who were exposed to experiences of abandonment and maltreatment in their families and who have lived in residential care. In the first place, the development of social skills is analysed from children's arrival at the institutional setting up to their adolescence. In the second place, the development of problem behaviors is explored, compared to children who live with their birthfamilies without experiences of initial adversity.

The sample was formed by the main caregivers of 17 children who were growing up in residential care in Spain and 25 children who were living with their birth families as a community group. The longitudinal study consisted of three data collections. In the first one, children were between 4 and 8 years old, in the second assessment they were between 8 and 13 years old and the last data collection took place when they were between 14 and 18 years old. Children in residential care had entered the protection system at an average of 6 years old. The assessment took place in the home of each participant, where the main caregiver of each child completed the Social Skills Rating System Questionnaire (in the first data collection) and the Social Skills Improvement System Questionnaire (in the second and third data collection). Both questionnaires offer standardized scores for social skills and problem behaviors.

On average, children in residential care had lower social skills than children from the community group. The effect of the time was non-significant, meaning that social skills didn't significantly change over time in both groups, and the interaction effect was also non-significant, showing that the effect of the time was similar for both groups of children.

On average, children in residential care had more problem behaviors than children from the community group. An effect of the time was observed as a trend, appearing more difficulties in middle than early childhood in both groups. The interaction effect was non-significant, meaning that the passage of time had similar effects in both groups.

Data obtained in this study will provide a better understanding of the changes taking place in the social development of adolescents whose initial life trajectories were marked by adversity. Furthermore, we continue improving our knowledge of the processes of development, recovery and resilience in such a fundamental stage of the human development.
Attachment has been assessed in children living in alternative care (AC) settings, such as Residential Homes (RC) and Foster Care (FC). However, no study has been conducted to compare attachment styles in residential, foster and parental care (PC) conducted as usual in the same country at the same point in time. There is also a lack of studies conducted in less developed countries. Therefore, the aim of this study was to compare outcomes for children living in three different types of care in Chile. Three groups of children (N=77) living in RC, FC and with biological parents were compared. Attachment styles, Indiscriminate Friendliness (IF) and socio-emotional/behavioural difficulties were assessed. Higher rates of secure attachment were observed in the RC group (36.1%) when compared to studies of children in RC in other countries (M=18%). However, children in both types of AC were significantly more likely to have insecure and/or disorganised attachment styles than PC children. Higher rates of socio-emotional and behavioural problems were observed in RC (55.6%) and FC (50%) compared to PC (10%). Within type of AC, no significant differences were found for attachment styles or for socio-emotional/behavioural difficulties, but children in RC had higher rates of IF. In conclusion, impact of placement in AC can vary between different countries. In addition, it is necessary to move beyond merely type of AC (i.e., residential or foster) to consider factors associated with the AC that may better explain differences in attachment security for children (e.g., quality of care).
The Crucial Role of the Micro Caregiving Environment: Factors Associated with Attachment Styles in Alternative Care in Chile

Wednesday, 3rd October @ 10:45: Development of Children in Care (Venue: D. Luís)

*Dr. Manuela Garcia Quiroga* (Pontificia universidad Católica de Valparaiso), *Dr. Catherine Hamilton-Giachritsis* (University of Bath)

The distribution of attachment styles has been shown to differ between groups of children living with their parents and children placed in alternative care (AC), defined as residential or foster. However, this is the first study in Latin America to explore possible factors affecting the quality of attachment in children living in both residential and foster care. Two groups of children (N = 57) were compared: one group living in Residential Homes (RC) and the other in Foster Care (FC) in Chile. Children's, caregivers' and structural factors (e.g., child: caregiver ratios) and their links with attachment styles were investigated. The micro caregiving environment (i.e., the specific individual child caregiver relationship), especially the caregivers' engagement, sensitivity, disciplinary control and affection, as well as some structural factors (i.e., child: caregiver ratios), were linked to attachment security in children. Specifically, better emotional caregiving and lower child-caregiver ratios were associated with higher rates of secure attachment. The association between quality of care (as measured by the HOME inventory) and attachment styles seems to be influenced by caregiver relationships (as measured by CCSERSS). Caregiver relationship factors (i.e., affection, engagement and sensitivity) directly impact the quality of the attachment children establish with them while living in AC. However, the relationships that caregivers establish with children under their care can be facilitated by good quality structural factors, particularly child-caregiver ratios.
Timescales in Adoption and Permanence Planning in Scotland

Wednesday, 3rd October @ 09:45: Law, Policy and Practice in Adoption (Venue: S. João)

Dr. Lucy Hanson (Liverpool Hope University), Dr. Gillian Henderson (Scottish Children’s Reporters Administration), Ms. Indiya Kurlus (Scottish Children’s Reporters Administration)

Objectives
This paper will outline the findings from two key studies on adoption and permanence planning in the Scottish context. The number of children adopted each year in Scotland is small in comparison to those who are looked after. In 2016, adoptions reached a new high of 523. This figure though includes stepparent or partner adoptions, estimated to be the majority of the 131 single adult adoptions (NRS 2016). Adoptions have fluctuated in Scotland between approximately 400-500 since 1997 (ibid.).
The paper will discuss how Scottish policy has developed in recent years surrounding adoption and the introduction of a new order called a ‘Permanence Order’. The research focuses on children dealt with under two different periods of legislation and the timescales in processing children through the different legal systems. Therefore the paper will examine two cohorts of children that completed the permanence process, one during original legislation (pre Permanence Order) and the second after new legislation was introduced (post Permanence Order).

Method
Data was collected on 300 children in total. The majority was collected from case files and records held by a national organisation call the Scottish Children’s Reporter Administration and the Scottish Courts. A defined set of variables were created and piloted with SCRA information at the beginning of the first study. Information about the children’s backgrounds, first contact with services, family context, use of emergency child protection measures and the times taken throughout key decision making stages of permanency were identified.

Results
The paper will address key results with regard to the timescales taken within the permanency process. Those analysed are the decision to move for permanency, the time taken in the matching process and the time taken to submit an application to court and a final Order made. Findings show that the new legislation has not made significant impact on the permanency process. Despite attempting to offer a ‘flexible’ approach to the permanency problem the decision to move children away from the family forever had not been impacted. The time taken to make this key decision was very similar across the two time periods, around 41% were identified within twelve months. Within the matching process, again no real impact can be made, with in fact a greater proportion of children being matched within a year under the previous legislation. Finally the court process showed some positive findings in terms of children who were adopted, but not so much those with the new Permanence Order.

Conclusions
Although the new legislation was welcomed in Scotland and brought in some clear changes, the impact of this is still yet to fully realised. Ongoing work within local authorities with regards to practice around decision making and support for social workers to navigate the difficult terrain is likely to bring the most change.
More Adoptions more Quickly? The Impact of Recent Changes in Policy and Law in England and Wales

Wednesday, 3rd October @ 10:00: Law, Policy and Practice in Adoption (Venue: S. João)

Prof. Judith Masson (School of Law, University of Bristol)

Background Adoption practice in England and Wales focuses on providing permanent homes for children, who have been removed from parents unable to parent them safely, and are without a family member able and willing to do this. Although outcomes are generally very positive, adoption remains controversial. Government policy: ‘more adoptions more quickly’ (2012) increased criticism from families, some social workers, lawyers, judges, and from foreign governments whose citizens were subject to adoption processes in England and Wales. Unless a child has been relinquished, court approval is required before an adoption placement. This approval (a Placement Order) is given (or refused) in care proceedings where the court may alternatively make orders in favour of relative carers, commit the child to state care or approve care by the parent with or without supervision. In 2013, an appeal court decision Re B-S required courts to give more reasons for their decisions in care proceedings. Care proceedings were reformed by legislation in 2014 to cut their length to 26 weeks, to reduce delays for children, and system costs. These proceedings now take less than half the time they took in 2011.

Aims and objectives Findings are reported from Outcomes for children before and after care proceedings reform (ESRC ES/M008541/1). This aimed to examine how the reforms to care proceedings changed court practice, and the effects on children’s services and outcomes for children involved. This paper presents findings on adoption.

Method Data was collected for 2 random samples of care cases (373) taken to court by the same 6 local authorities in 2009-10 (S1: 170 cases, 290 children) and 2014-15 (S2: 202 cases, 326 children). Data linkage was achieved with two national administrative datasets relating to children in state care (CLA) and children receiving social care services (CiN) in England and equivalent Welsh data. Cohort analysis in the linked dataset made it possible to establish impacts of the changes. Court data indicates which children had an adoption plan approved, and their age when this decision was made. Care data shows when a child was placed for adoption and when the adoption order was made.

Findings All the S2 children who were adopted were placed within 1 year of the adoption plan being approved but this was the case for only 80% of the S1 children. However, not all the reduction in time can be attributed to the changes in procedure and practice – fewer applications were made for Placement Orders, and more orders were refused by the courts; children with placement orders were younger and so easier to place; and a recruitment efforts, undertaken in line with the Government plan to increase adoptions, had increased the number of prospective adopters waiting for a child.

Conclusions Whilst the reduction in the length of proceedings was important, the courts’ more restrictive approach to adoption (which occurred at almost the same time) was a major factor in changing the profile of the children with adoption plans in the study local authorities. Whilst children who were adopted are likely to have benefited from placement at a younger age and fewer placements before adoption, outcomes for other children were mixed. Where adoption plans were not made or were rejected by the court, most children were well cared for, but further care proceedings were necessary for others, increasing emotional damage and delay. Data linkage is a complex method which allows novel analysis that can lead to new insights but is limited in terms of the outcome data is can provide.
Adoption without parental consent is one of the most invasive interventions a state can make into the private sphere. Such strong measures need to be justified in order to be perceived legitimate and acceptable in society. In 2015, the Norwegian Supreme Court decided in two cases regarding the termination of parental rights and adoption of a foster child without parental consent. The Supreme Court upheld both decisions made in the first instance. Some legal scholars have questioned the decisions by the Supreme Court (cf. Sandberg, 2016), as the discourses on the best interest of the child do not appear consistent concerning the weighting and understanding of the child’s interests. Even though one can argue that precedents in the field of child protection do not have the same status as for other areas of the law due to the inherently discretionary nature of the best interest decisions, these decisions do nonetheless provide clarity of the law and give guidance for the discretionary decision-making in the system. By studying these decisions, we analyse how the best interest of the child is reasoned and justified in cases on adoption.

In this paper, we follow the two specific proceedings throughout the judicial system and undertake an examination of the arguments in eight individual judgments on involuntary adoption: two decisions per decision-making body; the County Social Welfare Board (the Board); the District Court, the Appeal Court, and finally; the Supreme Court. The aim is to improve our understanding of how children’s best interests are viewed and balanced against the rights of others, and to add to the knowledge on how the best interest of the child is justified and decided in cases on child welfare adoptions. Moreover, we explore the reasoning for when and how welfare state intervention is considered legitimate and necessary.

The ‘best interests of the child’ is a guiding principle when decisions are made by the Norwegian Child Welfare Act (1992), and is furthermore legally established through the UN’s Convention on the Rights of the Child (1989). Moreover, the principle is set as one of four cumulative conditions for an adoption consent to be given by the Board or the courts. The best interest principle is an inherently value-based and ambiguous one, and decision-makers have been given considerable leeway in exercising discretion in giving weight to differing arguments and considerations when making decisions according to the principle. Previous studies (Skivenes, 2010) have uncovered comprehensive variation in the Supreme Court’s assessments of the child’s best interest, and a critical analysis display weakness in the argumentation and justifications of the dissenting non-consensual adoptions. Within the framework of rational discourse theory (Alexy, 1989; Habermas, 1996), we aim to identify and evaluate the arguments used by the courts and court-like bodies when reaching a decision on whether adoption is considered to be in the child’s best interests.

A preliminary finding is that the weighting of arguments and assessments on whether an adoption are considered “necessary” varies between cases across case proceedings as well as within cases across decision-making instances. This is particularly apparent when assessing the arguments relating to the child’s lack of emotional connection and relations to its birth parents, as well as the child’s need for permanency. Such considerations are deemed both applicable and in favour of adoption by the courts throughout the proceedings in both cases, but the argument has been weighted differently, emphasising the importance of maintaining the legal ties to the biological origin in the case which the courts initially deny an adoption in the last instance.
How to best foster stability and continuity in the upbringing of children, who have suffered abuse or neglect, is an ongoing debate. In Denmark, forced adoption, i.e. adoption without the biological parents’ consent, has recently gained traction as a possible remedy. This has not been uncontroversial, as the positive effects of (forced) adoptions are still contested. It has also garnered the attention of human rights lawyers, who observe issues in relation to, inter alia, state intervention in family life and the child’s rights to care, protection, autonomy and identity.

Generally, states seem hesitant to adopt children away without their parents’ consent, though states’ practices vary greatly. For instance, the parents’ consent was dispensed with in over 2,000 cases in England in 2017. In Norway, roughly 40 children are adopted every year without their parents’ consent. While still relatively low, it is remarkably high when compared to Denmark, where only 3-5 children are forcibly adopted every year, even though the two countries’ population sizes are roughly the same.

This general reluctance could be warranted in a human rights perspective, since forced adoption is considered amongst the most drastic interferences in family life that the state has at its disposal. On the other hand, human rights could also be used to argue in favour of forced adoptions, as adoption might serve the child better than other care alternatives. Thus, human rights play a role in both circumscribing and legitimising the use of forced adoptions.

Against this backdrop, my submission will explore how forced adoptions are used in Denmark, what the current trends are and how human rights are used to both legitimise and circumscribe forced adoptions. It will demonstrate how human rights and their underlying value and principles might help to explain and critically reflect on the states’ different approaches, namely in terms of how states strive to strike a fair balance between the different interests at stake. The submissions thus hopes to encourage further discussions on what the future might hold for forced adoptions.
In England, for many years, adoption from care has been a permanence option for some children who cannot return to live with their birth families. The number of children adopted from care has been falling in recent years for complex reasons, from a high of 5,360 children in 2014-15 to 4,350 in 2016-17. A proportion of these children are adopted by the foster carers they have been living with (approximately 10% in 2016-17), but for many children there is a need to identify a ‘new’ family. Where a child’s plan is adoption, there has been a focus in England on securing a placement as speedily as possible but it is harder, and therefore takes longer, to find suitable families for children who have particular needs (e.g. older children, sibling groups, children with disabilities or those with a minority ethnic background). Indeed, this often requires responsible local authorities to look beyond their own pool of approved adopters to identify a potential ‘inter-agency placement’ and this course of action leads to a fee being payable to the other agency. This paper reflects on some of the findings of a study which examined family finding practice and experience in a purposively selected sample of English adoption agencies during a period where the government agreed to subsidise the inter-agency fee for children whose characteristics make them ‘harder to place’.

While the aims of the study as a whole were broader, this paper focuses on:

- The characteristics that make children ‘harder to place’
- Adopters’ views on the way information about children is presented and the way in which their thoughts about their capacities change as they engage with the adoption process
- The factors thought important in identifying ‘suitable’ families
- Issues associated with supporting children and families when placements are made at a distance

The study as a whole used a mixed methods approach, focusing on seven local authorities and three voluntary adoption agencies, selected for regional representation, variation in size and levels of adoption activity, particularly in relation to harder to place children. Methods included:

- a secondary analysis of existing data, to identify factors associated with the time taken to identify an adoptive family prior to and during the subsidy period;
- interviews with adoption agency managers to understand the organisational and local policy context;
- focus groups with adopters and adoption practitioners, which explored their experiences and perspectives of the family finding process, matching and support
- case studies to track the family finding journey from the family finders’ perspective.

Findings from the quantitative analyses confirmed that particular characteristics of children were indeed associated with longer periods spent family finding. However, analyses of the qualitative data highlighted the importance of experience for both adopters and practitioners in shaping the ways in which family finding searches were pursued. In particular, there was a subtlety in perceptions and expectations, which is not easily captured by a ‘tick box’ approach to ‘matching’ waiting families with children they may be able to care for. Practitioners’ perspectives emphasised the importance of knowing children’s cases in depth and having active and meaningful links with adopters’ workers both within and beyond their own agency in order to achieve a match for ‘harder to place’ children. These findings have particular relevance in an era where there is increasing reliance...
on technology and the need to reduce detail to code. Finally, both adopters and practitioners raised the issue of ensuring that appropriate support could be provided, especially where placements were made at a distance.
Enhancing Cultural Competence Through In-Service-Training: A Study among Indigenous People, Immigrants and National Minorities

Wednesday, 3rd October @ 09:45: Minorities in Child Protection Systems (Venue: Ribeira II)

Dr. Merete Saus (UiT The Arctic University of Norway), Dr. Anita Salamonsen (UiT The Arctic University of Norway), Dr. Marcela Douglas (UiT The Arctic university of Norway), Dr. Ketil L. Hansen (UiT The Arctic University of Norway)

The three minority groups in Norway: The Samis, an indigenous people living in Norway, Sweden, Finland, and Russia, immigrants, and five national minorities: Kven, Rom, Romani, Jews, and Skogfinn. They differ when it comes to history, political influence and legal and socioeconomic status, among other factors. Compared to the other minority groups, the Indigenous people have the strongest rights regarding protection of cultural heritage, language, and way of life, established in international legislation and conventions. Despite these differences, these minority groups share some of the same experiences in relation to Norwegian authorities concerning a harsh Norwegization politics. Child welfare services has served as tools for this forceful assimilation processes. Families with minority background are over-represented in home-care services in child welfare. The minority families experience child as insensitive to cultural differences and have thus a widespread skepticism toward intentions and methods. Ethnicity and cultural competence are to some degree integrated in the curriculum in the formal education of child welfare workers. However, it seems that such theoretical knowledge is difficult to convert into practice. The child welfare counsellors find it challenging to work with minority families. Hence, innovation of in-service-training in order to enhancing cultural competence in child welfare services in Norway is necessary.

On these bases, the Norwegian Directorate for Children, Youth, and Family Affairs took the initiative to fund a study that took this situation as a starting point. To explore these issues we raised the question: How can in-service-training enhance cultural competence in child welfare service? We conducted a qualitative study with a total of 63 individual interviews and 7 focus group interviews. The participants represented the three groups and the child welfare services. We held one focus group with young representatives across the three minorities to specifically explore and discuss the youth perspective. The interview period was from August to November 2017.

The term cultural competence was in this study defined by incorporation of three main parts: 1) Sensitivity practice that is respectful, anti-racial, and inclusive. This part is addressing attitude and work-ethics. 2) Knowledge of central issues concerning minority-majority relations and the effect of distribution of social and political power. 3) Skills to implement cultural sensitivity and knowledge into good practice. These three parts: practice, knowledge and skills are similar to the three learning outcomes for life-long-learning in the European qualification framework: knowledge, skills, and general competence. We use both of these three-folded concepts in our analyses of the interviews and focus group interviews. Based on these analyses, we suggest several innovation strategies in in-service-training that have potential to enhance child welfare services work with minority families:

- multiple and supplementary on-the-job training courses. Courses that aim to raise the organizational learning attitude are useful in order to implement cultural competence as a basic proficiency in child welfare as an organization.
- Web-based learning tools, outlined with rooms that broadcast well-chosen learnings objects, tasks, and tests, designed to support child welfare workers to implement cultural competence into practical child welfare practice, is suitable for in-service-training. This process can be combined with a web-based certification that demonstrates basic skills.
• learning networks, especially for services that infrequently work with minorities.
• mentors recruited based on their minority backgrounds and knowledge about the public services. Mentors can serve both as support for minority families and child welfare service workers who seek a deeper understanding of how to practice cultural competence based on sensitivity and knowledge.

Representatives for the three minority groups in Norway are essential participants in the processes to implement these strategies into practice.
Background: The social-emotional development of young children is foundational to well-being and has long term effects including greater mental health, lessened likelihood of drug or alcohol abuse, and fewer relationship problems (Jones et al., 2017). Children in out-of-home care are at risk for social and emotional difficulties due to prior trauma, discontinuity of care, and the accumulation of health and emotional problems (Jee et al., 2010). As a result, monitoring their development in the child welfare system is crucial to ensuring they receive services to address developmental difficulties.

Objective: This exploratory paper’s purpose is to determine the effect of demographic, risk, and protective factors on social-emotional development, as measured by the Ages and Stages Questionnaire Social Emotional (ASQ:SE), in children age 8 months to 5 years in out-of-home care in Ontario, Canada. The ASQ:SE is a developmental screening tool used to determine if a child is either “typical” or “identified.” Children who are “identified” are recommended for further evaluation to determine if services are needed (Squires et al., 2002).

Method: The cross-sectional sample consisted of 1022 young children aged 8 months to 5 years, living in out-of-home care in Ontario, Canada who participated in the completion of the ASQ:SE as a part of an Assessment and Action Record (AAR-C2-2010; Flynn, et al., 2010) between January 1, 2016 and December 31st 2017. The AAR-C2-2010 is the core instrument used in the Ontario Looking After Children needs assessment and outcome monitoring project. The AAR-C2-2010 is completed annually in a conversational interview designed to facilitate dialogue among the child welfare worker, child, and caregiver(s) in order to guide and monitor developmental outcomes and well-being.

Results: A logistic regression was completed to examine the effect of demographic, risk, and protective factors in the identification of social-emotional difficulties using the ASQ:SE. The results of this model found that Black (African or Caribbean ethnicity) children were 96% more likely than non-Black children to be identified for further screening. Additionally, children with a developmental delay were 126% more likely to be identified than their peers. Older age and a higher number of changes in caregiver since birth were statistically significant risk factors, whereas the positive parenting scale, developmentally appropriate communication, problem solving, and personal social skills were significant protective factors.

Implications and Conclusions: While it was not unexpected that children with developmental delay would likely be identified by the ASQ:SE more often than their peers, it is surprising that children who were Black (African or Caribbean ethnicity) showed such a higher likelihood than their non-Black peers to be identified by their ASQ:SE scores. In the Ontario Child Welfare system minority children (Indigenous and Black -African or Caribbean ethnicity) are disproportionately represented and face higher levels of disparity. Our results reveal several questions for further research, including why are Black children almost twice as likely to be identified for further developmental screening than non-Black children? How do systemic factors such as poverty, community boundaries, and possible decision making inconsistencies or bias affect their ASQ:SE scores?

The findings of this model have practical implications for practitioners and caregivers. Once a child is identified, caregivers should work to help the child build skills at home, and workers should ensure the child receives any necessary interventions, as well as be aware of the risk and protective factors to help mitigate difficulties in a child’s social-emotional development.
Unaccompanied Minors in Secure Care – An Action of Panic or a Necessary Intervention?

Wednesday, 3rd October @ 10:15: Minorities in Child Protection Systems (Venue: Ribeira II)

Dr. Katarina Thoren (Department of social work, Stockholm university), Dr. Åsa Backlund (Department of social work, Stockholm university)

The number of unaccompanied minors (UM) arriving in Sweden has increased rapidly during the last decade. A peak occurred in 2015 when approximately 35,000 children arrived in the country without parents or other guardians. The number of UM has also increased in secure care (SC). In Sweden, SC institutions are the responsibility of the Swedish National Board of Institutional Care who runs 24 secure care units throughout the country. In 2016, the number of UM placed in secure care was 269, which accounts for quarter of all youth placements in secure care this year. This significant increase of this group within the SC system raises a number of questions about the youth group itself, of how and why they are placed in this kind of institutions, and what kind of treatment they need and receive in these institutions. In this presentation, we present preliminary results from a larger research project about unaccompanied minor in SC. The aim of the study is to investigate and analyze what characterizes the group of UMs in SC, what causes these placements, and what characterize care and interventions during the placements, as well as how UM themselves perceive and understand the placement within the SC system. The study is based on register data and documentation from the SC system; focus group interviews with social workers from the municipal social services in two cities; interviews with managers from three SC institutions; focus group interviews with staff at these institutions; and interviews with 11 UMs placed in SC.

The current presentation offers initial findings regarding the social workers’ perception of the UM’s problem, placement decision considerations, and finally how SC staff perceive and reflect about UM in comparison with other youth placed in SC. The SC placements are also mirrored through the perspectives of UM in SC themselves.

A preliminary analysis indicate that social workers in social services and personnel in SC report similar kinds of problems typical for UMs causing the SC placements, including traditional problems like substance abuse and criminality, but also more complex and/or unclear problems that is hard to define including vagabondage and trauma. UMs are reported to have more mental health problems compared to other youth in SC, often related to the migration process. In terms of placement considerations, the social workers’ decisions are reported either as distinct and clear with a need for an urgent stop of a dangerous situation (e.g drugs, criminality), or indistinct and unclear in case of unidentifiable/vague problems, and/or lack of placement/treatment alternatives. The SC staff sometimes argue that some UM have less severe problems and should not be in SC. In addition, UMs’ own descriptions of what kind of problems that brought them to SC mirrors big differences in complexity and severity. Both youth and staff express that UM have little knowledge about Swedish laws and child protection policies and that the placements in SC therefore can be difficult to understand. The youth interviewed report different experiences of whether the placement in SC have been helpful or not. Although most of them express that they experience the placement as not helpful, or even harmful, some of the youth viewed the placements as a positive turning point in their lives. Even if the results are preliminary, the findings provide an interesting glimpse of unaccompanied minors in Swedish secure care system and raises questions about the adequacy of SC placements and the need for alternative placements and interventions for some of the UMs in SC.
In the frame of child protection, the specific question of children’s cultural or religious background has only briefly been broached by French research (Gheorghiu, 2002) compared to other countries (Thoburn, Chand, Procter, 2005)[1]. The French secular and republican context explains in part how hard it is to frame this public interest mission in these terms. This context makes it very difficult to quantify this question, since the production of quantified data on ethnic or religious issues is not allowed in France and this type of data is considered sensitive. Nonetheless, I have chosen to study how placement has been experienced and considered by persons from minority groups, be they religious or ethnic. My approach is therefore qualitative in nature. In my PhD research, I have studied the experiences of twenty two (22) people who have left care and I undertook twenty four (24) interviews with professionals in two child protection organizations that are historically marked by religion- Judaism and Catholicism- which is unusual in France.

In this presentation, I would like to show how the situation of racialized fostered children allow to highlight process of categorization and of construction of “origins”, “origins” in which those children don’t necessarily recognize themselves anymore. If categorizations are less visible today, children in childcare system add up discredits, even more when they are racialized (Barn, Andrew, Mantovani, 2005). In this sense, the situation of fostering is relevant: it allows to point out the multiple assignations of identities which fostered children are confronted with, and to question the invocation of “origins” – are they understood as family background, social, ethnic or religious – of these young, when they daily live outside of their families, in a context of “obsession of genealogical memory” (Nizard, 2012: 211).

I will briefly explain the way in which these “origins” have been constructed and used in the history of French childcare system, including colonial period. Then, I will broach this question from the point of view of former fostered persons who have experimented these double assignation: as fostered children and as children from minorities. These situations will allow us to show the importance given to kinship in the frame of child protection, links which are imposed to racialized children because they are directly visible, even the distance that sometimes separate them to their parents. In accordance with Véronique de Rudder, we can note that “we attribute and reiterate an exteriority, with genealogical continuity” (De Rudder, 1998: 34).

[1] This question appears in the international European context. The UN Convention on the Rights of the Child (UNCRC) contains articles that relate to religion or ethnic origins (Articles 2-14-30).
Social Re-Evaluation in a Collective Multi-Cultural Religious Society: A Case Study of Youth at Risk

Wednesday, 3rd October @ 10:45: Minorities in Child Protection Systems (Venue: Ribeira II)

Dr. Anat Kali (efrata college), Prof. Shlomo Romi (School of Education, Bar-Ilan University)

Little is known about marginalizing processes among adolescents from enclave societies. One such society is the Israeli Jewish ultra-Orthodox which is committed to rigid interpretations of Jewish observance (Kaplan, 2003). Adolescents who veer from this path face blame and rejection from the community, and at times from their families (Lahav, 2005). Detached adolescents experience the relation-alienation dichotomy on all levels – their personal and religious identity, family, school, and community (author, 2010), especially when there is a gap between their religious observance and that of their family and community. When they veer from cultural norms, these youth not only place themselves at risk of exclusion from society but also jeopardize their siblings by becoming victims of stringent social sanctions such as exclusion from educational institutions and problematic marital arrangements.

Objectives

This study seeks to identify a theoretical model that can explain the unique characteristics of risk for troubled youth in collective religious societies. The context of this study is the Israeli ultra-Orthodox community, in which social exclusion for these youth is a recurrent phenomenon. Furthermore, the study seeks to develop a deep understanding of how collective religious cultures affect adolescents who challenge the norms.

Method

The present research is a multiple-case study, using interviews and observations. The study sample of 67 interviewees included 44 adolescents at risk (27 boys, 17 girls), five parents, 10 rabbis and “brokers” who work with adolescents at risk, and eight social workers. In addition, 11 observations were held in various locations where the research population meets. Data analysis was based on stages of grounded theory (Glazer & Strauss, 2008) and ethnographic content analysis.

Results

The collectivist nature of ultra-Orthodox culture accounts for the price and rewards that adolescents “gained or lost” by following the normal path or deviating from it. These adolescents described devaluation of social worth, resulting in damage to them and their family. Fearing implications of social reevaluation, the family often rejects the adolescent. Many ultra-orthodox adolescents were explicit about their social devaluation in their community. The study revealed life choices leading to risk situations were based on the dominance of social reevaluation in their community.

This process, identified as social reevaluation, follows a financial model. In finance, the re-evaluation model explains reassessment of assets and consequent readjustment of taxes. In the social context, social reevaluation involves reassessment of social capital of adolescents and their families following changes in their lives. This reevaluation is enacted by social agents such as heads of educational institutions, matchmakers, and members of the community.

Conclusions

This study suggests new theoretical and structural meaning for the concept of social reevaluation, as it seeks to identify conditions of its occurrence. Social reevaluation is based on division of capital between groups within the community. In this case the high capital “ruling groups” are the learned elite from European backgrounds, while the low capital “ruled groups” are the newly religious and those emanating from Eastern origins. Changes in the social value of individuals and families is expressed in positive and negative social rewards. Sanctions include non-admission to educational institutions, poor matches, and distancing from the community. Reevaluation is visible in ultra-orthodox society because social constructs and boundaries are clear, structured,
and inflexible. As a collectivist society, rewards are pronounced – both for conformists and even more so for deviants. The social re-assessment model reveals the way religious, collectivist, and multicultural societies create unique social mechanisms that generate risk situations for youths. Understanding these distinctive patterns enable construction of interventions for minorities with similar cultural and religious attributes worldwide.
Moving Out Does Not Always Mean Moving On: Placement Stability and Relational Permanence for Care-Experienced Young People

Wednesday, 3rd October @ 09:45: Promoting Stability in Foster Care and Adoption (Venue: Arrábida)

Dr. Dominic McSherry (Queen’s University Belfast), Dr. Montserrat Fargas (Queen’s University Belfast), Dr. Kerrylee Weatherall (Queen’s University Belfast)

Placement stability is sought for children who enter state care and need a place to call home. The research literature has very much focused on looking at placement stability (or physical permanence), and how to avoid placement moves and breakdowns. Adoption has been found more likely to achieve a greater degree of stability than other long-term placements, such as foster care or kinship foster care. However, the notion of placement stability does not consider the young person’s subjective perspective and thus the quality of the placement, while the concept of relational permanence does. Relational permanence conveys an enduring positive relationship between a young person and a caring adult. Very little is known about what happens after children move out of long-term placements. Does their feeling of belonging to that family disappear when the child moves out?

The Northern Ireland Care Pathways and Outcomes Study is a longitudinal study that has been following all the children who were in care on 31st March 2000 and under 5 years old. Three waves of the study have been completed to date, and Wave 4 (2016-2019) data collection is ongoing. The study is looking at a range of issues across placement types (i.e. adoption, foster care, kinship care, returning to birth parents, or Residence Order). This paper will focus on the issues of placement stability and emotional/relational permanence. This will involve examining placement stability for the 354 young people across the different types of placements; but also the circumstances of some breakdowns/disruptions; some of the young people’s sense of belonging and being part of the family; and their parents’/carers’ feelings of bonding to them. On the one hand, we found high levels of placement stability for the 354 young people in our study, although those who were adopted and placed under a Residence Order appeared more likely to remain in the same caregivers’ home than young people in foster care and kinship care did.

On the other hand, interviews with 43 of the young people (now aged 18-23) and/or their parents/carers revealed high levels of relational permanence, and showed that placement disruption did not necessarily mean a breakdown in the relationship. In fact, in all but one of the placements that disrupted when the young person was between 12 and 17, the young person-carers relationship endured over the years, and their feelings of belonging remained. Our findings have clear implications in terms of policy and practice. Social Services should begin to apply a more relational than structural lens when placing children who have been removed from the care of their birth parents. They could focus more on the importance of maintaining relationships rather than structural issues such as placement stability. For example, a child can leave a placement in the teens and maintain a great relationship with carers, but another may remain in a placement but never communicate with their carers. Social Services need to get children into an appropriate long-term placement as soon as possible, and support long-term placements, as the relationships formed are likely to persist and provide the children with a family for life, or another family for life, even if the placement breaks down in the teens.
Moving to Permanent New Families: Supporting Positive Moves from Short-Term Foster Care to Adoption

Wednesday, 3rd October @ 10:00: Promoting Stability in Foster Care and Adoption (Venue: Arrábida)

Dr. Gillian Schofield (Centre for Research on Children and Families, University of East Anglia), Dr. Mary Beek (Centre for Research on Children and Families, University of East Anglia), Prof. Elsbeth Neil (Centre for Research on Children and Families, University of East Anglia)

In England where most adoptions are of children in care, 80% of those adopted are under five when placed, having typically spent at least 18 months with foster carers, often from soon after birth. During this time it is likely that the foster carers will have become the child's source of love, nurture and reassurance and secure base attachment relationships will have developed. The child's move to adoption then means moving from trusted, familiar caregivers to adopters whom they will need to get to know, learn to trust and with whom they must build new attachments. This project was designed to address ways of facilitating this process, drawing on research from child development, foster care and adoption. It was also anticipated that lessons could be learned to support positive, child focussed practice in a wide range of placement moves to new families.

Children, especially those between the ages of six months and five years, find the loss of attachment figures very distressing. Feelings of anxiety, sadness and anger are typical, although not all children show their feelings in ways that adults find easy to read and respond to, especially children who have previously experienced maltreatment, separation and loss. In most cases the transfer of care from foster carers to adopters in England takes place over about two weeks, at the end of which the child is living full-time with the adoptive parents. Even these relatively short timescales can be reduced, often when the adults involved find the child's move very stressful. The question of whether children should then have any further contact with their foster carers is controversial, and this has often been discouraged, with adoption seen as a fresh start. This runs counter to evidence about how children manage separation, where continuity and the role of a familiar caregiver in providing reassurance and support is considered to be very helpful.

There is some evidence from research that badly managed transitions can have a long-term impact on the success of the adoptive placement, even contributing to placement disruption in some cases. Given the complex feelings and demands that children, foster carers and adopters can experience when children move to adoption it is vital to ensure that this move is planned and managed in a way that puts the child's emotional needs first, whilst ensuring adults' needs are also attended to.

This project aimed to achieve this through developing and piloting a programme that professionals can use to manage and support these transitions. The project team, in consultation with a range of stakeholders, developed materials to support professional practice, shaped around key principles and drawing on Schofield and Beek's Secure Base model (www.uea.ac/providingasecurebase). The programme was piloted in cases over a twelve month period, 2017-18, in two adoption agencies; one a rural county and the other a London borough. Developmental workshops during this period enabled the research team and the agency staff to review how well the programme was working in practice and to get an indication of what its effects might be on children and their foster and adoptive families, as well as on the agency staff involved. An online survey gathered data from social workers, foster carers and adoptive parents.

The presentation will report on the delivery of the theory and research based practice programme and the results from the pilot sites, exploring options for further implementation and evaluation.
Preparing Children for Adoption - Presentation of PPCA Program and its Application

Wednesday, 3rd October @ 10:15: Promoting Stability in Foster Care and Adoption (Venue: Arrábida)

Prof. Margarida Rangel Henriques (University of Porto), Dr. Isabel Fidalgo (University of Porto), Dr. Diana Teixeira (University of Porto), Ms. Sara Silva (University of Porto), Dr. Margarida Domingues (Câmara Municipal do Porto)

Child adoption and the construction of a new family entail specific challenges for both parents and children and also for the professionals involved in the process. Adoption is characterized as a demanding adaptation process, involving losses for all those involved and, simultaneously, the ability to construct new attachment relationships. Literature suggests openness to communication about adoption, grieving for the biological family, and the attachment to the new adoptive family, as being among the crucial factors to the successful psychosocial adaptation of the adoptee. Failure regarding these complex tasks is likely to compromise the child's development and well-being, by negatively impacting the preservation of the child's origins and personal history, and the process of self-identity construction. In addition, the length of the adoption process, its possible disruptions, and the impact of not finding an adoptive family, are a concerning reality. This context is clearly a major risk for the psychological and social adjustment of both children and adoptive families, with potentially traumatic consequences throughout the life cycle. Every year, on average, 351 children are adopted in Portugal. The 2015 approved law on adoption ruled the mandatory preparation of the child for adoption and post-adoption responses. In addition, it was stated the privatisation of services for the matching process in adoptive families. The scientific community in Portugal was thus urged to think on suitable ways of promoting psychosocial well-being of children facing adoption, and of developing empirically validated practices to appropriately equip the workforce of professionals in the adoption context. In this talk we will present a specific intervention program, designed for assisting the transition of children into a new adoptive family: the PPCA – Program for Preparing Children for Adoption, developed by the Webs of Meaning Group, at the University of Porto, in Portugal. Using case studies of its previous applications, we will present this innovative program illustrating the standardised practices used by professionals in assisting children facing adoption. The PPCA is inspired by a narrative-constructive approach. It includes ten structured sessions and defines a set of activities and tasks for professionals involved in supporting the child with adoptive plans. It comprises three published manuals, including the presentation of the program and background theory (as well as the findings from a pilot study), and two workbooks to be used by children and professionals, which allows the registration of the reactions of the child and the impact of the program. By promoting the participation of children in their own adoption plans, the PPCA encourages the openness of communication about adoption, potentially enhancing the child's understanding of his/her life history (including the decision of adoption). The program also supports the grieving for the biological family as well as the attachment to the new adoptive family. These factors are indicated as crucial for the psychosocial well-being of the child as well as of new adoptive families. In this presentation, we will focus on both the theoretical and the practical aspects of the program, in a lessons-learned format. Benefits, difficulties and impacts will be presented; and we will also reflect on how results can best inform decision makers about the relevance of PPCA and its applicability by adoption professionals and services.
Creating a Safe Clinical Setting for Dyadic Interventions with Young Children and Their Birth Parents, in the Process of Adoption

Wednesday, 3rd October @ 10:30: Promoting Stability in Foster Care and Adoption (Venue: Arrábida)

Dr. Adena Hoffnung Assouline (School of Social Work and Social Welfare- The Hebrew University of Jerusalem), Dr. Cigal Knei-Paz (School of Social Work Tel Aviv University)

The goal of the current presentation is to present clinical guidelines for trauma and attachment focused interventions that can positively contribute to the healthy development of young children in the process of adoption. There is general assumption that it is impossible to promote a beneficial connection between the child and the biological parents in the process of adoption, and that it might endanger the child in light of parental failure. In this lecture, we argue that these meetings can positively contribute to the healthy development of the child and to the success of the adoption process. In order to reach these goals, we propose to use trauma and attachment focused clinical interventions, based on the CPP (Child Parent Psychotherapy) a dyadic intervention model developed by Prof. Alicia Lieberman and Prof Patricia Van - Horn. The authors of this presentation have initiated and consulted a training program based on this model. It is designed specifically for biological parents and their children who are in the adoption process. The goals of the intervention: 1. Creating a safe clinical setting for parent and child; 2. Facilitating moments of playfulness and joy between parent and child 3. Explaining and giving meaning to the events that led to the separation 4. Promoting benevolence of the biological parent towards the child 5. Mediating the transition of the child between attachment figures. We will present clinical examples of interventions with the infant and the biological parents that show the efficacy of implementing these goals and explore the challenges when conducting such complex interventions.
The Assessment of Infertile Applicants for Open Adoption: Practice Implications

Wednesday, 3rd October @ 10:45: Promoting Stability in Foster Care and Adoption (Venue: Arrábida)

Ms. Lisa Velickovich (University of Sydney and Barnardos Australia), Ms. Ruth Drennan (University of Sydney and Barnardos Australia)

The Find-a-Family program of Barnardos Australia is an adoption and permanent care agency in NSW, Australia. Since becoming an adoption agency in 1985 the program has secured adoption orders for 333 children. The Find-a-Family program conducts carer applicant assessments with a specifically designed competency based framework that enables dual authorisation as permanent carers and prospective adoptive parents. Dual authorisation is an integrated process of recruiting and assessing carers who have expressed an interest in fostering and adoption. The objective is to respond to the permanency needs of children in out of home care by providing them with a case management system that allows for formal matching with a prospective adoptive parent prior to placement and immediate case planning progression from permanent care to adoption. The practice of dual authorisation fits our concept of the continuum of care model from permanent care to adoption. The majority of our prospective adoptive applicants have an experience of either primary or secondary infertility. These applicants, having investigated alternatives to biological parenthood, present with a desire to create a family through foster care and adoption. The degree to which an individual has processed their infertility can impact upon their ability to parent a non-biological child; their capacity to work collaboratively with the agency; and, openness to developing and sustaining positive relationships with birth families.

In this presentation we will describe the evolution of the Find-a-Family program's practice approach to the exploration of infertility issues for carer applicants through initial carer training and assessment. We will discuss the key aims of the infertility assessment module and the method used to implement a thorough investigation and determination of the carer applicants. The objectives when assessing include:

- experience of infertility and assessment of the impact of this on them (historically and currently).
- expectations about parenting a non-biological child
- awareness of the triggers of grief and loss connected with their infertility and ensure the applicant can focus on the needs of a child in care during these times
- readiness to manage societal attitudes and insensitivities towards fertility issues

This experience lead to the development and implementation of a “Parenting with Infertility” video as a complementary resource to our infertility assessment interview module which is utilized in the applicant's home during assessment. This video features three of our adoptive families who have had an experience of infertility and depicts their reflections on their infertility journey and the continuing impacts on the task of adoptive parenting for infertile applicants.

We will show excerpts of the “Parenting with Infertility” video to demonstrate the integration of this resource in our Find-a-Family program carer assessment and training framework. Our presentation will consider the issue of infertility in an Australian context and the genre of applicants who come to Barnardos to adopt a child i.e. same sex couples, single applicants.

Conclusions: Over the last 18 years, the Find-a-Family program has undertaken a specific training and assessment approach to the examination of carer applicants' experience of infertility. Our practice methodology has been refined and enhanced in line with our increasing understanding of the ongoing impacts of infertility for carers and adoptive parents. The resultant practice implications are that this strength based assessment process has improved our capacity to support infertile couples post placement. Our acknowledgement of the impact that infertility has on parenting a non biological child has resulted in enhanced placement stability.
Educational Support Interventions for Children in Foster Care – Results from a Danish Randomized Controlled Trial

Wednesday, 3rd October @ 09:45: Specialized and Therapeutic Care (Venue: Miragaia)

Ms. Misja Eiberg (VIVE - The Danish Center for Social Science Research)

Background

A growing body of research has consistently documented that children placed in out-of-home care (OHC) show poorer school performance compared to their peers and are at a high risk of entering adulthood with a low level of education (e.g. Jackson, 2013). Though it has been firmly documented that children living in OHC represent some of the most at-risk students in the school system, and though evidence points to the importance of schooling for long-term outcomes for care leavers (e.g. Berlin, Vinnerljung & Hjern, 2011), knowledge of how to support these children’s schooling and development is limited.

Objectives

The effectiveness of two different approaches to school support aimed at children living in foster care in grades 1-7 (mean age 10.4) were evaluated in a three-armed randomized controlled trial including 153 children (64% girls) in 136 regular Danish public schools.

One intervention was a home-based tutoring intervention called ‘Caregivers as Tutors’. The other was a school-based intervention, called ‘LUKoP’ (a Danish version of SkolFam) and involved a team of professionals at the child's school and the foster parents.

The aim of this presentation is to present the results of the trial, focusing on the effectiveness of the interventions in relation to a) school performance in reading and math and b) general development, including cognitive abilities, executive functioning, learning competencies and behavior.

Method

The children in the study were randomly allocated either to one of the experimental treatments or ‘treatment as usual’. The effectiveness was evaluated in a pre-test/post-test design.

The children were assessed with standardized instruments in reading and math. Cognitive abilities and IQ were measured with the WISC IV. Executive function was measured with the Behavior Rating Inventory of Executive Function (BRIEF), in both the teacher and parent versions, and with the Contingency Naming Test (CNT). Learning competencies were assessed using an index of the 5-15 Questionnaire. Moreover, the Strengths and Difficulties Questionnaire (SDQ) and the This is Me Questionnaire (originally ‘Sådan er jeg’) were employed.

Key results

At baseline, the children scored below the population mean on all applied measures, on average, and a rather large subgroup had very low scores – for instance, 40.4 pct. had an IQ score at least 1 SD below average, and 11.3 pct. of the children had an IQ score <70.

The school-based intervention ‘LUKoP’ showed a positive effect on the children's IQ score and verbal comprehension, and a small but positive effect on the children's reading speed in word reading. No further effect was found on reading ability in either in sentence and text reading or in mathematics. Likewise, no effect was found on the children's executive functioning, learning competencies or behavior.

No effect of ‘Caregivers as Tutors’ was found on any of the outcome measures.

Implementation studies of the interventions indicated that the limited effectiveness might be related to lack of high-intensity academic support in the schools in ‘LUKoP’, and a general low level of engagement in the foster families in ‘Caregivers as Tutors’, respectively.

Conclusions

The baseline findings of this study suggest that the need for support of children in OHC does not solely concern
academic skills, but also general development (e.g. strengthening of learning competencies). Moreover, the results points to ‘LIKoP’ as a potential beneficial intervention model, whereas ‘Caregivers as Tutors’ in its current format seems less effective.
Strengthening Family Relationships within Therapeutic Residential Care: An Australian Scoping Study

Wednesday, 3rd October @ 10:00: Specialized and Therapeutic Care (Venue: Miragaia)

Dr. Patricia McNamara (The University of Melbourne), Dr. Sara Mclean (Australian Centre for Child Protection, University of South Australia)

1. Background
Therapeutic residential care (TRC) is a placement approach which privileges healing from trauma and attachment disruption for vulnerable children and young people. Entry to TRC can often prove an opportunity also for staff to partner with families in efforts to overcome conflicts and separations and build more positive and resilient relationships. Scaffolding family relationships during TRC would seem especially important in the Australian context where many young people independently attempt reunification with their families upon leaving care. Too often, unsupported families and young people cannot overcome the complex relationship and individual challenges which confront those initiatives. This frequently leads to serious conflict and/or long-term estrangement. For young people such negative outcomes undermine critical grounding in family identity and compromise access to potential lifelong support. For all family members, reunification failure commonly results in cumulative trauma, as earlier episodes of separation and loss are inevitably revisited.

Formal evidence of what constitutes an effective family partnership within TRC and what impacts can potentially ensue from such a partnership remains undocumented in Australia. Anecdotally, there are encouraging indications that partnering well with families can have a range of positive long-term outcomes. Those indicators have given rise to this national qualitative scoping study.

2. Aims
The study aimed to:
1. Explore the range of family partnerships in Australian Therapeutic Residential Care (TRC)
2. Identify sector perceptions of best practice in partnering with families in TRC
3. Identify areas for further research policy and program development in relation to partnering with families in TRC

3. Methodology
A small purposive sample of therapeutic residential care managers representing key providers across Australia have been interviewed. They have been asked to describe features of family partnering within their own setting and more broadly in their home State/Territory. Such features include: theoretical models underpinning practice and how those underpin family partnerships; where family partnering is positioned as a policy and practice priority; qualifications, training and supervision of staff engaged in family partnering; perceived best practice and potential outcomes of effective partnering with families. National and international expert informants were also interviewed around similar themes. Semi-structured questionnaires were administered over one-hour via telephone interview. Interviews were recorded and transcribed and data analysed for content and themes utilising NVivo10 software.

4. Findings
Commitment by staff teams to achievement of the strongest possible relationships between parents and children and within sibling groups during a TRC placement is a consistent finding. Policies and practice approaches towards that end strongly emphasise trust building to enable true partnering between staff, young people and families. Healing family trauma and (often long-term) estrangement would appear to derive from high levels of family access to and inclusion within the residential program, along with a range of equity and empowerment strategies. Predictably, post-discharge support programs also seem critical to successful long-term outcomes from effective family partnering during TRC. Staff support of diverse types of intra-familial relationships and
of ‘family-like’ relationships that do not always equate to ‘reunification’ in the traditional sense would appear to be critical elements of best practice in this arena.

5. Conclusions
This scoping study begins to address an important knowledge gap, locally and internationally, around potential positive impacts of family partnering within TRC. It provides a platform for comprehensive outcome-based research to guide policy, programs and practice aimed at building the strongest possible family relationships during and post TRC. Strong and enduring family relationships can act as a critical protector for young people who too often experience tragically poor outcomes post out-of-home care.

Note: This study was conducted under the auspices of the National Therapeutic Residential Care Alliance (Australia) - NTRCA
MacKillop Family Services (MacKillop) is a non-government organisation providing community services across three states in Australia including family services, education, disability services and out-of-home care for children subject to child protection intervention. MacKillop operates 29 residential care houses for children and young people including 11 therapeutic residential care houses. The therapeutic residential care model provides a more targeted and intensive clinical support intervention.

This paper will present on the Therapeutic Residential Care (TRC) outcomes monitoring project conducted jointly between MacKillop Family Services (MacKillop), Verso Consulting and The Carers Phone. The project commenced in February 2016 across 10 TRC homes. Key client observational data is collected three times per day by residential care staff. In addition to supporting case practice, care planning and program oversight, this data informs the completion of validated tools – the Health of Nations Outcomes Scale for Children and Adolescents (HoNOSCA) and the Strengths and Difficulties Questionnaire (SDQ) by therapeutic practitioners. The online system provides data to record the behavioural and symptom severity of young people residing in TRCs in real time or at regular intervals and provides time matched aggregated data demonstrating areas of change for the program.

The project builds on the methodology and learning from the Victorian Evaluation of TRC pilots (Verso, 2011). The evaluation findings indicated that the application of identified therapeutic program elements supported significantly improved outcomes for young people placed in the TRC pilots. This project embeds data collection and automated reporting in TRC programs.

The paper will demonstrate how the TRC Outcomes Monitoring Project has supported good practice and the implementation of the TRC essential program elements required to ensure TRC model fidelity and improved outcomes for children and young people in care.

MacKillop has used the outcomes reports and the Verso System application for monitoring change for clients over time. Care staff and the therapeutic practitioner may consider multiple datasets in concert to gain insight into what is happening in the young person's life and how they can promote positive change. An example may include the data relating to the question “What appeared to be the young person's quality of sleep last night?” Simple sets of data tables open up practice possibilities to support improvements for the young people.

Following the methodology of the earlier state-wide evaluation, key client outcomes recorded to date using the HoNOSCA, the SDQ and Brann Likert Scales will be outlined. The presentation will include data collected at three time points – 0 months, 6 months and 12 months – to track progress against key indicators. Case examples will highlight the use of the system to improve practice and key organisation learning from the implementation of the project will also be explored.
Currently, the concept of social child welfare is moving in the direction of an establishment of more familiar living conditions for children and young people in out-of-home care. Historically, residential child-care institutions were comparable to closed environments in which children in care were brought up in isolation from other children and young people. Nowadays in Denmark, a set of political objectives encourages the idea of ensuring that children and young people remain in their known environments and participate in local school and leisure life, even though – for a period of time – they will have to live away from home.

The paper draws on a Critical Psychological conceptualisation of development through social participation (Klaus Holzkamp). In this perspective, growing up can, in general, be perceived as filled with challenges and dilemmas with respect to establishing relationships, taking part in communities and dealing with such tasks, requirements and interests that characterise life in and across contexts in modern society. Children learn to deal with such everyday-life challenges by taking part in communities; and, here, the point of special interest is that they learn together. In this perspective, to ‘participate’ should be construed in the sense of developing ‘a personal conduct of everyday life’ in a social life with others. This is why, theoretically, relations and networks must be understood as crucial in a personal learning what social practices are about. Thus, according to an inclusion perspective, the focal point of this presentation will be on how professionals – with focus on relations and networks – work with the expansion of social opportunities of participation for children and young people in out-of-home care.

This paper is based on a Danish practice-research project *Børn og unges netværk – et fælles ansvar* [Children and Young People’s Network – a shared responsibility]. For the period of a year, two researchers made observations within and across children’s everyday-life contexts in the course of their placement in a children’s home. Similar to previous research, our research shows that children’s personal relationships with family and friends may be fragile or have collapsed during placement. Professionals may have given up helping children to handle severe conflicts and keep the contact with important persons undergoing difficult periods in their lives. Our interviews provide an insight into the way in which children and young people living away from their family home will frequently struggle with the experience of being different, lonely and excluded from the communities in which they belong.

Observations made in respect of everyday life in a residential child care institution also show how, in practice, professionals work on the basis of complex and intricate issues that, not least from the children’s perspectives, comprise a number of dilemmas. Examples from everyday life demonstrate that there are no clear-cut solutions. Over time, the professionals themselves should develop networks across children and young people’s development contexts for the purposes of becoming enabled to research dilemmas and problem areas connected with children’s everyday life.

The presentation puts the inter-professional exploration of children’s perspectives of their everyday life in the foreground and argues that the perspective should be turned towards the development of professionals’ practices in order to expand children’s opportunities of agency within their everyday communities. The intention is to contribute to the development of professional practice theories in relation to social inclusion in out-of-home care. How can we conceptualise the cooperative development of professional practices in order to establish flexible alignments of actions relative to problems within complex issues?
Towards the Social Inclusion of Young People Transitioning from Out-of-Home Care: An Examination of the Home Stretch Campaign to Extend Australian Supports for Care Leavers till 21 Years

Dr. Philip Mendes (Monash University)

In August 2016, Anglicare Victoria established the Home Stretch campaign to lobby all Australian States and Territories to extend the transition from state out of home care (leaving care) age from 18 till at least 21 years. The intent of the campaign is to educate political leaders and the general community about the needs of care leavers, and the overwhelming social and economic case for extending care. This paper analyses the key public advocacy activities and achievements to date of the campaign. Attention is drawn to a number of factors which may alternatively help or hinder the campaign including the cost of out of home care and leaving care services, the lack of any significant political opposition to extended care, the minimal media coverage of care leaver needs, and the minimal engagement by government policy makers with local and international research evidence.
Extending Care from 18 to 21: Towards an International Evidence Base

Wednesday, 3rd October @ 10:15: Towards Social Inclusion of Vulnerable Youth (Venue: Auditório)

Dr. Iain Matheson (Research Centre for Better Outcomes from Fostering and Residential Care)

Background: In most Anglo-American countries, states, or provinces, some form of specific provision allowing young people to remain in care up to age of 21 (referred to here as ‘Extended Care’) has recently been, or is in the process of being, introduced. While defined and framed differently across jurisdictions, these initiatives allow some young people to transition from care at a time and in a way that better suits them, and is closer to the experiences of other young people and young adults leaving home. Such developments have been widely welcomed by children, young people, and care experienced adults, as well as advocacy groups, foster carers, social workers, the media, and the public. These Anglo-American developments add to the existing policy and practice experiences in other countries including Portugal, Spain, France, Germany, Belgium, Netherlands, Germany, Switzerland, Italy, Austria, Hungary, Romania, and the Republic of Ireland, where less formal Extended Care provision may be available and/or there is more flexibility on the age of leaving care.

Objectives: This paper reports on a small study on identifying the international evidence base on extending care from 18 to 21. In doing so, and in order to help guide future developments in New Zealand, the study's objectives were to identify: whether extending care ‘works’, for whom, and why; and any evidence in relation to design considerations on how to best implement such provision.

Methods: The study collected and analysed published information from (English-language): systematic reviews; research reviews; literature reviews from selected organisations, major research or evaluation studies, and select Transitioning from Care research experts. International evidence-based programme ‘rating’ websites were also reviewed.

Results: The study found that there is evidence to support extending care from 18 to 21, and that the introduction of such provision does appear to have helped some young people in their transition from care. However, across Anglo-American countries this is a fast-moving policy area, and the availability of research and evaluation studies, or other forms of published evidence, is still quite limited, and some findings from individual studies have been less compelling than perhaps anticipated. In some jurisdictions there have also been issues with the actual implementation of Extended Care.

The evidence does suggest the importance of: being clear on the particular form of extended care that is on offer; quality foster care provision and strong relationships between foster carers and young people in the first place; ongoing stable and purposeful support as young people establish themselves in education, employment or training; being open to the possibility of permanency and other opportunities and not seeing extended care as just a short-term reprieve; understanding that this is not for all and some young people will need different pathways; recognising the impact on the wider foster care system in terms of placement availability, and how long term placements are framed with prospective foster carers.

Conclusion: As well as an important right for care leavers, the research evidence on its effectiveness suggests that Extended Care is a promising policy development for those transitioning from care. The study's implications, the interface between evidence, policy and practice, and some areas for further research and evaluation, are also briefly explored. As well as researchers, advocates and policy-makers, the findings may also be of interest to practitioners and managers who are either supporting young people in, or transitioning from, care.
The aim of this communication is to capture the role of peer support in the transition to adulthood of youth leaving out-of-home care and who are committed in self-help organisations. In the general population, the transition to adulthood has been recently delayed compared to previous generations. Family support allows to prolong the duration of this transition. Contrary to this trend, the transition of young people living in out-of-home care comes with an injunction to autonomy and independence as soon as they reach the age of majority, despite their poor psychosocial conditions putting them in a position of profound inequality with their peers. Transitioning to adulthood is thus extremely difficult and violent for these young people cumulating multiple difficulties such as less schooling, health problems, family ruptures and the absence of a support network, which can result in core difficulties in their social and professional integration (Goyette, 2010; Goyette & Frechon, 2013; Goyette & Turcotte, 2004; Lacroix, 2017).

In France and Quebec, very few formal services are offered to prepare and support young people who enter adulthood at the end of child protective measures, those services don’t address all the youth and don’t promote an active exercise of their citizenship (Lacroix, Leclair Mallette, Vargas Diaz, 2018; Robin, 2009). One way to fill this lack of services is self-help organizations implemented by youth and former youth placed in child protection. Studies have shown that this kind of mutual aid impacts positively on the structural blockages of their transition (e.g.: Goyette et al., 2012). However there is still little research on the participation of these young people and most of the studies in this field focus mainly on their scarce political and social participation, highlighting their lack of commitment.

What drives these young people to engage in self-help organizations and especially what are the effects of their engagement in their transition to adulthood? Some work on child protection youth organizations defending their rights had recently appeared (e.g. Føllesø, 2004; Manser, 2011) and focuses on peer associations goals and their claims to public authorities, but there is a lack of knowledge regarding the actors who carry these claims and the impacts of peer-mentoring on their life paths.

This communication is based on a cross-country comparison study focusing on youth coming out of child protective services and who are involved in self-help organizations in France and Quebec. It is based on 9 interviews with youth involved in the RIQ, aged between 16 and 29 years; as well as on 20 interviews with youth aged between 20 and 29 years and 14 with “former youth” aged from 31 to 77 committed to the ADEPAPE in France. It is based also in field observations of associations’ activities in France and in Quebec, as well as in a documentary review.

For this presentation we will focus on the reasons that lead these youths to engage and to maintain their engagement in these self-help organizations, as well as on the effects of their engagement in their transition to adulthood. We will show that these young people experience an engagement process which evolves in time. At the beginning of their engagement, they generally find themselves in a beneficiary position, seeking help and individual needs satisfaction, but some of them eventually move to a volunteer or activist position, their motivations to stay engaged being no longer individual but collective. We will also show how this solidarity between peers, when engaged in a sustainable way, allows to acquire knowledge about their social rights, as well as providing social support and a space in which they can give meaning to their experiences.
Youth advisory groups are an innovative platform through which young service users are encouraged to engage in service and policy design. In recent years, clients’ participation in social services and policy-making has become a growing element in social services, both as a mechanism to increase efficiency, and as a tool through which clients can realize their civic and social rights. Drawing upon the 1989 Convention on the Rights of the Child, and taking into consideration that children have had the most limited access to decision-making arenas, youth participation in service and policy design may increase service quality and efficiency, social inclusion, and active citizenship. These are of special importance in the case of youths who have been taken into care.

For the last ten years the Israeli council for the child in care has operated “bridge to independence”, a program providing transitional housing and social support to youths aging out of care. One component of this program is a youth leadership group that was set up in response to three needs. First, the need to enhance transparency and accountability. Second, a desire to expand social networks of young people who age out of care. Third, a desire to foster the social and political skills of youth who aged out of care, and to involve them in national policymaking process as advocates for the rights of children in care.

Fourteen young care leavers participate in the leadership group. For the last three years this group has been meeting regularly every other week. In addition to the by-weekly meetings and the resulting activities, they participated in an annual seminar. They receive a small honorarium for their efforts. The leadership group divided into three sub-committees, one dealing with interior matters of the “bridge to independence” program, the second addressing issues of national policy, and the third planning social activities for themselves and their peers. For example, the first subcommittee presented to the management of the Council for the Child in Care a policy paper calling for extended tenure in transitional housing for care leavers who pursue academic studies. The second subcommittee met with the incoming director of the relevant department in the ministry of social welfare and presented their view about changes needed in group homes for children in care. They also conducted a symposium focusing on children in residential care as part of Israel’s first National Youth Parliament. The third sub-committee planned and implemented a day trip and a party for all the participants in the “bridge to independence” program.

There is a paucity of studies that examine whether and how young people’s participation influences decision-making processes. Previous research focused mainly on participation at the service level and did not attempt to assess the experiences and outcomes of participation in national decision-making processes. The present qualitative study aims to conceptualize the model of the youth advisory board established by the council for the child in care, to capture the experiences of youth who participated in the board, and to assess the contribution of their participation to their social networks, political skills, psychological engagement, and opportunities to engage in policy advocacy.

Data collection involves in-depth semi-structured interviews with young people who participate in the advisory group, with staff of the council for the child in care, and with government officials who were involved in participatory policy-making processes. A narrative analysis is employed to conceptualize the model, and to assess the experiences it has provided youth and practitioners, and its impacts on the lives of participants and on policy decisions.
Analysis of Residential Care Centres Directors Perspectives on Residential Care Quality: Implications for Practice from Research

Wednesday, 3rd October @ 09:45: Promoting Quality in Residential Care (Venue: Porto)

Ms. Mariana Leal (University of Porto), Ms. Ana Martins (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Ms. Sónia Rodrigues (University of Porto), Ms. Joana Campos (University of Porto)

This presentation is for a Portuguese/Spanish thematic session and aims to share some preliminary findings of a nationwide study on the quality of the Portuguese Residential Care (RC) system with Portuguese RC professionals.

**Background:** A comprehensive and ecological assessment of the quality of RC requires listening to all of those involved. RC centre Directors are considered prominent figures who are critical in promoting the quality in RC centres. Nevertheless, international research on this topic is scarce and, in Portugal, non-existent.

**Objectives:** This study aims to: a) characterize the perspective of RC centre Directors regarding RC quality; b) identify the agreement between the Directors’ criteria for RC quality evaluation and the international evidence-based standards for RC quality and c) analyse the most problematic RC quality dimensions according to the Directors’ perspective.

**Method:** Forty-nine RC centres, enrolled in a nationwide research on RC quality, participated in the present study. The Directors of these 66 participating centres (86.4% females) were interviewed using the ARQUA-P semi-structured Interview for RC centre Directors. This interview includes 142 open questions on different topics related to the running of the centre, i.e., resources, professional working tools and instruments, children’s needs and rights and labour organization and leadership. Using Nvivo software, the Directors’ discourse was classified in previously defined categories and coded on a 5-point Likert scale, according to the international standards of RC quality.

**Results:** Data analysis is still on progress. The content analysis of the Director’s answers allowed for the identification of their individual (mis)concepts of RC. Quantitative analysis’ preliminary results show that Directors positively evaluated the overall quality of RC centres. The dimensions with highest scores were related to Normalization and Integration in the Community, Coordination between Professionals and Respect for Children's Rights. The dimensions of Human Resources, Location and Equipment and Leadership presented the lowest scores. There were statistically significant differences between gender mixed and segregated RC centres regarding the following dimensions: Location and Equipment, Human Resources, Needs Assessment, Family Reunification Support, Security and Protection, Studies and Training, Normalization and Integration in the Community, Activity Plan Management, Leadership and Overall Quality. The RC Directors of gender mixed centres evaluated these dimensions more positively when compared to segregated ones. No statistically significant differences were found according to RC centre size. In 76% centres, the Directors evaluated the overall quality more positively than the researchers based on international quality standards.

**Conclusions:** These findings highlight the need for developing training programmes for RC centre Directors in Portugal aimed at raising awareness of the needs and the rights of the children in care and establishing a theoretical framework guiding RC intervention. RC directors also seem to require more leadership skills.
Portugal presents a high number of children and young people at risk, and residential care is the most used response to protect and promote their rights, aiming at meeting the needs of children and young people, enabling their education, wellbeing and integral development. Research in the area supports that the young consider the institution a safe and protective context providing the emergence of future perspectives, the transmission of values and feelings of stability and permanence, the development of internal and external limits that translate into indicators of maturity. However, studies in this area also point to the risks that may be associated with this experience, such as the fact that the family and existing relationships are removed, the dismissal and/or reduction of family accountability, and the institution becomes the main source of accountability, the emergence or accentuation of emotional, psychosocial problems and the social stigmatization and the social stigmatization of which they are often targeted, which may contribute to aggravate the difficulties of a population that was already in a situation of vulnerability.

With the objective of contributing to a deeper understanding of the factors that can differentiate success or failure paths in residential care, we conducted a multiple case study with 4 cases of young, male and female, housed in two shelters in the North region. The focus of analysis in each case was on the young himself, the case manager and a teacher. Data collection was carried out through semi-structured interviews built for this purpose, and with the young, self-report measures were also collected regarding psychosocial adjustment, attachment style, relationship with teachers and educators, and lastly about the social network of these young people. This collection was completed with documentary analysis. Following the criteria previously defined in a focus group with technicians, the team selected cases that, at the time, were evaluated as examples of successful and unsuccessful pathways. The data analysis followed the specific procedures of each instrument and in the case of the interviews the qualitative semantic analysis was carried out.

The results support the importance of looking at the different domains of the lives of young people as a whole, capable of influencing residential care experiences, reception experiences, from the experience of the application of the measure, to the support of the family through the course of residential care, and the school as a means of promotion social networking and academic success.
Adolescent’s Attachment, Quality of the Relationship with Caregivers and Emotion Regulation: A Longitudinal Study in Residential Care

Wednesday, 3rd October @ 10:15: Promoting Quality in Residential Care (Venue: Porto)

Ms. Mónica Costa (Faculty of Psychology and Education Science, University of Porto), Ms. Beatriz Melim (Faculty of Psychology and Education Science, University of Porto), Prof. Semira Tagliabue (Catholic University Sacred Heart), Prof. Catarina Pinheiro Mota (University of Trás-os-Montes and Alto Douro), Prof. Paula Mena Matos (Faculty of Psychology and Education Science, University of Porto)

Attachment theory is one of the most comprehensive frameworks for understanding social and emotional development. In residential care, it is expected that sensitive and responsive caregivers are able to help adolescents regulate their feelings of distress, enabling them to experience a sense of emotional security. Thus, residential care can provide opportunities for adolescents to experience warming, stable and secure relationships with long-lasting effects on emotion regulation. The present study examines the longitudinal contributions of attachment and quality of relationship with caregivers on adolescents’ emotion regulation in a sample of 306 adolescents, 12 to 18 aged, from both genders, living in residential care and 70 caregivers. We evaluated the effects of time 1 predictors (attachment and quality of relationship with caregivers and) on emotion regulation assessed at time 2 (6 months later). The moderating effect of adolescents’ attachment on the previous association also tested. Data was collected using dimensions of the Network Relationships Inventory (Furman & Buhrmester, 1985), the Experiences in Close Relationships–Relationship Structures Questionnaire (Fraley et al., 2011) and the Difficulties in Emotion Regulation Scale (Gratz & Roemer, 2004). Given that adolescents are clustered in institutions, we tested if the emotion regulation was nested in a higher level (residential care). Results will be discussed in light of attachment theory, pointing out the role the relationship with caregivers plays in the affective reorganization of adolescents.

Keywords: caregivers, quality of relationship, emotion regulation, attachment, semi-longitudinal
Preventing Runaways from Residential Care

Wednesday, 3rd October @ 10:30: Promoting Quality in Residential Care (Venue: Porto)

Ms. Joana Cerdeira (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Ms. Sónia Rodrigues (University of Porto), Ms. Joana Campos (University of Porto), Ms. Joana Soares (University of Porto)

**Introduction:** Runaway behaviours in Residential Care (RC) have been associated with a multitude of problems and harm to children engaged in this phenomenon, and are key indicators of the extent of the child’s danger. In Portugal absconding from care has not been prioritized in national policies, practices or research. Internationally focus has been given to socio-demographic variables at the expense of context variables. Children’s perspectives on the issue have been mainly ignored. **Objective:** The current research aims to identify protective and risk factors, predicting runaway behaviours of children in RC, considering both individual and contextual variables, taking into consideration children’s views on these matters. **Method:** 354 children placed in 33 RC centers participated in this study. Data were collected using two instruments belonging to the Portuguese Comprehensive Evaluation System for RC (ARQUA-P), (the Previous Information Request and the Interview for Children/Youth). Youth Self Report (YSR) was used to assess children’s psychological (mal) adjustment. **Results:** Individual and contextual factors have been identified to predict runaway behaviours in RC. Some variables were identified as protective factors (siblings in the same RC center, quality of the relationship with care workers and quality of leisure activities) while other variables were identified as risk factors (female gender, delinquent behaviours, substance abuse, gender segregated RC center and youth's assessment of the quality of participation). **Conclusions:** Runaway prevention might be best managed through a solid therapeutic milieu, with specific strategies required. Placements lacking in resources and activities, with overwhelmed and under-trained staff might display higher rates of these behaviours. Therefore, enhancing the effectiveness of the overall milieu is likely to decrease runaways from care. These findings help to understand the phenomenon and highlight the need to redesign a set of features of RC centers, caregivers’ practices and the functioning of the protection system when dealing with these runaway children.
Two dominant but competing discourses of family care and their ramifications for best child welfare practice exist. Despite postmodern family discourse recognition of flexibility and plurality of family patterns supporting the deinstitutionalisation of family, how best to safeguard children, whether those who are vulnerable or at risk or those who have already experienced harm remains the core care dilemma of child welfare. Generating strong emotions, concerns and opinions on the roles and rights of children, of families and of the state, these debates coalesce around whether family or state best provide care and how should this care be delivered. Parallel to the discourse which has opened up notions of a global plurality of family patterns is the international shift in child welfare legislation which recognizes that children can best be protected within and in conjunction with their family and kinship networks. New Zealand has lead an international shift in child welfare legislation since the 1990's which recognizes that children can best be protected within and in conjunction with their family-whanau and kinship networks. While this is recognized as initiative first driven by the need to respond to the needs of indigenous Maori children the approach is now widely used across many countries and cultures to underpin child protection legislation policy and practices. Despite this being heralded as a paradigmatic shift in child welfare, good outcomes for children in the child protection system still requires a range of responsive services and achieving this remains controversial.

The challenge and dilemma of constructing services that are responsive: that are protective and just for children while supporting and empowering for their families is not an easy task. Can these parallel discourses can be brought together to engage in the project of provision of best practice for safeguarding children. How can each inform the other? Or does the one negate the other? A matrix model of child welfare provision balancing the competing discourses of care provision with family and state circumstances is proposed.
Relationships between Birth and Adoptive Families when Children are Adopted from Care

Wednesday, 3rd October @ 11:45: Adoption: Relationships between Families and within the Family (Venue: Arquivo)

Prof. Elsbeth Neil (Centre for Research on Children and Families, University of East Anglia)

Background: For children adopted as babies and toddlers, post adoption contacts such as letters or meetings may take place in the context of adoptive parents and birth relatives have no prior relationship. Children are related biologically to birth relatives but may have no lived relationship in the form of memories or attachments. For children adopted at older ages established relationships with birth relatives may be present but not always positive. It is important to study how adopted young people and their adoptive parents relate to members of the birth family (and vice versa) and how and why these relationships change over time. In the UK where children can be adopted from care against their parents’ wishes there are additional issues of child protection and power dynamics.

Objectives: This paper aims to explore how young people adopted from care saw their relationships with their birth relatives over time and how these relationships were viewed and managed by adoptive parents and birth relatives. Four case studies will be used to illustrate four different patterns of birth family/adoptive family relationships across time and the case studies will be discussed with reference to relationship dynamics apparent across the whole sample.

Method: The sample consisted of children domestically adopted in the UK in the mid-late 1990s. Almost all were under age 4 at placement (mean age 21 months) and 70% were adopted from public care. The eligibility criteria were that there was a plan for the child to have either direct (meetings) or indirect (mediated letters) contact with an adult birth relative (parent or grandparent) after adoption (about half of the sample having each type). Data were collected in three waves: wave 1 – early childhood (mean age = 4 years); wave 2 - middle childhood (mean age 8) and wave 3 - late adolescence (mean age 18). Across all waves data were collected about 89 children in 65 adoptive families and 72 birth relatives from 62 families. Not all participants took part at every wave, and children were not interviewed in wave 1 (43 were interviewed at wave 2 and 32 at wave 3). This paper draws on the thematic qualitative analysis of adopted young people’s interview data collected via in-depth semi structured interviews. The case studies are based on 4 young people who participated in wave 3 (all of whom were adopted because of child protection concerns) drawing also on corresponding interviews with their adoptive parents.

Results: Plans for post adoption contact did not always result in the development of lived relationships between birth and adoptive families. In some cases contact was felt to serve other purposes, particularly meeting the information needs of all parties and promoting openness between adoptive parents and children. The four main patterns of relationships were: (1) relationships built early on and sustained through direct contact (2) relationships developed in adolescence enabled by earlier indirect contact (3) established birth family relationships closed down after adoption (4) meaningful relationships never established. Conclusion: Post adoption contact works in different ways in different families there is a need for clarity about the purposes of the contact and a collaborative approach to working towards these goals by birth relatives and adoptive parents. Where contact is indirect it is difficult for relationships to develop, though positive letter exchanges may enable future lived relationships. The maintenance of a relationship with birth parents will not be desirable for all children adopted from care, though relationships with extended family members may be positive. Regardless of whether children get to know their birth relatives, they need help to make sense of their history and family connections.
Parental Well-Being in Early Adoptive Parenthood: Challenges and Resources

Wednesday, 3rd October @ 12:00: Adoption: Relationships between Families and within the Family (Venue: Arquivo)

Prof. Rosa Regina Rosnati (Family Studies and Research University Centre, Catholic University of the Sacred Heart of Milan), Dr. Elena Canzi (Family Studies and Research University Centre Catholic University of the Sacred Heart of Milan), Dr. Laura Ferrari (Family Studies and Research University Centre Catholic University of the Sacred Heart of Milan, Italy), Dr. Francesca Danioni (Family Studies and Research University Centre Catholic University of the Sacred Heart of Milan, Italy), Prof. Sonia Ranieri (Family Studies and Research University Centre Catholic University of the Sacred Heart of Milan, Italy)

The transition to adoptive parenthood represents a particularly stressful event, but only few longitudinal studies have focused their attention on parental well-being during early adoptive parenthood. The present study was aimed at partially filling this gap, evaluating parental well-being (depression, parenting stress, couple satisfaction, and social support) during the first post-adoption year (T1=within 2 months after child's arrival in the family and T2=a year after child's arrival). In all the analyses mothers' and fathers' perceptions were compared. Participants were 56 couples, for a total of 112 parents. A self-report questionnaire was administrated to parents at two time points and it included the following scales: the Center of Epidemiological Studies Depression Scale, the Parenting Stress Index Short Form, the Partnership Questionnaire, and the Social Relationship Questionnaire. Results highlighted the existence of many adoptive parents' resources, especially a high couple satisfaction, and globally showed more continuity rather than change in parental well-being during the first post-adoption year. Implications for post-adoption support will be discussed.
Family Dynamics in Internationally Adoptive Families: A Longitudinal and Comparative Study

Wednesday, 3rd October @ 12:15: Adoption: Relationships between Families and within the Family (Venue: Arquivo)

_Dr. Esperanza León (University of Seville), Prof. Jesús Palacios (University of Seville), Dr. Maite Román (University of Seville), Prof. Carmen Moreno (University of Seville), Ms. Isabel Cáceres (University of Seville)_

Adoption research has dealt with children's outcomes much more that with adoptive family functioning and dynamics. Longitudinal studies on this topic are even more exceptional. The main focus of this paper is the analysis of some key components of the family dynamics and their relationship with some characteristics of both the children and the adults involved. The contents explored include parental stress (assessed with PSI for T1 and T2 and SIPA for T3), family cohesion and adaptability (FACES II), psychological adjustment of the children (SDQ), as well as parents' socio-demographic variables.

A longitudinal study of international adoptive families has been carried out. Two groups (adoptive and non-adoptive families and their children) were compared longitudinally throughout ten years of study. At Time 1, the participants were 98 families: 40 adoptive and 58 non-adoptive families. At Time 2, the participants were 69 families: 32 adoptive and 37 non-adoptive families. At Time 3, the participants were 59 families: 29 adoptive and 30 non-adoptive families. Data were collected in their homes at three different time points: when the children were six and a half years old, on average (T1), approximately four years later (T2) and around ten years after the first assessment (T3). The control group was matched in age with the adopted children and was studied in parallel at T1, T2 and T3.

In general, the longitudinal analyses of parenting stress showed a high degree of continuity from T1 to T2, for both adoptive and non-adoptive families, but not in T3, when there was a significant increase in the stress scores of the adoptive sample. The longitudinal analyses of family adaptability showed a good level of continuity from T2 to T3, but a decrease in family cohesion from T2 to T3 for both adoptive and non-adoptive families. Concerning the children's psychological adjustment, the longitudinal analyses showed a significant decrease of problem scores from T1 to T2 and from T2 to T3 in the non-adoptive sample, while the problem scores of the adoptees were significantly higher in T2 and T3.

At T3, the results also showed that, in the case of the adoptive families, the degree of parental stress was negatively correlated with the level of family adaptability and positively correlated to adolescents' emotional and socio-behavioral problems, while the adolescents' behavioral problems were negatively related to family cohesion and adaptability. These relationships were related to some socio-demographic variables: age at placement correlated positively with parental stress and negatively with family cohesion. Finally, a predictive model performed, for adoptive families at T3 shows that the most important predictors of parental stress were family cohesion and total score of adolescents' psychological adjustment.

The increased parental stress and the diminished family cohesion and adaptability in T3 in adoptive families, together with increased psychological adjustment problems in the adopted adolescents, are not present in non-adoptive families. For the adoptive ones, life seems more complicated for the children, the parents and the family as a whole. As the predictive analysis indicates, problems of family cohesion and adolescents' psychological adjustment have a negative impact in parental stress levels, an important indicator of wellbeing.
Parent-Child Adoption Communication within the Family: Impact on the Adopted Child's Developmental Outcomes

Wednesday, 3rd October @ 12:30: Adoption: Relationships between Families and within the Family (Venue: Arquivo)

Ms. Joana Soares (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto)

Background: Adoption has been identified as a successful natural intervention involving many gains for both the adopted child and adoptive parents, but it has also been associated to many challenges and difficulties. A common challenge across adoptive families is the task related to the adoption communication within the family, which is particularly critical in school-aged children. Research has consistently noted the benefits related to the openness in the parent-child adoption communication, supporting the children's curiosity and validating their connection to another family (the birth one). The adoption communication process also involves the respect for the children's unique perspective and feelings about their adoption experience, and the development of the parent-child emotional attunement. To achieve this parent-child co-construction/socialization of adoption (through communication), research should consider both parent and child perspectives in this process involving the family. Objectives: The present study aims to: a) analyse and compare parents' and children's perspectives on the dyadic adoption communication process; b) identify types of families considering both parents' and children's perspectives on adoption communication; c) explore the relationship between the pattern of adoption communication established within the family and parental emotion-socialization practices; and d) study the impact of adoption communication on children's developmental outcomes, such as social competence, emotion regulation and psychological adjustment. Method: One-hundred and three adopted children (59 boys), aged 8 to 10, and one of the adoptive parents participated in this study (75 mothers). They were adopted from care at the age of 3.29 on average, after living 15.80 months with their birth families and/or 23.86 months in out-of-home care (91% in institutional care). They were in their adoptive families for 5.51 years. Parents and children were interviewed on their respective perspectives about adoption communication, using the Portuguese Parents' Interview on the Adoption Process and the Children's Interview about Adoption. Data were collected at the families' homes. Results: Data analysis is still in progress. However, the first results showed significant differences between parents' and children's individual points-of-view on the adoption communication process. Parents generally presented a more positive and satisfactory perception of adoption communication than their children. Findings also revealed an absence of affective attunement within parent-child dyads, due to the disagreements found in reading each other's feelings, comfort and easiness in adoption communication. Based on these results, it is expected that, following the parents' and children's perspectives, different types of families in terms of adoption communication frequency, comfort, easiness and satisfaction with communication, feelings involved, the child's curiosity and parents' empathy for their children's birth family will be found. Bearing in mind the preliminary results showing the low parents' sensitivity/awareness to their children's emotional state during these communicational interactions, a significant relationship is expected between the patterns of adoption communication within the adoptive family and the parental emotion-socialization practices, particularly the way in which parents respond to their children's negative emotions. Finally, it is expected that children belonging to families with a more closed and non-emotion centred adoption communication will present lower emotion regulation, social competence and psychological adjustment. Conclusion: The strength of this study is the simultaneous analysis of the parents' and children's perspectives in the understanding/characterization of the adoption communication process within the adoptive family. The understanding of the emotional (dis)attunement found in these findings was only possible considering both points-of-view.
Curricular plans for citizenship formation in basic education suggest using pedagogical alternatives to put the knowledge into practice, however, it’s necessary to deepen in specific methodologies and give students opportunities of authentic participation in order to actually achieve the objective of developing attitudes, abilities and knowledge that can be transferred to life.

The purpose of the text is to document the principal findings about the implementation conducted during the 2014 through to 2016 period of the “Learning by participating” program, associated to Vía Educación, a civil association that generates opportunities for social sustainable development through the design, implementation and evaluation of educative strategies (Cárdenas, 2008). The outreach of the participation from a group of basic education students is shown in the state of San Luis Potosi, Mexico by being part of a Student Council through the development of a social intervention project for the improvement of their environment.

By systematizing the socio-educative intervention experience, an instrumental case study (Stake, 2002) was constituted in which the facilitation practices are described, finding that children are able to participate from self-management and self-regulation with an orientation towards the common benefit achieving a sense of self-efficiency, however, some scholar culture elements can limit these achievements from being sustainable in the educative center. The obtained results warn about the need of including in the planning process of social development projects, the intervention in the coexistence culture at institutional level for the promotion of democratic practices within all its instances, actors and procedures.
The University Children’s Library from the UAQ Creating Spaces to Develop the Well-Being of Boys and Girls in Queretaro, Mexico

Wednesday, 3rd October @ 12:00: The Promotion of Welfare in Mexican Children and Young People: Multiple Perspectives (Venue: Porto)

Dr. Martha Beatriz Soto Martínez (Universidad Autónoma de Querétaro)

The Autonomous University of Queretaro through the psychology faculty, with the project “University Children´s Library” (BIUAQ in Spanish), has had, for the past 8 years, the purpose of creating spaces that can develop the well-being of children from 4 months to 12 years, through courses such as reading, writing, experiment making and plastic activities. The courses take place inside UAQ´s facilities, currently counting on three spaces located in Queretaro, San Juan del Rio and Cadereyta. The work that is done requires the participation of family members, with the objective of making parents and children being together, sharing and enjoying the time that they spend together during the courses.

From the same project, for the past four years, we have been working with volunteers from the Mexican Social Security Institute (IMSS in Spanish). Our participation through courses such as “repairing lecture” attends children and teenagers that are hospitalized. After showing our work we were invited to collaborate in the Hospital of Specialties of Children and Woman and the Ambulatory Care Medical Unit (oncological treatment in children, teenagers and adults). The work that is done in hospitals has as its main objective that of accompanying and “caressing with words” children, teenagers and family members that are going through a painful moment not only physically but emotionally. Courses are provided by university students in psychology (basic area, educative and clinical) and in educational management, who in a voluntary way give 3 hours a week of their time to take part in BIUAQ projects. Students receive 3 preparation courses per semester and the volunteering lasts one year. It is worth mentioning that there are students that start their volunteering while they are in basic area and continue with their specialization area having in total 3 years in the project.

The work that has been done allows us to see the experiences that parents have when they share with their children in non-school spaces such as BIUAQ libraries, as well as in hospitals, where being together, the approachment, listening out and dialogue, having as a pretext the reading to give moments of being and privacy. There is a lot to be done related to the work with young children and their parents, as well as the issue with a vulnerable population, hospital projects, so it is needed to generate more spaces for the dialogue and keep betting on work with university students.
Dropping Out and Returning to the Education System in the High School: Experiencies and Interventions

Wednesday, 3rd October @ 12:15: The Promotion of Welfare in Mexican Children and Young People: Multiple Perspectives (Venue: Porto)

Dr. Gabriela da la Cruz Flores (Universidad Nacional Autónoma de México. Instituto de Investigaciones sobre la Universidad)

Educational research has focused on the analysis of the causes of school dropout. However, inquiries that explore the experiences of young people returning to school are limited. The purpose of this qualitative study was to analyze the experiences of the students who returned to high school spaces. For the collection of information, the focus group technique was used. The design of the study allowed to explore mainly the causes of the abandonment associated with individual and intra-school factors. The narratives reveal that some experience in the labor field generated a reflective process in the participants about their future, which rethought their expectations about education. This type of reflexive processes allows young people to assume greater autonomy and responsibility in decision-making. The experiences of young people who return to school can be of high value to mitigate possible causes of school dropout from the educational action.
All kinds of social phenomena like the rise of poverty and violence, the social welfare services deterioration, lower quality of life and the violation of basic human rights have an impact in the development and the well-being of boys and girls.

The child’s well-being has been motive of global concern. UNICEF has established six indicators of child welfare: Education, Health and security, material well-being, familiar and social environment, vulnerable childhood and lifestyles. Among the education indicators and lifestyles, the importance of the development of reading competencies in boys and girls and the access to books have been emphasized.

Considering that reading promotes child welfare, because reading capacities set the grounds for the development of other cognitive, social and emotional abilities, the work made in the Community Center of the Faculty of Psychology of the National Autonomous University of Mexico, located in the south side of Mexico City is presented.

The people from the neighborhood where the community center is located share some characteristics: low economic resources, average school grade of Elementary school or Middle school. The main occupation in the area is small commerce or informal works and the main problems they have in their community are: insecurity, drugs and alcoholism, violence and family disintegration.

The reading hall has three main objectives: a) promotion of reading and writing in the community; b) professional training of the students of the Faculty of Psychology of the UNAM, other Faculties and other universities, in the promotion of writing and reading; c) the research of literate practices in the community.

The activities to promote reading and writing in the community are based on the following theoretical approaches: constructivism; whole language; learning communities; project-based learning.

Considering the needs of the population, and taking a community perspective in which the community knowledge is respected and used as a bridge for the academic learning, in the Reading Hall courses have been given addressed to babies, kindergarten kids and elementary school kids, teenagers, mothers and fathers, teachers and others. It's important to say that the courses are applied by psychology students, who are under the guidance and continuous supervision of a teacher from the Faculty of Psychology of the UNAM.

After 14 years, the reading hall is a network of teaching and informal learning where each member of the community who go is a potential educator and apprentice, with the ability to teach and learn, because there is no age for learning, anyone can learn at any age and during their whole life. In this way, adult education (parents, educators and members of the community in general) is an essential condition for the well-being of children and young people, as well as for the community and society.
Children’s Participation in Mexico’s Child Protection System

Wednesday, 3rd October @ 12:45: The Promotion of Welfare in Mexican Children and Young People: Multiple Perspectives (Venue: Porto)

Ms. Natalia Valencia (Universidad de Sonora), Dr. Mónica López López (University of Groningen), Dr. Martha Frías Armenta (Universidad de Sonora)

Mexico ratified the Convention on the Rights of the Child (CRC) on September 21, 1990. Article 12 states the right of children to express their opinions, to be heard and to be taken into account. Likewise, it conceives children as subjects of rights, which implies that they will not only be seen as receivers of the decisions that adults make about them, but they will also be considered capable of forming their own opinions, expressing them, and providing useful perspectives and experiences. In December 2014, Mexico published the General Law on the Rights of Children and Adolescents, which seeks to overcome the tutelary approach and recognize children as rights holders, in accordance with the provisions of the CRC. This new rights-based approach states that as children and adolescents develop their autonomy, adults should provide them more space to make their own decisions and claim their rights. In the law, participation is a guiding principle, so it must be transversals in all their rights. The objective of this study is to analyse the legal documents relevant for the protection of children and adolescents, and to identify if and how it is stipulated that children be listened to and taken into account. **Method.** The definition of meaningful participation and its three dimensions were used as a coding scheme to analyse the relevant documents for the Mexican child protection system. **Results.** In the General Law on the Rights of Children and Adolescents, the three dimensions were found; however, in the documents for its application, such as the regulations, practical guide and procedures, these dimensions were not found. **Conclusions.** The law complies with the provisions of the convention, however, there is a gap between the law and other relevant documents. It is necessary to operationalize how, when, and by whom the participation of children should be directed, for this it is necessary to train professionals in participation and make adjustments in the documents to clarify ambiguities.
Across Europe, young people who have experienced out of home placement are at increased risk of disadvantage relative to the general population, in relation to indicators including educational achievement, physical and mental health, homelessness and involvement in crime (e.g., Meltzer et al. 2003; Firdion 2006; Stein & Munro 2008). However, to support young people in their transitions from care to adulthood through policy and professional development, it is necessary to attend to positive experiences and outcomes as they evolve in the intersection between contexts, systems and the lived experience of young people's everyday lives in time. 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 and NOVA. The research adopts a cross-country comparative approach to understanding the experience of positive ‘outcomes’ for care experienced young people. Regardless of the apparent comparability (or not) of two countries, ‘concepts cannot be separated from contexts’ Hantrais (2009, p72); even superficially similar or geographically proximate countries will differ in contexts such as population demography, over-arching policy objectives, and understandings of the role of the state in child and family lives (Boddy et al. 2011). But cross-national research can offer fresh perspectives on entrenched problems, questioning the inevitability of existing policy and practice frameworks by looking at approaches in countries which are both similar and dissimilar, albeit in different ways (Baistow and Wilford 2000).

The Against All Odds? study incorporates secondary analysis of national administrative data, in-depth qualitative longitudinal research with care leavers in each country, and – as a contextualising framework for the cross-national analysis – a cross-national documentary review of relevant legislation and policy frameworks which are pertinent to the situation of care experienced young people as they make transitions out of child welfare services. This analysis also serves as a contextualising framework for qualitative analysis of interviews with young people, through an approach to case-based research that enables ‘the application of explanations that are particularistic to a set of conditions for a particular person in a particular context and location that may not be ideal typical for a country pattern’ (Brannen 2005, p2). The aim is to illuminate the ways in which wider contexts, including policy and service frameworks, can support or disrupt care experienced young people’s transitions.
The purpose of this paper is to analyse successful transitions to adulthood amongst young people in care from an ‘objective’ and ‘subjective’ point of view. By drawing on quantitative as well as qualitative data we ask ‘What is successful transition for young people in care?’.

Defining successful transition has traditionally been marked by completion of post-compulsory education and employment (Schoon, 2015). However, studies show that care leavers are at risk of poor outcomes relative to the general population, especially in relation to education and employment (e.g. Olsen et al., 2011; Stein and Munro, 2008).

At age 18-30, 50 % of young Danes formerly in care are in the NEET group compared to 17 % in the general population and about a third of the care leavers have completed post-compulsory education at age 25 compared to about two-thirds in the general population.

In this paper, we use administrative data on young people born in 1988 who have been in out-of-home care to investigate: What makes some care leavers end up doing well as young adults, as they go against all odds and complete post-compulsory education? We use sequence analysis and find 4 different educational pathways. Then we analyse what factors (care history, stability, parental background, mental health) make an impact on the probability of being in the ‘against all odds’.

Drawing on biographical interviews with 24 care leavers aged 17-30 we then ask: what do the young care leavers define as positive outcomes and how do they define the social changes that made the positive difference for them in their transition to post-compulsory education and/or the labour marked? In the discussion we contrast the findings from the two types of data.

The paper draws on work conducted for the cross national project ‘Against All Odds’ funded by the Research Council of Norway. This presentation is part of the symposium “Against all odds – a three country comparison”.

Mrs. Mette Lausten (VIVE - The Danish Center for Social Science Research), Mrs. Jeanette Østergaard (VIVE - The Danish Center for Social Science Research)
The Role of Aftercare Services in a Norwegian Sample Doing Well

Wednesday, 3rd October @ 12:15: Against All Odds: A Three-Country Comparison (Venue: Arrábida)

Dr. Elisiv Bakketeig (NOVA (Norwegian Social Research), Oslo Metropolitan University), Dr. Elisabeth Backe-Hansen (Norwegian Social Research (NOVA), OsloMet-Oslo Metropolitan University)

Our purpose with this paper is to develop much-needed knowledge about how care leavers are able to utilize the services offered by CWS, and explore whether the services that they are offered are experienced as timely and relevant. Research tends to show that too few care leavers receive aftercare, that the services do not last long enough, and that they do not sufficiently address the needs the care leavers themselves put forward. In particular, this pertains to social, emotional, economical and practical support.

This study targeted care leavers who were doing well (studying or working when they were first interviewed). Twenty-four care leavers were recruited in Norway, Denmark and the UK, totaling 72 persons aged between 16 and 32 at the time. They consisted of three subgroups; at the end of their teens, in their early and late twenties/early thirties. In this paper, we present analyses of interviews with the 16 young adults who were old enough to have received aftercare services. Results from a limited sample are not generalizable in the statistical sense, although these young men and women did not differ significantly from other young people in public care when it comes to risk factors connected with their lives prior to moving into care or their experiences of stability and instability while in care.

In Norway, aftercare services may be offered between the ages of 18 and 23, subject to consent from the young person. Such services are not mandatory, and depend on resources and prioritization at the municipal level. State regulations exist, but these are not always followed locally.

Our point of departure for the analyses was that timely and efficient aftercare services must be understood in a relational perspective. On the one hand, the young adults need scope and opportunities to exert agency in relation to their social worker, and in relation to decisions about the services they are offered. This includes being in a process with their social workers, ensuring that services are flexible and last long enough. On the other hand, the social worker needs to have a supportive relationship with the care leaver, which is developed over time, and which ensures a dialogue between the two where both can voice their views and collaborate towards a timely and good plan for the care leaver.

We found that one of the 16 did not need aftercare services, as her former foster family gave her all the help she needed. Two of the others had refused aftercare because they did not have a constructive relationship with their caseworker. Of the remainder, five had positive experiences with aftercare, built on the care leavers experiencing that the social workers had recognized their needs and acted accordingly. The rest felt they had been offered insufficient support as services were not tailored to the young person's needs, or did not last long enough.

Our results are in line with findings from other studies of care leavers' transitions to adulthood. The elements associated with positive transitions (gradual transitions, flexible support and agency) were highlighted by those who were satisfied with their services, and were asked for in the accounts from the others. A relational perspective proved useful by enabling us to look at several important elements together, instead of focusing on for instance support or participation or the relationship with the social worker.
This paper is part of a cross national project ‘Against All Odds’ funded by the Norwegian Research Council and will be presented in the symposium “Against all odds – a three country comparison”.
Internationally, research has highlighted disruption to the educational trajectories of young people in care, documenting concern about disruption and poor educational outcomes (DfE, 2015; Stein & Munro, 2008). Recent analysis in England shows that those who experience greater disruption (such as multiple placements) are at greater risk of poorer educational outcomes (Sebba, Berridge, Luke et al., 2015). Yet there remains limited research focused on the experiences of those who attain educational success – even when their care pathways include multiple placements or significant disruption. This paper forms part of a cross-national study which attends to the experience of care leavers who are in education, employment or training, addressing significant gaps in our understandings of how young people can be better supported to achieve educational milestones.

We present findings from English data arising from qualitative longitudinal research from a three-country international study (Against All Odds?, led by Elisabeth Backe-Hansen) involving creative interviewing methods with care leavers (aged 16-30 years) who were also in education, employment or training. The analysis extends our understanding of the experiences of those who achieve educational ‘success’, whilst comparing the factors that have made a difference to those who have followed ‘normative’, ‘on time’ educational pathways, and those who have achieved educational ‘success’ despite delayed, disrupted and non-linear trajectories. The assumptions inherent in administrative datasets about ‘normative’ timing of transitions are highlighted through this analysis, exposing the routine way in which the educational achievements of those who have been in care are underestimated. The need for a flexible education system, and leaving care entitlements, which take into account the disruption experienced by young people in care and the consequent possibility of delayed educational pathways, is discussed.
Youth Safety and Well-Being: From the Inside-Out and Outside-In

Wednesday, 3rd October @ 11:45: Perceptions of Safety in Child Welfare: Contrasting Child and Adult Perspectives (Venue: Infante)

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

Objectives
A series of studies by the author and colleagues using different methodologies will be drawn upon to explore the notion of safety and well-being in child welfare. The notion of inside-out and outside-in refers to the differing perspectives and life-experiences of those with lived experience in care, whether in residential or community-based services, and those without such experience. While all children in care have experiences living inside the child welfare system, only some adult helpers (e.g. foster carers, child and youth workers, psychologists, counsellors) do; most have lived outside the care system, and thus have an outside experience and perspective of what it is like to live inside the system.

Practice suggestions based in research will be shared.

Methods
The presenter has used a variety of methods for trying to understand the notion of safety (and related notions of risk, trauma, pain, love and well-being) in the child welfare system. These methods range from direct practice in residential care, literature reviews, interviews, thematic analysis, grounded theory development, policy and legislation analysis, and - most recently - dialogic inquiry. Some of the ethical and methodological issues pertaining to researching experiences and perspectives will be touched upon in order to provide some context for the discussion of research findings.

Research publications that will be drawn upon include Pain, Normality and the Struggle for Congruence (Anglin, 2002), “We don’t feel that love” (Scott & Anglin, 2016), “From a ward to award, and beyond” (Zaharieva, Anglin & Rutman, 2017) and “Understanding and responding to pain-based behaviour: From the inside-out and the outside-in” (Anglin and Zaharieva, in process).

Results
The range of studies drawn upon for this presentation encompass many findings relevant for child and youth work practice. These include the uncovering of some key themes relevant for bridging child and adult perspectives as well as some strategies, templates and tools for more responsive and therapeutic practice (e.g. “double distortion”, “the cruel paradox of resilience”, “the language of pain”, “everyone feels “x”, some more than others, this is how, this is why”, “masquerade” and “the 8 stages of healing”).

Conclusions and Implications
Finding ways to not only listen to young people in or from the care system, but also discovering means for amplifying their voices and translating their experiences into improved adult action is the central purpose and outcome of this research program. Several implications for practice, policy and further research will be highlighted.
“Dragged into a World We Shouldn’t Have Been In”: Findings from a Study Exploring Safety, Sexual Abuse and Exploitation & How Residential Care Can Be Improved

Wednesday, 3rd October @ 12:00: Perceptions of Safety in Child Welfare: Contrasting Child and Adult Perspectives (Venue: Infante)

Dr. Tim Moore (Australian Centre for Child Protection, University of South Australia), Dr. Jodi Death (Queensland University of Technology)

In 2017, the Australian Royal Commission into Institutional Responses to Child Sexual Abuse handed down its findings. Over five years, the Commission highlighted the significant risks children and young people in residential settings experience, particularly in relation to adult-child and peer sexual abuse and sexual exploitation by adults outside of the residential system.

To inform the Royal Commission, a series of studies were conducted to explore children and young people's understanding and experiences of safety and to develop youth-informed approaches to preventing and responding to young people's safety concerns. 27 children and young people living in residential care characterized units as being physically and emotionally unsafe and identified a range of threats to their sexual safety.

The importance of empowering children and young people and providing them with stability, of establishing and enabling trustworthy relationships with adults within and outside of residential care, of appreciating the significant risks experienced by young people (particularly peer sexual abuse and exploitation) and training and supervision to staff to effectively manage threats were consider essential. However, participants identified a number of significant barriers to their protection: including a lack of confidence in staff, mismatching of residents, limiting ideas about young people in care and a system that failed to understand and prioritise children's safety from sexual abuse.

This paper will provide an overview of the findings of the Safe and Sound qualitative research project and the major themes identified by the Royal Commission. It will draw heavily on the views of children and young people and present their recommendations about how residential care units and systems might further protect them from harm and respond when they are abused or exploited.
Research Ethics in Residential Care: A Model for Working with Vulnerable Young People

Wednesday, 3rd October @ 12:15: Perceptions of Safety in Child Welfare: Contrasting Child and Adult Perspectives (Venue: Infante)

Dr. Jodi Death (Queensland University of Technology), Dr. Tim Moore (University of South Australia)

Objectives: Young people in residential care are often in vulnerable situations and yet have important insights into their lives, making them credible and worthwhile research participants. The centrality of children and young people's voices is embedded in the United Nations Convention on the Rights of the Child and is becoming of increasing importance to researchers working in areas that impact on the lives of children. Despite increased awareness of their need for involvement, there is often hesitancy to ask children and young people who have experienced trauma or increased vulnerability to engage with research processes. Whilst caution is warranted, failing to adequately engage young people meaningfully quickly results in the marginalisation of their perspectives, needs, desires, and does not recognise their autonomy and empowerment. The need to involve children and young people in research goes beyond viewing them as objects of the research to engaging them in determining how research should be conducted. This paper explores the specific approach taken in research conducted for the Australian Royal Commission into Child Sexual Abuse in Institutions. The project considered young people's perspective of safety in residential care.

Methods: This study utilized a number of strategies to respectfully engage with young people in residential care. The study established a steering group of young people in residential care which provided early consultation and guidance to the project and later on results once data was collected. In total, twenty-seven children and young people aged between 10 and 21 years were subsequently interviewed. The study developed a detailed consent process that will be outlined in this paper. Further, rather than directly asking young people about their thoughts and experiences of risk and sexual assault, young people were asked to respond to a number of vignettes and rate likelihood and consequence. This enabled young people to self-direct to more personal perspectives if desired, whilst also enabling meaningful participation if they did not wish to speak of personal experiences.

Results: The detailed approach to consent, as well as the respect for the voices and autonomy young people, taken in this study resulted in a model for working ethically with young people. The model acknowledges the vulnerability of young people in residential care, their rights to voice and their credibility as research participants.

Conclusions/Implications: This model demonstrates that it is possible to work with vulnerable young people in positive ways that respect their autonomy, their value and importance in research, and addresses the ethical imperatives in doing so.
All homes require structure, guidelines or “rules” in order to ensure the physical and emotional safety for those living in the home. However, children and youth who have experienced maltreatment in their family homes are particularly in need of an out-of-home environment to provide them with a sense of physical and emotional safety necessary for healing (Bath, 2015, Perry, 2017). However, the threat of experiencing harm while in out-of-home care due to intrapersonal, interpersonal or environmental risks exists, and out-of-home programs must operationalize “safety” into a set of rules and a structure so that safety can be secured for a particularly vulnerable group of young persons.

Research Questions
This presentation will use qualitative data to answer the questions “When adults focus on making things safe in out-of-home care, do youth feel safe?” (Moore & McArthur, 2016). Youth were also asked to critique a conceptual definition of restriction which was “the way in which adults in a youth’s life have anticipated that limits need to be made for the youth’s safety, developmental and therapeutic needs” (Rauktis, Huefner, O’Brien, Pecora, Doucette, & Thompson, 2009).

Method
Six focus groups were conducted in different regions of Pennsylvania over a four-month period with a total of 40 young adults ages 18-20 participating. Each group was facilitated and co-facilitated by a researcher and a foster care alumnus. Groups were digitally re-coded and professionally transcribed. A theoretical (analyst-driven) thematic approach was directed by the research question rather than allowing the questions to emerge from the data (Braun & Clarke, 2006). Three researchers independently read the transcripts and identified themes related to what adults did to make the home safe, and how those actions made youth feel in regards to their safety. Themes were then coded by the readers using NIVO 11, a qualitative analysis software application and then compared for consistency and condensed or expanded.

Results
The preliminary analyses identified that youth believed safety was translated into a series of rules, and the intent of the rules was to protect the foster parents, staff, and the agencies involved in their care, rather than the youth. The rules did not make them feel safer; rather, the rules made them feel powerless and voiceless. However, some youth recognized the necessity of rules to create environment and emotional safety: for these youth, rules were seen as structures to help to manage behaviors and to create predictability and order. In summary, a theme in these transcripts was the lack of voice and the absence of adults listening about what really matters in creating a safe out-of-home environment. Although youth described many safety measures, it did not result in the perception of a “safe home” regardless of these measures.

References:
Moore, T. & McArthur, M. (2016). ‘You Feel It in Your Body’: How Australian Children and Young People Think...


The Role of Adult-Youth Relationships in Supporting Youth Feelings of Safety in Residential Child Care

Wednesday, 3rd October @ 12:45: Perceptions of Safety in Child Welfare: Contrasting Child and Adult Perspectives (Venue: Infante)

Dr. Deborah Sellers (Residential Child Care Project, Cornell University), Dr. Lisa McCabe (Residential Child Care Project, Cornell University)

Objectives: In the US, safety is one of three objectives of the child welfare system. A sense of safety underlies the ability of young people to benefit from therapeutic elements of residential care. This study examines feelings of safety and the role of adult-young person relationships in supporting feelings of safety among children in residential care.

Methods: Implementation of the Children and Residential Experiences (CARE) model includes anonymous collection of surveys from staff and children. Children's views about their experiences in care are particularly significant because reporting these perceptions to agency leadership and staff often serves as a powerful tool for motivating and demonstrating changes in staff practice and the quality of care. The Youth Perceptions Survey (YPS), a closed-form, self-administered anonymous survey developed by Cornell University researchers, measures the quality of the relationships children ages 8+ have with their care workers. Questions focus on the extent to which workers listen and understand the child's concerns (e.g. listening to understand why you acted that way), promote their competence (e.g. helping you to understand yourself better), and are engaged (e.g. letting you know that they really cared and wanted to help) and flexible (e.g. giving you time and space to calm down if you need it). The YPS survey also includes the question “I feel safe here” and, on some versions, “I feel safe confiding in staff” with response options of never, rarely, sometimes, usually, and always. Staff surveys ask “Children feel physically safe here” and “Children feel emotionally safe here” with five response options ranging from strongly disagree to strongly agree.

Two sets of analyses are reported. First, child and staff perceptions of child safety are compared using surveys completed between spring 2017 and summer 2018 by 237 children and 505 staff in seven agencies. Second, factors associated with child perceptions of safety are explored using YPS surveys completed by 506 children in twelve agencies that participated in a four year evaluation of CARE that began in 2010.

Results: In the two samples of children, the distribution of responses to “I feel safe here” did not differ significantly. About 64% of children report that they usually or always feel safe; 15% report rarely or never feeling safe. In five of the seven agencies in which staff and children concurrently completed surveys, staff were more likely to agree or strongly agree that children feel physically and emotionally safe here than children are to report usually or always feeling safe. In two agencies, staff and child perceptions of child safety were very similar.

In the CARE evaluation sample, the quality of the relationship with staff is highly associated with feeling safe; a one point (on a 5-point scale) increase in relationship quality increases the feeling of safety by .87 (p=.000). Child age, gender, race, type of placement, and length of stay are not related to perceptions of safety, but higher SDQ scores are associated with decreased feelings of safety. When the extent of safety confiding in staff is included, the impact of relationship quality drops to .65 (p=.000) while feeling safe confiding in staff increases perceived safety by .19 (p=.000).

Conclusions/Implications: Across agencies, the quality of the relationships between children and the staff who care for them is strongly associated with the extent to which children feel safe. Feeling safe confiding in staff may mediate the association between relationship quality and perceived safety. Staff practices that improve the quality of their relationships with children and/or facilitate children’s feeling safe confiding in staff may increase children’s feelings of safety and thus their capacity for benefiting from residential care.
This presentation focuses on matching as the connecting of children in care and foster families. The definition used includes the decision-making process to pair together children and foster families as well as the process of placing children into that household. Matching is theorised as the cornerstone of placement success. First, the presentation presents findings from an international scoping review on matching in foster care, which builds upon the Keijlmans et al. (2016) review to incorporate studies of children in care's reports of the matching process as well as more recent studies. The current literature indicates that placements are often unplanned and not child-centred.

Next, the presentation covers findings from primary research done by the Rees Centre at the University of Oxford in partnership with Fostering People, an independent fostering agency, and Rotherham Metropolitan Borough Council in England. The research included focus groups with in total 19 young people, 21 foster carers, and 5 social workers as well as secondary analysis of individual interviews with young people who moved from residential care to foster care, a focus group with 11 policymakers, and open-ended questionnaires with 11 young people, 20 foster carers, and 7 social workers. The research uses thematic analysis (in NVivo) to analyse these transcripts. It explores their perceptions of their experiences, usefulness of the information provided during matching, and suggestions to improve the matching process. In particular, research findings highlight conflicting beliefs in crucial elements to the matching process (e.g. visits and young people's choice) and the important role of ‘chemistry’ between child and the household (Sinclair & Wilson, 2003).
Breakdown of Foster Care Placements in Flanders: Prevalence and Associated Factors

Objectives
In Flanders, family foster care is increasingly the option of choice for children in need of out-of-home care. However, foster care is a vulnerable intervention as is shown by the high number of placement disruptions. Knowledge regarding breakdown in Flanders remains scant. This study aimed at investigating the prevalence of placement breakdown in Flemish long-term foster care, and the association of breakdown with foster child, foster parent and placement characteristics.

Method
Case files of 309 Flemish foster children out of two provinces placed in long-term family foster care between 2005 and 2007 were analysed using a research window of 6 years.

Data-analysis
First, using descriptive analyses, differences regarding placement ending, foster child, foster family and case characteristics between provinces were examined. Next, Cox regression was used to examine the association of risk factors with duration of placement before breakdown. Third, all significant variables were inserted in one Cox regression model.

Results
After six years 208 placements (67%) had terminated: 90 (29%) placements broke down and 118 placements (38%) ended positively. Foster child’s behavioural problems (n = 64, 71%), conflicts between birth and foster parents (n = 38, 42%) and parenting problems of the foster parents (n = 26, 29%) were the main causes of placement disruption. Univariate Cox regression showed that six variables were significantly associated with breakdown. Including all six variables and the variable province in one Cox regression model resulted in a significant model ($\chi^2 = 72.299; df = 7; p < 0.001$) with three significant variables. The risk of breakdown increased with the age of the foster child at admission (OR = 1.098, $p < .001$) and its level of behavioural problems at time of placement (OR = 1.176, $p < .005$). In addition, breakdown risk decreased when the foster child received additional treatment (OR = .458, $p < .005$).

Conclusion
Consideration of the aforementioned factors is important in view of the appropriateness of a family foster care placement. Furthermore, behavioural problems should be assessed prior to placement and effective support should be offered to the foster child and the foster parents.
Predictors of Foster Children’s Mental Health: A Three-Wave Longitudinal Study

Wednesday, 3rd October @ 12:15: Placement Success: How to Get There? (Venue: D. Maria)

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

Objectives: Foster care is considered a relatively good out-of-home placement option by professionals and professional institutions. However, researchers disagree about the effects of foster care on children’s developmental outcomes (Ainsworth & Hansen, 2014; McSherry & Malet, 2017). Foster placements are not as stable as one would hope (Minty, 1999). In addition, studies on foster care have repeatedly revealed that foster children’s lives are characterized by mental health problems, not just before but also during foster care. For example, a recent meta-analysis showed that foster children run a higher risk of mental health problems than children in the general population (Goemans, Van Geel, Van Beem, & Vedder, 2016). However, the development of foster children likely depends on characteristics associated with the foster child, the foster family, and the foster placement. In this study we aim to establish why some foster care trajectories are more successful in terms of foster children's mental health than others. We examined which factors are predictive of the mental health (internalizing, externalizing, and prosocial behaviors) of foster children using a longitudinal design.

Method: The participants in this three-wave longitudinal study consist of 432 Dutch foster children residing in regular foster care. Participants (53.2% boys) were between 4 and 17 years old (M = 10.90, SD = 3.81). Mean time in current foster placement at the first wave was 58.98 months (SD = 50.61). Foster children were followed from October 2014 till October 2015, throughout their stay in the foster family. Each wave, foster parents were asked to complete a questionnaire containing questions about the foster child, the foster family and the foster placement. To measure the mental health of the foster children, de Dutch version of the Strengths and Difficulties Questionnaire (SDQ) for parents was used (Van Widenfelt, Goedhart, Treffers, & Goodman, 2003).

Results: To examine the change in foster children’s mental health over time and how this change depends on characteristics related to the foster child, the foster family, and the foster placement, we used multilevel modeling using R (R Core Team, 2018). We analyzed three separate multilevel models for three different mental health outcomes: internalizing behavior problems, externalizing behavior problems, and prosocial behavior problems. Our preliminary multilevel models showed that internalizing behaviors were generally stable over time and did not vary between foster children. For externalizing and prosocial behaviors, however, change over time varied between foster children. Several foster child, foster family, and foster placement characteristics predicted variations between individuals. Both internalizing, externalizing and prosocial behaviors were predicted by foster parents’ stress. In addition, foster children's age at T1 was a predictor of internalizing and externalizing behavior. Prosocial behavior was predicted by positive parenting and type of foster placement (viz., kinship foster families). SES and negative parenting were predictors for internalizing behavior.

Conclusions: This study demonstrated a relatively stable mental health of children in foster care over time, but differences were observed between foster children, indicating that developmental trajectories of foster children vary. Foster children are a diverse group with respect to their behavioral functioning, with some children showing relatively normal, and some children showing (sub)clinical levels of behavioral problems. Foster parents’ stress appeared to be an important predictor of foster children’s mental health. It therefore seems important to consider foster parents’ stress in screening and interventions, in order to promote foster children’s mental health outcomes.
In most European countries, when it is necessary to remove a child from their family, the preference is to place them in foster care rather than residential care. Foster care is based on the principle that every child has the right to live in a family environment. Foster carers are expected to work with social services and with the biological family of the looked after child while providing safety and stability in a nurturing and caring environment, always accounting for the looked after child's individual needs.

This presentation examines the associations between skills of foster carers and the outcomes of looked after children in order to explore key skills needed by foster carers performing this complex role. This was investigated in the English and Portuguese foster care systems, which have similar aims and selection processes of foster carers.

To pursue this goal, two studies were conducted. Study One aimed to explore the skills of good foster carers and how foster care placement success can be measured, through the use of focus groups ($N=99$) with a diverse sample of social workers, foster carers, care leavers (within five years of leaving care) and looked after children (16-17 years old). Study Two aimed to explore the associations between the parenting and professional skills of foster carers, the emotional, social, and behavioural outcomes of looked after children, and the quality of their relationship, through the use of survey methods with a large sample of foster carers ($N=793$). For this purpose, the following questionnaires were used: the Casey Foster Applicant Inventory Instrument, which measures skills of foster carers linked with parenting and professional roles, the Strengths and Difficulties Questionnaire, which examines the emotional, social and behavioural difficulties of looked after children, and the Child-Parent Relationship Scale, which evaluates the quality of the relationship between foster carers and looked after children.

In Study One, it was found that all stakeholders found the personality of foster carers extremely important, but the views of the English and Portuguese stakeholders diverged on the role of foster carers. In England, foster carers were perceived as professionals, whereas in Portugal they were perceived as substitutes of the biological family, therefore the focus was on the parenting aspects of the fostering role. The findings of Study Two confirmed associations between the parenting and professional skills of foster carers, the emotional, social, and behavioural difficulties of looked after children, and the quality of their relationship. Nonetheless, the carer-child relationship explained a much larger proportion of the variances of the difficulties of the looked after children, in comparison with the professional and parenting skills of the foster carers.

In conclusion, the quality of the relationship between the foster carers and the looked after children was more important than the professional and parenting skills to explain the outcomes of the looked after children. Implications for policy and practice on the English and Portuguese child protection systems will also be presented.

**Keywords:** Child protection systems, Foster care, Looked after children's outcomes, Foster carers' role, Carer-child relationship
Aim: The aim of this presentation is to outline the value of conceptualising the educational 'outcomes' of care-experienced individuals as both ongoing and evolving by drawing on data from an ongoing PhD study of the educational journeys of care-experienced adults, now aged 25-35, in Ireland.

Three key objectives lie at the heart of this presentation:

• 1) To outline the educational progress and aspirations of care-experienced adults, now aged 25-35;
• 2) To highlight the value of conceptualising the educational 'outcomes' of care-experienced adults using a long-term perspective, and;
• 3) To propose a more flexible conceptualisation of 'outcomes' as ongoing and evolving during the life course of care-experienced adults.

Context: Education is often one of the key outcomes examined when considering the 'success' of a child's placement and how children in care and care leavers fare during and after spending time in out-of-home care. The low educational attainment of children and young people in care and leaving care is well-established in a continually-growing body of international research. To date, the focus of much of this work has been on educational attainment and outcomes at particular points in time e.g. at the point of completing compulsory education and when ageing out of care. This has provided detailed and necessary information that helps us to understand how care-experienced children and young people progress in school and immediately after leaving care. However, emerging data suggests that as care leavers get older, they pursue various educational opportunities (Duncalf, 2010). In an effort to build on this emerging knowledge, this presentation will highlight the educational journeys of a group of care-experienced adults now aged 25-35, with a particular focus on 'where they are now' and what they hope to do in the future. Drawing on this information, this presentation seeks to stimulate discussion regarding how we conceptualise 'outcomes' and will propose a more long-term, ongoing, and evolving conceptualisation of educational outcomes in particular.

Method: Findings presented are drawn from data collected via ‘educational life history’ interviews (Moore, 2006) as part of an ongoing PhD study investigating the educational journeys of care-experienced adults in Ireland from a life course perspective (Brady & Gilligan, 2018). Data will be analysed drawing on theoretical thematic analysis. As this study is ongoing, the narratives of 10 completed interviews will be analysed and relevant preliminary findings presented.

Results: Preliminary findings will be presented and discussed with a focus on the most recent educational experiences of participants as well as their aspirations and hopes for the future with regard to their education and learning. The potential implications for research and practice of reconceptualising educational outcomes in light of these preliminary findings will also be addressed.

Conclusion: Applying a life course perspective, this presentation will argue that taking a longer term and more fluid view of the term ‘outcomes’ may serve to provide a more nuanced picture of the nature of care-experienced individuals' educational experiences and progress.
Introduction

Child protection practice includes a large variety of decisions across the child protection continuum (e.g., intake, substantiation, intervention reunification) and are impacted by a diverse range of influences related to the case, worker, agency, and external factors. (Baumann, Kern, Fluke & Dalgleish, 2011). Not solely these factors by itself, but also their interrelations affect decisions in the child protection system (Wittenstrom, Baumann, Fluke, Graham, & James, 2015).

Both the gender of the perpetrator of child maltreatment and where families originate from are case factors that that are associated with disparities in child protection decision-making. Children maltreated by their mothers have a higher likelihood of being placed out of their home, as child maltreatment can be perceived as more severe when committed by a mother (Crawford & Bradley, 2016). Moreover, the country where families belong impacts decision-making, as Canadian Black families (i.e. African heritage) have a higher change to be referred to services compared to White families (King et al., 2017).

Intersectionality implies that social identities, such as gender and a migrant background, do not meaningfully exist on their own, but that experiences of people are shaped by intersections of different identities (Crenshaw, 1989; Hancock, 2016). Privilege and disadvantage, also within the child protection system, is thus explained by intersections of these identities. Several scholars have shown the relevance of intersectional analyses in the child protection system: Children who are deprived at multiple axes of identity (e.g., neighborhood, ethnicity, age) have a higher change of child protection involvement (Bywaters, Brady, Sparks, & Bos, 2016; Wittenstrom et al., 2015) and black mothers report more negative experiences with the child protection system, as they face both race and gender discrimination (Mandel, 2005).

Objectives

In the current study, we examine whether a family’s migrant background and the gender of the perpetrating parent impacts the decision to provide child protection measures at the end of a child protection investigation. Subsequently, we investigate whether intersections of migrant background and parent gender impact decision-making.

Method

This study is part of the Hestia project, an international study of policy and practice of child protection in the Netherlands, England and Germany. We conducted a case file analysis including 1,207 child protection referrals. We collected data about the referral, demographic characteristics of family, the course of the child protection investigation, and the outcomes of the child protection investigation using a closed-ended coding scheme. Using a binomial logistic regression analysis, we investigated whether the decision-making to provide child protection measures was different for migrant families and mother and fathers who are perpetrators of child maltreatment. Using interaction effects (i.e., Migrant background x Mother/father perpetrator of child maltreatment), we examined intersectional differences in decision-making.
Results and conclusions

Our analyses show that child maltreatment committed by 1) mothers and by 2) fathers from migrant families is associated with increased odds on providing child protection measures. This suggest that child protection decision-making is impacted by disparities based on migrant background and gender. These findings are inconsistent with the Convention of the Rights of the Child, that states that children should not be treated differently based on characteristics of their family (UN Committee on the Rights of the Child, 1989).
Influence of Migration Background on Decision Making - Comparing Intervention Rates between Child Protection Systems

Wednesday, 3rd October @ 12:00: The Multinational Role of Ethnicity and Gender Undergirding Decisional Disparities (Venue: Auditório)

Dr. Eric Van Santen (German Youth Institute)

Objectives
The “inverse care law” (Hart 1974) and “the inverse intervention law” (Bywaters et al. 2014) are just two examples for the notion that there sometimes is an inverse relationship between needs and support or intervention rates. The study presented analyses whether this also counts for rates of intervention and support in child protection practice in three West-European countries: England, Germany and the Netherlands.

In designing social welfare systems, a recurring problem is whether the help given will actually meet up with those for whom it is intended, and whether the supply is commensurate with the demand. This issue is crucial to the design of every social welfare system. In the meantime, there is some empirically established knowledge of whether people in difficulties really have access to the available social work aid schemes. However, there is a dearth of empirical research focusing on selection bias of social work agencies after access to the care system.

Typical for social work is a wide scope of discretion: The answer to the question, whether and how a specific need needs to be countered by some sort of support or an intervention can vary widely between social workers and social work agencies. A wide scope of discretion contains also the risk of organizational discrimination towards certain groups. The presentation analyses, whether this is true for child protection decisions within child protection agencies in and between countries.

Methods
The presentation draws on data obtained from the NORFACE HESTIA-Project. HESTIA compares the operation of child protection systems in three West-European countries. This is done through analysis of 100 case files in four sites of children and families involved in cases of possible child maltreatment in each country (total sample: 1,207 cases). The analysis of case files focuses on reasons for referral, information gathered on children and their families, the voice given to children and parents as well as on detailed information on how a case was investigated and handled including case outcomes in terms of voluntary or involuntary measures. Based on their reading of the case file the coders also made a rating on subtype, severity and chronicity of children’s maltreatment experiences using the well established Modified Maltreatment Classification System (MMCS, English et al., 1997).

Controlling for subtype and severity of the children’s maltreatment experiences, intervention rates and types of intervention for children with and without migration background respectively ethnicity within and across countries are compared. This may reveal different thresholds for (local) state intervention in different local authorities respectively countries.

Results
In the referral and investigation phase there are some differences between cases with and without migrant background. Overall there is not much evidence for a selection bias of the child protection system regarding cases with and without migrant background when using migration background as a dichotomous variable.

Conclusion
When we use migration background as a dichotomous variable, there is not much evidence that the scope of discretion within the child protection systems leads to different decision making concerning children and families with and without migration background. This might be different though for children from specific regions.
Considerations of Disparities in Planned Permanent Exits from Care

Wednesday, 3rd October @ 12:15: The Multinational Role of Ethnicity and Gender Undergirding Decisional Disparities (Venue: Auditório)

Prof. John Fluke (University of Colorado), Dr. Dana Hollinshead (University of Colorado Denver), Mr. Dustin Currie (University of Colorado Denver), Dr. Sara Wolf-Feldman (Chapin Hall at the University of Chicago), Dr. Kerry Monahan-Price (Chapin Hall at the University of Chicago)

Objectives. When new initiatives are implemented and evaluated, it is important to consider both the environment in which the changes are taking place and the characteristics of the people responsible for the desired change. Thus, in order to understand the implementation context of a southeastern state participating in a Title IV-E Waiver initiative, a staff survey examining demographic, attitudinal, and organizational culture and climate features was administered, once at baseline and again a year and half later. Results from the survey were examined in relationship to outcomes of interest in order to understand the extent to which worker characteristics were associated with outcomes used to evaluate the success of the intervention.

Methods: An online General Staff Survey was administered twice across four regions within a southeastern state to both custodial and non-custodial workers, once in 2015 and then again in 2017. Overall responses rates for the first round were 65% and for the second, involving a larger pool of staff, were 79%. The survey employed scales measuring whether or not one had a social work degree, attitudes about family preservation, child safety, perceptions of workload, organizational culture and climate, child welfare tenure, concerns about liability and so forth. Worker and agency characteristics data from 226 non-custodial workers were then linked at the worker-level to 67,828 child-CPS response level administrative data reflecting case characteristics of children (e.g., age, type of CPS response received [e.g., investigations or assessments], spells in out-of-home care and re-referrals) whose first contact with the system occurred between 2009 and 2016.

Results: Bivariate analyses indicate that on average, staff without a social work degree and those with fewer years in child welfare favored child safety over family preservation while scores for staff with social work degrees and those with more years in child welfare scores were more neutral, or favored family preservation (respectively). Multilevel discrete period event history analyses indicate that in addition to child characteristics such as age, race, ethnicity, and regional variations, characteristics of the assigned workers are associated with the type of exits from out-of-home care. Specifically, factors such as whether or not a caseworker had a social work degree, where they fell on a spectrum of child safety vs. family preservation beliefs, their perceptions of organizational culture and climate, confidence in local services, tenure with the child welfare agency, and other beliefs affected the chance would be reunified, permanently placed with relatives, adopted, or longer term permanency.

Conclusion: The results of this study suggest that child welfare workers’ personal attitudes and characteristics have associations with the decision to choose different options for children in care which in some organizational contexts may also exacerbate disparities, a finding that offers insights into and has implications for workforce interventions and implementation concerns including selection, staff development, performance monitoring, staff retention, and quality improvement.
Factors Influencing Decision Making about Where Children are Placed in Out-of-Home Care

Wednesday, 3rd October @ 12:30: The Multinational Role of Ethnicity and Gender Undergirding Decisional Disparities (Venue: Auditório)

Ms. Jenna Meiksans (Australian Centre for Child Protection, University of South Australia), Dr. Mary Salveron (Australian Centre for Child Protection, University of South Australia), Prof. Fiona Arney (Australian Centre for Child Protection, University of South Australia)

Background
Determining the most suitable out of home placements for children is a 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 placements for children that meet their needs, the decision making processes that lead to placement remain poorly understood. To date, no Australian studies have examined the factors influencing this process in real-life cases.

Objective
This study forms part of a broader program of research examining the factors influencing decision making about the placement of children in out of home care. It aims to examine the factors child protection practitioners described as influencing the decision making process in real-life cases where placement decision making went well or not well.

Methods
Semi-structured interviews guided by the Critical Incident Technique were carried out with 10 child protection practitioners working in government and non-government organisations across a range of Australian jurisdictions. Practitioners were invited to describe their decision making in cases where they felt that placement went well and not well. An inductive approach to data analysis was undertaken using grounded theory methods to examine the factors influencing decision making and the way these factors combine and interact. The fit of the findings with existing decision making theories was examined.

Findings
There were no clear differences observed between cases that went well compared to those that went not well, suggesting that the same factors could positive and negative outcomes for children. Consistent with existing theory explaining decision making in child protection systems, decisions about where to place children were influenced by a range of factors including those relating to the case, decision maker, organisation and external context. Important new insights with regard to how these factors combine and interact over time are revealed, suggesting that placement decision making is a dynamic and complex process involving a series of interdependent micro-decisions, rather than a single decision at a single point in time. The cases described revealed that multiple different decision makers are involved in this series of decisions, with the potential decision outcomes and information about children and families changing over time. Existing decision making theories are drawn upon to help explain these new insights.

Implications
The findings of this study have important implications for the methodological and conceptual approaches to the study of decision making in child protection systems. The immediate implications for policy and practice with regard to placement decision making are also discussed.
While decision-making in child protection should focus on the needs of children and tackle the risks, service provision and support for maltreated children is also dependent on organizational factors. An amalgam of several organizational variables (e.g., high caseload per capita, low mean in years of job experience, low availability of easily accessible services) may be responsible that child protection organizations in certain regions identify and support fewer children than organizations in other regions – even if these regions are highly comparable in their social structure and family risk factors. While research on organizational factors in child protection decision-making has gained momentum, further research is still needed.

The Optimus Study Switzerland collected for the first time nationally representative data on all types of reported child maltreatment across sectors. Agencies in public child protection, from the social and health sector, and penal agencies provided an excerpt of their data on new cases between September 1 and November 30, 2016, to a secured web-based data integration platform. In a multilevel analysis, the impact of several regional and organizational factors (type of organization, size of caseload, density of sentinel agencies, etc.) will be analyzed along with professional characteristics (age, gender, job experience, etc.) while controlling for child and caregiver characteristics. Preliminary descriptive results show a distinct regional variance in service provision depending on the density of organizations and size of caseload. These findings will be further scrutinized and tested using multilevel modeling. They will help to identify strategies for adapting to child protection system in underperforming regions to minimize service provision inequalities in Switzerland.
Researchers have found that youth in foster care graduate at relatively low rates and are less likely to complete high school than their non-foster care peers (National Working Group on Foster Care and Education, 2014). By age 19, only 54% to 58% percent of foster youth graduate from high school compared to 87% percent of youth in the general population (Tzawa-Hayden, 2004). In one study, over 70% of 15 to 19 year old youth in foster care expressed a desire to attend college; 19% expressed a desire to attend graduate school (Day, Riebschleger, Dworsky, Damashek, & Fogarty, 2012). Approximately 20% of foster youth who graduate from high school actually attend college and 2-9% of former foster youth will attain a bachelor’s degree (National Working Group on Foster Care and Education, 2014).

To address these challenges many states are partnering with colleges and universities to provide on campus programs that specifically serve foster youth. This presentation will discuss and share findings from research on 2 key initiatives in the state of Alabama: National Social Work Enrichment Program (NSEP) and Alabama REACH.

NSEP was created to provide a 6-week summer camp experience for foster youth on a college campus. NSEP partners with the Department of Human Resources to identify older foster youth, those who are high school juniors and seniors, to participate in the program. Social work students are hired to serve as mentors and program assistants. Findings from an exploratory qualitative study will be discussed. Data was gathered through semi-structured interviews of 25 program participants who completed NSEP in the last four years, graduated high school, and were enrolled in college.

Alabama REACH, a 2nd initiative in Alabama, empowers current & former foster youth, orphans, emancipated minors, wards of the state, and homeless youth in a supportive environment that allows students the freedom to pursue higher education and successfully matriculate and graduate from college. Alabama REACH is a threefold program, REACH Back (future students), REACH Up (current students), and REACH Out (community members), that bridges high school to post secondary to community. REACH serves as a resource hub to help students access the needed services on campus as well as cultivate meaningful relationships off campus. REACH’s programmatic goal is to graduate individuals who will be successful personally and professionally. Findings from initial evaluation data, gathered through focus groups, will be discussed.

Suggestions for future research, as well as, implications for social work policy and social work practice with foster youth will also be reviewed.
Foster Youth and College Campus Support Program Participation: Physical and Mental Health during the First-Year Experience

Wednesday, 3rd October @ 12:00: U.S. College Campus Support Programs for Foster Youth: Opportunities and Challenges (Venue: Miragaia)

Dr. Sean Hogan (California State University)

Background and Purpose: The health and welfare of foster youth transitioning to adulthood through higher education is a concern for child welfare and student support service providers. In the United States, campus support programs designed to help foster youth succeed in higher education have become an important support service on many college campuses. This study explored the physical, mental, and emotional health, including self-esteem, of former and current foster youth during their first-year experience at a four-year university. The study sample was dichotomized by participation in a campus support program. It was the hypothesis of this study that students participating in campus support programs, over time, would have better outcome trajectories than other foster youth students.

Methods: This study was a longitudinal panel study of 114 former and current foster youth attending four-year universities. Study participants were recruited with the assistance of child welfare and campus support programs in southern California. Utilizing the mental health inventory of the Medical Outcomes Study (Hays, Sherbourne, & Manzel, 1995), RAND 36-Item Health Survey, and Rosenberg Self-Esteem Scale, the physical and emotional well-being of foster youth was assessed just prior to beginning their education at a four-year university and following completion of their first academic year. Paired-samples t tests and Wilcoxon signed rank tests were used to examine within-group relationships among variables.

Results: The results of this study did not support the hypothesis. Findings indicated former and current foster youth who participated in campus support programs experienced significant declines in physical, mental, and emotional health during their first academic year at a four-year university. Conversely, the physical, mental, and emotional health of students who did not participate in campus support programs remained stable over the course of their first academic year at a four-year university. Also, interestingly, students who did not participate in campus support programs experienced a significant increase in self-esteem during their first year at a four-year university.

Conclusions and Implications: While, intuitively, researchers expected foster youth participating in campus support programs to have better trajectories than other foster youth students, this was not the case in this study. Foster youth students who participated in campus support programs had a significantly different first-year experience in college than students who did not participate in campus support programs. Declines in physical and mental health should alert campus support service providers to a potential need for additional support services in these areas. Student health services and campus support programs should be proactive in providing behavioral and physical health services and supports to this population upon entry and throughout their journey in higher education.
An Urban University Campus Support Program for Students from Foster Care: Services and Outcomes

Wednesday, 3rd October @ 12:15: U.S. College Campus Support Programs for Foster Youth: Opportunities and Challenges (Venue: Miragaia)

Prof. Sonja Lenz-Rashid (San Francisco State University), Ms. Xochitl Sanchez (San Francisco State University)

Background: In the summer of 2005 San Francisco State University (SF State) launched the Guardian Scholars Program (GSP) which provides supportive, comprehensive services to undergraduate university students who were formerly in foster care. Before the Guardian Scholars Program began, former foster care youth did far worse academically than other low income, first generation university students on the campus. Former foster care youth had average GPAs of 1.88 and only 1/3 returned to campus for their sophomore year. Former foster care youth clearly had needs that went beyond the needs of other low income students who were not in foster care. The Guardian Scholars Program was specifically developed to fit the needs of students who were previously in foster care to ensure they have high retention and graduation rates, as well as positive experiences while in university. The GSP was developed, and has been implemented, with the collaboration of the SF State School of Social Work and lives in the Educational Opportunity Program on campus. The GSP offers comprehensive services such clinical case management, career planning, year-round on-campus housing (first university in the U.S. to offer this), separate and long-term mental health therapy (not short-term campus counseling services), leadership opportunities, academic advising and tutoring, scholarships and social events. Each academic year there are over 100 students served by GSP. To date the program has served over 200 students – both first-time freshmen and transfer students – and has a $1 million annual budget. Fiscally, the program is a separate non-profit on the campus.

Programs supporting foster youth in college are relatively new to university campuses across the United States. And, although there a number of support programs at four-year universities throughout the country, there has been little research examining the outcomes of students served by such programs.

Objectives: This presentation is based on a descriptive evaluation study exploring the outcomes of university students with a history of foster care served by a separate, comprehensive program at SF State University. The model, services and staffing structure of the Guardian Scholars Program will be discussed, including budgetary and fund development needs. Lastly, how to obtain university institutional buy-in for such a large stand-alone program will be described.

Methods: This study involves examining the short-term and long-term outcome data of the SF State University Guardian Scholars Program. First, retention and graduation rates of GSP students were examined. Second, outcomes of all GSP alumni who graduated from SF State between 2008 and 2017 (n=88) were explored. Retention and graduation data was collected as secondary data and the long-term outcome data was collected through a standardized survey instrument. The GSP graduates were initially contacted via phone, email or LinkedIn, and asked to do a phone interview. Long-term outcomes examined included: housing situation, employment status, annual wages, graduate school enrollment, use of public assistance, mental health challenges, current substance use, pregnancy and parenting, and criminal involvement.

Results: The program has a sophomore year retention rate of 88%, an overall retention rate of 84%, and a 6-year graduation rate of 70%. Early results illustrate that 98% of the sample were in residing in stable housing at follow up (1 to 10 years after graduation), and 100% were either employed at least 30 hours per week or enrolled in full-time graduate school. Also, there were much lower rates of receipt of SSI, food stamps and welfare (income support) when compared to former foster youth in other studies. Data in other areas is still being analyzed.

Conclusions: Comprehensive programs assisting current and former foster youth in university can lead to successful outcomes for them as they move to adulthood after graduation.
Foster Care Students’ Knowledge of College Campus Support Programs

Wednesday, 3rd October @ 12:30: U.S. College Campus Support Programs for Foster Youth: Opportunities and Challenges (Venue: Miragaia)

Dr. Nathaniel Brown (University of Georgia), Dr. Rosemary Phelps (The University of Georgia)

This exploratory study examined foster care students’ knowledge of college campus support programs tailored to their specific needs. Using snowball sampling, 195 participants completed the Foster Students College and University Survey. One-way ANOVAS, independent t-tests, and p-values were used to analyze the data. Key findings indicate that gender identity is related to campus connectedness. Females had higher levels of campus connectedness. Student classification was related to career self-efficacy. Gender identity and institution type attended in the past was related to campus connectedness. The study raised important questions about the aspects or success factors of campus support programs that encourage foster students to remain in college, persist to graduation, and overcome personal adversity by excelling academically. Descriptive statistics helped create a picture of a population that has been hard to access in the midst of transitioning from foster care to postsecondary institutions. Participants also provided responses to open-ended questions for additional feedback. These comments provided insight into, and information regarding awareness of campus support programs, challenges participants faced while transitioning from foster care to college or university, and ability to cope during their transition and integration into college or university. Results of the study can help college administrators, student personnel services staff, faculty, and counselors design, develop, and execute programs leading towards improved college completion rates. Adams et al. (2013) reiterated that the goal of social justice is full and equal participation of all groups in a society mutually shaped to meet their needs. This goal is also applicable to this population seeking to improve their lives through postsecondary education.
In Denmark, secure care institutions are used for short-term placement of the most vulnerable children and young people in out-of-home care. Every year 550 young people are placed in confinement for an average of 65 days. The majority are placed in secure institutions on legal grounds either in surrogate pre-trial remand or serving a sentence. A minority are confined on social grounds for protection or observation to enable making assessments and qualify future interventions. These young people, aged 12-17, are placed in confinement by decision of a Municipal Children and Youth Board based on case material prepared by a case manager. Secure placement is considered a very intrusive intervention and all other options must be exhausted before placing a child in secure care. However, since 2010 the number of young people placed in secure institutions on social grounds have tripled. This development of increasingly confining troubled and troubling youths calls for detailed exploration into the understandings of risk to others and themselves, which lie at the heart of these placements.

This presentation presents findings from an ongoing study on risk assessments in relation to secure care placement. We present early findings suggesting how risk is constructed and negotiated by case managers and youths placed in secure care. Risk behaviour such as crime involvement, drug abuse, violent behaviour and engagement in transactional sex are some of the dominant concerns which legitimate placement in secure care. Drawing on Deborah Lupton's theorizing of risk, we propose that these constructions of risk are embedded in institutional logics and practices as well as in the troubling behaviour of the young people.

The presentation draws on a qualitative study which explores decision-making processes resulting in secure care placement. The study includes interviews with 15 young people placed in secure care on social grounds, 15 case managers, and 20 case files which include a decision on secure placement. The young people were interviewed during and after secure care placement about their experiences of being assessed, participation in the decision-making process and their own understandings of risk, strength and vulnerability. The case managers of the young people were interviewed about their assessment of the young person's risk, strengths and vulnerabilities, their rationalities for secure placement, and concerns about and expectations to secure placement. The interviews with case managers took place after preparing a case for secure placement and just after this placement was terminated. This data provides nuanced insights into the decision-making processes over time and how key dimensions of risk and vulnerability are negotiated and constructed over time in this context.
Assessment and Decision-Making Processes of Frontline Workers in Cases of Criminal Risk Youth and Their Families

Assessment in Specific Care Settings - Open Session 7

Mrs. Mette Bonderup (Department of Learning and Philosophy, Aalborg University and University College Lillebaelt)

The political-administrative field in Denmark, as in other European countries, is increasingly seeking evidence-based research and a prioritization of specific methods. The purpose of this is to control the quality of social work practices. This form of governance has its roots in Neoliberalism and New Public Management and incorporated here lies in a challenge to the frontline workers autonomy and freedom of action, which is impeded by the requirements of documentation and evaluation.

The object of this paper is to investigate the decision-making of the frontline workers in complex social family problems, when their work is based on a Case Management method in an interdisciplinary setting. The intention of this is to discuss the connection between the understanding of the problems and needs of the family as experienced by the frontline worker on one hand, and on the other the political intention of creating better results within the families by strengthening co-ordination and cross-cutting efforts.

The case is a special unit in a large Danish municipality. From the administrative and professional management level to the level of the frontline workers, i.e. to all who are working directly or indirectly with criminal risk youth and their families, however, based on different legislations, tasks, and theoretical perspectives.

Preliminary findings based on 7 qualitative interviews with frontline workers and management show, that both consider the issues and needs of the family as complex to such an extent, that flexibility in casework is seen as a key concept. The Case Management Method must therefore be constantly adapted, and the daily practice must be seen in interplay between the legislation, interdisciplinary setting, the meeting with the family and the frontline workers understanding of the family's problems and needs.

I argue that quality in social work cannot be based solely on technical approaches, but that the knowledge-based assessment and decision-making processes of the frontline worker have a significant impact on the development of the family. Next step would therefore be a deeper investigation of the assessment and decision processes of the Case Managers, at their understanding of the problems and needs of the family and at how it is formed in the meeting with the family and the interdisciplinary team.

Current findings are followed up by a Case Note Review process (CNR) with Case Managers in the unit. Case Managers are chosen among professionals working with different legislations, tasks and theoretical perspectives. The purpose of the CNR process is that Case Managers, by starting from a locally anchored case, articulate their reflection and decision making process, thereby expressing their explicit as well as their so-called tacit knowledge. The CNR process is followed by unstructured focus group interviews, where Case Managers are given the opportunity to elaborate their answers.

The results based on the analysis of the CNR process will be discussed in different perspectives. Firstly the Case Manager's understanding of the problems and needs of the family in relation to her professional knowledge used in performance of her core area; secondly whether the organization in cross-disciplinary teams is affecting the assessment and decision-making, thereby creating a more overall understanding of problem and needs. Thus this paper will contribute to new understandings of how professionals assess and make decisions in their meeting with complex issues, when their work is supported/governed by methods and interdisciplinary organization.
Objectives
Children entering out-of-home care represent an ultra high-risk group, with 50-75% meeting criteria for mental disorders according to recent Norwegian surveys. International guidelines therefore recommend trauma-informed assessment of health and care needs for every child entering out-of-home care. However, few studies exist on when and how such an assessment should be performed, by whom, and what it should cover.

The aim of the Children At Risk Evaluation (CARE) study is to evaluate a new model for routine assessment of children entering care. A needs report from this assessment should then be taken as a starting point for offering tailored services to the child, and individual supervision of carers. The study will evaluate satisfaction with this new service from different perspectives, and if, compared to historic controls, children and carers receive more services and supervision and if this leads to improved health and quality of life and less breakdown in foster care.

Methods
Over a two-year period, we will assess 200 youth aged 0-17 years entering out-of-home care, who are referred by local child protection agencies to this assessment. The assessment is performed on a single day by two multi-professional teams; one within state child welfare for 0-6 year-olds, a second team within specialist child and adolescent mental health services for 7-17 year-olds.

The assessment covers cognition, language and motor development, socio-emotional development, relational issues, trauma exposure and -symptoms, sensory processing, mental health, as well as physical and dental health.

Assessment results are reported in accordance with the DC:0-5 classification for the youngest group, and with the ICD-10/11 for the older group.

A written report is sent back to the referral agencies within a few weeks of the assessment, with detailed recommendations regarding the need for services to the child and supervision of carers.

Results
Preliminary feedback from the local child welfare agencies indicates that the reports are useful in order to support children and their new carers, matching of children with their new carers, and for documenting the needs of the child during the legal process. Challenges include the time needed for team discussions and writing up reports, and team resources when asked to testify in court afterwards.

A process evaluation collecting feedback from staff in child welfare and mental health services, as well as from young people and carers, is planned. Also, an outcome evaluation comparing the study group with children who entered care before this assessment service was available, will be performed. The focus will be on mental health, quality of life, and stability of care (breakdown of foster homes).

Conclusions
Although routine assessment of health and care needs of children entering out-of-home care is recommended by international guidelines, there are few studies yet on what this should cover and how it should be performed. Our team-based model covers a wide range of developmental aspects, in spite of being performed in a single day. The presentation will cover details on the model and the planned scientific evaluation of this new service.
The Effect of Decision Trees on Rater Accuracy in Assessment of Parental Behavior

Objectives

Parental behavior plays an important role in the development of children. When working with at-risk families, professionals need to be able to assess behavior of parents with respect to their children. Information about parental behavior helps to be specific about the need of families, and, if necessary, to refer families to appropriate interventions. In current practice, social workers seldom use reliable and valid instruments to characterize parental behavior. Instruments should not only be reliable and valid, but also suitable for the constraints that professional practice place on time needed for training to become reliable and time needed to conduct observations and assign observer rating scores. Observation scale instructions need to be as efficient as possible while supporting reliable assessment.

To gain insight in the type of instructions, visual or written, that promote reliability and efficiency of assessment, this study was performed. The study tested whether decision trees with visual components leading to scale anchors may be an efficient and reliable alternative to text scales. Our hypothesis was that in the condition where raters used a decision tree, interrater reliability and rater accuracy will be higher on average, and the user experience will be more positive than in the condition where raters used a traditional written scale.

Material and Methods

Participants in the research were social workers working at Youth Protection Amsterdam. The research was conducted with two groups of participants (N= 217) randomly assigned to two research conditions, decision tree-based anchors and text-based anchors. Each participant in both groups observed six target videos and then rated parental sensitivity according to either the decision tree-anchor scale or the text-anchor scale. Also, they filled out a questionnaire about their user experience.

Results

Analyses showed that interrater reliability was good to excellent (.74 and .78) for both conditions and did not differ between conditions. Also, user experience was equally positive in both conditions. However, the text-anchor scale provided for a higher rater accuracy than the decision tree-anchor scale. In both conditions, the mean absolute difference with the expert rating was higher when sensitivity was low.

Conclusions

The decision tree-anchor scale performed similarly to slightly worse than the original text anchor-scale. The finding that reliability was similar was promising in light of the potential for developing visual aids for scale instructions for an observational instrument suitable for use by practitioners. The text anchor-scale is a well-developed instrument, while the decision tree anchor-scale is the first adaptation to provide for an instrument social workers are able to use in daily practice.
In Denmark, like in the other Scandinavian countries the municipalities have spent years trying to manage the economy and not to overspend the budgets for support for disabled children and their families. Disability organizations criticize and point out that as a result of this development, individual assessments of support for this group has been replaced by fixed standards.

This paper focuses on the frontline worker's approach when conducting risk assessment of vulnerable children with disability and their families. The results are discussed in connection with the need for improvement and strengthening of the assessment and decision-making processes in the field. I argue that the quality of the assessment and decision-making processes must refer to the intention of the law and in a theoretical perspective draw on the biopsychosocial perspective of disability, which is a combination of the medical and the social model of understanding of disability.

The field includes 7 frontline workers from two Danish municipalities, all of whom specialize in casework with the target group. Part of the support in Denmark is categorized as support for vulnerable children. According to Danish law, the frontline worker in these situations must conduct a risk assessment of the child as part of the decision-making process for children considered to be vulnerable. The assessment of the child must be based on a holistic approach. Therefore, as part of the process the frontline workers must obtain knowledge from the child, the parents and other actors, private as well as professionals in the child's life.

The analysis is based on documents from two Danish municipalities and consists of 10 children cases, appendices in the form of statements from other actors, and journal notes from the period during which the assessment has been prepared. The findings indicate that, in order to meet a holistic perspective, the assessment of the frontline worker is based on the professional assessments of other actors. The analyses also show that the professional assessments of the frontline worker are unfolded within the framework of what I refers to as a ‘bureaucratic logic’, which means that the assessment in the decision-making process remains implicit and subordinate to the professional assessments of other actors. This raises the following question: What knowledge does the social worker use in the assessments in the area of children or young people with disabilities and their families?

Current findings are followed up by group interviews with all frontline workers in both municipalities with the purpose of examining how frontline workers talk about the assessments that underlie their decision-making. A reflection model aimed at the special competences needed in the area of children with disabilities and their families is considered to be central to the strengthening of the assessment and decision-making processes, and a proposal for a model is presented. I argue that decisions about support for children with “special needs” should be seen in the intersection of information from the actors in the child's life, and their understanding of the importance of the disability for the child's needs, together with the social practice that is being developed in the actual administration where the assessments and the decisions are made.

Wednesday, 3rd October @ 11:45: From Dysfunctional Families to Well-Functioning Family Care Context (Venue: D. Luís)

Ms. Kelly Selvius (Spirit Youth Care Amsterdam, Vrije Universiteit), Dr. Miriam Wijkman (Vrije Universiteit Amsterdam), Dr. Anne-Marie Slotboom (Vrije Universiteit Amsterdam), Prof. Jan Hendriks (Vrije Universiteit Amsterdam)

Context: Child sexual abuse is known to have a major negative impact on its victims' lives. Knowledge on the consequences of commercial sexual exploitation of children (CSEC), however, is still relatively unexplored and therefore treatment cannot be tailored for these victims. Objectives: This review aims to compare research on consequences of CSEC with those of intrafamilial child sexual abuse (ICSA), with particular attention to the research methods that are used. Methods: The search on seven databases resulted in 1698 studies. Out of these studies, eighteen studies matched the inclusion criteria and were therefore included in this review. Fourteen studies focused on ICSA and four on CSEC. Results: The most notable difference in methodologies was the time between the sexual abuse and interviewing of the victims. This led to a variation in focus of consequences. For ICSA, most studies focused on mental health consequences while for CSEC, the majority focused on physical health consequences, in particular sexually transmitted diseases. Conclusions: Further research on consequences of CSEC is desperately needed. Longitudinal research should focus on comparing the presence of various consequences (mental health, physical health, sexual behavior and daily functioning) in victims of CSEC, victims of ICSA and a non-sexually abused control-group.
Brokeddown Presentation:

**Disabled Parents, Children’s Social Work Assessments and Service Responses**

Wednesday, 3rd October @ 12:00: From Dysfunctional Families to Well-Functioning Family Care Context (Venue: D. Luís)

Prof. Emily Munro (University of Bedfordshire), Dr. Maryam Zonouzi (University of Bedfordshire)

Drawing on the findings from an ongoing research study on ‘Reimagining Children’s Services in co-production with disabled parents’ the presentation will:

- Explore disabled parents’ experiences of children’s social work assessment and subsequent service provision in England
- Consider implications and strategies to develop and embed best practice
- Offer reflections on the use of appreciative inquiry in social work research.

Appreciative inquiry is intended to ‘co-construct and embed a desired reality built on participants’ experiences and aspirations’ (Bellinger and Elliott, 2011). A group of child welfare academics, social workers and disabled parents have engaged in a process of appreciative inquiry using the 5-D cycle of Definition (agreeing the scope of the research) Discovery (stories about what is), Dream (imagining the best of what could be), Design (statements of intention) and Destiny (action planning).

Mixed methods were employed including: interviews, focus groups, service mapping and storyboarding (a process by which participants write their story against a timeline and present the people in their stories including their feelings and thoughts).

Emerging findings highlight (among other things) that:

- Parents recognised that they needed help with parenting but were fearful of children’s social care involvement (this was exacerbated by uncertainty about the purpose of the assessment and lack of clarity about whether they were subject of child in need or child protection plans)
- The assessment process was experienced as deficit-orientated and based on assumptions about impairments rather than focusing on strengths and capabilities
- The services and support offered by children’s social care is largely time-limited and directed towards the child rather than the whole family.

Drawing on learning from practitioners and service users’ experiences the presentation will discuss the recommendations that emerged as research participants moved from the Discovery phase of the research onto Dream, Design and Destiny.
Baseline Patterns of Children’s Problem Behaviors and Parents’ Parenting Stress Moderate the Efficacy of Dutch Youth Care Interventions

Wednesday, 3rd October @ 12:15: From Dysfunctional Families to Well-Functioning Family Care Context (Venue: D. Luis)

Dr. Marc J. M. H. Delsing (Praktikon)

Important goals of family-oriented youth care services in the Netherlands are to reduce children’s emotional and behavioral problems and parents’ parenting stress. Although empirical evidence on overall efficacy of these services has been growing, few studies have examined whether interventions may be more effective for some types of families than others. The present study extends current research by examining to what extent subgroups based on children’s problem behaviors and parents’ parenting stress at baseline predict differential response to treatment. Additionally, it was examined whether certain subgroups benefit more from one type of care than from other types of care.

Data were analyzed from 2587 families with children aged 4 to 19 years, referred to different types of youth care services in the Netherlands (home-based, daycare, residential). First, latent profile analyses were conducted to identify classes or subgroups of families based on baseline patterns of Child Behavior Checklist (CBCL) syndrome scores and parents’ parenting stress scores. In the next step, we investigated main effects of both latent class and type of care on improvements in children’s emotional and behavioral problems and parents’ parenting stress. Finally, we examined interaction effects between latent class and type of care.

Analyses revealed five clearly distinguishable problem behavior – parenting stress classes: 1. comorbid internalizing and externalizing, high parenting stress (14.6%); 2. high externalizing, high parenting stress (25.1%); 3. high internalizing, low parenting stress (16.9%); 4. low internalizing and externalizing, relatively high parenting stress (23.2%); 5. low internalizing and externalizing, low parenting stress (20.1%). Main effects for latent class were found, indicating that not all subgroups benefited equally from care. Additionally, main effects were found for care type, indicating that the amount of improvement during care depended on the type of care provided. Finally, significant interaction effects were found between latent class and care type, suggesting that there may be an optimal match between a family’s problem behavior and parenting stress profile and the type of care provided. Implications of these findings for practice, research, and policy will be discussed.
Families’ Participations in Kinship Care: Different Strategies for Different Aims

Wednesday, 3rd October @ 12:30: From Dysfunctional Families to Well-Functioning Family Care Context
(Venue: D. Luís)

Ms. Sarah Mosca (University of Lille), Prof. Bernadette Tillard (University of Lille)

Context
In France, formal kinship care is rarely pronounced (7% of Out-of-home care). It represents a special figure of delegation to relatives or friends. When the judge uses this possibility, he gives the child custody to grandparents, uncle, aunt, or others relatives, designed as « tiers digne de confiance » (trusted third party). In some cases, the judge requests an additional up-bringing assistance at home - called AEMO (Aide Educative en Milieu Ouvert) - to supervise the relationship between the child, the kin-carer and the parents.

Based on a PhD thesis in progress, “Children living in kinship care in the North of France” and a study currently funded by the National Observatory of Child Protection (ONPE), this paper examines families’ participations in the additional up-bringing assistance at home with a kinship care.

In French child welfare, the parents’ participation is at the heart of the preoccupations. In this system, the status of the parents has changed. At first, the parents were considered as beneficiary of injunction and advice. Now they must be a “partner”, who has to take part in the additional up-bringing assistance at home. Thus the concepts of collaboration, participation, and cooperation are used to refer to the relationship between families and social workers.

However, which participations are possible in a binding framework, as one of the judicial additional up-bringing assistance at home? What relationships do they have with the social workers? In this way, this paper examines the families’ strategies to face the interventions of social workers.

Population and methodology:
Our qualitative methodology is inspired by the ethnographic approach, based on interviews and fieldwork observations. The fieldwork began in a non-profit association that provides additional up-bringing assistance at home (AEMO) at the judge request. With the help of the agency's managers, we considered all the cases supported by the association. From June 2014 to June 2015, we found 30 cases of educational intervention with kinship care. In each situation, we tried to collect the points of view of social workers and members of the 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.

Results and conclusion
In the unequal relationship between the families and the social workers, the parents and the kin-carers set up strategies to play social intervention games. In our fieldwork, we noticed different strategies varying between collaboration and delegation, alliance or distance in their relationship with the social workers. The aim of these strategies is to get (or keep up) child custody or to protect domestic environment, and especially to protect the parent’s role of their family line. They depend on several characteristics: the age of the child, the links between the parents, the trusted third party and the child, and the legitimacy given to the interventions and the social workers, etc.
Foster care is a complex and temporary process characterized by the separation of children/parents, as well as continuation of their affective bonds, and by the need to preserve, as well as, to transform their relationships. In this process, many actors (children, social workers, birthparents, foster families, social and health agencies) are involved, interacting and learning by their explicit or implicit temporalities intertwined with systemic, social and cultural temporal dimensions. Thus, the concept of *rhythm* (Alhadeff-Jones, 2017) could be used to illuminate the coordination of these embodied and simultaneous temporalities, including continuities and discontinuities in care trajectories.

From a social pedagogical view (Cameron et al., 2016; Wolf, 2016) respecting the rhythms of families and children is, in fact, a requirement of any educational practice that should support their development, learning processes and relationships. In Italy, research on the temporal dimensions related to foster care has been scarce. My research will try to fill in this gap by investigating, on the one hand, how rhythms affect children’s and adults’ learning in the foster care process and, on the other hand, how professionals are called in to look after them. Therefore this study also aims to outline innovative professional training design connecting with time concepts and improving knowledge about foster care.

A complex and systemic methodological design guides the research. A pilot project was conducted with 12 foster care professionals, using *co-operative* inquiry (Heron, 1996) to explore the participants’ multiple representations and ideas of foster care. In-depth interviews with other 18 professionals were then used to point out the importance of rhythms. A second *co-operative* inquiry with 12 professionals was conducted in order to illuminate the frames of meaning and presuppositions regarding the temporal dimensions and to critically explore the practices that individually, relationally and institutionally sustain or hinder rhythms.

From a preliminary analysis I identified *rhythmic dilemmas* related to foster care processes and perceived from the professionals as antagonist and unpleasant contradictions. It seems that they have not any clear pedagogical or methodological strategies to manage or think about: 1. foster temporalities vs birth parents temporalities; 2. families temporalities vs professionals temporalities; 3. children temporalities vs adults temporalities; 4. unpredictability vs planning process; 5. time to act vs time to reflect on interventions; 6. continuous vs discontinuous trajectories; 7. orienting rhythms vs disorienting rhythms; 8. rhythms suffered vs rhythms generated. These rhythmic dilemmas illustrate the complexity of foster care and the lack of coordination of different temporalities. Professionals’ emotions are involved when they describe these rhythmic patterns. These temporal dimensions endow not just the individual perspective but also the shared meaning of a group of practitioners or an organization.

One of the practical implications of this research is to outline an innovative professional training that could encourage professionals and their institutions to review theories and practices of foster care in order to:
- respect for the rhythms of families and children
- try to compose *rhythmic dilemmas* in a transformative way and not to find solutions or solve them;
- develop the capacity of negotiate different temporalities and crisis, connect different individual and social factors;
- recognize the complexity, the relational and procedural nature of the foster care.
Young people who have been in state care as children are highly disadvantaged as young adults yet few states around the world have recognized their particular status in legislation or in official data collection. The objective of this presentation is to outline findings from two studies. The first study focused on what is known through population based data about young adults aged around 30 who were in care as children in three European countries representing different welfare regimes: Britain, Finland and Germany. The second study was a ‘global mapping’ of legislation and provision in 12 countries from South and Central America, Africa, Asia and Europe.

Methods:
Study 1: Available data on outcomes for young adults who had been in state care as children were the British Cohort Study 1970, the 1987 Finnish Birth Cohort Study, and, for Germany, the Socio-Economic Panel, 2001-2015. Finland has the most comprehensive data set, as it is drawn from administrative records, and Germany had the least. British data is somewhat old, as the participants were aged 30 in 2000. In each case it was possible to compare young adults who had ‘ever’ been in care as children with those who had ‘never’ been in care. Cross-country comparisons were limited due to differences in the data set, and in the timing of data collection.

Study 2: A 12 country mapping of policy and practice about care leavers and employment utilized fieldwork teams to collect official statistics, published literature and experiences and views of key stakeholders, including, in some cases, young people, under the auspices of SOS Children’s Villages International. Research instruments and training in their use was carried out by the UCL research team. Fieldwork teams submitted data to the UCL team, who wrote case studies for each country.

Results: There are wide and continuing differences between young adults aged around 30 who were ever in care and those who were not in each of the countries examined, particularly in relation to educational attainment and employment. Young adults who were placed at later ages, and were male, were particularly disadvantaged. There were fewer differences between groups in relation to relationship status and parent status. Health status shows stark differences in relation to mental health (depression in Britain and Finland; psychotropic medicine use in Finland). There were also large differences in incidence of homelessness (Britain and Finland). There was little evidence of a welfare regime effect; none of the countries’ welfare states were enabling young people who had been in care as children to thrive in comparable ways to those who had ‘never’ been in care. Cross-country comparisons were limited due to differences in the data set, and in the timing of data collection.

Conclusions: Available cross-national data is weak and not harmonized but points in the same direction. Instead of a ‘cliff edge’ approach, states should be developing support for a more gradual shift from ‘dependence’ to ‘independence’ that more closely mirrors transitions for those ‘never in care’. The policy intentions of being in care vary from offering basic safety to giving highly disadvantaged young people some prospects in life. Having accepted responsibility for children in care, states should be ensuring the best possible outcomes for them as adults, just as parents would.
Collective Impact is an innovative approach to tackling complex social problems. It requires collaboration across government, business, funders, charitable organisations and citizens to achieve significant and lasting social change. It involves five key elements: A common agenda (including a shared understanding of the problem and agreed upon approach to addressing it); shared measures (to ensure alignment, accountability and to document progress); mutually reinforcing activities (contained in an action plan); continuous communication (to build trust and maintain momentum) and a backbone organisation (with dedicated staff to serve the whole collective; Kania & Kramer, 2011).

A collective impact approach is being taken in Vancouver to improve outcomes for youth transitioning out of government care. These youth face major challenges to healthy development, including poorer educational outcomes, unemployment, and mental health and substance use challenges. Over half transition out of care and into homelessness. The acute housing crisis the city is experiencing means the numbers who experience homelessness continue to rise.

Concerns about the growing number of homeless youth with a history of government care was the catalyst for agencies to come together through a shared understanding that, despite the efforts of individual agencies, outcomes for these young people were not improving and were likely to worsen. It was also recognised that the issue was too complex for a single agency or system to address, and if outcomes were to be improved cross-sectorial partnerships would be needed.

Established in 2014, the TRRUST collective impact initiative includes youth currently and formerly in care, as well as representatives from 44 local agencies including the local school district, post secondary institutions, housing providers, employers, employment support programs and other statutory and non-statutory support services. Members meet quarterly to share updates, set future directions and ensure compliance with the common agenda. The initiative is overseen by a strategic advisory committee. There are four inter-sectoral clusters (working groups) which meet monthly and work together to improve outcomes for youth transitioning out of care in the specific areas of housing, employment and education, caring connections, and meaningful experiences. A fifth cluster ensures shared measures are developed and implemented, and has developed a longitudinal survey to follow youth through the transition out of care. Each cluster has a youth and adult co-chair, and reports to the collective quarterly.

The initiative has experienced a number of successes to date as a direct result of its collective work or through the work of member agencies and clusters. These include the provision of ‘transition kits’ to all youth leaving care, the introduction of post-secondary tuition wavers and wrap-around supports, enhancements to the welfare benefits available to youth following their transition out of care, the development of an ID bank, and the appointment of a housing navigator.

The developmental evaluation of the initiative shows that over time agencies have begun to trust each other more and to report increased collaboration. Decision making by consensus is proving effective and agency
representatives feel the initiative is making progress.

Current projects include developing a graduation fund to ensure youth from government care have a comparable graduation experience to their peers; addressing transit fines which leave youth unable to attain a driver’s licence; offering regular social events for youth approaching the age they will transition out of care to connect with peer mentors who have successfully transitioned out of care; and working with the municipal government to secure designated affordable housing units.

As part of this presentation, a representative of the backbone organisation for the collective will discuss successes and challenges of TRRUST to date and the applicability of the model for use in Europe.
Annual FEPA Survey in Spain: The Evolution of the Attended Youngsters Profile and Programs 2013-2017

Wednesday, 3rd October @ 12:15: Research on Care Leavers’ Needs and Support (Venue: Ribeira I)

Ms. Ana Villa Uriol (Federació d'Entitats amb Projectes i Pisos Assistits (FEPA)), Mr. Jordi Sàlvia Tobias (Federació d'Entitats amb Projectes i Pisos Assistits (FEPA)), Mr. Joan Prat Armadans (Fundació Servei Solidari)

Aims
Most of the data compiled in Spain regard to the childhood protection system. Nevertheless, there is a lack of research that collects information on the topic of young care leavers around the whole state. Mostly, there have been developed partial geographical studies in the past.

FEPA, the Spanish Federation for assisted housing and projects for care leavers is an umbrella body with more than sixty non-profit member organizations around the country and a 19 years old path. It has a significant degree of commitment with knowledge and applied research on the care leavers field (Strategic Plan 2013-15 and 2017-2019).

A specific research about support services development in Catalonia from 1994 to 2012 was developed in collaboration with Girona University and the Catalan government (Montserrat, Casas and Sisteró, 2014). Moreover, three editions on an emancipation resource map have been developed in 2013, 2017 (Observatorio del Tercer Sector and FEPA, 2013, 2017), the third edition is in an ongoing process. Furthermore, the longitudinal study CALEAMI concerning young care leaver transition to adulthood is being carried out together with Barcelona Autonomous University (Sala and Sanz, 2017).

It has been observed a substantial need of collecting information on the subject, the profile of attended youngsters and the existing support programs so as to outline policies and improve the current program development. This is why FEPA develops an annual internal research among its member organization based on a quantitative questionnaire that allows to have an evolutionary perspective.

In this communication the data evolution on the Annual FEPA Survey from 2012-2017 is presented. The project arises from the whole network collaboration and has had in 2017 the involvement of 53 non-profit organizations. Observatorio del Tercer Sector, a research non-profit organization carry out the data analysis of the information collected. Nowadays, there is not any other similar study in Spain.

To sum up, the main objective of the initiative is to provide regularly information about the attention provided to young care leavers in Spain and on the evolution of the youngsters profile and their needs on the basis of the current different programs and services provided.

Methodology
The Annual FEPA Survey follows four main stages every year. First of all, an annual review of the questionnaire that is discussed in a FEPA work group that includes different non-profit organization members to reflect specificities over time. Secondly, the data gathering from an online survey sent to all FEPA members that covers: housing, training, labour and legal support and also the youngsters profile attended from 16 to 23 years old in emancipation programs. Thirdly, the analysis of the information and report making. Finally, the direct and indirect dissemination activities, discussions based on the main results and findings and policy proposals preparation on FEPA’s board and knowledge specific work group.

Results
A synthesis of the main data from the last surveys can be found at www.fepa18.org In 2017 more than 2,500 youngsters were attended by more than 300 professionals and 400 volunteers. Preliminary results show that there is an increasing number of unaccompanied minors arriving to Spain with an unbalanced presence in the territory. Additionally, around 70% of youngsters were men and more than 70% of the attended youngsters were studying.
Bibliography
Facing Challenges and Ideas About Support: The Perspective of Care Leavers in Switzerland

Wednesday, 3rd October @ 12:30: Research on Care Leavers’ Needs and Support (Venue: Ribeira I)

Ms. Renate Stohler (School of Social Work, Zurich University of Applied Sciences), Prof. Karin Werner (School of Social Work, Zurich University of Applied Sciences), Ms. Jessica Wendland (School of Social Work, Zurich University of Applied Sciences)

In our contribution we will present selected findings of the ongoing innovative research and development project titled «Transition to Adulthood: Foster children participate!»

Up to now, very little is known about the transition to adulthood of care leavers in Switzerland. The few existing, small scale and mostly qualitative studies set the focus on young people leaving residential care. The results of these studies are inconsistent but nevertheless give some evidence that - as also in other countries - young people leaving care are facing several challenges. In contrast there is no empirical knowledge about the process of transition to independence of foster children in Switzerland. This underlines the importance of the ongoing project mentioned above which is funded by Mercator Foundation Switzerland. The project includes a realisation based on a research part and aims at promoting the integration of foster children into Swiss society and labour market. In the research part of the project the focus is set on assessments and experiences of (former) foster children and their need for support after having left their foster families, as well as the practice of social workers regarding the care-leaving process of foster children. To gain the necessary information semi-structured qualitative interviews were conducted with (former) foster children (N=28) and social workers (N= 23) in the German part of Switzerland.

Based on the results of this research various projects for care leavers and social workers will be developed (realisation part of the project). The project is highly innovative for Switzerland in the sense that care leavers are actively involved during the various phases of the project. Based on Franks (2011) who is suggesting a methodology of creating pockets of participation in participatory research, a group of former foster children accompanies the project team critically during the whole period of the project.

In our contribution we will present the results of the research part of the project. Challenges in the process of transition to adulthood and independence and the need for support from the perspective of foster children will be described. The analysis indicates that there is a difference between young people who are still living with their foster parents and former foster children with respect to the assessments regarding future challenges. Afterwards we contrast the findings with social workers’ perspectives.

We will further illustrate how former foster children/care leavers participate in the project and we give some insights into our experiences gained while working together with young people in this research project.

Finally, we will draw conclusions and give an outlook on planned activities. The results show that there is a need for support of care leavers within the child and youth-welfare system and also for non-professional support.
Stepping Outside the Box: A Care Leavers Approach to Carrying out Research with Other Care Leavers

Ms. Róisín Farragher (UNESCO Child and Family Research Centre, National University of Ireland, Galway.)

This presentation describes a research project designed to explore the ways in which young people with experience of the care system in Ireland understand ‘family’, family relationships and connections. The research problem for the current study focuses on the ways in which young people who have experience of the care system understand and experience family relationships. The title of the study is ‘Family Matters: An explorative study of the family relationships of young people who have experience of the care system’. The study aims to address the following research questions: How do people in care talk about family? How do they understand and experience family? How do young people in care describe a family relationship? The research population is drawn from young people in Ireland aged between 18-23 years who have experience of residential, relative and foster care. The researcher chose Constructivist Grounded Theory (CGT) as the conceptual and analytical framework for the research as it focuses on privileging the voice of research participants and raises our awareness of our own personal biases/preconceptions. Research and practice literature indicates that the confidence and self-esteem of young people are boosted when their views are respected and taken seriously. Moreover, it can give them a sense of being active agents in their own lives and lead to better outcomes. In this presentation, the researcher reflects on the actions of researchers in the co-production of knowledge. She will describe the steps adopted throughout this research project to enhance reflexivity and to address ethics in the researcher/participant dynamic. As there is more than one way to raise the voices of young people, the researcher propose CGT as one way of designing and implementing research to explicitly promote the young person participant as an active co-producer of knowledge about family, family preservation and reunification and care systems (residential, relative and foster). The researcher suggests that CGT assists us to privilege young people with experience of care systems in the co-production of knowledge about the ways in which family and relationships is experienced and about the design and implementation of policies and services. One of the main aims of this presentation, is for attendees to understand what the aims and objectives of research project are, sample size, process of recruitment, and the rationale for choosing CGT as the conceptual and analytical framework. Given the researcher spent a number of years in foster care, she will reflect on the process thus far as a researcher discussing issues such as researcher subjectivity, bias and pre-conceptions, and ethical implications. In discussing these issues, attendees will be presented with options such as reflexivity, journaling and memonering and how they can help reflect on and understand the position they hold when carrying out research and/or participating in research.
Core Competencies for Safeguarding Young People in Care

Wednesday, 3rd October @ 11:45: Let's Talk About... Addressing Sexuality in Special Needs Education (Venue: S. João)

Prof. Leonieke Boendermaker (Amsterdam University of Applied Sciences (AUAS)), Mrs. Mirjam Walpot (Amsterdam University of Applied Sciences (AUAS))

To get insight in the kind of competencies professionals need to address sexuality in care in a pedagogical way, a review of publicly available materials on the subject was undertaken in Denmark, Belgium and The Netherlands.

Method

Included in the review were: guidelines, policy documents, interventions, training programs for professionals, educational programs, tools, and websites. Finally, 31 materials (consisting of 36 publications) met the inclusion criteria and were included in the review (these materials consisted of 14 guidelines and policy documents, 7 interventions, 1 training program for professionals, 1 educational program, 5 tools and instruments and 3 websites.

The (small) research team in each of the three partner universities reviewed the materials in their own language and coded them with a standard coding form to provide a list of competencies, describing knowledge, attitude and skills. In a working session of the researchers (from the Netherlands, Denmark and Belgium) the competencies (knowledge, skills and attitude items) were discussed at length. As the competencies mentioned in the three countries showed a lot of resemblance, the goal was to create a manageable list of competencies. Discussing the competencies was important because languages and cultural differences made it difficult to create a shared understanding of the translated competencies. Thorough explanation of the translated competencies into English was necessary to fully understand their meaning. This process was essential in order to make deliberate choices and to develop a comprehensive and concise list of 137 competencies on sexuality education in residential and foster care. In this list, 38 general competencies of social work profession were mentioned. These competencies were not directly related to sexuality education and they were therefore removed from the list. A list of 99 items on knowledge, skills and attitudes concerning relationship and sexuality education remained.

All participants in the project (N=47; researchers, lecturers, work field partners, interviewees, and members of the three local reference groups) were involved in prioritizing the competency items left, by rating them on a scale from 1 (not important) to 5 (very important). Almost all items were rated as (very) important, which emphasizes their importance but hampers the development of courses and teaching materials. Therefore it was decided to stick to the 20 highest ranked competency items of the three categories of the list (knowledge, skills, and attitudes). In the category skills, the number 20 and 21 of the list had similar mean scores and therefore both were included.

Results

This list of 61 items of important knowledge, skills and attitudes was clustered into five categories, based on the content of the items. The clusters were discussed and refined in a working session with the researchers and lecturers and formed the input for working sessions with the workfieldpartners. In this way the list of 61 items was reorganised into 17 competencies, organised over five central themes (see below). The items on knowledge, skills and attitudes were rearranged among the 17 competencies, to formulate the behaviour characteristics belonging to each competency.

- Discussing sexuality
- Supporting young people's needs concerning sexuality
- Dealing with sex and sexuality in a professional way
- Dealing with differences in values and cultures regarding sex and sexuality
• Recognizing and responding to harmful sexual behavior
A Free Online Course for Professionals on Dealing with Sexuality

Wednesday, 3rd October @ 12:00: Let’s Talk About... Addressing Sexuality in Special Needs Education (Venue: S. João)

Mrs. Gitte Riis Hansen (University College Absalon)

Based on the research presented in the first two presentations in this symposium, five central themes were formulated as leading in the development of teaching products:

- **Values, rules and legislation:** The way we deal with relationships, intimacy, and sexuality in care is largely determined by our own set of values and personal experiences. It is also shaped by the context within which we work. National laws, international guidelines, organizational policies, ideas and ethical standards...they all influence our actions with regard to this topic.

- **Knowledge on sexual development:** Research shows that many people have misconceptions concerning the development of healthy sexuality. To be able to react in an adequate way, knowledge on the behavior to be expected is essential.

- **Sexual identity:** Sexuality has many different aspects. As professionals, we need to be alert to the various sexual identities of our clients. We should have special concern for the LGBT-group within care. Another element of concern is the cultural and religious background of those involved.

- **Sexual risk behavior:** How to deal with risk behavior: young people in care are at risk of sexual abuse, simply because of the reasons they are in care. Many children and young people in care are not only at risk but also show risk behavior. This combination makes it difficult for professionals to address risk behavior in a proper way.

- **Addressing sexuality with young people in care:** Talking about relationships, intimacy, and sexuality (broadly defined) turns out to be very difficult, because of many things: the taboos surrounding the issue are important, as are the very personal nature involved, the many prejudices, and the context within which we have to work. As a professional, you need tips and tricks to help find the best ‘language’ for your discussion. You also need ‘courage’ - and an open, transparent, and guiding attitude.

As a next step, the competency clusters and educational themes were combined in the design of the online course, with the learning process of professionals as the main goal. In producing an online open international course for professionals needs profound and thorough didactic attention: we had to consider especially three overall aspects:

1. **Cultural aspects:** The online course is an international learning instrument for developing attention and competencies working with a subject that has very different approaches in different kinds of countries and pedagogical environments. In some pedagogical and social environments, the subject of healthy sexual development has a lot of attention – in some environments it is considered more or less as a taboo.

2. **Didactical e-learning aspects:** Working with developing of competencies in working with sexual healthy development needs - as our research also confirms - knowledge, skills and working with attitudes. The online course is created in a structure addressing “knowledge” (to see or hear), skills (to reflect) and attitudes (to act). Another crucial consideration has to address the challenge of open source online elements, where there is no actually teacher of facilitator present while the professionals are attending the course and developing competencies.

3. **Graphical aspects:** The online course is first a visual learning element; the graphics (pictures, colors, design) will be a part of “teaching presence” and have a strong impact of the learners´ approach and sense making. The online course has been developed with a strong attention to the graphical design.
In this presentation, the structure of the online course will be demonstrated and will be related to didactical considerations and reflections. Depending on the participants, the content of one of the modules will be shown, starting with a short introduction movie based on situations from practice.
A Summer School on Sexual Upbringing in Care

Wednesday, 3rd October @ 12:15: Let's Talk About... Addressing Sexuality in Special Needs Education (Venue: S. João)

Mrs. Iddegien Kok (Amsterdam University of Applied Sciences (AUAS))

The five clusters of competency items and five central themes based on exploratory research an working sessions with researchers, work field partners (professionals) and lecturers constitute the backbone not only of the (free) online course, but also of the summer school for social work students. In this presentation, the program of a summer school for social work students will be explained and the content of one of the modules will be shown in more detail.

The main goal of the summer school is to give students the opportunity to familiarize themselves with the subject of relationships, intimacy, and sexuality. It is specifically designed for students who intend to work in residential care or with foster parents. The summer school, therefore, mainly focuses on transferring knowledge. This is done through lectures, exercises, homework assignments, and field trips.

Like the online course, all materials are available online, to enable other universities to organize a summer school on the subject (in a local language). Experiences in piloting the summer school and the do's and don'ts on organizing a summer school, will be shared.
Dealing with Sexuality in Teaching

Wednesday, 3rd October @ 12:30: Let's Talk About... Addressing Sexuality in Special Needs Education (Venue: S. João)

Mr. Wim Van Tongel (Artesis Plantijn University College Antwerp), Mrs. Gwendy Moentjens (Artesis Plantijn University College Antwerp)

Like addressing sexuality with young people in care, teaching students on the topic requires specific competencies. A review of publicly available Dutch materials on teaching (in class) on these subjects provide relevant do’s and don’ts for lecturers at University (of Applied Sciences). Among others on: creating a safe environment, managing difficult situations in the classroom (for instance: provocative remarks of students, addressing signals of negative experiences or abuse, emotional reactions), gender, cultural and religious diversity.

In the course of the project different materials for teaching have been developed and collected. Many of these materials have been incorporated in the summer school and the online course. All materials are available online, for free.

In the presentation we will go into the variety of materials that have been developed. We aim to demonstrate the relevance of these materials for teaching students, including the didactics of teaching on this intimate subject.
Sexual Development & Needs of Young People in Care

Wednesday, 3rd October @ 12:45: Let’s Talk About... Addressing Sexuality in Special Needs Education (Venue: S. João)

Mrs. Mirjam Walpot (Amsterdam University of Applied Sciences (AUAS)), Prof. Leonieke Boendermaker (Amsterdam University of Applied Sciences (AUAS))

Children in residential child care are at an increased risk of being victims of sexual abuse. In an international review of the literature, van Zenderen et al (2015) found that 33-50% of the children in residential child care have experienced sexual abuse during childhood, and that children with a history of sexual abuse have a higher risk of sexual risk taking behavior, such as unprotected sex, lower self-efficacy, a higher risk of re-victimization and sexual exploitation.

Gender differences, disorders (like mild developmental disabilities or psychiatric diagnoses) and non-normative sexual identity (LGBT) affect the sexual developmental needs (Höing, 2018). In this explorative study, we therefore tried to answer the question: ‘what are the needs of young people in care when it comes to sexual development?’

Method

13 individual interviews and 8 focus groups interviews were conducted in the 3 organizations involved in the Erasmus+ project in Belgium, Denmark and The Netherlands. Only the Dutch organization employed professionals working with foster parents.

Results

 Interviews with professionals and young people in the organizations showed that young people in care are generally more vulnerable than their peers growing up at home. They are often insecurely attached, have a lack of positive role models and positive sexual experiences, have not grown up with clear norms and values concerning sexuality, have low self-esteem and little knowledge about (healthy) sexuality. This set of characteristics makes them more likely to show inappropriate sexual behaviour and make unhealthy choices with regard to sexuality.

To meet the special needs of young people in care, professionals should be able to make young people feel safe and secure. In addition, they should act as positive role models, set limits, help young people to gain self-confidence, and give them space to have positive sexual experiences and to discover their own norms and values. Professionals working in care should provide sexual education (upbringing) in a pedagogical way, which supports young people in their knowledge, skills, and attitudes concerning sexual development and teaches them to make wise and responsible decisions for themselves. Professionals need to put aside prejudices about boys and girls and treat them equally.

Doing this means that professionals dare to address the subject and for instance start a conversation with or react to young people in care: when young people have discussions about boyfriends, girlfriends, or when young people watch clips or have discussions on social media where sexuality plays a role. Important topics to discuss are: healthy sexual behaviour, relationships, wishes, limits, making your own decisions, changing behaviour after regretting something, norms and values, and social media.

Conclusion

The interviews and focus groups show that it is essential that professionals know how to address sexuality in a pedagogical way, as part of daily life. Young people in care have special needs that professionals working in care should know about and act upon.
Court-Level Policies on Child Protection Removals of Newborn Children

Prof. Marit Skivenes (University of Bergen)

Professional discretion in decisions about a child’s best interests is exercised based on the authority given to decision-makers by the state. In many countries, it is the courts that have the authority to make decisions about a newborn child’s removal from their parents. How do courts justify the decisions that terminate or severely curtail the rights and responsibilities of parents? The presentation uses examples from decisions in eight European countries (Austria, England, Estonia, Germany, Ireland, Finland, Spain and Norway) based on comparative research conducted by a group of researchers at the Centre for Research on Discretion and Paternalism at the University of Bergen, Norway. I focus on how the value-laden principle of the child’s best interests is interpreted in the court judgments. This is an intriguing puzzle because a value- and normpluralistic society challenges both the relationship between the general principles that underpin society, and society’s policies with respect to children and families (Habermas, 1996; cf. Skivenes, 2002, 2010). To compare discretionary reasoning between decision-makers, I examine the different types of argumentation in these judgments and assess how they elaborate on the different considerations that can be expected to be involved in child protection decision-making (cf. Skivenes, 2002, 2010). What are the arguments and reasons that are considered in the actual decisions that are made by the courts based on the principle of a child’s best interests?
Laws and organizational processes are of vital interest when states are removing newborn children from their parents. Interventions into family life in the form of removing children from home and placing them in alternative care because of child maltreatment are one of the most intrusive actions into the lives of citizens that a state can take. When making these decisions, professionals are given the authority to make judgements and choices about what is in the best interests of the child. They also make judgments about how these interests should be weighed against parents' interests and/or against the child's opinion. However, we still know too little about how laws and organizational processes regarding decision-makers in courts (or court-like organizations) who decide about the removal of newborn children from home frame the discretion of these decision-makers. Discretion is understood as decision-making “subject to the standards of a particular authority” (Dworkin, 1967, p. 32), such as a public child welfare system. In this presentation, I will draw on the research by a group of researchers affiliated with the Centre for Research on Discretion and Paternalism at the University of Bergen, Norway, who study discretionary decision-making by courts in the context of child removals of newborns. Building on the work of this international research group, I will compare how laws and organizational processes shape discretionary decision-making in the domain of child removals of newborn children in Austria, England, Estonia, Germany, Ireland, Finland, Spain and Norway. How do governments regulate discretion in these decisions about the child's best interests?
Behavioural Parenting Training: One Size Fits All?

Wednesday, 3rd October @ 16:00: Evidence-Based Parenting Interventions: Who Benefits and Why, and How Much Do They Cost? (Venue: Infante)

*Dr. Joyce Weeland (University of Amsterdam), Dr. Loes Keijsers (Tilburg University), Prof. Geertjan Overbeek (University of Amsterdam)*

Behavioural Parenting Training (BPT) is the gold standard for preventing and treating externalizing problem behaviour in young children. However, BPT is not equally effective for all families. Moreover, we know very little about how these programs work, let alone how they work for specific subgroups of families. Although changes in parenting behaviour are theorized to be the main mechanism of change, almost half of studies testing mediation in BPT trials do not support this assumption (Forehand et al., 2014; Weeland et al., 2017). One possible explanation might be that general principles of parenting, used in BPT programmes, do not apply to all individual families. Indeed, pioneering studies on parenting show unique correlations between parenting and adolescent behaviour (e.g., Keijsers et al., 2015; Rekker et al., 2017). These novel insights into the complexity of parenting effects show that it is crucial to test mechanisms of change of BPT at the within-family level. Moreover, it suggests BPT might be effective not when it leads to group-level changes in the use of certain parenting techniques, but when it breaks down cycles of parent-child interactions related to children’s externalizing behaviour within a specific family. The current study uses three-wave observational data on 378 parent-child dyads (*M*<sub>agechild</sub> = 6.31, *SD* = 1.33, 55.3% boys) of which half received the BPT programme The Incredible Years. Multilevel structural equation models with both fixed and random effects will be modelled in Mplus to assess the relationship between changes in intra-family parent-child correlations and child behaviour after intervention. Analyses are ongoing.
The Efficacy of Triple P, Positive Parenting Program (Level 4) in Children and their Primary Caregivers

Wednesday, 3rd October @ 16:15: Evidence-Based Parenting Interventions: Who Benefits and Why, and How Much Do They Cost? (Venue: Infante)

Mrs. Sandra Nogueira (University of Porto), Prof. Isabel Abreu Lima (University of Porto), Dr. Ana Canário (University of Porto), Prof. Orlanda Cruz (University of Porto)

The Triple P – Positive Parenting Program is a multilevel system that has often reported good outcomes for children, parents and families (Sanders, Kirby, Tellegen & Day, 2014). Level 4 is an intensive training program of 8 – 10 sessions for parents/caregivers of children with emotional or behavioural problems. The aim of this study was to assess the efficacy of Triple P Level 4 interventions on children’s behaviour, parenting styles, parental competence and psychological functioning. This is the first randomized clinical trial with Triple P (level 4) conducted in Portugal with high psychosocial risk mothers, as we are aware of so far. Parents or child caregivers were randomly allocated to Group Triple P program (n = 40) or to the treatment-as-usual control group (n=40). Mothers of the Triple P group showed significant improvements in parenting and sense of competence and a decrease in stressors related to parenting and anxiety levels. Participants who attended Triple P also reported significantly lower rates of the child’s misbehaviour than participants in the control group. The first group also strengthened their social support informal network. Data revealed that Triple P was effective with Portuguese families and positive results remain 12 months after the end of the program. Results confirm Triple P program, level 4, as a powerful tool for intervention with families in high psychosocial risk, adding an important contribute to the vast array of evidence on the efficacy of Triple P.
What Is the Role of Therapist Factors on Parent and Family Interventions Directed at Behavior Problems?

Wednesday, 3rd October @ 16:30: Evidence-Based Parenting Interventions: Who Benefits and Why, and How Much Do They Cost? (Venue: Infante)

Dr. Sara Leitão (Faculty of Psychology and Educational Sciences, University of Coimbra & Faculty of Psychology, University of Lisbon), Prof. Maria João Seabra-Santos (Faculty of Psychology and Educational Sciences, University of Coimbra), Prof. Maria Filomena Gaspar (Faculty of Psychology and Educational Sciences, University of Coimbra)

Despite the emphasis on implementing evidence-based parent interventions directed at behavior problems and the need to ensure their effectiveness across a variety of settings, a research gap still exists with respect to the study of the role of therapist factors on parenting interventions.

This presentation focuses on characterizing the empirical studies that have explored the impact of specific therapist characteristics and actions in the effectiveness of parent and family interventions directed at children/youth behavior problems.

Data from a systematic review is presented, including results from 15 final studies selected from 199 screened articles. In spite of some methodological limitations of the selected studies, the results found were consistent with previous research, showing that therapist factors have an impact on the process and effectiveness of parent and family interventions.

Most of the studies analyzed therapists’ actions and three groups of therapists’ actions were found: responsive and relationship promoting; directive and structuring; and other actions.

Results considering the relationship between therapists’ characteristics and outcomes were not homogenous. Therapists’ characteristics such as sex, ethnicity/race, degree of training, professional experience or level of confidence in professional skills seem to have a complex relationship with youth and family outcomes, suggesting that more attention should be paid to the study of the mediator and moderator process variables influencing these relationships.

Given the results found, implications for clinical practice and future research on parent/family interventions will be considered.
There is currently a range of parenting interventions available in different countries, with varying delivery formats and theoretical approaches, targeting different problems and population groups. A large body of research exists investigating the effectiveness of parenting programmes on multiple parental and child outcomes. However, information on effectiveness is not sufficient to make decisions on whether the outcomes produced by parenting interventions are value-for-money, or whether decision-makers should allocate existing resources to the financing of such interventions, among other competing alternatives. Health economic evaluations have become a popular tool to guide decision-making and inform health policy, and its methods are also being applied to parenting interventions.

In this presentation, an overview of the research completed to date on the cost-effectiveness of parenting interventions with the aim of improving child health will be provided. The type of economic evaluations and analytical frameworks employed will be described, the interventions and target groups evaluated will be defined, the outcomes and costs captured will be stated, and the findings of the existing evidence will be presented. Finally, a few methodological limitations of existing studies that could be addressed in future research will be identified. There will be a particular focus on economic evaluations of parenting interventions targeting child mental health, which will be strengthened by the presentation of particular examples of ongoing research.
Legislative and Policy Reforms Impacting Therapeutic Residential Care (TRC) in the US: Challenges and Opportunities

Wednesday, 3rd October @ 16:00: The Role of Residential Care in Child Welfare Systems (Venue: Arquivo)

Dr. Christopher Bellonci (Judge Baker Children’s Center, Harvard University)

Abstract: The debate about the role of Therapeutic Residential Care (TRC) in the service array for children with behavioral health needs continues in the United States. Shifts to using TRC as a clinical intervention for short-term stabilization is increasingly becoming policy and is being written into legislation. The author, a past president of the Association of Children’s Residential Centers, has been at the heart of these debates and will share his insights into the rationale, potential unintended consequences as well as opportunities to ensure TRC remains a viable option for children with serious behavioral health disorders and their families.

TRC in the US has been criticized as being costly, disconnected from community-based services and supports, and without evidence for its effectiveness. There is also a private market serving youth whose parents can pay upwards of $100,000 US per year. Some of these programs have minimal licensure and have been associated with abuses including the maltreatment of youth in their care. These factors, and a philosophical approach that values serving youth in the least restrictive, most community-based settings is driving some of the policies in the US.

The Family First Prevention Services Act (FFPSA) was signed into law in 2018. This represents the first major reform of federal child welfare spending in a generation. FFPSA allows states to use federal dollars to pay for prevention services for families at risk of having a child enter foster care. The money for these services comes from cost-savings by limiting TRC to youth whose needs are independently determined to meet certain clinical cut-offs. Only Qualified Residential Treatment Programs (QRTP) will be funded defining TRC in federal legislation for the first time. State initiatives including California’s Short-Term Residential Therapeutic Program that was a model for FFPSA will also be discussed.
Identifying Evidence-Based Practice Models of Therapeutic Residential Care (TRC) in a U.S. Context: Historical Antecedents and Future Opportunities

Wednesday, 3rd October @ 16:15: The Role of Residential Care in Child Welfare Systems (Venue: Arquivo)

Prof. Jim Whittaker (University of Washington)

Group care’ or ‘residential care’ viewed in a global perspective is a variegated and multi-faceted sector of service reflecting multiple goals and objectives including social care, provision of safety, education, family support, socialization and aid in making the often difficult transition to adulthood. In the U.S. context, residential care in most of its applications has skewed in the direction of ‘treatment’ of children and youth with identified mental health or behavioral needs in contrast to some other societies where the need for provision of basic social care offers a sufficient rationale for residential placement.

Within the narrower U.S. context, this presentation will explore key milestones in the development of several identifiable models of “therapeutic residential care”, particularly those few in number that have attracted both professional adherents and research and development funding from key governmental institutions like the National Institute of Mental Health (NIMH). The developmental trajectories and influences of these pioneering programs will be examined for their implications for contemporary practice and future research.

Symposium participants will take away some concrete understanding of the present status of “therapeutic residential care” as an evidence-based intervention as assessed by the California Evidence-Based Clearinghouse for Child Welfare (CEBC) as well as in related research by James and others (James, 2011; James, Thompson and Ringle 2017). Pathways and stratagems for building a more robust evidence base for therapeutic residential care will be identified, as well as the logistical and ideological barriers that must be overcome in achieving them.

A case will be made for advancement of a coordinated program of future research in therapeutic residential care both to meet the needs of potential youth consumers and their families for high quality, evidence-based services and to address the pressing contemporary challenges to therapeutic residential care outlined in the companion paper on recent legislative and policy reforms in the U.S. offered by Dr. Christopher Bellonci. These initiatives offer both promise and challenge and contain profound implications for the future of therapeutic residential care in the U.S.
This paper will discuss the introduction of a pilot programme that aims to improve the transition from care for young people leaving residential care placements in England.

Evidence shows that care leavers can be at risk of poor outcomes during their journeys to independent adulthood, including housing instability and homelessness, being NEET and poor mental wellbeing. Many care leavers report experiences of isolation and loneliness after care and studies of marginalised adults show over representation of care leavers among homeless adults and the long-term unemployed. Research suggests that these risks might be greater for early leavers who move from their placements aged 16-17.

Young people leaving residential care placements can face particular challenges during the transition to adulthood. This might reflect a tendency for residential care to accommodate adolescents with complex needs and those who come into care late and fail to settle - scenarios identified in the leaving care literature as risk factors for poorer post-care outcomes.

Positive post-care accommodation can compensate for earlier difficulties and is associated with positive outcomes in EET, wellbeing and life-satisfaction. Research also highlights the importance of developing and maintaining links with trusted support networks, including consistent adult support, to help young people to successfully navigate the practical and emotional challenges of transitioning to independent living.

Unlike their peers in foster care, who benefit from Staying Put provision to support them to remain with foster carers to age 21, there is no statutory provision for young people in residential care to stay where they are beyond 18 years or remain in contact with their carers.

This inequity has been recognised nationally and has resulted in the development of a government funded pilot programme to test out approaches to supporting residential care leavers to remain in contact with their carers beyond the age of 18. The approach, known as Staying Close, is being tested across eight programmes in England, though it being developed more widely. Approaches vary, though share a common aim to provide a planned and supported transition from care and ongoing support and contact with key adults aftercare.

Our paper will discuss the context in which Staying Close has been developed, how it might fit with wider leaving care policy and support and the potential for Staying Close approaches to provide ongoing support and improve outcomes for residential care leavers.

As the pilot programme is in its early stages, it will not yet be possible to provide data on its impact on outcomes for young people using this approach, however the paper will outline the research methodology (including the outcome areas identified as indicative of a positive transition from care), and describe the range of approaches being developed within the pilot programme.
Profiles and Needs of Young People in Therapeutic Residential Care in Spain

Wednesday, 3rd October @ 16:45: The Role of Residential Care in Child Welfare Systems (Venue: Arquivo)

Ms. Carla González (University of Oviedo), Ms. Alba Águila Otero (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo), Prof. Amaia Bravo Arteaga (University of Oviedo)

BACKGROUND: There is extensive evidence about the high prevalence of mental health problems in children and young people in residential care in Spain. A recent research carried out with 1216 children and young people in that country has shown that 49% of cases were receiving some kind of mental health treatment and 61% were identified as clinical in some of the broad band scales of the Child Behavior Checklist (CBCL) (González-García et al., 2017). Although those figures are really significant, international research shows special concern on the group of adolescents with particularly severe emotional and behavioral problems who need more specialized resources. The use of therapeutic residential care, as recently defined by Whittaker, Holmes and Del Valle (2014) is a matter of concern for practitioners and policy makers in the international arena. In the case of Spain, the Ombudsman drew up a report in 2009 which concluded the diffuse and hardly interventions, as well as the scarce supervision by the public authorities. Therefore, the reform of the Spanish Child Protection Law in 2015 has included a chapter exclusively devoted to the regulation of this “specific centers for adolescents with behavioral problems”. Despite the importance of this type of therapeutic care, there is a lack of knowledge in this field of research. There are no references about the profile that is attended, the procedures to refer young people to those services or the quality and effectiveness of the interventions in Spain.

OBJECTIVE: In view of the above, our aim is to analyze the profile and needs of the young people attended in specialized therapeutic residential care in Spain.

METHOD: In order to achieve this objective. The sample is made up of 759 young people in children's homes, of whom 379 were in therapeutic residential care (TRC). As a comparison group, young people were selected from regular homes network in equal numbers for age and sex. We have analyzed personal and family background of young people from their official files and key social educators, as well as previous child care interventions made. Variables related to the situation in the current placement (substance consumption, risky behaviors, contacts with their families, etc.) were informed by key social educator of each young person. We also collected information about the type and characteristics of treatments that each young person was receiving. This last information was reported by the psychologist of the residential facility when possible or the key social educator. Finally, a screening test (Youth Self-Report) was applied to assess the young people mental health status.

RESULTS AND CONCLUSIONS: There were differences in the time spent in residential care, with the comparison group staying longer in residential care. However, TRC had a higher number of changes of placement than comparison group. On examining, differences in clinical scales on YSR, TRC group had a significantly higher percentage than comparison group in the externalizing and total scale but there were not differences in the internalizing scale. Results will provide public authorities and policy makers with valuable information to improve the intervention model of these therapeutic facilities taking into account their high economic, social and human cost.
Research and social work policies emphasize the importance of encouraging positive parent-child contact to enhance the well-being of children in care. This large-scale study examines youth reports on the level of perceived support and frequency of contact with their fathers and mothers. The study is based on reports of a random sample of 1,409 young people, aged 13 to 20 in residential care in Israel. The study maps the adolescents’ most significant sources of support and shows that the importance of support from various family and extra family possible sources of support changes according the youth’s characteristics.

Overall the study reveals increased frequency of contact and support of mothers as compared to fathers, though fathers are still as a whole involved highly in the adolescents’ lives. The study identifies groups of young people at risk of reduced contact with their fathers and with their mothers. For example, adolescents reporting more geographic distance were vulnerable to reduced contact and support by both fathers and mothers, while girls from divorced parents were vulnerable especially to reduced support by their fathers.

The findings have implications for child’s pre-placement decisions and for designing intervention programs to strengthen child-parent contact while in residential care.
Biographical Meaning of Participation for Children from Foster Care

Dr. Daniela Reimer (Zurich University of Applied Sciences, School of Social Work)

Participation in important decisions is defined as a child's right in the UN Children's Rights Convention. Theory and Practice in Social Work agree that it is important to engage children in decision making processes. But too often, children themselves do not feel able to participate and feel powerless in the face of decision making processes.

The presentation wants to take a closer look on the longer biographical meaning of participation and non-participation for children and young people from foster care. It argues, that biographical perceptions of the foster care experience and the development of one's identity are widely influenced by the possibilities as well as the lack of possibilities to engage in decisions.

The background of the presentation is an ongoing biographical research with young people from foster care. 100 biographical interviews (each several hours) with young adults have been conducted and analyzed (with varying intensity). In some cases (n=15) 4-8 years after the first interview, follow-up interviews have been conducted. All over this research, participation as well as a lack of participation have been identified as pivotal topics.

First of all, I would like to present my understanding of children's participation in the context of foster care, including the professional prerequisites of participation. The latter include particularly the perspectives professionals have on foster children as well as own professional self-concepts and the ability to talk to children (of all ages). Then, I would like to present with examples from biographical interviews the experiences and consequences of participation and a lack of participation in: the transition into foster care, situation of crisis in foster care, contact with biological parents and siblings. It will be shown that a lack of participation tends to lead to feelings of loss of control, powerlessness and questioning the own identity as a normal person. Whereas successful participation process leads to a growth of self esteem, confidence in the self and one's abilities as well as in other people, a sense of control over one's life and the capacity to grow personally through difficult moments. Situations of misunderstood participation will also be presented, where adults hand over responsibility to children pretending participation but overcharging the child.

At the end of the presentation, consequences for social work practice and further research in foster care are discussed.
The View of Professionals on Children’s Participation in Dutch Child Protection Investigations

Wednesday, 3rd October @ 16:15: Are We Ready to Face the Challenges of Participation of Children and Families in Child Protection Interventions? (Venue: Auditório)

Ms. Helen Bouma (University of Groningen), Dr. Mónica López López (University of Groningen), Prof. Hans Grietens (University of Groningen), Prof. Erik J. Knorth (University of Groningen)

Objectives
Worldwide, there is growing recognition of the importance of children’s participation in the child protection system (CPS). This attention is mainly driven by the right of children to participate, as formulated in article 12 of the UNCRC. Furthermore, scientific research reports on the advantages of children's participation for their health outcomes, but also for the success of interventions (Ten Brummelaar et al., 2018). However, research shows that participation of children in child protection practice still needs to be improved (Van Bijleveld et al., 2015). On the practice level, professionals play a crucial role in the participation of children; their knowledge, skills, values and experiences are important factors in this context. Therefore, this study investigates the views and experiences of professionals with children's participation in child protection practice.

Method
In this qualitative study, we conducted 31 interviews with professionals working in child protection agencies in the Netherlands. We asked them what they think participation of children should involve, whether they think that children’s participation is important, which reasons they have to do and do not involve children and which facilitating and limiting factors they experience in everyday practice. We thematically analysed these interviews to investigate whether the concept ‘meaningful participation’ of children is implemented in child protection practice. We based our analysis on our model of ‘meaningful participation’ which we developed by scrutinizing the General Comment of article 12 of the UNCRC and by reviewing literature on the experiences of children with participation in the CPS (Bouma et al., 2018). This model brings together three core dimensions of participation (informing, hearing, involving) and participation as an ongoing process.

Results
Preliminary results of our first analyses show that professionals have different ideas about and various experiences with children’s participation in child protection investigations. Whereas some of them say that they never have a reason to do not involve children and that it is not possible for them to conduct a good child protection investigation without involving the child, other professionals emphasise that it is not always in the best interest of children to involve them and that children's participation does not always have added value to an investigation. Many participants mention that they, as professionals conducting child protection investigations, are only involved for a short period of time, which makes participation of children more complex.

Conclusions
As children are often dependent on professionals regarding their possibilities to participate, it is important to get insight in professionals’ views on and experiences with participation. This study provides knowledge on professionals’ ideas about the importance of children's participation, the way professionals do involve children in Dutch child protection investigations, and supporting and limiting factors in everyday practice to involve children. The study adds to our knowledge on children's participation and may help to improve child protection practice.

References

How to Help Professionals to Include Children and Family Participation in Their Practices Through Group Intervention: Professionals’ Attitudes

Wednesday, 3rd October @ 16:30: Are We Ready to Face the Challenges of Participation of Children and Families in Child Protection Interventions? (Venue: Auditorio)

Dr. Nuria Fuentes-Peláez (University of Barcelona), Dr. Ainoa Mateos (University of Barcelona), Dr. Mcruz Molina (University of Barcelona), Dr. Belen Parra (University of Barcelona)

Professional support of families that are under temporary protection, with the goal of reunification, is necessary for helping families re-establish positive family dynamics. Without this support, the conditions that contribute to child abuse and neglect will likely persist. In this context, we analyse the attitudes of professionals towards group intervention, resilience, positive parenting and child participation before and after participating in initial training and develop a group program intervention.

Method
Quantitative methods were used. Two instruments were designed ad-hoc for the study: a) an identification sheet for collecting the professionals’ socio-demographic characteristics and b) an ad hoc questionnaire for capturing good professional practices to favour work with families in foster care and reunification processes, based on the Best Practice Guide of positive parenting (Rodrigo et al., 2015).

The identification sheet collects both socio-demographic and professional information, specifically, socio-demographic data (e.g., sex, age), contact information, professional experience, the type of methodologies and interventions performed in work with families, and the type of information received.

The second instrument, the questionnaire of good practices, was designed to determine participants’ agreement with the statements on good professional practice presented with regard to the four variables presented. Agreement with the statements was assessed on a scale from 1 to 5, where 1 indicates “I completely disagree”, and 5 indicates “I completely agree”. See Table 1.

The study was conducted with 119 professionals from Spain and Portugal who work in the child protection system.

Results
The results show a high degree of consensus among professionals regarding the following practices: (a) incorporating positive parenting and resilience into family reunification processes; (b) training the biological parents in parenting skills; (c) promoting the active participation of children in the foster care and reunification process and (d) group intervention as a methodology to increase family participation, family support and cohesion. Nevertheless, while it is clear that the attitude they generally show towards family resilience is positive, it has been observed that when they professionals face assertions that directly challenge the family skills’ to change, as their capability to take decisions, they struggle to come to a consensus and disagreements are more common. Regarding the latter point, the study found that older and more experienced professionals are more open and inclined to promote participation in family reunification processes.

Conclusions
The practical implications of the results invite us to review competencies training for professionals working in child protection services, focusing on encouraging a positive attitude towards the parental competencies of the biological family and the active participation of children in foster care and reunification. These professionals’ attitudes are a key factor in mediating the process of family reunification.
A competence-enhancement approach has become an increasing focus in professional work with parents and children in reunification programmes. Counteracting the inevitability of an out-of-home placement, this approach assumes a psychoeducational perspective prioritizing family needs, the strengthening of family resources and resilience to overcome the adverse effects of the child protection measure. Particularly, the involvement and the participation of the birth family are regarded as essential processes for a successful outcome in the context of residential care and family reunification. Current research on this topic has shown that family participation is a catalyst for the return of their children home, promotes the parents’ agency and helps a better understanding about the real motives of the separation.

Moreover, abiding prevention policies and evidence-based methods there is a growing concern about providing interventions in the context of family-services partnerships and collaborative researches. Still, professional work face critical challenges throughout program implementation. Therefore, the goal of the present study is to systematize professional challenges in the realm of program implementation, their possible causes and how they affect the family reunification processes. As part of an ongoing bilateral research in Spain and Portugal, the sample for this study uses previous data basis gathering 91 accounts of Spanish (n=63) and Portuguese (n=38) professionals. Taking into account the similarities and differences across child protection systems in the two countries, the analyses present the multiplicity and complexity of processes that influence the professional commitment to the programme throughout its implementation. Additionally, these results allow us to consider the importance of congruent professional practices that are bound to non-stigmatizing and needs-led ways sensitive to the parents and children participation in the reunification process. Likewise, other changes in professional ethos and organizational dynamics in the context of the residential care and inter-institutions relations will be discussed.
The History and Changing Policy towards Open Adoption in Australia

Wednesday, 3rd October @ 16:00: Open Adoption from Welfare Care: The Australian Experience (Venue: D. Maria)

Dr. Betty Luu (University of Sydney), Prof. Amy Conley Wright (University of Sydney), Dr. Susan Collings (University of Sydney)

Objectives: Australia has a troubled history with adoption; a legacy of forced and ‘closed’ adoptions and the systematic removal of Indigenous children, known as the ‘Stolen Generations’ during much of the 20th Century. Adoption was believed to give children a ‘clean break’ but evidence shows that closed and forced adoptions denied children the chance to know an important part of themselves and had detrimental and lifelong effects. Australian adoptions now reflect an open model, which has greater emphasis on birth parents’ and children’s rights, retention of identity, preservation of cultural heritage, and maintenance of birth family contact. This presentation will outline recent efforts to increase the number of open adoptions from care of children in New South Wales. Adoption is not culturally appropriate for Indigenous children and placement with kin is expected to occur if possible.

Method: National statistics and public reports will be used to trace the history of adoption in Australia. Policy and legislative reforms to out-of-home care in New South Wales will be outlined. Statistics on the rates of adoptions from care since 2014 and decision-making timeframes will be presented. Permanency pathways for Indigenous children will be discussed.

Results: Changes in social mores and welfare reform led to a dramatic reduction in the number of infants adopted in Australia from the 1970s. In recent years, there has been a steady increase in the number of children in out-of-home care. Many of the 47,000 children in out-of-home care could expect to spend their entire childhood in care. New South Wales has led moves to increase permanency via open adoption. In 2015-16, 68 of the 70 adoptions from care in Australia occurred in New South Wales and the following year this number had risen to 131. Decisions about permanency options must now be acted on within one to two years of entry to the care system.

Conclusions: Policy reforms in New South Wales have succeeded in increasing open adoptions from care as a permanent placement option for children who cannot return home safely. Aboriginal and Torres Strait Islander children continue to be significantly over-represented in out-of-home care nationwide. With adoption considered a last resort in New South Wales, attention needs to move to strengthening alternative pathways to permanency, including through guardianship, for these children.
The Background of ‘Hard to Place’ Children Adopted from Welfare Care: Findings from the Australian Open Adoption Outcomes Study

Wednesday, 3rd October @ 16:15: Open Adoption from Welfare Care: The Australian Experience (Venue: D. Maria)

Dr. Susan Tregeagle (University of Sydney and Barnardos Australia), Ms. Lynne Moggach (Barnardos Australia), Prof. Harriet Ward (Universities of Loughborough and Oxford), Ms. Helen Trivedi (Universities of Loughborough and Oxford)

Objectives
The objective of the research described is to measure the adversity experienced pre-adoption by children selected for adoption on the basis of being ‘difficult to place’. These findings demonstrate the feasibility of adoption for very emotionally vulnerable children and enhance case workers’ understanding of the health and behavioral issues that they present. The research goal is to inform caseworkers about complex adoptions and enhance stability and identity for the adoptees.

Method
This research is part of the Australian Open Adoption Outcomes study (AOAO) conducted by Barnardos Australia and the Universities of Oxford and Loughborough. The study assesses outcomes of open adoption practice for 210 children adopted from out-of-home care between 1987-2013. Data is available on the whole cohort of adoptees and outcomes will be assessed over twenty-six years of practice. This part of the AOAO has involved examination of administrative files and adoption records on the children’s characteristics and experiences before entering their adoptive homes.

Results
Many of the adoptees had encountered a high rate of Adverse Childhood Experiences (ACEs) within their birth families, including significant abuse and neglect, and are known to be associated with poor life outcomes. In the Australian out-of-home care system, their vulnerability was increased through factors such as long periods between first notification and entry to care, failed restorations, disrupted kinship care placements and multiple moves between foster placements. By entry to their permanent placements, a high proportion of the adoptees had significant emotional or behavioural problems and more than half had at least one diagnosed health condition or disability. All of the children had at least one experience that was significantly related to poor outcomes, with most having had three or more; more than half the children were assessed as being at high risk and 15% at extremely high risk of adverse outcomes in adulthood.

Analysis of data collected about birth parents found a high prevalence of substance abuse, mental health issues and domestic violence, often in combination. Such issues are known to have an adverse effect on parenting capacity and are likely to have implications for ongoing contact through open adoption arrangements. Adoptive parents were found to be in stable relationships, financially secure and well-educated. Their primary motivation for adoption was infertility.

Implications
The implications of adverse childhood experiences and decisions of the child welfare practitioners are extreme vulnerability for adoptees from care. However in practice, adoptive families can be recruited to care for them. Knowledge of the adoptees’ vulnerability facilitates caseworkers in preparing families for the task of parenting the adoptee and maintaining contact arrangements and provides evidence to assist consideration of long-term post adoption support.
Understanding and Overcoming Implementation Barriers to Adoption from Foster Care in the Australian Child Welfare Workforce

Wednesday, 3rd October @ 16:30: Open Adoption from Welfare Care: The Australian Experience (Venue: D. Maria)

Dr. Melissa Kaltner (Department of Family and Community Services NSW), Ms. Simone Czech (Department of Family and Community Services NSW)

Objective

Open adoption is infrequently utilised in many settings, despite evidence of its ability to provide stability for children who are unable to safely reside with their birth families. This presentation describes a series of action research projects which focused on the drivers of adoption practice in the state of New South Wales, Australia, and outlines the development of sector adoption capacity arising from these activities.

Methods

An Action Research and Learning Model was implemented within this setting to conceptualise and support practice, with a number of project iterations to this end. A large-scale mixed-methods study of child protection and OOHC practitioners across the state (n = 614) was initially undertaken. This study examined baseline practitioner knowledge on adoption from care, attitudes towards adoption and perceived practice enablers and barriers. The study employed the use of sector wide surveys with practitioners in both Government and NGO settings. Alongside this survey, interviews and focus groups were also undertaken to thoroughly conceptualise adoption practice drivers. The study analysis focused on barriers and enablers to adoption practice to provide a basis for future sector support. Through this analysis, workforce capability, capacity, communication and culture were identified as key practice issues necessary to address to support sector practice.

Findings from this study were then used to inform adoption practice refinements. This included addressing capability and confidence barriers identified in the study through developing and implementing a series of evidence informed training events delivered across the state. Alongside these sector training efforts, the study findings also informed the development of structural and procedural changes in adoption from care practice. This included the implementation of an Adoption Taskforce. The Taskforce model carries out fast cycles of ‘build, measure and learn’ to inform current and future adoptions processes and practices.

Findings and Implications

The implementation of these projects resulted in an unprecedented 129 adoptions from care during the 2016 - 2017 period, representing a 93% increase on the previous year’s adoption orders. The drivers of adoption practice identified by the study and the specific changes implemented as a result of this work of relevance to other jurisdictions will be focused on within this presentation. The action research undertaken to date highlights how adoption practice can be supported through structural changes and workforce education to result in tangible permanency outcomes for children in care.
Children’s Best Interests and Contact Orders in New South Wales Supreme Court Adoption Matters: A Case File Audit Study on Contact Decision-Making

Wednesday, 3rd October @ 16:45: Open Adoption from Welfare Care: The Australian Experience (Venue: D. Maria)

**Dr. Betty Luu (University of Sydney), Prof. Amy Conley Wright (The University of Sydney), Prof. Judy Cashmore (University of Sydney), Dr. Susan Collings (University of Sydney)**

**Objectives:** In 2014, New South Wales (NSW) state legislation established a preference for open adoption over long-term foster care in an effort to increase permanency and security for children in care. The NSW Supreme Court applies the ‘best interests’ principle to decide whether an adoption order should be made for a child who is in out-of-home care. This includes decisions about a plan for post-adoption contact with birth relatives. Given these reforms are current and their likely impact on children’s ongoing relationships with birth and adoptive families, it is important to understand what influences judicial decision-making.

**Methods:** Descriptive analysis was undertaken of all judgments relating to adoption applications to the Supreme Court of NSW for children in out-of-home care during 2017. This data included the conditions for post-adoption contact. Information about contact was summarized directly from case files by a member of the research team, removing identifying information. Three researchers independently coded the data, using an inductive approach based in grounded theory.

**Results:** Preliminary themes reveal the dynamic nature of contact from entry into care, the time of the judicial hearing and future plans for contact post-adoption. There were strong normative views expressed about the value of contact for identity purposes as rationale for ongoing contact. Judges expected adoptive parents to demonstrate an existing commitment to birth family contact and to show that contact has been attempted or was underway. Additional analyses are currently underway regarding views of the child, birth families and adoptive families, and will be reported at the conference.

**Conclusions:** This research has implications for legal practices around interpretation of the ‘best interests’ principle regarding children’s ongoing relationships with birth family. There are also implications for social work practices to encourage and sustain positive contact experiences between adopted children and their adoptive and birth families.
Achieving Legal, Residential and Psychological Permanence for ‘Hard to Place’ Children Adopted from Care in New South Wales

Wednesday, 3rd October @ 17:00: Open Adoption from Welfare Care: The Australian Experience (Venue: D. Maria)

*Mrs. Helen Trivedi* (University of Oxford), *Prof. Harriet Ward* (Loughborough University), *Ms. Lynne Moggach* (Barnardos Australia), *Dr. Susan Tregeagle* (University of Sydney and Barnardos Australia)

**Purpose:** International research has shown that children in long-term foster care often experience frequent changes of placement and school, insufficient integration into a substitute family and inadequate support when they make the transition from care to independence in early adulthood. The purpose of this study was to explore whether open adoption (with regular face-to-face contact) offers better opportunities for stability and permanence for children in out-of-home care in Australia who cannot return to their birth families.

**Methods:** This study is one element in a more extensive programme designed to explore the life trajectories of a cohort of children adopted from out-of-home care in New South Wales between 1987-2013. For much of this period the programme focussed on finding permanent adoptive homes for children identified as ‘hard to place’. Data concerning children’s experiences before entering their adoptive homes were collected from administrative files and adoption records; quantitative and qualitative data concerning subsequent experiences were collected through responses to an on-line survey and through face to face interviews with adult adoptees and adoptive parents.

**Findings:** The whereabouts of 121 (58%) of the adoptees were known at follow-up. The findings suggest that the vast majority, including those who had experienced numerous placements while in care, found stable, permanent adoptive homes. The adoptees were also older when they left home than most care leavers, and they received more extensive, long-term support as they made the transition to adulthood. Not all placements were stable. At least twelve (12%) adoptees had left home before they were eighteen, and fourteen (28%) of those who were no longer living with their adoptive families had left for non-normative reasons. However, the findings also demonstrate that residential permanence was not the same as psychological permanence; they show how most adoptees developed close attachments to their adoptive parents and became firmly integrated into their families, including some of those who found they could not live together. Adoptive parents also developed strong parental relationships with adoptees and continued to support those who had returned to birth families or who had left their homes following intense conflict. Most adoptees had face-to-face contact with birth parents following placement; however as adults, almost all identified themselves as members of their adoptive families. By the time of the survey (on average 19 years after placement) only five adoptees appeared to have no ongoing relationship with adoptive parents. The presentation will focus on how the majority of adoptees developed a sense of psychological permanence with their adoptive families, while often retaining a continuing link with birth family members.

**Implications:** The study provides policy makers and practitioners with strong evidence of the value of adoption for children in care who cannot return to their birth families, and demonstrates how such placements can offer a route to permanence for older children who have extensive experience of abuse. The findings can also inform debates concerning the advantages and disadvantages of face-to-face post adoption contact in helping very vulnerable children to develop a sense of stability and security as they become integrated into substitute families.
Adolescents in Residential Child Care in Portugal: Exploring Profiles and Needs

Wednesday, 3rd October @ 16:00: Children and Adolescents Experiencing Care (Venue: Arrábida)

Mr. André Tavares Rodrigues (University of Oviedo), Ms. Carla González (University of Oviedo), Prof. Amaia Bravo Arteaga (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo)

There is an international consensus about the need to develop needs assessments in the field of adolescents in residential care. These adolescents have experienced adverse conditions, living in their family environments and most of them have suffered different types of abuse and neglect. There is a clear scientific evidence of the way in which these situations have an impact in psychological functioning. Despite the fact that residential care is the most common protection measure adopted in Portugal when children need to be taken away from their families, there is still a gap in knowledge about the needs of these young people.

The research available is quite limited because there are few studies and they are based on small samples. Given this need, this study aims to provide information about the characteristics of young people who are in residential care homes in Portugal. To reach this objective, the design of this study has included a comparation sample from Spain. The inclusion of a Spanish comparative sample provides a better understanding of the profile of Portuguese children in residential care. The geographical and cultural similarities between both countries and the availability of studies in Spain make it a useful reference point.

The sample for this study is made up of 345 young people between 16 and 17 years old from different residential facilities located in Portugal. The Spanish sample comprised 385 young people in the same age range. The following information was collected through a questionnaire that was designed for both research projects: 1) information about protection measures (mean of stay, reason for care, break-downs of foster care and adoption etc.); 2) risk factors in their families 3) scholar functioning (educational level, existence of any kind of change to their curriculum, diagnosis of special needs) 4) information related to emotional and behavioral needs of each young person and individual risk factors (type of treatments they were receiving, existence of a diagnosis of intellectual disability, suicidal behavior etc.)

The results showed that the average stay is significantly higher in the sample from Portugal (M = 61.28 vs. 44.14). In addition to breakdown experiences, Portugal also showed higher percentages of adoption break-down (8.7% vs 1.8). Both samples showed complex family profiles, but there was a greater presence of risk factors in Portuguese sample in comparison to the Spanish one. Results related to mental health status revealed the high percentage of young people with psychological (56.2% vs 40.2%) and psychiatric treatment (36.2% vs 23.4%) in both samples Furthermore, the results also showed that there was a high percentage of young people with a diagnosis of intellectual disability.

Our results reveal the complexity of the profile of young people in residential care in both countries. The results show a high presence of mental health problems, individual risk factors congruent with adverse early experiences as well as poor school functioning. Furthermore, this research has also revealed that the profile in care in Portugal is more complex compared to Spain. In accordance with these results, efforts should be directed toward developing residential care facilities adapted to these characteristics to ensure the success of interventions.
The Long and Winding Road: Adolescents’ Process of Adaptation to Long-term Residential Care

Wednesday, 3rd October @ 16:15: Children and Adolescents Experiencing Care (Venue: Arrábida)

Prof. Luiza Nobre Lima (CINEICC; Faculdade de Psicologia, Universidade de Coimbra)

Based on the paradigm of Dan McAdams, according to which identity is constructed narratively, an exploratory research of qualitative nature was conducted on the life stories and the projects for the future of adolescents placed in residential care. Among others, this study aimed to answer the following research question: How do adolescents placed in residential care describe their experience of institutionalization? Following the Grounded Theory methodology, 17 adolescents, aged between 15 and 18 years old, with a minimum of 5 years of institutionalization, were interviewed. The results showed that the narratives about the experience of institutionalization reflect a process of adaptation to residential life that runs through 3 stages – (non)acceptance, revolt and resignation – which resemble a process of mourning for the absence of their family. Soon after the placement, children start to feel sadness, solitude, revolt and a feeling of abandonment that will last for very long. During this period they idealize their families which reinforce the desire to go back to them. The resignation stage is reached when the teenagers find a meaning for their institutionalization, in which case they rationalize the pretext that their placement under residential care was the possible life alternative, so their future could be better. From the findings obtained during this research some practical implications were taken, which concern some aspects of the care provided to the institutionalized children and adolescents: the loss of attachment figures; the possibility that placement can become a traumatic experience; the traumas they already have; and the need to orient them towards the future.

Keywords: adolescents; residential care; narratives; process of adaptation
This presentation focuses on children’s experiences in residential care in Finland. The study is carried out in National Institute for Health and Welfare during the period of 1.3.2017–31.12.2018 and is based on the notion that we have still little research based knowledge about the wellbeing and experiences of children living in residential care. Listening to looked after children’s and young persons’ experiences about their lives in care is thought to be one of the key elements to understanding the quality of the residential care. However, very little is known about what looked after children identify important themselves.

The presentation is based on the interviews with fifteen young people (nine females and six males), who were 12 to 17 years of age. They live in different residential units and five of them have experiences of several placements and placement breakdowns. Interviews were conducted between September 2017 and March 2018. It has been argued that some research designs allow very little leeway for young people’s individual constructs of their experiences. In this project the interviews were conducted according to the principles of active interviewing (Holstein & Gubrium 1995), where the interviewer and interviewee are considered as equal and active partners in constructing meanings around the interview themes. The interview situations were constructed as dialogical as possible to give young people the opportunity to concentrate on the subjects they consider the most important.

In this presentation I will present preliminary findings of the study: young people’s experiences of every-day care practices, during the placement and experiences of placement moves. For these young people the experiences of being heard and being involved in decision-making on their everyday life and placement moves were important.
Discovering Who I Am - Exploring the Optimal Conditions for Positive Identity Formation in Residential Child Care

Wednesday, 3rd October @ 16:45: Children and Adolescents Experiencing Care (Venue: Arrábida)

Mr. Gerry Marshall (Queen's University Belfast)

Rationale
Young people who live residential child care are likely to have been exposed to multiple adverse childhood experiences (Clough et al, 2006). Research indicates that these experiences can affect their emerging sense of identity (Fonaghy and Target, 1997). Developing a sense of self and self-worth is an intersubjective process and inextricably linked to the successful development of relationships with key figures in our lives (Mead, 1934, Gilligan, 1982, Moshman, 2011). Research shows that young people in care have not routinely been provided with the service or therapeutic environment that could assist them to construct positive identity formation in this setting (Selwyn et al, 2006). Identity formation has been linked with improved outcomes for care leavers however the paucity of in-depth research in this area is clearly noted (McMurray et al 2011; Ferguson, 2018).

Objectives
- To work collaboratively with a selected group of professionals, academics and young people in care and establish indicators of quality residential child care
- To explore what is the necessary milieu, culture and caring environment which allows for the positive development of a young person's identity in a children's home

Method
This is a qualitative research project designed in three inter-locking stages which uses three separate focus groups and semi-structured interviews to explore and develop a set of indicators about what constitutes quality residential child care in Northern Ireland. This is with special reference to the identity formation of young people in state care. The participants in these included social services inspectors, academics, team managers of homes and front-line care staff. One focus group was constituted entirely by young people currently living in residential care.

Results
Research fieldwork is on-going. Based on preliminary data gathered from semi-structured interviews and focus groups this presentation will highlight:
- Identify formation of young people in care is under-researched in Ireland and the UK and receives little attention in literature
- The state residential care system for young people in Northern Ireland is currently uninformed about identity formation and how to best promote it in children’s homes
- The presence of a therapeutic ‘life space’ in homes is crucial to positive identity formation. Yet in Northern Ireland we are not measuring whether the homes are providing such a therapeutic environment for young people to grow and develop a positive sense of self
- The quality of care provided by staff is critical to developing this ‘life space’. Yet we do not incorporate this concept into the professional training of staff prior to becoming qualified in social work nor afterwards in professional practice
- The individual qualities of staff are critical to creating a person-centered culture of care. This includes their level of emotional intelligence, practising their ‘values-in-action’ and being an ‘authentic practitioner’ as well as more classic emphasis on skills and knowledge. We need to develop a more sophisticated way of assessing the personal and professional qualities of staff. This has implications for the professional recruitment and training of care staff.
- Team managers in homes embody the caring culture of the home and set the standards for the rest of the
staff group. We need to explore how to best recruit, support and train team managers to sustain themselves and the home.

Conclusion
This research highlights that identity formation of young people in state care is under-researched in Ireland and the UK. This has implications for the selection and training of staff and managers in residential childcare. This study incorporates an innovative theoretical construct which yields an original approach to understanding how to better support and care for young people living in children's homes.
Strategies of Youngsters in Vulnerable Situations Facing Difficulties in Relation to Youth Care Interventions

Wednesday, 3rd October @ 17:00: Children and Adolescents Experiencing Care (Venue: Arrábida)

Mr. Jan Naert (Department of Special Needs Education, Ghent University), Prof. Rudi Roose (Department of Social Work and Social pedagogy, Ghent University), Prof. Wouter Vanderplasschen (Ghent University - department of special needs education)

Background: Accessibility and continuity are two main concerns in the present youth care system. First, reaching youngsters in vulnerable situations presents challenges for the youth care system. Secondly, young people express difficulties in experiencing continuity in their care trajectories over time. Different interventions are put forward to address these difficulties. There is increased attention for community-based youth care interventions, and coordination and case management initiatives are established to address problems related to continuity of care. Previous research on narratives of young people showed that there might be a gap between professional conceptualizations of continuity of care and the way young people themselves experience this continuity. Moreover, some strategies of young people who face difficulties, such as lack of agency and co-ownership in regular care, might lead to flawed interpretations and more problematic, even to more damaging interventions (Naert, 2018, submitted). Shedding light on some of the coping strategies, can help in reducing the unwanted pressure on young people. This is the topic of this presentation. The study is part of a more comprehensive PhD-project, in which different perspectives on continuity and coordination of care are compared and analyzed.

Objective: We aim at gaining insight in different strategies of youngsters in vulnerable situations who face difficulties in their trajectories in relation to youth care interventions.

Method: 25 youngsters were interviewed about the experienced continuity in their trajectories both in and out the youth care system. 13 youngsters were recruited in low threshold youth work services in Ghent. The other youngsters (n=12) were recruited in residential youth care services. By retrospective reconstruction of their trajectories in relation to youth care, youngsters were able to express significant moments in their biographical timeline. By exploring these moments, we got an in-depth view on how young people experienced different interventions and how they created ways to deal with difficulties related to care interventions.

Results: Three main themes surfaced in the narratives of young people. First, all of these youngsters were confronted with periods of existential chaos in their trajectories. Secondly, there is lack of support at these specific moments. Thirdly, young people face a fundamental lack of agency throughout their contacts in relation to youth care. Young people develop different strategies to cope with these difficulties. We discerned the fighting, the fleeing and the freezing strategy. Some of the young people develop an oppositional strategy towards care and its related aspects. Others try to flee from care and develop different strategies in order to do so. Some young people talk about being in care while not really ‘be’ in care (freeze). Although different strategies emerge within the narratives of each individual youngster, there are also youngsters who develop a dominant strategy to deal with different interventions.

Discussion: Discerning the strategies of young people and looking in different ways at behavior of young people can create space to divert from classic interventional logics. This can create new spaces of development for both youngsters in (close contact with) care, but also for youth care workers. More open ways of working and a recognition of symptomatic reactions to - at times – reductive interventional logics could create more flexibility for fieldworkers. Open-ended care programs with more co-production in their own trajectories pose some challenges for youth care. During this presentation we will conclude by reflecting on the results and look for ideas or themes that might be important to further deepen this discussion.
Leaving care policy is focused on improving outcomes for young people moving on from state care with an emphasis on independent living and engagement in further education and employment. Whilst these are important markers of success in young adult life, there is a growing recognition of care leavers’ wider needs in developing their sense of self and place in society.

This presentation will share the experiences of 31 care leavers with mental health and/or intellectual disabilities in Northern Ireland who were interviewed up to three times as they transitioned from state care. Their stories are punctuated with reflections on their past which bear much influence on their experience of leaving care including: their understanding of the reasons why they came into care; the development of mental health and/or disability related needs; their experience of state care and schooling; and their relationships with birth families over time.

It is clear that leaving care services need to focus on assisting young people with mental health and/or intellectual disabilities to develop the independent living skills they need for their adult lives with support, if necessary, from specialist adult services. However, it is also clear from the accounts of the study participants that equal importance needs to be given to supporting them to make sense of their past experiences of care and mental health/disability in order to enable them to reframe and develop their identities as they move into their young adult lives.

Too often when children’s services cease at around 18 years old, there is a fracture in support based on how services are organised and not the young person’s needs. For care leavers, this often leads to an abrupt end to familiar arrangements and relationships. The findings from the study suggest that, in addition to the traditional focus on independent living skills, support for care leavers should offer continuity of care, give greater attention to relationships and identities, and provide integrated person-centred services with flexible overlapping between child and adult services.
Transitional Housing for Youths Graduating from Care – Positive Outcomes and Persistent Issues

Wednesday, 3rd October @ 16:15: Coping with Challenges after Leaving Care (Venue: Ribeira I)

Dr. Talia Schwartz-Tayri (Tel Aviv University School of Social Work), Ms. Edna Glebocki (The council for the child in care), Ms. Tamar Milliner (The council for the child in care), Prof. Shimon Spiro (School of Social Work, Tel Aviv University)

The Bridge to Independence program aims to provide youths who leave residential group homes or foster care, and cannot be reunited with their families, with a roof over their heads, emotional and instrumental support, and services that they need during their transition to adulthood. A first follow-up study, conducted in 2013, focused on how youths who graduated from this program fared in terms of their military or civilian service, housing, tertiary education, employment, income, health, leisure activities, social relations, and general satisfaction with their lives. The study also obtained retrospective evaluations of the youths' experiences as residents in transitional housing provided by the program. Semi-structured interviews with 25 participants revealed a complex picture of young people facing a variety of hardships, and experiencing some of the same challenges that, according to the literature, other youngsters face when they first graduate from care. Furthermore, the interviews revealed that in the transitional housing units issues of fostering independence while providing a safe environment were only partly resolved.

Findings of this survey were presented to the steering committee and the staff, and a number of changes were made in the program. These included efforts to develop support networks among participants, enhanced instrumental and emotional support by program staff after the participants graduate from the program, and special efforts to enhance opportunities in areas such as tertiary education, vocational training and employment. A recent replication of the survey, involving in depth interviews with 30 graduates of the program and questionnaires administered to over 100 youths currently participating in it, revealed improvements in the life situations of the graduates, along with a number of persistent issues that still need to be addressed.
Background
The UK's rhetoric of austerity is centred on the prevailing governmental belief that children should be home with their parents in order to help end a 'culture of entitlement'. Children living away from their families are caught at the harsh end of such policies and have experienced significant cuts in benefit entitlements. Although current campaigns, such as 'Staying Put' aims to secure placements for young people in care up until the age of 21, the reality is that many young people are forced to leave care placements as soon as they reach 18, and many are left without financial or emotional support.

Estimates show that in the UK, an estimated 1.3 million children have been forced to 'sleep rough' or in an 'unsafe place' and that over 255,000 children experience hidden homelessness in the UK on any one night (Clarke et al, 2015). Although these figures are alarming, they fail to capture the experiences of young people without a 'home'. The focus of this paper is to highlight experiences of young people aged 16-21 who have declared themselves as 'homeless' and been subsequently placed in a specialist youth homeless hostel.

Methods
Researchers worked alongside a homeless youth charity to explore experiences of homeless children and young people in one English city. Working with a steering group of six ex-residents, researchers recruited twenty young people to share their experiences of alternative residential care. Participants contributed to the research using a range of methods, including focus groups, peer-to-peer interviews, drawings, timelines and questionnaires. Researchers worked collaboratively with young people to develop research methods and to refine project findings and conclusions.

Results
By sharing young people's everyday experiences, this paper explores youth homelessness in an age of austerity and highlights systematic boundaries that jeopardise the security of children leaving care and those close to 'ageing out' of children's services. Since it is easier for young people to gain support before they turn 18, it was worrying to find that local authorities encouraged children to use informal and short-term solutions to avoid homelessness, such as sleeping on a friend's sofa. Participants recalled being told to 'go back home' when reporting themselves as homeless. For those fleeing from violent and abusing homes, simply 'going home' was not an option and put them sometimes in grave danger. Further complications arose when acceptance onto welfare interventions impinged on parental consent, which was for some almost impossible to gain. As a result, hostel placements were often granted after months of informal homelessness. Young people frequently expressed relief at having finally found 'somewhere safe' that they could stay. Despite experiencing trauma, and often abuse, hostel residents struggled to access mental health support although many reported high levels of stress and mental illness. Although participants received financial aid, all twenty stated that they found it difficult to make ends meet and many missed meals to make money go further. Residents reported that they entered the hostel without the knowledge required to live independently and therefore tended to rely on hostel staff for information around cooking, cleaning, budgeting and nutrition. Official support was considered insufficient and inadequate to meet the needs of young people in crisis.

Conclusions
Since young people were often ejected from tense family environments during times of dispute, the need for parental compliance to trigger aid meant that children and young people were frequently prevented from accessing support. Unsurprisingly, participants reported high levels of stress and anxiety and felt bleak about
their future prospects. This paper addresses the uneasy tension between rights and responsibilities and highlights the significant gaps in provision for young people facing homelessness.
In Canada, youth in long-term government care who have not been adopted or reunited with their biological families are expected to transition to adulthood and become self-sufficient quite rapidly at the age of 18 or 19. This is due to provincial legislation across Canada mandating child welfare agencies to release youth from their care at the age of majority. This contrasts with the experience of their peers, who tend to stay at home up until age 29 and remain interdependent on their support networks throughout their adult lives. According to national estimates, approximately 10% (6,700) of the youth in care population transitions out ('ages out') of the Canadian child welfare system every year. In British Columbia, approximately 1,000 youth ‘age out’ of care on a yearly basis at age 19.

Due to the cut-off of supports, youth exiting care tend to have limited support networks, and most of their connections during their time in care are formal and short-term. These policies and practices hinder the ability of youth exiting care to build social and human capital to support them during transition to adulthood, despite research indicating that supportive long-term relationships can act as a bridge and buffer during this transition. Research also illustrates that the status quo is not working: most young people are at high risk of experiencing difficulties after ‘aging out’ such as homelessness, under-education, unemployment or underemployment, economic hardships, mental health issues, PTSD, substance abuse and early pregnancy or parenthood.

There is a lack of understanding on the perspectives of youth who have ‘aged out’ of care on long-term supportive relationships during the transition to adulthood, in addition to how to establish and maintain those relationships. Child welfare practices and permanency planning often do not include the perspectives of youth in and from care, and their voices are often left out of social change conversations. This collaborative Participatory Action Research (PAR) photovoice project focused on incorporating and elevating the voice of eight youth between the ages of 19 and 29 who have ‘aged out’ of government care in the Greater Vancouver area, in the province of British Columbia. The research aimed to take a closer look, through the power of images and accompanying captions, at the relationships that matter to youth in and from care, and how those relationships can be developed, nurtured and sustained over time in a healthy way.

Photography training and facilitated weekly group discussions were held over the course of 12 weeks. The lead researcher transcribed the photo contextualization and analysis process, from which thematic analysis was conducted as a group during the last 3 weeks of the project. Co-researchers then selected 4 photographs each to be part of an exhibit, and developed accompanying titles and captions. As part of the project research dissemination deliverables, the co-researchers work was showcased at a collaborative photo exhibit event open to the community at the conclusion of the data collection phase in December 2018. Preliminary results showcase the need for broadening the definition of community relationships to include online forms of connection, and broadening the definition of family relationships to include parent-like mentors and pets. In addition, most recommended that pets should be designated as therapy or service animals, as they provide emotional support and healing from PTSD for youth ‘aging out’ of care. Most participants expressed a need for preserving and maintaining sibling relationships while in care, as siblings often get separated and the relationship becomes damaged over time. Connections to spirituality, culture and the land were also identified as important, especially for racialized and Indigenous youth.
Child Welfare Clients’ Successful Transition to Adulthood - Identity Capital in the Making

Wednesday, 3rd October @ 17:00: Coping with Challenges after Leaving Care (Venue: Ribeira I)

Dr. Tonje Gundersen (Norwegian Social Research (NOVA), Oslo Metropolitan University), Prof. Marianne Dæhlen (Norwegian Social Research (NOVA), Oslo Metropolitan University)

The capacity for doing well is perhaps the single most important but least understood part of successful transitions to adulthood among former child welfare clients. Care leavers are known to be at risk of poor outcomes in relation to social as well as individual indicators including education, mental and psychical health, homelessness, unemployment, dependence on social assistance, and crime. Some, however, manage the transition to adulthood more successfully than others do. This project’s goal is to entangle factors that can give us an insight into why some young adults with experiences from child protection services seemingly are on a right track towards doing well. Guided by theories of relational agency and James Côté’s concept of identity capital, this paper explores the importance of relations and meaning for young people's successful transitions to adulthood. Thus, in the current study we argue for the importance of investigating the relationship between tangible resources such as educational credentials and social network and intangible resources like level of self-direction and agentic capacities. The study is part of a three-country project where we have interviewed 24 young people between the ages of 16-30 years in each country that have managed to succeed “against all odds”. Here, we present results from the analysis of qualitative interviews conducted in Norway. Our findings indicate that these young people have some intangible resources making them resist being positioned as a “child protection kid” and that provide them with a will to seek a positive future. These resources intertwined with positive relational experiences as well as their perception of the importance of forming positive social networks and to contribute meaning to their past.
Psychosocial Risks among Child Welfare Workers: A Scoping Review

Wednesday, 3rd October @ 16:00: Improving Quality of Social Workers’ Practices (Venue: Ribeira II)

Mr. Oyeniyi Samuel Olaniyan (University of Bergen), Prof. Anette Christine Iversen (University of Bergen), Dr. Gaby Ortiz-Barreda (University of Bergen), Prof. Hilde Hetland (University of Bergen)

Objectives: The purpose of this scoping review is to assess the prevalence of psychosocial risks among social workers within the child welfare service (CWS). Psychosocial risks refer to interactions between and among work environment, job content, organizational conditions and workers’ capacities, needs, culture, personal extra-job considerations that may, through perceptions and experience, influence health, work performance and job satisfaction. Risks at work have been associated with stress, disrupted productivity, sickness, and other negative health outcomes. Working around children with troubled pasts, vulnerabilities, and complicated upbringing, child welfare workers are oftentimes confronted with innumerable demanding intricacies within their field. In this regard, getting an overview of the types of psychosocial risks exposures for this work group will contribute immensely to enhancing and boosting their performance and well-being.

Methods: We conducted a scoping literature review in the springs of 2018. Using keywords from two widely accepted psychosocial scales (Copenhagen Psychosocial Scale and QPS-Nordic) as our point of departure, we conducted a search in four bibliographic databases (Psych Info, Medline, ProQuest, and Web of Science) and the gray literature to identify relevant studies. We employed a simple analytical framework (search, appraisal, synthesis, and analysis- SASSA) as well as two separate Boolean operators “OR” and “AND” in retrieving relevant studies. a) Filters related to psychosocial risk: Quantitative risks, Cognitive demands Emotional demands, Demands for hiding emotions, Sensory demands Influence at work, Possibility for development, Degree of freedom, Meaning of work, Job commitment, Predictability, Role clarity and Role conflicts. b) Examples of child welfare filters: Child welfare workers, Child welfare employees, Child welfare professionals, Child welfare social workers, Child welfare employees, Employees within the child welfare.

Results: We screened the titles and abstracts of 2534 studies that were identified through the databases. After obtaining 313 full texts, 102 studies were retained for inclusion. To be included, studies had to be peer-reviewed and focus on child welfare workers. Papers had to focus on (or include in its sample) psychosocial risk variable(s). Included studies were published between 2000 and 2018. Majority of the studies were conducted in the USA, survey designed, with focus on turnover or turnover intentions. Other identified psychosocial risks were job dissatisfaction, high workload, job stress, burnout, secondary somatic stress vicarious trauma, work-related trauma effects, role stress, role conflict, role ambiguity, career advancement, unmet expectation, work-family conflict, work-life balance, emotional exhaustion, and organizational commitment. Although most of the included studies in the present review did not report workers’ well-being variables, several studies have documented the debilitating impact of psychosocial risks on workers’ mental health, fatigue, cardiovascular disease, fatigue, health and well-being. Findings points towards too much focus on ‘turnover’ with only few reporting on workers’ well-being and other type of risks like harassment, absenteeism, bullying, etc.

Conclusion: In view of the impacts of psychosocial risks on workers’ health and well-being, efforts should be geared towards improving child welfare workers’ working conditions to reduce exposures to these risks. Research on psychosocial risks is not new, but this review is the first to summarize and analyze existing literature on psychosocial risk among child welfare workers.
What Knowledge Do Social Workers Use to Make Decisions Regarding Permanency

Accurately identifying children at risk of abuse and intervening in ways that will protect them is far from an exact science (Spratt, Devaney and Hayes, 2015; Fleming et al., 2015) and is made all the harder by the fact that social workers have no unitary knowledge base to draw on to determine their recommendations (Enosh and Bayer-Topilsky, 2015). Much as one would like to be able to base such important recommendations on the solid ground of empirical findings, the nature of child abuse precludes this possibility (De Bartoli and Dolan, 2015). The belief that empirical findings could provide a single actuarial-like formula so that decisions could be based on hard data has yet to materialise (Munro, 1999; Minkhorst, et al., 2016) resulting in inconsistency in decisions taken in child protection (Spratt, 2000). In the absence of this actuarial-like formula or unitary knowledge base, it is important to know what knowledge social workers in the field use to inform their recommendations for permanency.

This paper will present findings from an exploratory in-depth qualitative research project whose aim was to explore the knowledge that social workers use to make decisions regarding permanency. The presentation will begin with an outline of the theoretical orientation of the research and its utility as a research construct for studying knowledge which was based on a social constructionist approach. This underscored the research view that knowledge is made or invented – rather than merely given or taken for granted. It views knowledge as an individual interpretation of the world which in turn required the researcher to have an understanding of the social world that people have constructed and which they reproduce through their continuing activities (Denzin and Lincoln, 2000). In order to generate this new awareness regarding the social phenomena of the knowledge used by social workers to make decisions, the research adopted a logic of enquiry to answer the question that fits with the phenomenological interpretivist schools of research.

The paper will continue by outlining how a specifically created case study was established in consultation with experts to explore the knowledge practitioners in a statutory local authority used to make decisions regarding permanency. The paper will outline how thinking-aloud protocols and a semi-structured interview were used to explore the knowledge used by practitioners to make the decision. From the interviews themes were generated using NVivo 11. An adapted model of knowledge, thought by Pawson et al., (2003), to be the main sources of knowledge used to make decisions, was used to help structure the themes arising from the interviews. These sources of knowledge include organisational knowledge, practitioner case knowledge, service-user knowledge, research knowledge, and policy community knowledge. Theoretical knowledge was also added to the sources to ensure this was recognised.

The findings suggest that there is wide variation between practitioners in relation to the extent, depth and degree to which each source of knowledge is used, with practitioner case knowledge dominating. The findings also outline the variability of the decisions taken with three separate decisions for permanency being made based on the same case study. Finally, the findings highlight that whilst some social workers used the same source of knowledge, the ultimate decision they made for permanency was different. The implications of the findings will be discussed in relation to evidence informed decision-making, consistency of decision-making and how knowledge is utilised to make decisions. Recommendations will be outlined that will help inform social work graduate and postgraduate education, training and supervision, with the aim of improving the extent and depth of practitioner knowledge in the field, thus increasing the robustness, consistency and defensibility of decisions taken.
The Psychological Well-Being Practitioner - Youth - Does it Work?

Wednesday, 3rd October @ 16:30: Improving Quality of Social Workers' Practices (Venue: Ribeira II)

Dr. Jana Knot-Dickscheit (University of Groningen), Dr. Anne-Marie Huyghen (University of Groningen), Mr. Ton Jonker (University of Groningen)

Context and Objectives
Since 2015, youth care in the Netherlands has changed significantly. Municipalities are now exclusively responsible for youth care (transition) and the main focus is on, for example: clients' own responsibility and possibilities; prevention; offering integral help; and demedicalisation (transformation) (NJI, n.d.).

By deploying the function of the Psychological Wellbeing Practitioner – Youth, the aim is to identify psychosocial problems at an early stage, to treat them briefly if possible and, if necessary, to make timely and targeted use of specialized care (Van Dijk, Verhaak & Zwaanswijk, 2013).

The research was intended to gain a better insight into the Psychological Wellbeing Practitioner – Youth function, the experiences gained, best practices in the realisation of this function, experienced barriers and solutions found for them.

Method
Within the framework of this research, a literature study was carried out, quantitative research was carried out using questionnaires for the Psychological Wellbeing Practitioner – Youth (n=54) and general practitioners (n=11) and qualitative research was carried out using semi-structured interviews with General Practice-Based Nurse Specialist – Youth (n=5), an advisor and an expert on financing forms.

Results
Our study (Jonker, Knot-Dickscheit, & Huyghen, 2017) showed that the Psychological Wellbeing Practitioner–Youth function is carried out by social workers trained at universities of applied sciences and by university-educated care workers. Mostly these care workers have a lot of experience in youth mental health services or in child and youth psychiatry. Work experience is considered important because of the diversity of problems of the clients and also because the position is considered to solitary.

Many General Practice-Based Nurse Specialist – Youth consider the decision to treat clients themselves or to refer to specialised care as difficult. The Psychological Wellbeing Practitioner–Youth hold a maximum of twelve consultations. As soon as the Psychological Wellbeing Practitioner – Youth estimates that adequate help cannot be provided within the general practice, he or she refers clients to specialised mental health care. However, waiting-lists in specialised mental health institutions are perceived as an obstruction.

Consultation and cooperation between the Psychological Wellbeing Practitioner – Youth, the municipality and the care institutions are essential. The tasks performed by the Psychological Wellbeing Practitioner – Youth are mainly: problem clarification, short-term treatment, referral to specialised mental health care, providing consultation, supporting of the general practitioner and being a contact for third parties.

The nature of the questions of care with which the Psychological Wellbeing Practitioner – Youth is confronted mainly relate to anxiety, compulsion and/or mood problems; system problems; screening and diagnostics; child-raising questions; behavioural problems and; emotion regulation and/or personality problems.

The collaboration between general practitioners and the Psychological Wellbeing Practitioner – Youth is generally experienced as positive. Both see the lack of opportunities for consultation as the most important limiting factor in the cooperation. Such consultation is considered important by the Psychological Wellbeing Practitioner – Youth in order to be able to perform their function properly. The most important sources of support are the Psychological Wellbeing Practitioner – Youth colleagues, intervision groups and the institution for which are the Psychological Wellbeing Practitioner – Youth also works.
To come close to Child Welfare practice – in an Educational Context

The Norwegian Child Welfare Authority has through the legislation authorization to intervene in relation to children and adolescents affected by various forms of neglect. For the same reason, Child Welfare Authority is a disputed activity in the public sector.

When the Child Welfare Authority is criticized its their work on assessing children’s care situation, the same criticism also poses a major challenge for educational institutions and education policies. Strongly in this debate is the question of what and how students should learn practical Child Welfare work, and the interaction between practice, education and research is raised as a prerequisite for developing a robust Child Welfare with high professional competence.

This paper is based on a qualitative survey of 200 students (Bachelor in Child Welfare and Social Work) in their second academic year, and addresses the part of the teaching that deals with practical Child Welfare work. The survey aims to provide students with some knowledge about Child Welfare work; from when they receive a message in which the content is that children are exposed to child neglect, to investigate the children’s situation (oral communication with children and families as well as written documentation), to finally implement measures pursuant to the provisions of the Child Welfare Act.

The ambition has been to investigate how students reflect on what they have learned as well as looking into the relationship between what the students expressed that they have learned, and the learning methods that were used. The general theoretical perspective in this paper is social constructivistic. Through this perspective, the students’ narratives about what they have learned and why, help to elaborate how the understanding of knowledge is created in different contexts.

The results show that questions related to what students regard as positive learning factors, are largely about student-oriented approaches. Firstly, dialogue-based lectures that emphasize the dialogue between students and teachers. According to the students, dialogue-based lectures are about helping them to construct knowledge in collaboration with other students and teachers who themselves have long experience of practical Child Welfare work. Secondly, plenary seminars where students are given the opportunity to discuss key themes from the course literature together with teachers and fellow students. Thirdly, role-play based on practical situations, where the students get trained to conduct the case processing. Fourthly, group guidance where the guidance takes place while the students are actively working with the case processing.

Conclusion: This project shows that there is a correlation between students’ learning outcomes and chosen teaching methods. The findings show that students are both motivated and inspired by working with cases and issues derived from the field when the context allows academic discussions with teachers who themselves have long experience from practical Child Welfare work. Finally, the project also shows that it is important for professional education to help students see the relevancy of the theoretical teaching given to practical work tasks, as well as to ensure the relationship between education and the level of knowledge on the one hand, and the requirements for knowledge application in practice on the other hand.
Becoming FASD Informed: Strengthening Practice and Programs Working with Children, Youth and Adults Living with Fetal Alcohol Spectrum Disorder

Wednesday, 3rd October @ 17:00: Improving Quality of Social Workers' Practices (Venue: Ribeira II)

Dr. Deborah Rutman (School of Social Work, University of Victoria and Nota Bene Consulting Group)

Objectives

- To expand evidence-based knowledge about what is an ‘FASD-informed’ approach
- To increase understanding about why an FASD-informed approach matters – i.e., what are the service-related barriers faced by children, youth and adults living with Fetal Alcohol Spectrum Disorder (FASD) and what are positive outcomes of FASD-informed programs
- To strengthen capacity regarding planning and evaluation of FASD-informed programs

Methods: This session shares findings from the author's multiple research and evaluation projects over the past two decades, including qualitative studies of parents who have FASD, substance-using women with FASD, and youth and young adults with FASD. Through these projects, the author has undertaken comprehensive reviews of the literature on FASD-informed practice, undertaken interviews with dozens of people with Fetal Alcohol Spectrum Disorder focusing on their experiences with services, and carried out interviews and consultations with over 100 service providers working in programs serving people with FASD.

Results: The session will present synthesized findings about FASD-informed practice: what it is; why it is centrally important in working with youth, women or adults who may have FASD; what are the experiences and social determinants of health challenges that people with FASD face that affect their accessing and successfully engaging in services; and how FASD-informed program evaluation frameworks and processes can facilitate program planning and aid in demonstrating impacts of health, prevention and support services.

Conclusion: An FASD-informed approach uses knowledge about how FASD may affect a person in potentially all areas of life and also recognizes that for people with FASD, other issues such as trauma may be present. The approach then delineates adaptations that can maximize participants' access to and success within programs, services and systems of care.
Monitoring the Development of Children in Foster Care Placements

Wednesday, 3rd October @ 16:00: (Un)Success in Foster Care (Venue: D. Luís)

Ms. Mariska de Baat (Netherlands Youth Institute), Ms. Danielle Oomen (Netherlands Youth Institute/ De Rading)

Context
In the Netherlands more than 20,000 children are placed in the foster care system. Unfortunately, actual practice in the foster care system shows that these placements often fail and that children are forced to move (breakdown). Foster care providers expressed the need for an instrument to monitor the development of the foster child and the risk of breakdown.

From 2014 to 2016 a Monitor Foster Care was developed by the Netherlands Youth Institute and five (out of 28) foster care providers. In 2017 the foster care providers started to use the Monitor Foster Care. This ongoing research project serves two purposes:
1. Monitoring progress on the level of the child and matching support accordingly;
2. Improving and professionalising quality of foster care.

Method
Five foster care providers tested the Monitor Foster care in their daily practice in 2017. Around each foster child a foster care team was formed (the foster parents, the birth parents and the foster care worker). Members of this foster care team were assessed with the Monitor Foster Care.

The indicators determined for the Monitor Foster Care match the main targets and quality characteristics of the parenting version of foster care and also the national performance indicators of youth care. The indicators are:
1. Target realisation
2. Development of the child in various areas
3. Contact between parent and child
4. Factors that influence the continuity of the placement (cooperation parents and foster parents, care and parenting by foster parents, effects of the placement on foster parents’ own children and other foster children, and other factors).
5. Breakdown or no breakdown and reasons for ending placement
6. Satisfaction with placement in foster care

Results
With this presentation we will present the first results of the Monitor Foster Care of 983 foster care placements.

Conclusion
The first results of the Monitor Foster Care revealed more insight in seven domains of the foster care placements. Practical implications for improving and professionalising the quality of foster care, in order to prevent breakdown, will be provided.
Research into the Characteristics Associated with Reunification Decisions in Flemish Short-Term Family Foster Care

Wednesday, 3rd October @ 16:15: (Un)Success in Foster Care (Venue: D. Luís)

Dr. Frank Van Holen (Pleegzorg Vlaams Brabant), Dr. Laurence Belenger (Pleegzorg Vlaams-Brabant en Brussel), Ms. Elke Carlier (Pleegzorg Vlaams-Brabant en Brussel), Ms. Babette Potoms (Vrije Universiteit Brussel), Prof. Johan Vanderfaeillie (Vrije Universiteit Brussel)

Objectives
Since the entry into force of the foster care decree in Flanders (01/01/2014), a distinction is made between short-term and long-term family foster care. In short-term foster care, a foster child is placed in a foster family for at most one year with the aim of reunification, or, if the latter is not possible, clarifying the child's future (long-term family foster care or residential care). However, research regarding reunification in Flanders remains scant. The present study examines reunification rates and placement, child, birth and foster parent characteristics associated with reunification in short-term foster care.

Method
Case files of a representative sample of 125 short-term foster care placements that started after 01/01/2014 and ended before 31/12/2015 of all Flemish foster care agencies were analysed with a coding scheme designed for this study. Independent variables were characteristics related to the foster child, the birth family, the foster family and the placement.

Data-analysis
First, the outcome of short-term foster care placements (planned reunification yes/no) and the place of residence after placement ending were examined using descriptive statistics. Next, bivariate associations of independent variables with the dichotomized dependent variable (planned reunification versus other) were studied. Finally, all independent variables associated with a planned reunification were included in a logistic regression model.

Results
For 34 children (27.2%) the reunification with the parent(s) was planned, 8 children (6.4%) were reunified with their parent(s) against the advice of the foster care service, 54 children (43.2%) remained with the same foster family in long-term foster care, 16 children (12.8%) moved to another long-term foster care family, 12 (9.6%) to residential care and 1 (0.8%) to a child psychiatric clinic.

Bivariate analyses showed that seventeen variables were significantly associated with a planned return home. Inclusion of these variables in a logistic regression model resulted in a significant model ($\chi^2(11) = 45.973, p < .001; \text{Nagelkerke } R^2 = .524$) explaining about 52% of the variance, with only one significant variable being the pedagogical skills of the mother at the end of the placement ($\exp(B) = 3.364, p < .01$).

Conclusion
Considering that short-term foster care aims at reunifying foster children with the birth parents if possible, a reunification percentage of 27.2% seems low. Two explanations are possible: (1) insufficiently clear indication assessment, and (2) insufficient expertise in foster care workers, amongst others because yet no effective program is available in Flanders.

The finding that the pedagogical skills of the mother plays a decisive role in the decision to reunite is hopeful. This might indicate that by improving pedagogical skills, the reasons for the initial out-of-home placement were addressed and/or decision makers became more confident to decide to reunite.
Children in foster care may be vulnerable as a result of the cumulative impact of previous adverse childhood experiences on their development and functioning. Evidence suggests that those who have experienced early adversity may continue to experience the impact of trauma across their lifespan - experiencing poor life outcomes including homelessness, poor mental health, over-representation in the criminal justice system and low educational attainment.

This paper presents the outcomes of a study of 48 children who have been involved in a model that represents a paradigm shift in the care of children in Australia spanning the past 18 years. The Treatment and Care for Kids (TrACK) program is a home based care program providing intensive therapeutic intervention for children presenting with complex trauma and challenging behaviours. The program integrates knowledge about the neurobiology of trauma with established principles and structures for training, support and planning across the network of important adults in relationship with the child, in particular the carer and where appropriate the family of origin.

The study used a mixed method design incorporating case file reviews, interviews with young people and carers and interviews with professionals who were part of the network of support services provided to the foster care family.

The results showed significantly positive impact as a result of the quality of care and support they received for the majority of the children on domains associated with stability, attachment and regulational capacity. The results are presented across a range of measures. For example, 29 of the total sample of 48 children had experienced more than three placements changes in the lead up period to their referral into TrACK. Of these, fifteen children had had more than six placements disruptions being accepted into the program. An additional seven had experienced more than ten placements changes, with two experiencing between 18 and 30 placements. After being part of TrACK, only six of these same 48 children had experienced any placement breakdowns.

The results are discussed in relation to the following elements of the program which were identified as the most critical to its success.

- Experienced, capable carers who were prepared to commit to the long-term care and healing of children who had experienced significant adversity.
- A focus on safety as being multi-faceted. Recognising that it takes time to progress from short-term physical safety to medium-term relational security (positive, trusting relationships), and then long-term recovery.
- The value of a care team that shared a commitment to the sustained focus on the child and the child and carer relationship. Carers were not alone: they had a long-standing relationship with other team members and knew that they had ‘round-the-clock’ support. The presence of a working partnership...
where each team member’s role and views are respected and valued is at the heart of a care team’s success.

- The value of a clear theoretical and evidence-informed model of practice which was conveyed, primarily by the therapeutic specialist, in a practical and accessible way in response to the unique needs of each child. This included an understanding of the need to plan for and work with children in the long term to ensure that relationships were reparative. It also included a shared understanding that the primary site for therapeutic intervention was the relational space between child and carer.

- The value of manageable caseloads for foster care professionals and therapeutic specialists which enabled time and space for reflective, holistic practice.

- The importance of discretionary funding to enable carers to provide for children in ways that may enhance their development and healing.
Fostering agencies face challenges in improving the outcomes and wellbeing of children and young people in care, decreasing placement disruptions, and increasing the retention of foster carers. An international literature review on peer support to foster carers found that peer support facilitated a number of key support needs and identified the Mockingbird Family Model as a promising model for peer support and respite (Luke & Sebba, 2013). The Mockingbird Family Model aims to “create an extended family community designed to support, develop and retain quality foster families that can meet the challenging and complex needs of children and youth experiencing foster care” (Mockingbird Society, 2018). The model endeavours to do so by providing an experienced ‘hub home’ carer who offers regular respite, emergency respite, connections with siblings, peer support, and social activities to 6-10 ‘satellite’ foster and kinship families. This paper will open by presenting the theoretical framework for peer support and analysing the theory of change for the Mockingbird Family Model.

Next, the paper will review existing evaluations of the Mockingbird Family Model across the United States and England. It discusses both impact and implementation findings. This will draw on both social intervention evaluation frameworks as well as literature on importance of reframing and labelling in foster care, from changing ‘respite’ to ‘sleepovers’ to viewing foster care as more child and community-centred.

Lastly, the paper will discuss the on-going University of Oxford-led evaluation of the expansion of the Fostering Network’s Mockingbird programme in England, funded by the Department for Education’s Innovation Programme (2017-2020). The evaluation focuses on the model in 11 local authorities and 2 independent fostering agencies. It looks at impact and outcomes related to wellbeing, carer retention, and placement disruption, the implementation of the model, and a cost-benefit analysis.
A traumatic event is defined as a situation involving the experience of death, risk of death, significant injury or risks to physical integrity (own or others), in which the subject’s response translates into an intense fear or feeling of impotence (1). The study Adverse Child Experiences (ACE) (2) classifies childhood trauma according to 10 categories: physical, sexual and emotional abuse, physical and emotional neglect, exposure to domestic violence, consumption of psychotropic substances within the family, mental disorders within the family, parental separation, and a relative in prison. The trauma is biologically encoded in the brain in various ways. Changes in structures such as the hippocampus, coordination and integration of the functioning of the neural network have also been identified. The changes referred to are reflected in interpersonal, physiological and psychological experiences (3). Some research data regarding the long-term implications in terms of psychological trauma in childhood, namely at the neuronal and behavioral level, will be presented below.

Research suggests that many of the long-term impacts of sexual abuse by surviving adults result from chronic neuroendocrine dysregulations caused by prolonged exposure to abuse and violence (4), consequently the neurological response to minor irritations will be in a totalitarian form, derived from interpretation as a threat (5).

Investigations have shown that extreme stress environments lead to increased cortisol (6) and, consequently, decreased hippocampal volume, a decrease that has been associated with a diminished explicit memory, which places adults at higher risk for the development of symptoms of post-traumatic stress (7). The ACE study revealed a relationship between trauma in childhood and increased promiscuity (11,12) explained by disruptions of oxytocin regulation, which leads to less discriminatory connections during adulthood. A study conducted in Romania’s orphanages in 1990 showed that children exposed to global neglect had significantly smaller brains (13). Henenghan et al. (15) found that in 18.6% of abused and neglected adolescents (age > 12 years) scores were positive for PTSD (17).

Recent evidence demonstrates the relationship between diseases such as cardiac ischemia, cancer, chronic pulmonary disease, among others, and abuse during childhood (2, 11, 15). The explanation of these results comes from the adoption of behavioral risk factors such as smoking, alcoholism, impoverished diet and sedentary lifestyle.

From what has been described above, it is essential to verify situations of abuse in the sense of preventing possible trauma, since there are long-term replications. In children subjected to physical, sexual and / or neglect, the effects are not completely irreversible, requiring prolonged, adequate intervention in a stable and predictable range and with adults in symptom with their emotional needs (16).
Mental Health Characteristics and Needs in Children and Adolescents in Residential Care

Wednesday, 3rd October @ 16:15: Adversity and Needs of Children in Care (Venue: Porto)

Ms. Joana Campos (University of Porto), Prof. Maria Barbosa-Ducharme (University of Porto), Prof. Pedro Dias (Catholic University of Portugal, Centre for Studies in Human Development, Faculty of Education and Psychology), Ms. Ana Martins (University of Porto), Ms. Mariana Leal (University of Porto), Ms. Sónia Rodrigues (University of Porto)

Background: Residential Care (RC) consists of the placement of a child in an institution which has permanent facilities, equipment and a staff that guarantees the appropriate care of his/her needs and provides conditions to allow for his/her education, well-being and development. Several studies have showed that the prevalence and severity of mental health problems are greater in children and adolescents in RC than in the general population. The risk factors for the problems observed are related, not only to previous family contexts, but also to individual characteristics and contextual variables. Furthermore, there is a significant number of clinical cases that are not timely diagnosed, leading to emotional and behavioural problems and being a risk factor for psychopathology in adult life.

Objectives: The main goals of this presentation is to analyse the frequency of Internalization Problems (IP), Externalizing Problems (EP) and Total Problems (TP) of adolescents in RC in Portugal; determine the degree of (dis)agreement between different informants regarding emotional and behavioural problems, and analyse gender differences for emotional and behavioural problems.

Method: 256 adolescents (56.6% male), aged 11 to 18 (M = 15.14, SD = 2.08) participated in this study. The information was collected through the questionnaires that compose the ASEBA Battery (CBCL; TRF; YSR) using caregivers, teachers and the adolescents as informants.

Results: The three informants classified a high percentage of adolescents as borderline or clinical cases for IP, EP and TP. This result shows the presence of psychological problems and maladaptive behaviours that indicate psychopathological symptomatology. Regarding the agreement between the informants, the highest correlations were found between the self-report and caregivers’ assessment on the EP scales. Moreover, significant differences associated to gender were found, with girls showing more problems and psychological maladjustment in Anxiety/Depression, Somatic Complains, IP and EP.

Conclusions: The findings of this study highlight the need for RC professionals to be adequately aware of the signs and symptoms of mental health problems in adolescents. RC centres should adopt evidence-based prevention programmes, require careful assessment of adolescents’ needs, be culturally appropriate and integrate adolescents into psychosocial health policies. It is essential to implement measures to assess the quality of RC centres, provide specific training to caregivers in order to promote proper management of adolescents’ behaviour, build more positive interactions and respect the Children’s rights, thus enhancing well-being.
Spin Project - A Southern European Approach to Therapeutic Life Story Work - Portugal

Wednesday, 3rd October @ 16:30: Adversity and Needs of Children in Care (Venue: Porto)

*Mrs. Margarida Marques* (Associação Child Trauma Intervention - Portugal), *Mrs. Maria Barros* (Child Trauma Intervention Association)

Therapeutic Life Story Work is an approach to reconstruct and reconnect a child, using personal narrative. A fragmented and discontinuous personal narrative, places a maltreated child at risk. Without a life story, a child is adrift.

We provided a life story service, in residential and family foster care and, also, for adopted children. The age range of the children we worked with, is from 6 to 16 years old.

We studied different types of life story in the southern region of Portugal – Alentejo, focusing on the difficulties and results, impacting on the child development, particularly attachment, identity, emotional intelligence, social and communication skills and learning.

We used the definition of TLSW as a therapeutic process with traumatized children, because the presence and support of the primary career, working alongside with the child and the therapist, throughout the process, is crucial.

This therapeutic and innovative design, was an overall challenge, especially in residential foster care, because it enhances the role of the career, demanding sensitivity, involvement and commitment, to the child's needs and story.

We also worked with children and adolescents that lived with enlarged families and the one's placed with adoptive parents.

We consider that TLSW with extended families has its own peculiar aspects. The parenting team has shared, from birth to the present, the child's life. They have close and direct family ties, with the children's parents. The parenting team competes with the absent parents, considering themselves the stronger element of the family.

In TLSW with adopted children, the main objective is to give details of their history, facilitate the sharing of their past, link the past to the present and, understand how it impacts on the behavior. An important aim is to replace fantasies about the birth family, by a realistic account of the early life events.

The work with each child or adolescent happens during nine months, with sessions every two weeks. The first block of six sessions, works communication, trust and attunement between therapist, career and the child, and can be quite fun, using games, charades, drawings and so on. Alongside, an information gathering work takes place, so that in the second block of six sessions, the chronological narrative can be built, with the child, integrating memories, clarifying doubts and deconstructing magical thinking.

Overall results show that, pre-occupation levels drop, learning levels improve, and behavior patterns are no longer an issue, due to the outcomes of attachment, identity and emotional intelligence indicators, mainly.

We concluded that TLSW is an important and effective therapeutic tool, to assist children, residential foster care Institutions and families, in understanding significant issues from the past and supporting them, moving forward.

We helped children to understand and move through their present, using their past and being able to design a positive future.
Who are the Unaccompanied Migrant Adolescents Who Arrive Alone in Catalonia?

Wednesday, 3rd October @ 16:45: Adversity and Needs of Children in Care (Venue: Porto)

Dr. Joan Llosada-Gistau (University of Girona), Mr. Francesc Xavier Balagué Gea (Direcció General d’Atenció a la Infància i l’Adolescència (DGAIA)), Mr. Manuel Lolo (Direcció General d’Atenció a la Infància i l’Adolescència (DGAIA)), Mr. Eduardo Hernandez (Direcció General d’Atenció a la Infància i l’Adolescència (DGAIA)), Ms. Ana Bessa (Direcció General d’Atenció a la Infància i l’Adolescència (DGAIA)), Ms. Montse Alfaro (Fundació Idea)

Background and objective: The arrival of unaccompanied migrant adolescents in recent years in Catalonia and especially in Barcelona has been huge. Particularly, in 2016, 650 unaccompanied migrant adolescents arrived and this figure increased to 1,489 new arrivals in 2017. This massive arrival of foreign boys has overwhelmed the Protection System and has led to the opening of new centers and places. But what do we know about these adolescents? Why do they come to Europe? How did they come to Catalonia? What profiles do they have? What expectations have they placed in their migration project?

The main objective of this study is to identify the main profiles of unaccompanied migrant adolescents who arrive in Catalonia and Barcelona in order to give an adequate response to their needs and expectations from the different services and resources of the Child Protection System.

Method: A cross-sectional survey carried out in Catalonia (Spain) between February and March 2018. The study population consisted of 12 to 17 year-old unaccompanied migrant adolescents who were in residential care. To collect the data an ad-hoc structured online questionnaire was administered. The questionnaire included 48 questions grouped into 7 sections: sociodemographic characteristics, health conditions, immigration itinerary, family ties in destination, languages and academic training, work experience in origin, and their future expectations. A descriptive and bivariate analysis was carried out. The independent variables were: age, nationality and education level.

Results: The rate response was 54% (n=504). The majority of unaccompanied migrant adolescents are boys (97%) between 16-17 years old (64%) and Moroccan (85%). Most of them reach Europe through Spain and specifically through Andalusia. Half of them come from rural areas and a good part of them (36%) have family members who are already living in Catalonia. The boys say that the main reasons that motivated their migration were the lack of future expectations in their country, to flee from poverty and to be able to help their family financially. Once in the host society, they have as main expectations to enter to the labor market and regularize their status in the host country. Unaccompanied migrant adolescents scored, on average, 7 points out of 10 of their satisfaction with life.

Conclusions: The results of this study provide important information about the profiles of unaccompanied migrant adolescents who have arrived mainly from Morocco to Barcelona. Policy-makers should bear in mind the specificities of these adolescents depending on their sociodemographic characteristics and their expectations for the future in the host society when implementing programs designed to help them in the transition to adulthood, promote their emancipation and, ultimately, lead them to social inclusion.
In this paper two complementary studies will be presented. Study 1 aimed to identify critical dimensions in the promotion of school success of children and young people in residential care, which could be included in instruments for needs assessment in the school domain. The study was based on a qualitative methodology and assumed an ecological perspective. Data were collected through interviews, focus groups and open-ended questionnaires. Participants (N = 37) included children and young people in residential care, caregivers, technical directors, school teachers and care leavers. Semi-structured scripts were used and content analysis was performed using NVivo.

Eight critical dimensions for the promotion of school success in residential care homes were identified: Organization and Functioning of Residential Care Home; Study and Learning; Caregivers; School Context; Teachers; Articulation School - Residential Care Home; Family Context; and Children and Youth.

Study 2 aimed to test the suitability of a set of instruments to evaluate intervention needs in the school domain in the context of residential care homes. The results of a pilot study with three different residential care homes are presented and discussed.
Care arrangements for children growing up in families with multiple problems need to be of high quality to ensure child safety and well-being. Services like these rely, in turn, on high quality research to provide meaningful guidance for practitioners in their complex decision-making processes. Conducting research in families with multiple problems, however, can be considered particularly challenging, which is not surprising if one considers that they are also known in social work practice as one of the hardest target groups to reach. The problems these families face are often severe and complex and sustained problem solving often involves various family members, social network partners and professionals. The goal of our symposium, therefore, is to do justice to both: (1) the distinctiveness and complexities of providing family based services in multi problem situations, and (2) the methodological rigor needed to provide scientifically sound evidence on problem specifics, as well as, on possible benefits and the harm of the interventions offered. The symposium will be open to discussions that involve all attendees, held in the form of a dialogue that explores boundaries and possibilities of different research approaches, mainly focusing on quantitative methods, though being open for inputs on qualitative research perspectives as well. Topics such as (a) target group characteristics, (b) control group designs (in randomized trial settings or not), (c) regression to the mean, and (d) missing values will be addressed. Moreover, if possible, topics submitted by the attendees beforehand will also be addressed.

Wednesday, 3rd October @ 16:00: Quantitative Methods for Decision-Making Research in Child Welfare (Venue: Miragaia)

Prof. John Fluke (University of Colorado Denver), Dr. Mike Tanana (Windriver Research), Dr. Dana Hollinshead (University of Colorado Denver), Dr. Mindy Vanderloo (University of Utah)

Part I: Instrumentation for Child Welfare Decision Making Research

Background:
Developing an understanding of decision making in Child Welfare settings includes the identification and development of measures that address the characteristics of decision makers and their perceptions or beliefs about their organizational settings. Data collection in such settings is challenging. The tools that measure characteristics of staff are not necessarily based on solid psychometric foundations, or may have been developed for other purposes. Nevertheless a growing body of research has begun to isolate tools and salient factors.

Objectives:
The workshop will expose participants to the General Staff Survey (GSS) instrumentation suite. In addition participants will be asked to respond to specific instruments as part of the workshop exercises. Provide information regarding the theoretical underpinning and hypothesis regarding decision making research instrumentation. Expose participants to the available psychometric research regarding tools related to decision making. Describe approaches, challenges related to data collection. Describe designs for data analysis, including multi-level analyses. Describe research gaps, and needs for ongoing research.
**Workshop on Quantitative Methods for Decision-Making Research in Child Welfare - Part II**

**Wednesday, 3rd October @ 17:30: Quantitative Methods for Decision-Making Research in Child Welfare**  
(Venue: Miragaia)

*Prof. John Fluke (University of Colorado Denver), Dr. Mike Tanana (Windriver Research), Dr. Dana Hollinshead (University of Colorado Denver), Dr. Mindy Vanderloo (University of Utah)*

**Part II: Using Multilevel Models in R-Statistics to Analyze Child Welfare Decision Making Data**

**Background:**
Comprehensive data systems that collect and store all of the child welfare data for a geographic area are quickly becoming standard tools for states and agencies. These new systems present new opportunities for understanding the dynamics and long term outcomes for children and cases in this system and specifically for understanding the role of caseworker decision making on a large scale. However, this type of data also brings with it new challenges that may not be present in smaller scale studies. In child welfare, children are nested within families; family cases are nested within caseworkers; the outcomes for each of these clusters are not typically independent of one another. Fortunately, free statistical software that can handle these types of dependencies has improved dramatically over the last decade.

**Objectives:**
This workshop will demonstrate how to use a free statistical software package (R statistics) to analyze multilevel data specifically applied to decision making research questions in child welfare. Participants will have the chance to use an example child welfare dataset with sample analysis code to analyze and visualize nested data. The goals of the workshop will include helping participants understand many of the key considerations for constructing and analyzing hierarchical data as well as interpreting the output. The examples will include predicting the probability of entering the foster care system given family characteristics and worker characteristics at the time of a CPS case. Data visualization techniques for examining the results will be demonstrated.
In 2011, I started conducting a study on historical sexual abuse of children growing up in foster families in the Netherlands since the end of the Second World War. For several reasons, I consider this study a major turning point in my research career. In this presentation, I will tell why it was a turning point with long-lasting effects and I will invite the audience to accompany me on my journey. I will describe how my work on historic abuse in foster care provided a deeper understanding of the lived experiences of foster children, the impact of trauma, the disclosure of child (sexual) abuse and the transformative power of storytelling. I will comment on how this work inspired me to develop major research lines, dwell on my process as a researcher and reflect on changing perceptions of my role as a scholar and a mentor for students. Finally, I will outline some ideas for future projects on historic abuse of children in foster families.
Experiences of Victimization by Peers and Staff in Residential Care from an Ecological Perspective

Thursday, 4th October @ 09:00: (Re)Victimization of Children in Care (Venue: Arquivo)

Prof. Shalhevet Attar-Schwartz (The Hebrew University of Jerusalem)

The lecture brings together a series of findings from a large-scale study of the victimization experiences of Israeli Arab and Jewish youth by peers and staff while staying in residential care settings for children at risk. The study identifies various youth and institutional characteristics linked to increased vulnerability to various types of peer victimization and victimization by staff. It yields insights both about young people at risk of victimization and about the institutions where victimization is more likely to occur. These insights, as well as possible implications for child welfare research, policy and practice, will be discussed in the presentation.
Participation of Children and Families in Decision-Making: Voluntary Placement?

Thursday, 4th October @ 10:00: Participation of Children and Families in Decision-Making (Venue: Infante)

Prof. Janet Boddy (UNIVERSITY OF SUSSEX)

This paper reflects on findings from a cross-national scoping review of voluntary placement arrangements, which focused on five countries: France, the Netherlands, Denmark, Finland and Norway. The review was commissioned by Family Rights Group (FRG), a UK non-governmental organisation that supports and advocates for parents and families of children involved with child welfare systems, and formed part of a wider Knowledge Inquiry that FRG was leading on behalf of the Your Family, Your Voice Alliance. The objective was to provide a resource for reflection on policy and practice development in England, a way of looking with ‘fresh eyes’, by considering how, and why, different countries understand and approach voluntary arrangements for child placement - and so addressing critical issues such as the nature of ‘soft coercion’ in voluntary arrangements.

The review drew on existing English language literature as well as my own previous research, including studies of cross-national approaches to work at the ‘edges’ of care, and of work with families of children in care, and an ongoing study involving young adults who have been in care in England, Denmark and Norway (Principal Investigator Elisabeth Backe-Hansen). The aim was not to compare the ‘effectiveness’ of family-focused work across the countries, nor systematically to review all the relevant research evidence, and the five countries inevitably comprise a selective sample – reflecting in part the focus of my previous research. However, they also encompass variation in policy and legal frameworks and practice, for example: in involvement of the judiciary and the delegation of parental authority; in dis/continuities between placement and other forms of support for children and families; and in policy emphasis on the involvement of parents and birth families in child welfare decision-making, or on the use of adoption as a route to permanence. By holding the five country case studies in ‘conversation’ with each other, and reflecting on (dis)connections across the countries and with English policy and systems, it becomes possible to think across contexts about voluntary arrangements are used (and could be used in future) within child welfare systems, and about the ways in which families are involved in crucial decisions about their lives.
Contested Consent in Child Protection: A Study of Care Order Decisions

Prof. Tarja Pösö (University of Tampere)

The objective of this presentation is to explore the complex and contested topic of consent in child protection decision-making. Research literature is very limited on the topic of consent in child protection although consent in health care is widely explored. It is rarely acknowledged that a parent could willingly give a child into state care. Or that a child would request the child protection agency to place her away from her home. Instead, the child protection systems tend to treat child welfare removals as ‘involuntary’ (unless they are short-term ‘voluntary placements’). The Finnish child protection system has taken a different approach and introduced two routes into state care for parents and children – consent and objection based routes. Both routes restrict human (parents’) rights considerably in order to support the rights of children.

The presentation is based on the data from three Finnish municipalities highlighting the decision-making process, including written decisions, interviews with social workers and observations of hearings in which consent or objection are expressed. The data provides a limited, yet intriguing view on consent. Consent is, at the one extreme, represented as an expression of self-determination: a parent, often a mother, actively wants to give the child away with the child’s best interest at heart. At the other extreme, the silence of the parent or the child may be interpreted as consent. The paper focuses on the empirical interpretations of consent in this data, and claims that one should not take ‘consent’ – nor ‘objection’ – for granted as they may have several layers of organizational, professional and psycho-social motives and implications. The findings challenge the decision-making system and its ways to recognize consent and objection; furthermore, they challenge child protection research to widen its theoretical views on consent (and objection) in the very specific, interest and conflict driven context of child removals in child protection.
Who Is the Decision Maker? An Analysis of Four Different Decision-Making Models in Child Protection in Four Nordic Countries

Thursday, 4th October @ 10:30: Participation of Children and Families in Decision-Making (Venue: Infante)

Prof. Staffan Höjer (Department of Social Work, University of Gothenburg)

The Nordic countries Norway, Finland, Denmark and Sweden are often described as having family oriented child protection systems with great focus on early intervention and services to the whole family. In addition, great attention is paid to children's participation and children's perspectives. Despite the similarities there are differences in the organization of the decision making bodies. In Norway, Finland and Denmark the decision system for child protection cases have been reformed several times during the last 25 years. The aim of this presentation is to compare and analyze the role of different actors involved in the decision-making system in child protection in Norway, Finland, Denmark and Sweden. A special focus will be to discuss the role of laypersons, motivations for keeping them in the decision-making and how it may affect the professional status of social workers.

The study is based on a comprehensive document analysis of official documents, legislation, guidelines and reports about child protection in each country, together with a review of recent research articles in the area. This is complemented by 12 interviews with experts and scholars with vast knowledge about the child protection system in their respective country.

The result presents great variation in the appointed actors and also what recent reforms have led to. For instance is Sweden the only country where a committee of politically appointed laypersons still is the one to make decisions about voluntary out of home placements. In the other countries the systems include different actors such as lawyers, social work managers, and other experts with different professional backgrounds. Laypersons do participate in the decisions in three out of the four countries. However, one similarity is the core position of social workers in the assessment process manifesting the status of the profession in this respect.
In this paper, we are concerned with how restrictions of parental rights are assessed, understood and justified in state interventions, specifically in child protection removals of newborns. In most states it is the court or court-like bodies that has the authority to make decisions about such restriction of parental rights, and our data material for the analysis are the written judgements that justify whether an intervention is necessary or not. Our aim is to understand the actual reasoning and justification of a child protection intervention that concerns the best interests of a newborn baby, and especially we focus our analysis on the courts’ consideration of parental capacities. Our study contributes to the discussions about the legitimacy of state interventions, and improves our understanding of the principle of the child's best interests and how it is balanced against parental rights.

Analysing removals of newborn children includes considering the pasts of the mothers or the parents, and the future prospects for the child. These cases are extremely intense and typically involve fewer dimensions than cases with older children that have more lived experiences (cf. Masson & Dickens, 2014). Thus, these cases will provide data for fruitful cross-system comparisons of different courts' discretion regarding the futures of the children and their families.

The data material is a selection of judgments about care orders of newborns, from the years 2016, from three countries (England, Germany and Norway). The written judgements are produced for the purpose of the court proceedings and are written after the decision has been made; as such, we need to be aware that judgements adhere to each legal sphere's logic of appropriateness.

A theory of argumentation states that legitimate discretionary reasoning would develop through rational discourses building on the premise that all persons concerned can participate, that they can freely put forward their viewpoints and arguments, that relevant information is included, and finally, that forms of transparency and oversight exist (Habermas, 1996; Skivenes, 2002; Molander et al., 2012). These premises are basically similar to the legal-administrative principles that are already established in modern states to regulate governments and administrations interaction with citizens and service users. The critical focus for our study of judgements in this paper is on the involvement of concerned parties, i.e. the parent(s).

The aim is to examine critically the arguments and reasons that are considered in relation to parental capacities and way of living their life. Different types of argumentation elaborate on the different considerations that can be expected to be involved in child protection decision-making and thus provide nuanced and fruitful tools and benchmarks for use in analysing and comparing discretionary reasoning between subjects (cf. Skivenes, 2002, 2010; Russell & Summers, 2013). Based on this short outline of theory, the analysis of the written court judgements has the following aims:

- Identify the types of argument – pragmatic or ethical (normative) – introduced to the assessment of the parent(s).
- How is the mother/parents described in the judgement?
- What do we learn about the parenting abilities, the challenges the parent(s) have, history of parent, diagnosis, etc.?
- What is the threshold for “good enough” parental capacities?
- What might one expect to be the focus (e.g. due to legislation, CRC, etc.)?
• Which other family-related matters are described in the judgement?

This type of analysis does not conclude whether the children should be removed or not, or if they should be adopted or not, but is focused on the quality of the argumentation process leading to a decision. However, if weaknesses are identified, it indicates that the result might have been different if the deliberative process had been conducted thoroughly.
Promoting Participation of Youth and Parents during Residential Care

Thursday, 4th October @ 11:00: Participation of Children and Families in Decision-Making (Venue: Infante)

Dr. Annemiek T. Harder (University of Groningen)

Participation in decision-making procedures of young people in care is regarded as an essential element affecting their current or future living circumstances. Furthermore, it might improve the quality of decision-making on and delivery of provided services (Ten Brummelaar, Harder et al., 2018). Despite its importance, there seem to be different challenges to achieve “meaningful” participation of youth in residential care. For example, residential care professionals perceive safety and existing boundaries as barriers to participation of youth during care (Ten Brummelaar, Knorth et al., 2018). Based on two empirical studies involving care professionals and young people, I will discuss different factors that can promote participation of clients in everyday interaction during residential care.

An important facilitator related to young person’s participation in decision-making is a supportive relationship between a young person and a professional. Therefore, I specifically focus on the interactions between youth and residential care workers. The results of the first empirical paper (Ten Brummelaar, Knorth et al., 2018) shows that professionals understand what participation entails (e.g. informing, listening to, taking views into account), and how and why they can use participation in everyday practice. Both factors with regard to the young person, care professionals and organization are associated with the participation of youth in decision-making. The second paper (Eenshuistra et al., 2016) specifically focuses on how professionals currently try to promote participation of with young people during residential care. The results of this observation study suggests that an autonomy-supportive treatment approach applied by professionals in residential care practice can promote youth participation considerably (cf. Harder, 2018).
Young People Leaving Care in England: A History from Below (1973-2011)

Thursday, 4th October @ 10:00: Transitions from Care to Adulthood: Exploring Historical Narratives (Venue: Arquivo)

Prof. Mike Stein (University of York)

This presentation is based on the history of the rights movement of young people in care in England. It is derived from interviews, documentary analysis, participation and observation (Stein 2011; 2015).

From 1973 young people came together to talk about their experiences of care, to help and support each other and to campaign to improve the lives of young people living in and leaving care. The groups which made up the rights movement during this 35 year period were: the Leeds Ad-lib group (1973-1975); Who Cares? (1975-1978); the National Association of Young People in Care (1979-1994); Black and In Care (1983-1985); and, A National Voice (1998-2011). The voices and words of the young people who participated in the rights movement created a history of care ‘from below’, they were present at their ‘own making’ (Thompson 1968). It is a history of struggle, altruism and collective resilience – of how young people came together to improve the lives of other young people.

The main aim of this presentation is to identify recurring themes from these young people’s history which have relevance for contemporary leaving care policy and practice.

The presentation will explore:

- their disrupted lives in care and the attendant consequences for young people’s well-being;
- their experience of care as stigmatising and controlling - for some young people this included physical, sexual and emotional abuse at the hands of those who were meant to care for them;
- their views about leaving care to live independently - having to cope with major changes in their lives at a younger age than their peers in the general population;
- their search for a coherent family and cultural identity; and,
- the wide variations in the quality of care they experienced, revealed by the surveys and campaigns of the rights movement.

In relation to each of these themes the exploration will provide examples drawn from the rights movement and identify their importance to understanding current leaving care policy and practice.
During the 20th century, tens of thousands of children and adolescents in Switzerland were placed in residential child care or foster families and later moved on to independence. Several studies suggest that little attention was paid to the integrity and well-being of these children during care or in transitions to adulthood. Research also shows that they were often subjected to social isolation, compulsory work, or even sexual or physical abuse, resulting in lifelong consequences. Despite problematic conditions in former Swiss residential care facilities and the negative effects of such conditions on children's development, many of those affected were ultimately able to take charge of their lives. In many cases those adults benefited from the support of significant other people. But only a few studies have looked at the impact of changes that took place in residential care sectors during the second half of the last century. Even fewer have addressed their consequences for the life trajectories of affected people. So far, research has provided little knowledge on how socioeconomic circumstances, integration into society, or quality of life arose between living in care and adulthood.

One of the objectives in our research on “life trajectories after residential care in the Canton of Zürich (1950-1990)” was to determine whether and where the formative experience of growing up in residential care between 1940 and 1990 resulted in similar outcomes for different individuals. Thus we’ve conducted biographic-narrative interviews with 37 former residents aged 45-85. The research project was part of the research network “Placing Children in Care: Child Welfare in Switzerland” which was financed by the Swiss National Science Foundation. We have chosen an approach that allows us to trace, analyse, and to interpret the patterns of people's lives, the crises they experience, and their coping patterns. We particularly wanted to understand if and how the life trajectories of adults relate to their experiences in residential care and to following transitions to adulthood. Further parallel historical and sociological sub-projects allowed us to contextualise our results in time.

Some results from our research project show:

- how leaving care became part of discourse and practices on different levels,
- how former placed children experienced processes of leaving lasting years and decades,
- risks of formal and structure-orientated (instead of subject-orientated) concepts and understandings of leaving care,
- and what recent research and practice could learn from the past.
- to help those disciplines to manifest their positions in this field
- and to control and discipline young people during and after their transitions to adulthood.

Initial findings suggest that there are complex interactions between resilience and vulnerability. As Werner and Smith have pointed out, “Not all development is determined by what happens early in life.” But our results show that the surprisingly strong impacts of residential care on a person’s life manifests itself in critical life events and in certain life domains even decades after they have have left care facility. The issue of transitions to adulthood after care was part of professional discourses in Switzerland between 1940 and 1990 a few times. But when this issue came up, it came up not systematically on the basis of different scientific backgrounds and goals. One of the strongest concepts that was responsible for certain efforts was the concept of “pursued
welfare" ("nachgehender Fürsorge"). It was related to psychiatric, therapeutic and legal disciplines. And for a long time its main two goals were:

Further our results how that some professionals and residential care homes also started to create some unique forms of leaving care settings supporting young people's agency and capabilities bottom up – but without any holistic concept and exchange.
50 Years of Leaving Residential Care in Romania – How the Practice and Experience of Leaving Care Have Been Shaped by Communism and a Child’s Rights Agenda

Thursday, 4th October @ 10:30: Transitions from Care to Adulthood: Exploring Historical Narratives (Venue: Arquivo)

Dr. Roxana Anghel (Anglia Ruskin University)

In a study I conducted in Bucharest in 2004 (Anghel, 2007, 2011), young people leaving residential care were experiencing deep anxiety about their departure and about their subsequent quality of life. Their lives in institutions, where they suffered poverty, abuses and injustices, left them lacking adequate assets for social integration. They felt unprepared and abandoned once again. Whilst care leavers were transitioning from care, their professional carers were experiencing a simultaneous, but paralysing conceptual transition. They were moving from pre-rights practice, to complex practice expectations based on rights, standards, child’s best interest, and voice. Mutual distrust between the young people and their carers developed, and a pervasive deficit discourse from both, professionals and society.

However, during that same period (2002 to 2007) Romania developed its most comprehensive rights-based child-care reform. Across a number of laws and policies care leavers' needs were receiving sustained attention. They were to be supported by a comprehensive framework of preparation, extended care, and priority for housing, education, employment, and health. Their carers were to receive training to understand the expectations of a rights-based and child-centred legislation.

Yet, reviewing available literature in 2018, care leavers’ experience is uncannily similar fourteen years later. Collecting data from 140 residential centres, Balan et al. (2016) found that young people face the same difficulties at exit from care, lack information about the opportunities afforded to them by law, and most feel unprepared, abandoned and anxious. The discourse has remained focused on deficit (Alexa, 2014), with limited conceptual progress. It appears that the gaps between policy, practice and outcomes, already observed in 2004, have remained as wide. A sense of stagnation emerges, akin to Turner’s (1969) concept of ‘permanent liminality’ (in Thomassen, 2009:22), when a transition is never finalised.

I will take a historical analysis approach to uncover what persistent underlying mechanisms and discourses remain systematically unaddressed resulting in entrenched obstacles and lack of progress in supporting care leavers. Along a timeline spanning 50 years and two political regimes, from the 1970 communist Law for the Protection of Certain Categories of Minors, through to two rights-based child protection reforms in the 90s and 00s, and to today’s care leavers’ rights activists, I will explore what solutions emerge from analysing:

- how the concept of ‘care leaver’ has evolved along this continuum,
- how the concept of ‘care’ has evolved, and
- what has been the impact on practice of the ‘rights’ discourse, in operation in Romania since 1990, but which has generated a tension between conflicting discourses on rights and responsibilities persistent to this day.
Leaving Care in Norway, and the Nordic Welfare Model, in a Historic and Current Perspective

Thursday, 4th October @ 10:45: Transitions from Care to Adulthood: Exploring Historical Narratives (Venue: Arquivo)

Prof. Jan Storø (OsloMet - Oslo Metropolitan University)

Research on children and young people in care in Norway is a quite young research field. It was boosted with the implementation of Barnevernets utviklingssenter (The Child Welfare Development Centre) in 1990. Before this we had almost no research on residential care and foster care, and certainly not on leaving care and the transition to adulthood. Because of this I have sought other sources in the first part of my presentation to understand how the leaving care transition was understood in the 20th century, and up till our time.

I will draw on two articles:

- Storø, Jan, Sjöblom, Yvonne and Höjer, Ingrid. A comparison of state support for young people leaving care in Norway and Sweden. Differences within comparable welfare systems. Child and Family Social Work: Accepted for publication

The first article presents the professional and political discussions – and the shifting legislations – in Norway on leaving care for a period of more than a hundred years. The legislation has traditionally been weak on leaving care issues, but was strengthened as part of the larger project of building the modern welfare state after World War II. In the coming years, the legislation has gone through shifts in different directions (both weakened and after that somewhat strengthened again), and is discussed again this year.

The second article discusses how the modern Nordic welfare state, as it has developed in Norway and Sweden, actually represents a problem to care leavers – at least in its present historic stage. The model seeks to cover up for the needs of all citizens, through universalistic services on a broad range and a high degree of decommodification. This gives a secure situation for most citizens in most situations. But if a citizen, or a group of citizens, fall out of or find themselves not covered by the measures within this model, they risk being left alone, because there are no alternative services – neither state driven, nor private/NGO driven.

The case of Norway and Sweden is interesting. Within a very similar welfare model, one could believe that care leavers are treated similarly, and quite well – given the solid economic situation in the Nordic countries. But the two countries have chosen very different approaches to care leavers; Norway having legislation (though relatively weak), and as Sweden up till now have chosen not to implement such legislation.

Care leavers has not been included in the larger political debates on welfare services in Norway (and also in Sweden). It is fair to suggest that the number of individuals within this group has been too small to raise attention, and maybe even too marginalized to be visible to policy makers. The arguments of the few voices having advocated for improving the services for care leavers have not been taken into the larger political debates. This is interesting because in the same period Norway has gone through a substantial political and economic transition. From being a poor country in the outskirts of Europe a hundred years ago, Norway has developed to being one of the world's richest countries. Norway's failure to address the situation of the care leavers in today's society should also be understood in a historic context. It is maybe even fair to say the care leaver's case cannot be understood sufficiently without its historic backdrop. I will discuss this in my presentation.
Transitions from Care to Adulthood: Persistent Issues across Time and Place

Thursday, 4th October @ 11:00: Transitions from Care to Adulthood: Exploring Historical Narratives (Venue: Arquivo)

Prof. Harriet Ward (Loughborough University)

Introduction
Over the last thirty years or so there has been a growing body of international research into the outcomes of care and the specific experiences of care leavers; moreover, legislation and policy focussing specifically on care leavers has been introduced in countries as disparate as England, Norway and Argentina. However, concerns about care leavers have been raised in numerous societies for well over a century and reflect their approach to wider issues such as poverty and social exclusion, which impact on a much higher proportion of the population.

Objective
This paper draws together the issues discussed by the INTRAC History Group over the last two years. Its purpose is to explore some of the historical evidence concerning the widespread prevalence of concerns about care leavers in order to improve understanding of their persistence, and set a valuable context for future policy and practice initiatives. The premise is that we can only truly make sense of the present by understanding the past. The paper draws on research into the history of legislation and policy concerning care leavers over the last 150 years in five countries: three in the United Kingdom: England, Northern Ireland, and Scotland, and three countries in continental Europe: Norway, Romania and Switzerland. Empirical evidence from historical research undertaken in these countries shows that, although these societies have different histories and welfare regimes, the experiences of their care leavers reveal a number of common themes, concerns and issues that reflect unresolved debates which have persisted for well over a century.

Findings
Common themes include the objectification of children in care and institutionalised secrecy concerning their histories, early experiences and sometimes their whereabouts. These are related to their powerlessness and lack of agency – all of which provide fertile conditions for exploitation and abuse. Common concerns include: abuse within the care system and its long-term consequences for the mental health of care leavers; evidence of unsatisfactory outcomes of care; and the vulnerability of care leavers to social exclusion. Common issues include the introduction of policies that are now viewed as systemic injustices. These encompass juvenile emigration from England and Scotland, apprenticeship to the fishing fleets in Norway or the enforced separation of children whose parents were suspected of subverting the communist agenda in Romania. Evidence of powerlessness, systematic injustices, abuse within care and poor outcomes for care leavers all reflect a number of enduring debates which come to prominence at different times in different societies, but have yet to be fully resolved. These unresolved debates include opposing perspectives around the purpose of care: should it be to protect troubled children or to protect the society from the trouble they cause? Should it be to enable children to overcome traumatic experiences in early life and develop into independent adults, or should it be to discipline the unruly and enforce conformity? A further unresolved conflict is reflected in attempts to strike a balance between the perceived need to discourage welfare dependency and an acknowledgement that, without adequate support from the state, care leavers may struggle to become independent adults.

Conclusion
Finally, the paper will present some of the advances that have been made over the last fifty years or so. These include a growing understanding and acknowledgement of abuse, its aetiology and consequences; a gradual shift in perception towards a rights based approach to child welfare, underpinned by the UNCRC; formal government
apologies for some of the injustices of the past and the introduction of specific legislation and programmes for care leavers. However it will also ask whether changes to broader welfare provision have acted as a counter-balance to recent advances.
BACKGROUND: Gender-responsive practices designed for girls in residential care call for programs that match the needs and risks commonly found among this clientele (Belknap, Lynch, & DeHart, 2016). Great importance should also be ascribed to the kind of environment in which these programs are delivered. Program staff are particularly encouraged to place a high priority on building healthy relationships with the girls in their care (Kerig & Schindler, 2013; Matthews & Hubbard, 2008). However, youth care workers tend to consider intervention with girls as being particularly complex and demanding, and sometimes, not very rewarding (Lanctôt & Turcotte, 2018). In addition, some youth care workers tend to attribute very negative personal characteristics to girls (Lanctôt, Ayotte, Turcotte, & Besnard, 2012). Such negative views are at risk to have a deleterious effect on the therapeutic relationship and on girls’ receptivity to the intervention. It is thus important to better understand how youth workers’ views of girls can shape placement experiences.

OBJECTIVE: This study aims to better understand how the positive or negative perceptions held by youth care workers towards adolescent girls in residential centers can influence the therapeutic relationship and the evolution of adolescent girls during placement, both from the perspective of youth care workers and adolescent girls.

METHODS: Semi-structured interviews were conducted with 11 adolescent girls placed in residential care (Montréal, Canada) and their assigned youth care workers (n = 11). These interviews were conducted a few months after the start of the placement and individually with each party. The analysis strategy first focused on the different qualifiers that youth care workers used to describe the adolescent girls under their supervision. The perception that youth care workers had on these adolescent girls was then linked to their own assessments of the quality of the therapeutic relationship and the potential for change during placement. Adolescent perceptions of these indicators were then analyzed to enrich the analysis.

RESULTS: Youth care workers recognized the adversity experienced by adolescent girls throughout their life. The beliefs that these youth care workers held about these girls’ potential for change, however, emerged as an important factor related to the course of these girls’ placements. While some youth care workers were hopeful for the adolescent girls under their supervision, others had a particularly defeatist vision of them and their future. The positive or negative perceptions held by youth care workers greatly affected their psychological availability, including their willingness to actively offer support towards the girls’ positive development. Adolescent girls who perceived low emotional and social support from their designated care worker mainly established utilitarian and mistrustful relationships, which only diminished investment in the placement.

CONCLUSIONS: As recommended by Knorth et al. (2010), it is important that youth care workers have a framework and supportive resources to question their own “psychological availability” and their ability to build trust with vulnerable youth placed in residential care. To this end, the Secure Base Model (Schofield & Beek, 2009) can provide a positive and relational framework for therapeutic caregiving, which helps youth to move toward greater security and builds resilience.
Girls Placed Out-of-Home: With Whom Do They Build Trustful and Fulfilling Relationships during Placement?

Thursday, 4th October @ 10:15: Responding to Young People's Relational Needs: The Crucial Role of Residential and Foster Carers (Venue: Auditório)

Background: Studies of young people placed outside the family recognize the protective role that social support plays during the critical period of the placement (Jones, 2014; Rutman & Hubberstey, 2016; Salazar, Keller, & Courtney, 2011). However, establishing a social-support network remains a significant challenge for a considerable proportion of youth placed out-of-home (Adley & Jupp Kina, 2015; Ahrens et al., 2011). The relationship disruptions caused by the placement (for example, changes in home, guardian, school, friends and neighbours) make such young people's support networks considerably more fragile (Ahrens et al., 2011; Hébert et al., 2016; Jones, 2014; Salazar, Keller, & Courtney, 2011). Particularly, lack of emotional support appears to be of great concerns among youth with a placement history (Goodkind, Schelbe, & Shook, 2011; Samuels, 2008). Responding to the relational needs of youth during their placement is unquestionably of great importance. But the concept of “needs” is quite subjective and must be better defined. In particular, vulnerable youth’s own views as to the type of relationships that they consider fulfilling should be considered, but few studies have given these youth the chance to express such views (McLoed, 2010; Sanders et al., 2017).

Objective: This study aims to better understand adolescent girls’ perceptions regarding their appreciation of their interpersonal relationships as well as their relational needs and expectations during their out-of-home placement. The specific objective was to better understand to whom girls could rely on during their placement and how these significant individuals attest to their support.

Methods: Semi-structured interviews were conducted with 15 adolescent girls placed out-of-home (Quebec, Canada). Adolescent girls were placed in foster home (n = 7) or in residential care (n = 8). The age range was between 16 and 18 years old. The first placement occurred before age five for three girls, between ages 6 and 11 for four girls and between ages 12 and 16 for eight girls. Data were analyzed using both inductive and deductive content analytic approaches. The deductive coding was driven by the relational schemas defined by Gendreau (2001). These schemas include empathy, congruence, consideration, trust, security and availability.

Results: Findings first highlighted that girls tend to have negative perceptions of their relationships with residential/foster carers in their placement environments (e.g.: with foster parents, youth care workers). Girls particularly expressed themselves about i) their need to be treated with more consideration by their carers, ii) their lack of faith in the carer’s capacity to respond to their fundamental needs, and iii) the lack of availability of their carers to truly listen to them. However, some girls reported strong bonds with their foster parent and others reported having received useful guidance and support from practitioners who were providing assistance outside their placement environment (e.g. psychologists, social workers, practitioners intervening in an external service or program).

Conclusions: It is important to implement innovative approaches and interventions to promote the development and consolidation of supportive relationships within the placement environments. The relevance of the Good Lives Model (Ward & Stewart, 2003) will be discussed. According to this model, for rehabilitation interventions to be effective, they must promote individuals’ personal well-being and meet the needs that they themselves identify as important priorities. This model proposes a more holistic, humanistic, pragmatic approach to the rehabilitation of vulnerable people, focusing less on their personal deficits and more on their capabilities.
Providing a Secure Base for Lesbian, Gay, Bisexual, Transgender and/or Questioning Young People in Foster Care in England

Thursday, 4th October @ 10:30: Responding to Young People’s Relational Needs: The Crucial Role of Residential and Foster Carers (Venue: Auditório)

Dr. Gillian Schofield (Centre for Research on Children and Families, University of East Anglia), Dr. Jeanette Cossar (Centre for Research on Children and Families, University of East Anglia), Dr. Emma Ward (Centre for Research on Children and Families, University of East Anglia), Dr. Birgit Larsson (Centre for Research on Children and Families, University of East Anglia), Dr. Pippa Belderson (Centre for Research on Children and Families, University of East Anglia), Dr. Julia Keenan (Centre for Research on Children and Families, University of East Anglia)

The experiences and needs of Lesbian, Gay, Bisexual, Transgender and/or Questioning (LGBTQ) young people in care have been overlooked in England in policy and research. This paper reports on the first study of LGBTQ young people in care in England (Cossar et al in preparation), focussing attention on the caregiving role of foster carers in providing them with a secure base.

The concept of a secure base (Bowlby, 1973) in attachment theory has made an important contribution to our understanding of what children need from relationships for healthy development. The core principle of a secure base for exploration is that sensitive and available caregiving for children reduces their anxiety and promotes exploration, giving them the confidence to explore their environment, engage in play, education and activities, but also explore their own feelings, relationships and identities.

For young people in care from troubled family backgrounds, who lack trust in relationships, the concept of a secure base can be helpful in defining the therapeutic caregiving that they need. The Secure Base caregiving model (Schofield and Beek 2014, 2018, www.uea.ac.uk/providingasecurebase) draws on attachment theory and research, as well as child placement research, to provide a framework that links five caregiving dimensions to the developmental goals that children in care often find hard to achieve. These dimensions are: availability-helping the child to trust; sensitivity-helping the child to manage feelings; acceptance-building the child’s self-esteem; cooperation-helping the child to feel effective; family membership-helping the child to belong.

LGBTQ young people in care are likely to have additional developmental challenges, as their emotional, psychological and social well-being depends on how well supported they are in managing not only the difficult family histories they share with other young people in care, but also the tasks of developing their sexuality and gender identities. As Meyer (2013) suggests, living with and expressing minority sexual identities can be stressful, and for LGBTQ young people in care who are caught up in complex networks of family relationships and professional systems, discovering and feeling comfortable with their identities is a significant developmental task.

Our study focused on how LGBTQ young people in care in England negotiate their identities and are supported. Interviews with 46 LGBTQ young people provided life stories of their pathways from birth families through the care system. The interviews were analysed using narrative analysis, with a focus on intersectionality between LGBTQ, care and other identities. A national survey and focus groups explored service provision. The focus of this paper will be the interviews with 25 foster carers with experience of caring for LGBTQ young people. Telephone interviews were conducted and analysed thematically, with each stage of the analysis being subject to checks by members of the research team.

The Secure Base model was used as a framework to analyse these interviews and it was found to be helpful in understanding how foster carers in this study responded both to the more familiar relationship tasks of fostering and the additional tasks arising from the needs of LGBTQ young people in their care. For example, helping LGBTQ young people in care to trust in relationships required not only emotional and practical availability to
aid recovery from abuse and neglect, it often meant supporting young people with lack of trust arising from rejection and stigma in birth families and the community. Acceptance to build self-esteem included helping young people to explore and express their sexuality or gender identity while also accepting that these identities might be fluid and evolving. This presentation will explore the messages for practice in relation to training and supporting foster carers.
Background: There is mounting evidence that children and adolescents in child protection (CP) group care have histories of multiple maltreatment experiences, attachment problems, behavioral disorders, and high levels of co-morbid mental health problems (Dorsey et al., 2012; Kolko et al., 2010; Tarren-Sweeney, 2017). These issues are increasingly recognized as dysfunctional adaptations stemming from traumatic experiences that can cause toxic stress. However, CP agencies have not yet systematically adopted policies and procedures to screen for exposure to victimization or to provide trauma-informed services. Building on the Attachment, Self-Regulation and Competency (Blaustein & Kinniburgh, 2010; ARC) model, we are collaborating with CP agencies to provide staff with new ways of responding to the need of young people under their care. The ARC model has been shown to decrease trauma and behavioral symptoms in children and youth in out-of-home care, as well as caregiver stress (Hodgdon et al., 2013; 2015).

Objective: This collaborative project aimed to implement the ARC model in CP group care settings and assess its impact on the caregivers’ knowledge and attitudes towards trauma experienced by children in their care. This paper will report on the data collected prior to the implementation of the ARC model (pre-training data).

Method: In collaboration with 11 CP agencies in Quebec (Canada), 206 group care workers from 23 units serving children and youth aged 3 to 17 have taken part in the ARC implementation. Pre-training data with workers are based on the Attitude Related to Trauma Informed Care (ARTIC) Scale (Brown & Baker, 2016) and the Secure Base Interview (Schofield, University of East Anglia). The former is a 35-item questionnaire comprised of five subscales (e.g., Underlying Causes of Problem Behavior and Symptoms; Responses to Problem Behavior and Symptoms). The latter is a semi-structured interview drawing from Attachment theory and designed to document caregivers’ perspectives on five dimensions of caregiving: Availability, Sensitivity; Acceptance; Co-operation; Family Membership (Belonging).

Results: Preliminary data from the ARTIC revealed that workers generally endorse trauma-informed practices, but that a range exists in regards to how workers understand children's behaviors and how to best help them. Most felt able to meet the demands of working with traumatized populations, but they minimized the effects of vicarious traumatization. Age of the workers, years of experience, educational level, and age of the clientele served did not significantly impact ARTIC scores; however, professional role and gender were associated with different scores, with women scoring higher than men and clinical support staff scoring higher than floor staff. Initial coding of the Secure Base interviews revealed a tension between being available to respond to children's individual needs and managing a group and doing shift work. Workers also expressed the challenge of responding sensitively to children's unwanted behavior and emotional needs while simultaneously managing their own emotional responses. Group care workers gave numerous examples of ways in which they show acceptance and attempt to support positive self-esteem in children. Regarding cooperation, workers tended to view children's capacities as fixed; describing them as either collaborative or oppositional. Finally, group care workers generally reported working hard to support children's positive relationships with biological and/or foster families, even in cases where they felt protective of the children in their care and disagreed with parenting methods.

Conclusions: This project showed that child protection workers demonstrate genuine care for children's well-
being but understand their roles and mandates in different ways. Most workers report facing organizational and work-related challenges when implementing approaches that focus on children and youth trauma-related needs and on their role as a secure base to their clients.
Needs of Girls Placed in Institutional Care in France: Girls’ and Carers’ Perspectives

Thursday, 4th October @ 11:00: Responding to Young People’s Relational Needs: The Crucial Role of Residential and Foster Carers (Venue: Auditório)

Dr. Hélène Join-Lambert (Université Paris-Nanterre), Dr. Severine Euillet (Université Paris-Nanterre), Mrs. Emmanuelle Boudaud (Université Paris-Nanterre), Dr. Virginie Avezou-Boutry (Université Paris Nanterre)

Objectives
Young people placed out-of-home in child protection are known to face more risks than other young people during their transition to adulthood (Stein, 2012). It is also established that girls face specific risks: for example, a French study states that during their placement, 14% of girls were pregnant whereas only 1% of boys were becoming (Boujut, Fréchon, 2009). However, girls who live in care also have hopes for the future, and specific needs linked to their situation. Based on the possible selves approach (Erikson, 2007) our research project was aimed at identifying fears, hopes and needs of adolescent girls, both from their own perspective and from the perspective of their carers.

Methods
Individual semi-structured interviews have been conducted with 15 girls placed in four different institutions around Paris, and aged 16 to 18, in 2017 and 2018. Consent was obtained from the girls under 18 and their legal representatives. Four group interviews were organized with 15 carers working in the same four institutions. Thematic and lexical analysis of the interviews is used to compare adults’ and young people’s perspectives with respect to hopes, fears, and needs of girls.

Results
At times girls express anger towards their carers and the institution where they live, but mainly they show awareness about the support they receive.
Many girls express their hopes in terms of educational and professional becoming. They show a strong need in terms of encouragement towards these ambitions. On the other hand, carers see themselves as ‘dream-breakers’ in the sense that they are forced to remind young people in care about the need to be financially independent at the age of 18, or at least no later than 21. As we know from other research, young people in care are encouraged to lower their ambitions regarding educational paths (Jackson, Cameron, 2012).
Carers mention becoming a mother as a hope but they also see it as a fear if it arrives too soon or with the wrong man. On the opposite, girls think about motherhood as something that will occur far in the future, when, they will be financially independent. Several girls fear to live the same experience as their mothers, whereas carers see the risk of reproducing the neglect and abuse they have suffered from.
In terms of needs, girls value relationships with important persons like parents, siblings, other members of kin, and friends, as far as they provide practical help, emotional support and consistency. This social dimension is also important in terms of shaping their identity: they are very cautious about whom to be friends with, and mostly they choose friends outside the institution where they are placed.
Carers highlight the need of time for girls to get ready for adult life, and state that leaving care at age 18 is too early for most of the girls. Girls rather quote the need of financial support and of predictability in care decisions, where they feel powerless.
Common fears mentioned by girls and by their carers seem to be driven from actual experience of young people who have left care in the previous years: they mention fear of prostitution and homelessness.

Conclusions
Although girls’ and carers’ definitions of hopes, fears and needs are different, carers are very much aware of
the girl's perspective. Our data shows that the girls we interviewed have rather little support in terms of reliable relationships, which is in line with international research (Goyette, 2011). For adolescent girls and their carers, the institutional and legal context regarding the support to transition to adulthood creates huge uncertainty regarding their future life after they turn 18.
**From Selection to Formative Evaluation: A New Model for Preparing and Following Adoptive Mothers and Fathers**

Thursday, 4th October @ 10:00: Towards a Relationship-Based Approach: The Change of Paradigm in Alternative Care in Chile (Venue: Porto)

Dr. Irene Salvo Agoglia (Universidad Alberto Hurtado), Mr. Esteban Gómez Muzzio (Fundación América por la Infancia), Dr. Manuela García Quiroga (Pontificia Universidad Católica de Valparaíso), Ms. Rosita Vargas Díaz (Universidad de Montreal), Ms. Leyla Contreras Yévenes (Fundación América por la Infancia)

This presentation is based on the preliminary results of an ongoing research (2017-2018) “Design of technical resources to formatively evaluate the suitability of applicants for adoption, based on the right approach”, requested by the National Direction of Adoption of the SENAME, Child Protection System in Chile and carried forward by an interdisciplinary and specialized team. This research aims to design and test an evaluative-formative model and its respective instruments to state the suitability of national adoption applicants. This model purpose is to provide the necessary, sufficient and quality information not only to declare its suitability, but also to identify the needs of support and training, which are consistent with the guidelines adopted by SENAME, the current legal framework, the state of the art and international experiences.

This instruments design will be directly related to the progressive implementation of a National Adoption System (SISNA), which conceives adoption as a process, the adoption trajectory, that requires continuity, articulation and integration between the prior stages to the declaration of suitability with the eventual process of post-adoptive accompaniment, by articulating the information gathered in the evaluation stage with various training and reflective resources. This will avoid falling into a reductionist and psychologist’s view of suitability assessment, laying on the traversal incorporation of diverse approaches which will allow an ecologically and culturally adapted approach for the development of adoptive parenthood. We are using an action-research methodology, through a participatory and recursive process, in which we are working in partnership with the main actors in the co-construction of this new model. Overcoming linear, hierarchical and Objectivist logics in the construction of instruments, we have implanted a method of active participation of professionals at the central level of the Global Adoption Program (PAG), the Regional Adoption Units (UADOP) and various national and international experts, international organizations, as well as the adoptive families themselves who have gone through this process. In this way, the voice of all the actors involved is incorporated, both to build the architecture of the model, and to legitimize and validate its proposals. The fundamental scheme of this model seeks to integrate tools from an interdisciplinary field, seeking a balance between rigor, relevance and applicability within the acceptable limits for public policy, as well as complementary and usefulness for the various stakeholders.
Chile shares a common history with other child-protection systems in the world. The first child protection services were held by private institutions, primarily linked to the catholic church with a minimal or null State involvement. However, this historical confluence takes divergent paths when States all over the world started to take the leading role in child welfare in the late seventies. In Chile, the Pinochet dictatorship caused the contraction of the welfare state, which was strengthened with the implementation of the neoliberal model. They implemented a financing system that stimulated child institutionalization, which consisted in a payment that was given to the private institutions for each day that the child slept in an institution in an out-of-home care placement.

With the advent of democracy, the child-protection system began to gradually change. In 1990, Chile subscribed to the International Convention on the Rights of the Child. The Chilean State committed to make institutional changes in favor of children within a certain period; the goal was to introduce a new paradigm and change the child’s vision as a subject of protection, to a paradigm that considered child as a subject of rights. The de-institutionalization and the professionalization processes began, accompanied by the introduction of a new type of State funding which was materialized in the Law N°20.032 of SENAME, which introduced a new type of subvention systems, which stimulated family services, foster-care placements and kinship-care. The Chilean State finances a significant percentage of child protection institutions, but its role remains superficial and the largest percentage of services are still in private hands.

However, it is important to acknowledge important changes in Chilean child-welfare, especially the structural changes introduced by the former president Michelle Bachelet, which has led to the creation of the “Política Nacional de Niñez y Adolescencia” [National Policy on Children and Adolescents] which in the period from 2015 to 2025 aims to the progressive installation of an institutional system of rights guarantees and orientation of public policies.

In this changing context, the aim of this communication is to show the practical implications of these paradigm changes in child protection services in Chile, in particular in permanency planning and adoption in the context of the implementation of the action research, the “Design of technical resources to formatively evaluate the suitability of applicants for adoption, based on the right approach”. We would show that unlike other countries, in Chile adoption is still not considered as a natural pathway in permanency planning. Conversely, adoption is still considered the last option in a linear process. This is related to the fragmentation of child protection services which leads to an important variability. The different actors agree with the importance of a changing of paradigm, which sees adoption as a process, a valid alternative to permanency, and which introduces a more humanistic approach to the adoption services.
The Global Transformation in Adoption and its Effects in Child Protection: An Overall View of the Situation in South America

Thursday, 4th October @ 10:30: Towards a Relationship-Based Approach: The Change of Paradigm in Alternative Care in Chile (Venue: Porto)

*Dr. Anne-Marie Piché (Université de Quebec a Montreal), Mrs. Rosita Vargas Diaz (Université de Montréal)*

This presentation is based on the results of a field study that gathered the testimonies of several professional actors (local and international) of five different South American countries (Chile, Argentina, Colombia, Peru, Bolivia): private organizations that have the formal approval to carry out adoption processes, professionals from the central authorities in charge of protection and adoption services, association of adoptive parents, among others.

The objective was, on the one hand, to better understand the actual realities of adoption, and on the other hand, considering that the former countries of origin of international adoption have been for a few years in a moratorium on this type of adoption, observe the mechanisms for implementing new laws and policies to promote local adoptions. The general objective of this qualitative study was to portray the changes in the phenomenon of international adoption in a comparative context of the South American countries.

Methodology: 32 Semi-structured interviews were carried out with key actors on child protection and adoption (between 2014-2017), which were then analyzed in an inductive manner by means of the grounded theory; the objective was to highlight the challenges that these professionals face, their attempts to collaborate around the needs of the children involved and the efforts in the development of the system.

Common and divergent themes could be evidenced, such as: 1) the confrontation with the barriers of implementation of new rules for the protection of children and the adoption management; 2) the actors have had to review their ways of respecting their adherence to the HC-93 norms, laws and principles of action; 3) serious social problems in families were amplified by urbanization and the loss of social relationships (alcoholism, substance abuse, domestic violence, poverty) and exacerbate abuse, the main source of separation; 4) the poor availability of psychosocial services offered by the public sector limits the ability to prevent these problems and puts pressure on charity or religious organizations to support and organize adoptions privately; 5) the systems are fragmented (adoption and protection, administrative and judicial) and this affects the quality and speed of the solution process for children; 6) the number of permanent locations or local adoptions remains, to a large extent, inferior to the objectives; the number of children living in institutions and waiting to be adopted is too high and too long, which results in the failure of many to possibly be adopted; 7) the lack of public investment and the slow development of the child’s right culture impede the correct application of the new laws and policies on the welfare and adoption of children. Faced with these obstacles, professionals try to create alliances to strengthen their systems. This presentation will focus on the results of Chile, using this country as a comparative axis with the rest of the countries included in this investigation.
Pilot Residential Project for Adolescents Aged 12+ in Chile.
Towards a Relationship-Based Approach

Thursday, 4th October @ 10:45: Towards a Relationship-Based Approach: The Change of Paradigm in Alternative Care in Chile (Venue: Porto)

Ms. Claudine Litvak (Hogar de Cristo), Dr. Manuela Garcia Quiroga (Pontificia universidad Católica de Valparaiso)

The “Hogar de Cristo Foundation” a Chilean NGO, is proposing a new residency system for Chile, based on a process of reflection related to the conditions of children and adolescents living in residential settings both in this NGO and other settings in the country. The aforementioned responds to a moment of inflection in the country, where different reports show the permanent violation of children’s rights in the Chilean protection system. An exhaustive qualitative and quantitative research was carried out in the field. Subsequently, the Foundation conducted an exhaustive bibliographical search, including a comparative policy analysis regarding models with positive results at an international level. The results of this study was then analysed with more than 45 Chilean and international experts agreeing in elements considering to be fundamental for the operation of a residence in the national context. The afore mentioned process built the path towards the development of a technical model based on quality standards, which purpose is to promote good quality of life and social inclusion of all those children and young people who are living in residences.

This new technical model is being implemented in a pilot stage, involving two residences; one for boys and one for girls with a capacity of 10 users each, for a period of two years with a scope of 60 people in total, including their relatives and other significant persons as indirect users.

The pilot project will be evaluated by an external entity to measure the results of the program in young people and their families. In the same way, the implementation will be monitored by an observatory led by actors from civil society, academia and government, who will witness and provide feedback on the entire process. Finally, this project also aims to influence public policy, which is why it plans to develop a feasible and scalable proposal to improve the system of specialized protection and residential care for young people in our country.

The model consists of a specialized therapeutic residence, through a multidimensional combined treatment with a relationship based approach. This model seeks to improve the quality of life and socially include adolescents and young people who have been severely affected in their rights, and who have multiple and complex needs.

This purpose implies the following specific objectives:

- improve young people’s subjective well-being;
- promote, protect and re-establish young people’s mental health;
- increase educational attainment among young people;
- increase the social inclusion of young people;
- encourage family ties (maintenance of family ties and / or reunification);
- eliminate or reduce the risk of deprotection;
- accompany young people in their transition to adult life.
The **objective** of this presentation is to raise a discussion of whether the basic rights according to the Convention on the Rights of the Child (CRC) seem to be implemented to a satisfactory extent in the care environments for children and young people. Almost all nations have signed the CRC, and many states have incorporated the rights in national law. However, at the same time many states seem only little aware of how to implement the rights for vulnerable groups, such as children and young people in out-of-home care, whom this presentation focus on.

As concerns **methods**, a Danish study has collected a huge amount of survey data in a large sample consisting of more than every second young person in out-of-home care 11, 13, 15, and 17 years old (2,500 young persons altogether). While the youngest half of the sample was interviewed face to face by trained interviewers, the eldest half was asked to fill in a web based questionnaire. If they did not respond to this, they were offered a face to face interview, which one third of this group accepted.

In the presentation, this survey data will be used to illustrate examples of the implementation of five articles in the CRC. The five articles concerns

- The right to freely express your own views, and that your views are given due weight (article 12);
- The right to protection from all forms of violence (article 19);
- The right to special care and protection while deprived of the family environment (article 20);
- The right to periodic review of the treatment while in care (article 25);
- And the right to a living standard ensuring adequate physical, mental, and social development (article 27).

The presentation will be guided by the question: To which extent are these rights met for young people in out-of-home care? Thus, methodologically the analysis rests on the survey data mentioned, collected in Denmark. It is plausible to assume that the trends and conclusions are true for many welfare states.

One **result** is that the CRC rights seem to be met to a reasonable extent in some respects. For example, an increasing amount of young people in out-of-home care like going to school, and they feel more and more challenged in school - in a positive way. In other respects, however, the **results** are disappointing. As concern the central issue of participation, far too few of the young persons feel involved in the process around and decision on out-of-home care. And far too many experience that their personal needs and beliefs are not met or acknowledged.

The most striking **result** is, however, the large – sometimes enormous – discrepancy between how young persons perceive to grow up in foster care versus residential care. Young people placed in residential institutions and group care homes feel less involved, they feel less heard, and they have a considerable lower score on life satisfaction. Other examples will be specified in the presentation, **concluding** that the results call for action if we want to implement the CRC seriously.
This paper is based on the narratives of 39 Romanian born young adults who experienced residential care, foster care, domestic adoption in Romania and intercountry adoption from Romania. Exploring the participants' accounts after their time in care from this children's rights and dignity perspective can be a contribution to the children's social care area that has been under-theorised (Nussbaum & Dixon, 2012; Shaw & Arksey, 2004) for a long time. In recent years, some scholars have suggested the UNCRC as a conceptual framework (Cordero Arce, 2015; Smith, 2015; Waldock, 2016) that is specific to children. As a tool, the framework enjoys wide acceptance expressed in its almost universal ratification (Melton, 2005) and takes a holistic approach from a human rights perspective (Freeman, 2011).

Drawing on the UN Convention on the Rights of the Child to interpret quality of care and on Nussbaum's Capability Approach to interpret the quality of the research participants' adult life, I propose a conceptual framework on what to regard quality of life during and beyond care and the elements that should frame it. By employing human dignity as a core concept in the human and children's rights realm and in the Capability Approach (M. Nussbaum, 2011), this conceptual framework bridges care experiences to adult life experiences from care leavers' and adoptees' perspectives.

The paper will present empirical data from a study that used life history interviews as research method. Most research participants were in their 20s the time of data collection. They entered adulthood from residential care settings (16), foster care (8), domestic adoption (7) and intercountry adoption (8) although many of them had experienced different types of placement during their care history.

The findings of this qualitative study suggest that the extent to which the research participants' current lives reflect their personal choices or the fulfilment of their aspirations is mostly connected to the quality of care rather than the type of placement. By bringing forward the voices of care leavers and adoptees, the findings contribute to current debates about a hierarchy of placements. This study also contributes to a better understanding of the different types of placements from the perspectives of those who experienced them. As such, it has the potential to inform policies in this field.
Knowledge Regimes in Child Protection

Thursday, 4th October @ 10:30: Child Welfare Systems (Venue: Miragaia)

Dr. Anette Faye Jacobsen (Danish Institute for Human Rights)

Knowledge and evidence-based interventions in family and child protection cases have become widespread during the last decades (Christensen et al, 2017). Knowledge is not neutral, however, nor is it devoid of interests. The objective of this study is to analyse how knowledge regimes can be constructed and used to influence policy-making in relation to child protection.

The analysis is conducted within a contemporary history framework inspired by a post-structuralist approach. According to this, the interpretation of sources includes analyses of concepts and discourses as decisive aspects of knowledge production and policy formation. This is not a one-way stream of influence from research to lawmaking; rather, knowledge is produced through ongoing, complex exchanges between politicians, administrators and research communities at national and international levels.

It follows that applied research is often generated in a dialogue with public policy processes. This study analyses two examples of how knowledge and research have shaped legislation and institution building pertaining to child protection in Denmark during the last decades.

The paper focuses on a series of political initiatives which have aimed to enhance and systematise protection measures against child abuse, adopted in Denmark since the turn of the millennium. Similar efforts to strengthen evidence-based child protection have gained momentum in a number of Western European countries (Gilbert et al, 2011). Moreover, international campaigns by organisations including the United Nations have urged states to take steps to prohibit violence against children in public institutions as well as in the home (Durrant et al, 2011).

Around the year 2000, new programmes were launched at two major Danish university hospitals in the cities of Copenhagen and Aarhus, focusing on the identification and treatment of children exposed to sexual abuse. Parallel to these, a new public institution was established under the Ministry of Health: SISO (Knowledge Centre for social measures concerning sexual abuse of children).

The study explores how these new knowledge hubs, in a dialogue with the government and the ministries of health and social affairs, shaped political campaigns and implementation of protection schemes at the local and municipal level. This includes implementation in children’s institutions, kindergartens, foster care homes, etc. During the 2000s, a number of child abuse cases were disclosed by the press and caused a media scandal due to the failure of the authorities to protect the children involved. This led to new political initiatives including the commissioning of research (Oldrup, 2010, 2016), establishment of new institutions to deal with victims, and development of new municipal protection mechanisms, all under the heading ‘the Abuse Package’.

Still more encompassing definitions of child abuse, however, had failed to include psychological forms of maltreatment in legislation and policy guidelines to front line practitioners. Some surveys had included this aspect but it was marginalized in advocacy and policy processes. This has changed during the last years as an effect of political pressure primarily from women’s rights groups.

This study traces the generation of new knowledge about child abuse and analyses definitions, delimitations and contestations of key concepts such as violence and different form of abuse, as applied by research communities, child advocates and lawmakers in relation to the legislative developments and political awareness.

The paper concludes with a discussion of how research evidence and interests may influence politics and practical implementation of child protection programmes. It also outlines how the political agenda and public opinion impact on research questions and knowledge production. Finally, the paper asks how research communities can keep their critical self-reflection amidst political and public pressure to deliver results within pre-defined frameworks, and with a growing institutional demand to raise funds for further research from outside donors.
Russia ranks among the first in the world when it comes to the number of children left without parental care with its 2.4 per cent of the total child population. About 80 percent of these children have the status that in Russian is called ‘social orphan’: they are children whose parents are alive, but for some reason not part of their lives (Biryukova and Sinyavskaya 2017). The Russian child protection system has been criticized for its inability to support families at risk and consequently its orientation toward alternative care – in large residential care institutions.

The Russian government is now radically reforming the state system for children in out-of-home care, both family-based and institutional (Kulmala et al. 2017). Recent policy initiatives strive to ‘deinstitutionalise’ Russia’s care system for children left without parental care by promoting adoptions, increasing the number of foster families, creating family support services to prevent children from entering the care system as well as restructuring remaining residential institutions into smaller, home-like environments. These moves are all key elements that will bring Russia into line with the global deinstitutionalisation trend (e.g. Ainsworth & Thoburn 2014).

The reorganization of the alternative care system is being implemented throughout the country at a considerable scale and speed. In comparison to the Soviet-rooted, residential care dominated system, the current reform represents a fundamental change in the underpinning ideals of care and institutional design, a paradigm shift as Kulmala et al. (2017) conceptualize the reform. The prevailing ideologies of child welfare systems are traditionally characterized by being oriented either to family support or child protection (Gilbert et. al 2011). As Verhallen et al. (2017, 2) briefly summarize, the family support model can be characterized as services and interventions with poor or struggling families which aim to strengthen the care and capacities of parents, whereas the child protection model directs interventions at identifying and protecting children at risk of abuse or neglect. Gilbert et al. (2011) note that since the 1990s, a third orientation, a child-focused model, has emerged. This model contains aspects of both child protection and family support and is characterized by early intervention policies, services and practices, with parents’ responsibilities as caregivers both examined and supported to ensure that they provide a good childhood.

In reality, though, no country presents a pure type of any model but combines their elements. Russia is no exception. In this paper, we argue that at the level of ideals and policy, the Russian paradigm shift is from child protection to a mixture of child-focused and family support. Yet, at the level of practices many aspects of child protection remain. The Soviet legacy still affects the current institutional arrangements and practices and many serious pitfalls persist. Much has happened, yet, partly on paper and with unintended, even paradoxical results.
A Human Rights Analysis of Removing and Maintaining a Child in Care under a Voluntary Agreement in Ireland and England

Thursday, 4th October @ 10:00: Decision-Making: Child-Oriented versus Family-Centred (Venue: Arrábida)

Ms. Maria Corbett (National University of Ireland)

In Ireland and England, a child may be taken into State care under either a judicial order or a voluntary agreement between social worker services and the child's parent(s) and/or guardian(s). A third of all children in care in Ireland are in care under a voluntary agreement, and in England this figure is 29 per cent. Voluntary agreements offer a quick, flexible, inexpensive and uncontested route into care which can serve as an important child protection and family support measure. Utilising the voluntary care option keeps children, parents and social workers out of court: an experience that can be stressful, stigmatising, time-consuming, adversarial and expensive.

Despite the clear advantages associated with voluntary care, concerns have been raised in both jurisdictions about its use. The voices raising these concerns include the judiciary. For example, in a 2015 case Munby P., President of the Family Division of the High Court of England and Wales criticised the “misuse and abuse” of voluntary care.

Objectives
The presentation examines the use of voluntary care in Ireland and England to assess and compare the compliance with international and European human rights law in each jurisdiction. The analysis includes a review of how the legal status of the child's care placement (being either under a judicial order or a voluntary agreement) impacts on the fulfilment of the child's rights. Issues explored include the child's right to have his or her views taken into account in decision-making, and that an admission to care must be a measure of last resort, and whenever possible, should be temporary and for the shortest possible duration, in line with the jurisprudence of the European Court of Human Rights.

Method
Socio-legal research completed as part of a doctoral thesis on child protection decision-making is the basis for this presentation. The methods employed include doctrinal legal analysis of international and European law to identify human rights norms and standards and an analysis of relevant Irish and English judgments. Secondary analysis of relevant social work research, policy publications and media reports was also undertaken.

Results
Similarities and differences emerge in the definition and practice of voluntary care in Ireland and England. In both jurisdictions, social workers face similar challenges in ensuring and documenting that parental consent is free, full and informed. A second challenge is how social workers respond in circumstances when a parent seeks the return of his or her child. Parental consent to voluntary care can be withdrawn at any time and from that point onward there is no legal basis to maintain the child in care. A third challenge is how to ensure that the voluntary care placement is for the shortest possible duration, which may involve efforts at family reunification.

Conclusions
The presentation concludes with a discussion on proposals to reform voluntary care to comply with human rights obligations, while at the same time retaining the elements that make it a valuable child protection and family support intervention.
Removing a newborn from a family is a strong intrusive intervention by the state and, as also shown by the case law, the consequences of the removal are almost always irreversible. Research on these types of child protection interventions in Europe are scarce, and there is little or no systematic factual information about the reasons for state intervention. The lack of knowledge about what is going on in this crucial area of the welfare state is a huge concern, and it is unclear whether there is detailed national and international scrutiny of the fairness and rightfulness of these interventions. In this research, we analyse judgments from the European Court of Human Rights (ECtHR) with the aim to identify core issues in child protections removals of a newborn, as well as to systematise the specific newborn removal criteria applied by the Court.

We have identified all the cases decided by the ECtHR under article 8 wherein removal of a newborn child has happened. The data material consists of all the judgments in cases of child protection care orders involving newborns decided by July 2018 - during its existence, the ECtHR has discussed the newborn removals in a total of 11 cases. The cases range from 1995-2017 and cover eight countries: Austria, Croatia, Finland, Germany, Norway, Russia, Sweden and United Kingdom (UK), with Norway and the UK with two and three cases respectively and with one of these cases against Norway still pending before the Grand Chamber.

All of the cases deal with the right to family life (art 8 of the ECHR) and discuss, when is it necessary in the democratic society to remove a newborn baby. In this research, we analyse the ECtHR's assessment of member states involuntary removals of newborns. Methodologically, the study combines text analysis and the legal analysis.

The analysis is divided into two substantial parts. We start by exploring the factual situations presented in these cases. We analyse: 1) nation-states reasons for removal of a newborn; the position and status of the child and the biological parents; what the states have done to prevent the removal and to remedy the problematic and worrying situation. 2) The substance of the complaints and alleged violation of the right to family life and the focus of the ECtHR in these proceedings. Secondly, we turn to the legal evaluation of these cases and examine: 3) how the court draws the line between what is and what is not a necessary removal; what weight does the ECtHR place on different arguments and how these considerations guide balancing the rights of the parents and the interests of the child. 4) We conclude by analysing the margin of appreciation that nation-states have under article 8 in these cases.

Current research has several limitations due to the low volume of the cases and the peculiarities of the proceedings in the ECtHR. The parents initiate these cases and, thus, the court focuses on the arguments brought forward by them. Furthermore, the prerequisite of the international proceedings is the exhaustion of domestic remedies and pass the rigorous admissibility test. Nevertheless, the cases selected present an interesting and unexplored intersection of the family law and child protection removals practice that should reveal the universal values that legally bind all the member states to the Council of Europe.
Decision-Making and Construction of Risks in the Danish Child Protection System: Discretion and Categorization

Thursday, 4th October @ 10:30: Decision-Making: Child-Oriented versus Family-Centred (Venue: Arrábida)

Prof. Andrey Lukyanov-Renteria (University College Absalon), Prof. Anne Sofie Lykke Holbek (University College Absalon)

The purpose of the presentation is to look on how discretion and categorization influence decision-making process in child protection cases – in connection with the project UC Absalon runs with 3 municipalities in Denmark. Our project is supported by the Danish Government and has the purpose of finding out how the legal norm is understood and implemented by child protection social workers and how they use discretion and categorization to determine use of different legal norms implicating different legal rights for the children and their parents. Our focus is on article 11 (3) in the Danish Social Service Act, which makes it possible to provide preventive measures for the child when assessed, that the child’s problems and needs are less complex, and can be accommodated by preventive measures. As a part hereof, our focus is on the interface of the regulation in the Danish Social Service Act concerning special support to children (article 50/52), and the significance of this in terms of the children and their parents’ legal rights.

The project is based on a critical approach towards child protection in Denmark and aim to find mutual patterns in use of § 11.3 and sociological analyses of the main development patterns within risk assessment.

The theoretical framework is based on a concept of national welfare state and the critical analysis of it (Lorenz, 2006; Lessenich, 2012) combined with Hawkins’ ideas regarding decision making and discretion (Hawkins, 2002).

The main conclusion of the project is, that the definition, extent and grade of risk in the context of decision-making process are often the result of personal and societal normative approaches. At the same time, this approach is the result of a paradigm, defining children as a new vulnerable group susceptible to risk – and therefore in need of special protection and support. This paradigm can be identified both in international conventions (e.g. Convention on the Rights of the Child) and within the research field (Young-Bruehl, 2012).

The context for our project is the Scandinavian welfare state - based on the principle of universal access to publicly provided goods and services. It means that the child protection system can also be defined as part of the re-distribution system, where both economical, educational and psychological support of families with children can be considered. At the same time, the child protection system can be used as part of control and normalization agenda, and even as system of punishment. E.g. our project shows, that social workers are more open to positive interpretation of law and definition of risks as low, if the family is categorized as “normal”, “with resources”, when family with even slightly element of deviation considered as families with higher risk – and necessity to be investigated.

It means, that social workers at municipal level might double role regarding child protection. They both construct new risks, re-distribute resources and use power to assess and fight these risks. In this case discretion can be used as flexible mechanism, supporting the social workers definition of normality and providing them with possibility to use their power within the legal frame.

As our project shows, discretion is directly connected to flexible definition of risks and can include not only factors dangerous for a child’s health and development, but also factors connected to a child's spare time activities, identity, and physical form.

Discretion as mechanism of construction of risks on a municipal level can be as reflection of the social normativity, and since there is no research done in this area in Denmark, we found it relevant to bring this topic into discussion.
The Scottish Children’s Hearing System has been in place for forty-seven years; however, little research has been undertaken on how children’s panel members make their decisions, despite them being required to make potentially life changing decisions regarding children’s welfare (Waterhouse, 2017).

This presentation is based on a recent qualitative study investigating how panel members make decisions within the Scottish child welfare legal system and what factors influence these processes, as well as whether being presented with findings from an intervention-based assessment influences their decision-making. Six panel members of an Area Support Team volunteered to participate.

A think aloud procedure (TAP) was used after participants read a case vignette (that had been adapted from a Dutch study (de Haan, van der Asdonk, van Berkel, Alink & van Ijzendoorn, n.d.) for the Scottish context) and a semi-structured interview was administered. Thematic analysis was used to analyse the TAP and semi-structured interview transcripts.

Evidence provided by the intervention-based assessment was considered to very valuable in informing panel members’ decisions. Five master themes were identified: observing people-face-to-face, assessing change, protection from harm, community and wider resources, and making the right decision. Participants, like other decision makers (Benbenishty et al., 2015; Fluke et al., 2014), are conscious of having to process a large quantity of information and make a judgment about the child's safety and needs before making a decision about whether to make an order and where the child should live. The identified factors are consistent with the influences that Bauman et al. (2011) set out in their Decision-Making Ecology Framework. The findings provide an in-depth understanding of how panel members make their decisions at panel meetings and identify the diverse range of factors they consider during this process.

Given that this is the first study to investigate panel members’ decision-making, replication of this research in other geographical areas of Scotland could establish whether the national findings are similar and therefore merit policy consideration.
Improvisation in Caseworkers’ Practice

Thursday, 4th October @ 11:00: Decision-Making: Child-Oriented versus Family-Centred (Venue: Arrábida)

Ms. Helle Schjellerup Nielsen (University College Copenhagen)

Because of several cases of severe child neglect in Denmark, a new social policy and law was introduced to act as early as possible upon violence against children. The so-called “abuse package” was implemented during an ethnographic case study of social workers practice at a department of children and family services in Copenhagen. The package and the unprepared way it was implemented caused disruption in everyday work practice, as known processes of assessment, decision-making and set ways of work practices no longer applied.

The purpose of the research project was to study how caseworkers manage their practice with children, young people and their families in vulnerable positions; and further explore conditions that influenced their work. Thus, the research focus was everyday work practice and in particular, how the caseworkers managed their practice under the actual very changed work conditions. Long-term daily close up fieldwork contributed to an understanding of the caseworkers’ practice.

The fieldwork consisted of participant observation and focus group discussions with the caseworkers. Participant observation entailed observing eight caseworkers’ work practices at close quarters on a daily basis over four months. We often followed one caseworker for up to three days, during which we observed every element of their work practice, in terms of office work, internal meetings, meetings with service users, courses, home visits, lunch breaks etc. This proximity to the children and family services’ working practices, including the insights on caseworkers’ formal and informal meetings with colleagues and management internally as well as externally made it apparent that the caseworkers operated in a confusing and emotionally charged work practice.

Our ethnographic methodology is inspired by a meaning-making approach where focus is on describing and understanding the meaning producing processes that takes place in organizations (Moesby-Jensen & Schjellerup Nielsen 2011; Ybema et al 2009). The ethnographic and practice research (Uggerhøj 2012:84) approach, which in this study is characterized by the proximity to the field – both in form of partnership with the municipality and the ethnographic fieldwork – has been productive for understanding what takes place in caseworkers’ practice. This presentation focuses on partial results from the research project using the theoretical concept organizational improvisation (Kamoche, Pina e Cunha & Vieira da Cunha 2002), which addresses the management of organizational changes and challenges. The presentation shows how the caseworkers alternated between frustration and a feeling of insufficiency in relation to e.g. ethics, professional knowledge and a sense of getting their job done, and finding resources to improvise their work practice in order to manage the new work pressure. Thus eventually, rediscovering a collective professional standpoint and (re)create meaning in their work practice.
Positive Turning Points in the Educational Journeys of Care-Experienced Adults: Preliminary Findings of a Life Course Study

Thursday, 4th October @ 10:00: Education in Care Leavers (Venue: D. Maria)

Ms. Eavan Brady (Trinity College Dublin, University of Dublin)

Aim: The aim of this presentation is to provide the audience with an understanding of positive turning points in the educational journeys of care-experienced adults, now aged 25-35, in Ireland.

Context: A turning point is an event or transition that results in a lasting shift in a person’s overall life course trajectory. Positive turning points in education have been identified as touching “upon the essence of education”, reflecting its potential to maximise human capital (Yair, 2009: 351). In the context of a considerable body of work highlighting the low educational attainment of children and young people with care background, gaining insights into the positive educational turning points of care-experienced adults over time provides opportunities to identify key events, relationships, and experiences that have influenced their educational journeys. Gaining insight into the conditions leading to these turning points and the effects they have had, from the perspective of care-experienced adults, allows us to glimpse the ways in which individual educational trajectories have been altered in a positive way over time.

Method: Findings presented are drawn from data collected via ‘educational life history’ interviews (Moore, 2006) as part of an ongoing PhD study investigating the educational journeys of care-experienced adults from a life course perspective. Data will be analysed drawing on theoretical thematic analysis. As this study is ongoing, the narratives of 10 completed interviews will be analysed and relevant preliminary findings presented.

Results: Drawing on the above data, preliminary findings will be presented addressing both the conditions that enable positive turning points and the effects of positive turning points. [EB1] This study is guided by the life course perspective (Brady & Gilligan, 2018). As such, the presentation will highlight links between positive educational turning points, social context, and individual development over time.

Conclusion: This presentation will offer new insights as to how the educational progress and experiences of care-experienced adults are influenced over time. This knowledge has the potential to build on a growing knowledge base examining the ways in which we can support and increase the educational attainment and opportunities of care-experienced children, young people, and adults.
Are Youth with Foster Care Experience Succeeding in Undergraduate Social Work Education? Results from a U.S. Survey

Thursday, 4th October @ 10:15: Education in Care Leavers (Venue: D. Maria)

Dr. Kevin Jones (University of Portland)

Background and purpose:
Youth in foster care are much less likely to attend college than their peers (Casey Family Programs, 2011), and once enrolled in college they are more likely to drop out prior to graduation (Day, Dworsky, Fogarty, & Damashek, 2011). However, there is little information about how students with foster care experience fare when they persist in higher education. Since many students with foster care experience choose social work as a major based in part on their personal experiences, it is important to understand how their experiences in undergraduate social work programs compare to the experiences and outcomes of peers who have not been in foster care. The purpose of this study was to understand the relationship between foster care experience and student success and satisfaction in undergraduate social work programs. A secondary purpose was to understand some of the factors that might account for differences in performance and experience between students with foster care experience and other social work students.

Methods:

Data collection: Following approval by the University of Portland IRB, a link for an online survey was sent to faculty of all 502 undergraduate social work programs in the United States accredited by the Council of Social Work Education (CSWE). Faculty were asked to send the link to social work students who had completed field placement/practicum hours in their program. The survey request yielded 593 respondents, 493 of whom completed the entire survey. Data were exported to SPSS for analysis.

Data analysis: Multiple regression models tested whether foster care experience predicted success and satisfaction in social work programs (preparation for employment, preparation for graduate school, preparation for competent professional practice, and satisfaction with the program), controlling for demographic variables such as year in school, age, race and ethnicity, gender identity, sexual orientation. A series of ANOVA tests compared self-ratings of competence on ten core social work competencies between students with and without foster care experience. Post hoc ANOVAs tested for differences between students with and without foster care experience on several variables to help explain differential outcomes for the two groups.

Results:
Foster care experience significantly predicted preparation for employment, but was not a predictor of the other three success and satisfaction outcomes. Students with foster care experience also reported having significantly higher achievement of key social work skills on four of the ten competencies measured versus students with no foster care experience. In the post hoc tests, students with foster care experience were significantly more likely to be parents and reported significantly lower overall grade point averages (GPA) than other students. Students with foster care experience were also significantly more likely to have a mentor in the social work program than students with no foster care experience.

Conclusions and implications:
The results of this study are surprising and encouraging. Unexpectedly, having foster care experience is a significant predictor of success for undergraduate social work students. Students with foster care experience feel more competent in key social work skills and also more prepared for employment as a professional social worker than students with no foster care experience. While familiar challenges are present—higher likelihood of early parenting and lower grades compared to other students—the students with foster care experience seem to be leveraging the presence of mentors and possibly their own life experiences to thrive as undergraduates.
in social work programs.
Beyond Cultural Capital: Strengths of Care Leavers in Higher Education

Thursday, 4th October @ 10:30: Education in Care Leavers (Venue: D. Maria)

Dr. Andrew Harvey (La Trobe University), Prof. Jacqueline Wilson (Federation University Australia), Ms. Lisa Andrewartha (La Trobe University)

Cultural capital has been claimed as necessary to accessing and succeeding in higher education (Bourdieu 1984). In its embodied form, cultural capital is possessed through sensibilities, accents, musical taste, and a range of attributes typically held by the middle and upper classes, and is transmitted through hereditary custom over time (Bourdieu 1984). Critical race theorists (e.g. Yosso 2005; Solórzano and Villalpando 1998) have lamented the way that Bourdieu's concept of cultural capital has been linked to a deficit model by which under-represented students are seen to 'lack' this capital. Under critical race theory, alternative forms of capital are highlighted by which marginalised students, e.g. Latinos and African-Americans in the United States, can be viewed not for their lack of cultural capital but for their strengths. These strengths include possession of familial, resistant, aspirational, navigational, linguistic, spiritual, and social capital.

As one of the most under-represented groups in higher education, care leavers frequently suffer from stigma, low expectations, and a deficit mentality of those around them (Harvey et al 2016). Better capturing the strengths of care leavers is central to redressing this narrative, and the research project on which this paper is based included more than thirty interviews with students that revealed the benefits of independence, persistence and life experience. However, the extent to which the various forms of capital outlined within critical race theory can be applied to care leavers is questionable. At the centre of such theory is the notion of community cultural wealth, and the strength gained by students who feel they are part of a bigger familial or community narrative. For many care leavers, there is no clear community of solidarity, and concepts such as familial capital may have limited, or different, value.

This paper explores how theoretical frameworks may be adapted to better understand and harness the strengths of care leavers in higher education.
Pathways from Care to Education and Employment: A Meta-Analysis

Dr. Luciana Cassarino-Perez (Universidade Federal do Rio Grande do Sul), Dr. Gemma Crous (University of Girona), Dr. Anouk Goemans (Universiteit Leiden), Dr. Carme Montserrat (University of Girona), Dr. Jorge Castellá Sarriera (Universidade Federal do Rio Grande do Sul)

INTRODUCTION: The harsh trajectory faced by youngsters transitioning from care to independent living has been object of researchers worldwide and efforts are being made to explain it theoretically and contextually (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Greeson, 2013; Montserrat & Casas 2014). These young people were found to have poor outcomes compared to peers with no out of home care experience in different aspects, such as finding a job, engaging and graduating from high school, attending and engaging in college (Kirk et al., 2011; Lockwood et al., 2015; Okpych & Courtney, 2014; Stott, 2013).

OBJECTIVES: This study aimed to review and analyze, in a systematic way, the pathways from care to education and employment, using the technique of meta-analysis. METHOD: Ten series of meta-analysis were conducted, five to examine the association of placement stability, race, mentoring, gender and education with employment outcomes; and five to examine the association of placement stability, race, mentoring, gender and maltreatment with education outcomes. A literature search identified 12 publications with employment outcomes for youth out of care (N = 9,392) and 12 publications with education outcomes (N = 6,781).

RESULTS: Being a girl and having a high school diploma were found to be related to higher odds of employment. However, no significant overall effect with respect to placement stability, race and mentoring related to employment outcomes of the youth out of care were found. As regards to education outcomes, results indicated that placement stability is linked with a higher probability of having a high school diploma when leaving care. The other meta-analysis pointed out the nonexistence of significant differences between the educational level considering the variables race, gender, mentoring and type of maltreatment on young people leaving care.

CONCLUSIONS: Results from this meta-analysis point to the fact that stability in children’s life experiences might be where the problem of achieving substantial improvements in care leavers’ education and employability actually lies. The findings also suggest that robust research on factors influencing the trajectories of young people leaving care is limited, especially in low and middle income economies. Therefore, it is important for the future of this youth that more effective studies will be conducted, using expressive samples and with sufficient power to be able to draw valid conclusions for different child welfare contexts and countries.
Looked After Children, Mental Health and the SDQ: A Systematic Literature Review

Thursday, 4th October @ 10:00: Meeting Mental Health Needs in Care (Venue: Ribeira I)

Ms. Christine Cocker (Centre for Research on Children and Families, University of East Anglia)

Increasingly, systematic literature reviews are used in social work academia to identify, explore and synthesise literature from a variety of different disciplines. This paper presents the findings of a systematic review of looked after children, mental health and the SDQ using the PRISMA approach. The sources of literature about the separate topics of child and adolescent mental health and looked after children is extensive and diverse, and there is a growing knowledge base at the intersection of the two areas, including child psychiatry and clinical child psychology, with less social work research informing this field.

The review addressed the following questions:

- How has the SDQ been used in research with looked after children in screening and assessing mental health problems?
- Is the use of the SDQ as a screen for looked after children an effective way to gather information about their mental health?

Following a comprehensive search of a number of databases, 31 empirical studies that used the SDQ were identified and critically appraised. These comprised RCTs (n=3) and cross-sectional studies (n=28). Most were UK studies, but a small number of studies were from Belgium, Australia, Canada and USA.

The results showed that the SDQ was used as an outcome measure, a screening tool or a combination of both to identify mental health problems in looked after children at entry to/whilst in care, or reported social workers’ use of the SDQ and/or their ability to identify problems. Some methodological issues were raised with most studies tending to have small sample sizes, and some studies used a variety of qualitative and quantitative methods. Only half the studies used all three versions of the SDQ: the parent-carer report; teacher report and the child self-report; a further third used only one report version – the parent-carer report. However, studies consistently viewed the SDQ as a brief but effective screening tool at both micro (individual) and macro (population based) levels. All studies identified high levels of mental health need via SDQ screening, which equates with findings from other literature that uses different screening tools.

This paper concludes with discussions about the problems that children with high SDQ scores then have in accessing specialist support. Gaps exist in our knowledge about which combination of report versions would be best to use, the effect that screening might have on service demand given funding tensions, and the level of co-operation required between key organisations to make any referral process work well for looked after children. The literature that comments specifically on the contribution that social workers can make to SDQ screening and working with looked after children with mental health problems will also be highlighted.
Assessing Outcomes of Mental Health Treatments for Children in Residential Care: A Longitudinal Study

Thursday, 4th October @ 10:15: Meeting Mental Health Needs in Care (Venue: Ribeira I)

Prof. Amaia Bravo Arteaga (University of Oviedo), Ms. Carla González (University of Oviedo), Ms. Alba Águila Otero (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo)

BACKGROUND
Numerous studies have evidenced that children in care show a higher prevalence of mental health disorders (ranging from 40% to 88%) than children in general population and vulnerable children living at home. However, there are few studies focused on emotional and behavioural development during their placement in care. The provision of mental health services is a crucial factor to understand the evolution of children in care with emotional needs. Research in this field has shown that this population has higher rates of service use than general population of the same range of age. Nevertheless, there is a lack of research based on longitudinal studies to assess outcomes of mental health treatments for children in residential care.

OBJECTIVE
Given the lack of long term studies about behavioural and emotional development of children in care, this study has two goals: (a) to describe the evolution of emotional and behavioural problems of children in residential care by means of a two year longitudinal study (b) to assess outcomes using the CBCL comparing children with different kinds of treatments.

METHOD
The sample consisted of 493 children 8-17 years old (M=13.96, DT=2.46) in residential care in seven Spanish regions. Data were collected in 2013, and a follow-up study was repeated two years later in 2015 with those children who remained in residential care.

The following variables were collected through a questionnaire designed ad-hoc for this research: (a) process of intervention; (b) family characteristics and antecedents; and (c) emotional and behavioral problems detected, therapeutic attention and type of mental health treatment (psychiatric, psychological and/or pharmacological). In order to assess the need for clinical attention with standardized tools, we used the Child Behavior Checklist (CBCL; Achenbach & Rescorla, 2001). The CBCL provides eight specific clinical subscales and three broad-band scales: internalizing, externalizing, and total score, whose T-scores allow classification of the cases into three ranges: normal, borderline, and clinical. All the data were collected through the key residential worker.

RESULTS AND CONCLUSIONS
According to CBCL the 57.3 of the sample reached the clinical range in the first assessment on some of the broad-band scales. Two years later the same instrument detected 56% of these children in that range. The ANOVA showed a significant improvement only in the attentional problems and aggressive behaviour scales. We also compared outcomes according to different treatments and use of services. We identified 4 different trajectories about service use: (1) being in treatment through the two years, continuous treatment (31.6%); (2) those who were not receiving mental health services at the beginning but started later, partial treatment (12.4%); (3) those who finished the treatment during the follow-up period, discharged (20.1%); (4) those who were not referred to any mental health service, no treatment (35.9%).

The main results were: (1) those who were in continuous treatment don’t show a significant improvement, (2) those who received partial treatment show the worst outcomes with a negative evolution; (3) there are positive outcomes for those who completed the treatment, especially for those suffering internalizing problems; (4) there were no significant changes in the non-treatment, as expected.

Need for early detection and proper referrals based on objective criteria are the main conclusions and implications for practice.
Studies have found that abused and victimized children who enter the Child Protection System frequently show externalizing behavior problems, especially during adolescence. But traumatic experiences also facilitate the development of internalizing disorders, such as social withdrawal, anxiety, media and technology misuse or addiction, etc. Because of their “silent” nature, internalizing problems are easier to ignore than externalizing ones. Consequently, the impact of these disorders on the psychosocial development and future well-being of these adolescents may go unnoticed or underestimated.

Social withdrawal is one of the most frequent behavior disorders during adolescence, and one of the most frequent consequences of victimization. It refers to a lack or poor social interaction based on an individual’s own will— in contrast to isolation by peers. Socially withdrawing in a critical period for the development of social skills such as adolescence, could lead to interpersonal difficulties, anxiety, depressive symptoms and loneliness. Recent research has observed different types of social withdrawal based on personal motivation for social approach and social avoidance (shyness, unsociability, avoidance), and depressive symptomatology associated to social interaction (low mood).

Many studies show adolescents with history of traumatic experiences and externalizing behavior problems report alterations in their empathic capacity, though results are not consistent. Dispositional empathy has a cognitive dimension, which makes it possible to intellectually understand another person’s feelings or emotions, and an emotional dimension that allows the vicarious experience of an emotion that is consistent with the emotion that is being observed in another person. Empathy is a capacity that fully develops in a healthy social environment and may be altered by traumatic events. It is thought to be of great importance for prosocial behavior. In this study, social withdrawal has been conceptualized as a social interaction problem, contrary in form but similar in nature to social interaction problems in violent externalizing behaviors. Therefore, dispositional empathy was proposed as a mediating and/or moderating variable in the relationship between traumatic experiences and social withdrawal. Hypothesis concerning both the cognitive and emotional dimensions of the empathic construct were formulated.

The objective of this study was to evaluate the association between severe victimization and different social withdrawal subtypes among adolescents living in residential care. The explanatory model proposing empathy as an intermediate variable between victimization and social withdrawal was tested. Finally, the effect of victimization, social withdrawal and dispositional empathy on loneliness was evaluated.

Participants were 107 adolescents (Mage = 15.2) living in residential care facilities from Gipuzkoa and Navarra (northern Spain). Results showed that victims of domestic psychological abuse, peer assault and sexual violence, reported significantly higher scores than non-victims in several dimensions of dispositional empathy. Moreover, as the number of types of victimization increased (polyvictimization), so did frequency of social withdrawal and loneliness. On the other hand, most dimensions of dispositional empathy positively correlated with social withdrawal. Analyses for empathy as a mediational or moderational variable were conducted to test associations between every type of victimization, every dimension of dispositional empathy and every social withdrawal subtype. Results showed some significant but small effects for some combinations. The effect of dispositional empathy on social withdrawal or loneliness phenomena could lead to some practical implications for prevention and treatment of withdrawn adolescents.
BACKGROUND. Children with Intellectual disability are more likely to suffer abuse and neglect. Therefore, they are over-represented among children in child care interventions, particularly in residential child care. The vulnerability of children and young people with ID is often aggravated by the high comorbidity with other emotional and behavioural problems. It was observed that they are two to three times more likely to have mental health problems, or maybe it was observed that these children are two to three times more likely to have mental health problems. Although there are numerous studies on the emotional and behavioural problems of children in care, there are few studies on children with ID specifically.

OBJECTIVE. This study examines the relationship between ID and mental health problems and treatment by comparing groups of children with and without ID.

METHOD. This sample was made up of 794 children (496 boys and 298 girls) aged between 6 and 18 in residential child care. The sample came from the regions of Asturias, Cantabria, Extremadura, Murcia, the Diputation of Guipúzcoa, the Cabildo of Tenerife, and seven Children's SOS Villages in different regions of Spain. The sample was part of a larger research (N=1226). We selected the cases that had an official diagnosis of ID (n=169). The rest of the group (n=625) makes up the sample that was selected as a comparison group without disability. The socio-familial information and case data was obtained through a questionnaire developed ad hoc for this research. The following variables were included in this instrument: (1) information related to child care intervention (time in residential placement, changes of children's home, history of foster care or adoption breakdown, and reasons for admission); (2) family background variables; and (3) the child's mental health problems and needs already detected (therapeutic care and type of treatments received). To assess the existence of emotional and behavioural problems, we used the CBCL (Child Behavioral Checklist). The information was gathered through each child's key residential worker (social educator).

RESULTS AND CONCLUSIONS. Results showed that the prevalence of intellectual disability in residential child care Spain is about 19%, which is significant due to their special needs. Regarding the reasons for admission, significant differences were only observed in terms of an increased frequency of physical neglect and sexual abuse in the group with ID. Significant differences in the average stay in residential placement were also observed, with the group with ID staying almost two years longer than the group without ID. In addition to this disability they have a higher frequency of clinical problems in the scales of withdrawal-depression, thought problems, attention problems, and above all, social problems than their peers in residential care. They are also referred more frequently to therapeutic services, in particular to psychiatric intervention, and receive more pharmacological treatments. We note the high prevalence of ID that was observed in this sample. This data, together with the increased frequency of risk factors in these children's families, suggests the need for social services to provide better care and support in terms of the family situations in the early part of the child's development, one of the most significant challenges to the child protection system. Based on the most significant differences: long stays in centres, more illnesses, and increased incidence of mental health problems in minors with ID, would seem to be sufficient argument for better specialisation in residential care for this group, with professionals who are specially trained in disability and mental health.
Examining the Role of Mental Health Disorders on Adult Functioning among Emerging Adults with a History of Out-of-Home Care: A Mixed Methods Study

Thursday, 4th October @ 11:00: Meeting Mental Health Needs in Care (Venue: Ribeira I)

Ms. Javiera Pumarino (School of Population and Public Health, University of British Columbia)

Objective: The objective of this study is to investigate the influence of mental health disorders on adult functioning among Canadian emerging adults (aged between 18 and 29 years) with a history of out-of-home care (e.g.: foster care).

Background: Approximately 500 and 700-1000 youth age out of out-of-home care each year in Manitoba and British Columbia (BC) at ages 18 and 19, respectively. There is growing concern over the vulnerability of these youth, in part because of numerous highly publicized reports of premature death related to untreated mental health and substance use issues.

From a developmental perspective, emerging adulthood has been identified as a critical period. Systematic reviews have found that emerging adults with a history of out-of-home care are at high risk for adverse mental health and adult functioning outcomes (i.e., low educational attainment, unstable housing and employment, low income, and criminal justice involvement). Although the relationship between history of out-of-home care and these adverse outcomes has been established, few studies have examined the role of mental health on adult functioning in this population. The existing evidence is frequently based on descriptive studies, which often use self-reported cross-sectional survey data from small samples, collected retrospectively, without including a comparison group.

The lack of understanding of this complex relationship limits the ability to identify and provide the supports youth require before, during, and after they transition out of care and into adulthood. To address this knowledge gap, we need to study this complex relationship in depth, using both advanced statistical techniques and data-rich qualitative methods.

Methods: This study will use an explanatory mixed methods approach, which will involve a quantitative stage followed by a qualitative stage to explore the quantitative findings in more depth.

The quantitative stage will use a population-based retrospective birth cohort design to analyze de-identified linked administrative data from the province of Manitoba. With these data mediation models will be used to answer the following research question: Among emerging adults, to what extent do mental health disorders account for the association between history of out-of-home care and adult functioning outcomes (i.e.: high school incompletion, receipt of social assistance for housing and/or income, criminal justice involvement, suicide or suicide attempts)? Hypothesis: mental health disorders account for a significant proportion of the excess risk of adverse functioning outcomes among those with history of out-of-home care.

The qualitative stage will examine the complex relationship between the out-of-home care experience, mental health disorders, and the transition into adulthood. It will explore the experiences of a group of emerging adults with a history of out-of-home care and a diagnosed mental health disorder living in Vancouver, BC. It will also elicit their perceptions on how to improve the mental health supports provided before and during their transition into adulthood. This stage will involve conducting one or two focus groups followed by individual semi-structured interviews. Transcripts will be analyzed using thematic analysis. Findings will be described and synthesized in a narrative way. Potential participants will be identified from the roster of clients accessing services at the Inner City Youth program, which provides support for precariously housed youth diagnosed with mental health and/or substance use disorders.

Progress to Date: This project is currently being developed as a PhD thesis project.
Social work team members and foster carers may have different perspectives about contact between children and young people in care and their families of origin, and these perspectives may not reflect what children or young people feel (Sen & Broadhurst, 2011). This presentation will address this gap by presenting findings from a pilot study of foster children's experiences of contact with their biological families, an important issue in provision for children in care. Children and young people in care who are in contact with their families may experience loyalty conflict regarding the relationships they have with their families of origin and those they establish with their foster carers. Those children and young people who experience this conflict may have higher levels of emotional and behavioural problems, which can contribute negatively to placement stability (Leathers, 2003).

On the other hand, children and young people in care have reported that they wish to have more contact with their families of origin and that contact makes them happy. Moreover, they feel that they are mainly well adjusted to their placement and that they belong to that environment (Chapman, Wall, & Barth, 2004). Therefore, contact arrangements should be flexible taking into account the wishes of the children and young people, which can change over time (Atwool, 2013).

While there is a growing literature on family contact issues for children in care, research based on cases drawing on the actual experiences of children is still relatively scarce. This proposed presentation is based on a pilot study on the sensitive issue of how children and young people experience family contact in foster care. There is a special focus on the children's experiences, opinions, and feelings. The study aims to generate more evidence on family contact based on the experiences of children, in order to identify key issues and areas for further examination.

This study is part of a project developed by the InED, Center for Research and Innovation in Education from the School of Education of the Polytechnic Institute of Porto (ESEP), entitled “Contact in Foster Care: Patterns, Outcomes and Management Models.” The general objective of the project is to investigate the outcomes of contact between the child or young person in foster care and their family, or the reasons for its non-existence or cessation (Delgado et al, 2016).

The main project was designed to gather information, using similar questionnaires for social workers and foster carers regarding all the 221 children and young people in foster care in the Porto district. This set of 221 children represented 59.1% of the total number of children and young people in foster care in Portugal (Social Security Institute, 2017).

For the purpose of the pilot study, 10 children who had contact with the family of origin were randomly selected to participate in focus groups, based on three criteria: gender, age group (6-9, 10-13, and 14 years old or more) and time length of placement (up to one year, between one and three years, and more than three years).

The findings allow us to conclude that the possibility of maintaining contact is positively evaluated by the children. Also evident is the distinction they make about the nature of the contact they wish to maintain or deepen with each member of the family.

A possible set of implications drawn from the findings pointed to the importance of developing a monitored cooperation that improves communication processes in order to take into account the children and young people's views in the decision-making process; and to develop more attentive and open working relationships with
biological parents throughout the foster care placement.
Objectives: There is a real lack of systematically collected evidence on the ‘best practice’ around parental contact for children in out-of-home care (OOHC). In this paper we present some of the first outcomes of an Australian cluster randomised controlled trial (RCT) on an intervention aiming to improve contact experiences between children in long-term OOHC their parents.

Method: The study subjects were 183 children who were having regular supervised contact with their parent(s) at eight intervention and seven control sites (all agencies that provide services for children in OOHC). The intervention was delivered by the family case workers over 6-9 months and it consisted of an enhanced practice model with regular supports and assistance to the parents before and after the contact visits. We conducted interviews at baseline with parents, foster/kinship carers and case workers of the 183 study children and the follow-up interviews will be completed in the middle of 2018. This paper reports information provided by the carers and case workers about the study children.

Results: The paper presents the children’s psychosocial profiles with relevant protection history, developmental and health issues, and current contact arrangements with parents. The primary outcome of the trial measures the children’s emotional safety and distress as measured by the Strength and Difficulties Questionnaire. Secondary outcomes for the study include: (i) quality of relationships between children, parents and their carers as assessed using the Child-Parent Relationship Scale; (ii) the ability of carers to support children as measured by Receptivity to Family Connections Scale; and (iii) the proportion of contact visits cancelled.

Conclusions: This paper presents the main findings of one of the first RCTs on a contact intervention. By increasing systematic evidence in this area, the study outcomes can be used to better guide the management and supervision of contact visits in the OOHC context, and to improve outcomes for the children and their families.
Parents Having Supervised Contact with Their Children: Findings from the kContact Study

Thursday, 4th October @ 10:30: Openness and Contact in Foster Care and Adoption (Venue: D. Luís)

Dr. Stephanie Taplin (Institute of Child Protection Studies, Australian Catholic University), Dr. Aino Suomi (Institute of Child Protection Studies, Australian Catholic University), Prof. Morag Mcarthur (Institute of Child Protection Studies, Australian Catholic University), Prof. Cathy Humphreys (Social Work, University of Melbourne)

Aims: Within the care and protection literature there are few studies that examine the impacts of contact visits and the outcomes for children and families. This presentation introduces the kContact study, a trial of a supervised contact intervention with children in long-term care and their parents, and some of the first study findings.

The kContact study is an Australian cluster randomized controlled trial (RCT) with 183 children in permanent or long-term placements who were having supervised contact with their parents. The intervention aimed to improve contact between parents and children in out-of-home care (OOHC) and consisted of an enhanced practice model whereby the family case managers provided more systematic supports – both practical and emotional – to the parents before and after each contact visit.

Methods: Agencies have been randomised into intervention or comparison sites, and parents, caseworkers, and carers interviewed on two occasions to determine the effectiveness of the intervention. Follow-up interviews are being concluded by mid-2018.

90 parents of children in long-term out-of-home care in three Australian jurisdictions completed face-to-face interviews at baseline. This paper describes the characteristics of the parents, their parenting arrangements, their child protection histories, detailed information about the supervised contact arrangements with their children in out-of-home care, and their views and experiences. The reasons for supervision at the time of the contact arrangements/order and the current circumstances will also be discussed.

Results: Preliminary analyses from the baseline interviews show that the parents interviewed tended to be mothers, disadvantaged, and with large numbers of children who were mostly born when the parents were very young. Their children had been in long-term care; most had been having supervised contact several times a year for some time. Many parents felt that they needed more support in relation to contact.

Implications and recommendations: By obtaining detailed information from parents about their histories and experiences of supervised contact we will increase the evidence in this area, and provide guidance as to better support the contact these parents have with their children.
Factors Contributing to Limited Openness: Results from a Longitudinal Study on Openness in Foster-to-Adopt Families

Thursday, 4th October @ 10:45: Openness and Contact in Foster Care and Adoption (Venue: D. Luis)

Prof. Geneviève Pagé (Université du Québec en Outaouais), Dr. Doris Chateauneuf (Université Laval), Dr. Béatrice Decaluwe (Private practice)

In Quebec (Canada), approximately 300 children in care are adopted each year, most of the time through a foster-to-adopt (FTA) program called “Banque-mixte”. These children, considered to be at high-risk of abandonment, are placed with foster parents who are willing to adopt them if they are legally freed for adoption. In the meantime, regular supervised direct contact may occur between the child and his/her birth parents, which creates an opportunity for FTA parents to meet the birth parents when they bring the child to these visits. While literature demonstrates the positive effects of openness in adoption and contact for the child’s development and a sense of continuity in her identity construction (Brodzinsky, 2005, 2006; Rosnati; 2005; Wolfgram, 2008), little is known about how uncertainty of being able to adopt the child, contact with the birth parents in this context, and social workers’ attitudes may influence the FTA parents’ level of openness. Results from a longitudinal qualitative study including 15 cases of FTA placements will be presented. The objective was to analyze communicative openness and perceptions of the child’s family of origin in FTA placements from the point of view of FTA parents, the child’s caseworker, and the FTA family’s caseworker. All FTA parents were interviewed twice, once during the first year of placement (T1) and the second time, 12 to 18 months later (T2). Analysis at T1 of the study allowed us to identify three profiles of openness (forced openness/closed attitude; limited openness/passive attitude; strongly affirmed openness/proactive attitude). This presentation will focus on results from the preliminary analysis of T2 interviews, on 10 of the 15 cases from this study, showing that while 5 FTA families have kept the same profile throughout the study, the others have moved towards a more closed attitude. We will discuss how the burden of maintaining supervised visits between the child and their birth family, experiencing or anticipating difficulties in the process without feeling supported, and the lack of involvement from caseworkers to favor more openness when possible seem to influence the attitudes and level of openness of FTA parents. Also, FTA parents seem to find it easier to be more open towards members of the birth family that are not the birth parents. Implications for practice and a need for better support for foster-to-adopt parents will be further discussed.
Looked after and adopted children's contact with the birth family has been a controversial, challenging and complex issue in different countries for several decades. The current legal framework in the UK (Children Act 1989, Children (NI) Order 1995) actively endorses contact with birth families. This has led to a rise in contact and its frequency for children in care and to the promotion of a more open approach to adoption. The Northern Ireland Care Pathways and Outcomes study is a longitudinal study that has been following all the children who were in care in Northern Ireland and under 5 years old on 31/3/2000. The study has examined a range of issues across the different types of placements the young people ended up moving into (i.e. adoption, foster care, kinship care, returning to their birth parents, and Residence Order). We are currently in the study's Wave 4, and data collection is ongoing with the young people (now aged 18-23) and their parents or carers. This presentation will focus on the complexity of feelings and types of contact the young people have with their birth families, as well as their attitude and experience of searching in a digital age (dominated by social media). We will compare these within all the types of placements.

So far, we have found that the young people can be classified into four groups based on their experiences, attitudes and feelings regarding contact with (and searching for) their birth families. Some of the young people would be included in more than one of these categories, depending on their different types of experience with different family members. The groups are:

- The ‘content’ group, who are satisfied with their current arrangements for keeping in touch (or not) with their birth family members. Most are still seeing them or/and talk to them via text or social media.
- The ‘curious’ group, who have searched (usually online via social media) for certain family members.
- The ‘no interest’ group, who have stated a clear lack of interest regarding their birth family, even in cases where they did not know much about them.
- The ‘mixed or troubled feelings’ group, who expressed a mixture of feelings towards the birth family, often including anger and/or guilt.

In this presentation, we will also focus on the role of social media in searching or being in touch with birth relatives during early adulthood. We will also highlight the trend of some of the young people making contact with birth parent (or the other way round) as they turned 16, 17 or 18, leading to young people sometimes living with their birth parent for a short period of time.

The analysis will be based on the semi-structured interviews with 43 young people and/or their parents/carers. Data collection is ongoing, and we expect to be interviewing at least another 100 more. In this presentation, we will also be discussing implications for policy and practice. One of them being the need for Social Services to be aware and prepare young people searching and contacting birth relatives through social media, and its implications for young people's mental health and wellbeing, regardless of the placement they grew up in.
What Does the Norwegian Child Welfare Services Seek to Achieve by Providing Parent Counselling to Children and Families?

Thursday, 4th October @ 10:00: Promoting Safety and Relationships' Preservation within Families (Venue: Ribeira II)

Ms. Eirin Ljones (Uni Research Health, RKBU Vest), Dr. Øivin Christiansen (Uni Research Health, RKBU Vest), Dr. Ragnhild Hollekim (University of Bergen)

Background  Research repeatedly states that parents’ day-to-day care and interaction with their children has a vital impact on children’s well-being and development. Internationally, numerous parent-training programs are initiated in order to improve parenting competence and practice, such as PMTO, MST and IY. This is also the case in Norway. However, such programs only represent a minor part of child welfare in-home measures. Furthermore, research shows that many marginalized families may have difficulties making use of parent-training programs. In this study, we look closer at the most frequently used in-home measure in Norwegian child welfare services (CWS): “parent counselling”. Unlike several manualized parent-training programs, very little research exist on “parent counselling”.

Objectives  The aim of the current study was to explore what Norwegian CWS seeks to achieve with the intervention labelled as “parent counselling”. Moreover, to look for the role CWS assign for themselves when they offer children and their families this particular measure.

Methods  We analysed two specific types of documents from 84 children’s case files: a) documents comprising a short summary of the assessment and the reason why CWS offered these families parent counselling and b) action plans describing what parent counselling aimed to improve concerning the particular child. The documents were collected from 14 different municipal CWS in Norway.

Results  Document analysis indicate that CWS through parent counselling aimed to address a variety of problem areas in the family related to children’s health and development, as well as parental and family strains and challenges. However, the dominant focus was on parental care and competence. There was a clear emphasis on the parent-child relationship and parenting practices. Attention was particularly directed to the parent’s ability to recognize and respond to the child’s needs and interests. Less attention was payed to factors like the parent’s mental health and socioeconomic factors affecting the families’ lives.

The document analysis demonstrated that the CWS primarily takes on a supportive role in the parent counselling measure. However, the language used in the documents also revealed that CWS sometimes have parents under surveillance or take a controlling position in such measures.

Conclusions  Not surprisingly, parent-child interaction is in the focus of parent counselling. However, concerning the complex difficulties the majority of families that are involved with the CWS experience one can ask if the narrow focus is excluding important factors contributing to children’s development and well-being. The lack of attention towards social, economic- and various health factors combined with a notion that “good” parenting is aligned with middle-class norms and practices can imply a) that some families do not get adapted and sustainable help and b) less respect for diversity and family rights and responsibilities in their up-bringing practices.
Program fidelity monitoring is essential in promoting evidence-based work in child and family services, as it is used to evaluate the program. Program fidelity (also known as treatment integrity) refers to the degree to which an intervention or program is implemented as intended (Perpletchikova & Kazdin, 2005). Program fidelity instruments can be used measure the level of program fidelity, and to inform professionals and the organization about the quality of their program application. Professionals need ongoing support to assure high quality program application, especially in a routine care setting (Bond, Drake, McHugo, Peterson, Jones, & Williams, 2014; Smith-Boydston, Holtzman, & Roberts, 2014). Important elements of this support seem to be the use of program fidelity instruments for monitoring, and active learning methods such as video feedback and role play with feedback (Goense et al., 2015).

In this study, we address the gap between scientific knowledge and daily practice, moving from knowing what works towards doing what works for high risk families. It concerns program evaluation and quality assurance on both worker level and team level. The research question is: how are reflective practices of a support system (program fidelity instruments and active learning methods) applied in practice, and what are the facilitators and barriers? More specifically, we examine what it takes in practice to actively use instruments as meaningful measures for program fidelity monitoring, and use active learning methods as video feedback and role play.

Methods: A mixed-methods design was used to study the use, and the facilitators and barriers of using reflective practices in supervision. The research consisted of collection of program fidelity instruments to examine the use and level of program fidelity, and interviews to evaluate the use, facilitators and barriers of the program fidelity instruments. This study was conducted at Youth Protection Amsterdam (YPA) in the Netherlands.

Results: The results showed that the program fidelity instruments are 1) not used by all supervisors, 2) not used in all teams and 3) not used with the intended frequency. Results describe why and how supervisors use one program fidelity instrument as a tool for themselves to monitor professional's program fidelity, whereas the other instrument is used together with the professional to reflect on his or her learning process. Active learning methods are not used regularly, although professionals and supervisors recognize the importance and potential benefits. Supervisors and professionals that use the instruments state how valuable the monitoring process is in practice, and how the instruments and active learning methods are integrated part of daily reflective practices.

Conclusions: Implementation of program fidelity instruments and active learning methods are not easily and quickly accomplished. Further and ongoing stimulation is required. This study informs child and family care organizations to implement reflective practices, to monitor and stimulate program fidelity. It is important to purposefully integrate implementation elements on the level of competency and leadership to promote high quality care for high risk families. Sufficient levels of program fidelity are needed. Next, as this study shows, there is a second type of fidelity that is related to organizational performance, such as providing training and supervision as planned and intended, and facilitating professionals and organization with the program fidelity data to assure high quality care and ongoing program monitoring.
Meaningful Measures and Feedback Loops in High Risk Families

Thursday, 4th October @ 10:30: Promoting Safety and Relationships' Preservation within Families (Venue: Ribeira II)

Mr. Marc Dinkgreve (Youth Protection Amsterdam), Ms. Sigrid van de Poel (Youth Protection Amsterdam), Ms. Inge Busschers (Amsterdam University of Applied Sciences), Ms. Mirte Forrer (Youth Protection Amsterdam), Mrs. Barbara Regeer (Athena Institute, Free University Amsterdam)

High risk families need sustainable change in order to achieve a stable environment for their children. The high risk families that get support of youth protection services have a track record of being resistant to change. Case managers at Jeugdbescherming Regio Amsterdam (Youth Protection Amsterdam, YPA) achieve and maintain the necessary change because they use the framework of Intensive Family Case Management (Busschers et al., 2016), an adapted version of Functional Family Therapy (Alexander et al., 2013). To maintain high quality performance in the method and monitor outcomes of families, they are supported by meaningful measures and feedback loops on all levels of the organization. Realizing (and maintaining) these measures and feedback loops was (and is) not easy. A brief overview of the implementation and transformation process that YPA undertook in order to achieve their results is described in the NS life case; Every Child Safe Forever (Dinkgreve, 2017). Between 2013 and 2018 YPA installed and refined several meaningful measures and their consecutive feedback loops. In essence, feedback loops are behavior-related cause-effect relationships. They are used 1) on a daily basis at family/case level; 2) on a weekly base at individual workers, team, and management team level; 3) on a monthly and quarterly base at organizational level. Feedback is acquired by case workers, supervisors, psychologists and team managers by studying meaningful measures on: safety, result, risk of future unsafety, organizational issues (that adversely affect results for children and families), and through case meetings, both on team and organizational level (tough cases team). We provide an overview of meaningful measures and their feedback loops that are currently used in practice: at the level of families and workers; the level of teams of workers and at the organizational level. Participants will gain insight in the why, what and how of the development and implementation of feedback loops in child and youth care.
Atypical Caregiver Behavior during an Assessment-Based Intervention for Family Preservation with Parents of Young Children

Thursday, 4th October @ 10:45: Promoting Safety and Relationships’ Preservation within Families (Venue: Ribeira II)

Mrs. Anne-Fleur Vischer (University of Groningen), Prof. Hans Grietens (University of Groningen), Prof. Erik J. Knorth (University of Groningen), Dr. Wendy Post (University of Groningen)

Objectives - Timely decision-making in the context of permanency planning for maltreated young children is both significant and complex (Vischer et al., 2017). Research findings on failed reunification (Wulczyn et al., 2011) and re-abuse (Connell et al., 2009) indicate undesirable outcomes of treatment provided by family preservation (FP) services. In order to prevent children from further harm, a thorough understanding of supporting families towards ‘good enough parenting’, including the assessment of parenting in the context of placement decisions, is imperative.

Against this background in 2009 the Expertise Centre for Treatment and Assessment of Parenting and Psychiatry (EC) in the Netherlands was established. The EC provides a ‘last resort’ assessment-based intervention for families aiming for reunification with their young child (0-2) or trying to avoid an out-of-home placement. Mentalization-Based Treatment is one of the methods utilized to promote a secure attachment. Early disturbed care due to insensitive parenting behaviours has been proven to be a risk factor for the development of disorganized attachment strategies. This pattern of attachment has been most evidently associated with psychopathological outcomes later in life.

The present study was intended to assess the development of (in)sensitive/atypical caregiver behaviour among parents admitted to the EC and to explore if findings were linked to practitioners’ decision-making on treatment (dis)continuation and family preservation.

Method – The quality of caregiver behaviour was measured by coding videotapes of three naturalistic, core parenting situations (feeding the child, physically caring for the child, putting the child to bed) with the Atypical Maternal Behavior Instrument for Assessment and Classification (AMBIANCE; Bronfman et al., 2009, 2014). Data were collected during the inpatient phase of the EC-programme in week 2 (T1), week 6-7 (T2) and - just before the final evaluation - week 14 (T3). The sample included 30 parent-child dyads at T1. AMBIANCE outcomes were analysed in-depth with descriptive statistics on group, subgroup and case level.

Results - Analysis of the data indicated, among other things, a decline of the frequency and severity of atypical parental behaviours over time on four out of five dimensions. At the end of the intervention, all parents who were still in the programme (n=19) scored in the non-disrupted range on the dimensions fearful/disoriented behaviour and withdrawal behaviour. Parents for whom the trajectory was terminated at Evaluation 1 (week 4) with a negative advice on FP, scored higher (more severe atypical behaviour) on the overall level of disrupted behaviour compared to parents who continued the intervention at T1. Other outcomes were mixed. Parents who received a positive advice on FP in Evaluation 3 (week 15) showed at T3 (week 14), as expected, in general less atypical behaviour compared to parents receiving a negative advice on FP. Most of the families receiving a positive advice on FP (69%) were classified as “non-disrupted” at T3 and most of the parents receiving a negative advice on FP were classified as “disrupted” at the last measurement before the decision on FP (83%).

Conclusion - This study yielded new understandings of the (problematic) parenting behaviours of the target population of the EC. It generated indications of positive change regarding parenting behaviour during the intervention. Practitioners’ decisions to terminate a trajectory at Evaluation 1 and to preserve a family at Evaluation 3 were partly validated with the AMBIANCE data. The study confirmed the applicability of the AMBIANCE in evaluation studies to assess change in parental behaviour during an inpatient intervention programme.
Reference
Socio-Educative Program to Promote Family Reunification: Support for Practitioners through a Virtual Environment

Thursday, 4th October @ 11:00: Promoting Safety and Relationships’ Preservation within Families (Venue: Ribeira II)

Ms. Laura Fernández-Rodrigo (University of Lleida), Prof. M. Àngels Balsells (University of Lleida), Dr. Eduard Vaquero (University of Lleida)

The communication presents part of the results of the dissertation “The use of Information and Communication Technologies (ICT) for the development of the socio-educative program ‘Walking family’” (Balsells et al. 2015). The dissertation was carried out within an investigation project in which the program was implemented and evaluated. “Walking family” intends to improve the parental skills of families of the Child Welfare System who are experiencing a process of foster care and reunification. In order to achieve this goal, it is essential to train practitioners appropriately and to support them over the implementation of the program.

A Virtual Environment (VE) is used as a media to improve the collaborative work and knowledge between researchers, who have developed the program, and practitioners who implement the program with families. The VE includes a Moodle Platform with a forum and other specific tools, an online tool for evaluation questionnaires, QR codes, digital material, an informative website, the e-mail and the telephone. In this sense, the aim of this study is to evaluate the VE as a group of tools for the training, the communication and the evaluation of the program.

A questionnaire, based on the Technology Acceptance Model (TAM) (Davis, 1989), was carried out to evaluate the perceived usefulness and the perception of utility of the tools in the VE. The sample is composed by 17 of the 28 practitioners who have implemented the program with families with the support of the research team through the VE. They are social workers, psychologists and pedagogues.

The results show that practitioners usually used all tools provided, with the exception of the forum and QR codes. In general, the VE was considered useful to support the practitioners over the implementation, especially, in order to access to the materials of the program and to exchange data with researchers about the families who are in reunification processes. Moreover, the practitioners considered that the tools were generally easy to use. On the other hand, the high standard deviation shows that participants have different points of view about the use of these tools.

In conclusion, using a VE to support the implementation of a socio-educative program allows to improve the communication between practitioners and researchers. However, all the tools provided didn’t facilitate the collaborative and continuous training among practitioners. In this sense, it is proposed for other studies to review which methodologies or approaches can be more suitable to offer a collaborative and online training for practitioners of Child Welfare System. The purpose is giving them enough support to improve the quality of the intervention with families in reunification processes.
Stigma and Childhood: Addressing Discrimination and Marginalisation

Thursday, 4th October @ 10:00: Social Barriers in Minority Groups (Venue: S. João)

Prof. Andrew Kendrick (University of Strathclyde)

Children and young people experience stigmatization in a wide range of cultural, social and political contexts, for example: children who have experienced abuse or neglect; care experienced children, disabled children; refugees and asylum seekers, and children in poverty.

While Irving Goffman’s seminal work on stigma was published over 50 years ago, stigma has still been described as one of the least developed concepts in the social sciences. This is particularly the case for the development of understanding of stigma in childhood where work has largely been addressed in relation to specific groups of children and young people.

This presentation will detail the outcomes of a programme of participative seminars which focused on particular aspects of stigma in childhood:

- cultural and social perspectives;
- experiencing and measuring stigma;
- addressing and alleviating stigma.

It will highlight theoretical and empirical developments in the understanding of stigma in childhood from the perspectives of research, policy makers and practitioners, and the lived experience of young people and young adults:

- the different forms of stigma expressed through the body, individual characteristics or social status;
- the political, ideological and economic production of stigma;
- the nature of direct and structural discrimination expressed through social and power relationships; and,
- self-stigmatisation whereby individuals internalise negative stereotypes.

At the level of children and families, stigma needs to be addressed through honest dialogue, supportive relationships, choice and empowerment. Consideration needs to be given to the nature of stigma, the potential impacts on children and families, and an understanding of impacts of stigma on both children and young people.

Organisations and professionals need to reflect on how their own policy and practice impacts on children and can exacerbate stigma. Staff training and development is crucial in developing reflective organisations.

At the level of communities and society there needs to be engagement with issues of stigma and how this impacts on children. Effective public awareness campaigns can address stigma, and politicians and policy makers need to battle the marginalisation, stigmatisation of our children.
Marginalised Young People and Misrecognition: A Case Study from Residential Care with Unaccompanied Refugee Minors in Finland

Thursday, 4th October @ 10:15: Social Barriers in Minority Groups (Venue: S. João)

Dr. Riikka Korkiamäki (University of Tampere), Prof. Robbie Gilligan (Trinity College Dublin)

Theories of recognition (e.g. Honneth 1995; Taylor 1994) have received increasing attention in research on children and young people in care. However, the concept and experiences of misrecognition, as the opposite of recognition, and children's potential reactions to it, have been much less on the agenda. In this presentation we argue that the concept of misrecognition is a valuable lens for deepening our understanding of young people's responses to difficult circumstances. We present misrecognition as a central form of adversity experienced by young people in various marginalised positions, influencing their subjective wellbeing, prospective development and potential for exercising agency.

In this presentation, we study the experiences and influences of misrecognition using detailed evidence from the lived experience of Unaccompanied Refugee Minors living in residential care. Unaccompanied Refugee Minors (URM) often face the stigmatizing categorisations related to both being in asylum and being in care, hence placing them at risk of being a highly misrecognised group of young people. As an example, we look closely at an episode of a 17 year old URM boy wanting to help his hospitalized friend but being denied the opportunity to do so by the workers in their residential care unit. The incident was depicted in ‘spider map’ and photo elicited interviews by several of the 15 URMs, aged 15-17, who participated in a study on ‘vulnerable’ young people's relationship networks and social supports in Finland. Drawing from Honneth's (1995) and Taylor’s (1994) conceptualisations of (mis)recognition and using this single case as an example we look at how misrecognition is played out, how it is resisted, and how the acts of resistance are perceived by the young people and care workers present. With this example we show how misrecognition is potentially played out in residential care settings—and with marginalised young people in general—and how young people may respond to it. In addition to young people partly accommodating the misrecognized identities, we identify the straightforward and subtle ways in which they may seek to resist the misrecognising categorisations that they face as ‘young people in care’.

As implications for practice and policy, we highlight the importance of appreciating the significance of misrecognition as a ‘driver’ of young people's behavior. To young people, the individual acts of resisting misrecognition may be meaningful ways of constructing narratives of agency, belonging and resilience. Adults may respond by appreciating this positive value of young people's resistance and how it may support agentic identities and facilitate resilience. Alternatively, we suggest, they may misinterpret resistance—solely as transgressive behaviour—thus feeding the narrative of failure and misrecognition, potentially leading to deeper adversity for the young person. We hence conclude that resistance in face of misrecognition may count as a double edged sword: helping to cultivate resilience but also bearing a risk of further marginalization. This calls for more awareness by adult carers of experiences of misrecognition among marginalized youths and more understanding of the meaning and significance of young people’s resistance in the face of what they perceive as misrecognition.
**Labor Market Integration of Young Refugees in Germany - Triangulating Perspectives Toward Program Development**

Thursday, 4th October @ 10:30: Social Barriers in Minority Groups (Venue: S. João)

Prof. Sigrid James (University of Kassel), Ms. Franziska Seidel (University of Kassel), Mr. Juri Kilian (University of Kassel), Mr. Julian Trostmann (University of Kassel)

**Study purpose:** Labor market integration is viewed as a key task toward the process of adjustment of young refugees. Social workers play a crucial role in this process, working as mediators between newly arrived people and the “receiving society.” Toward this end, a collaborative multi-sector demonstration project was initiated in a mid-size city in Germany, aiming to prepare young adult refugees, ages 18-25, to enter a vocational apprenticeship as a gateway into the labor market. We will present key findings from the accompanying independent evaluation, which aimed to (1) explore processes that shape the project, (2) identify personal or structural factors that enhance or hinder project success, (3) triangulate different perspectives of various project participant groups, (4) provide tentative results regarding the project’s effectiveness, and (5) use qualitative data as a basis for the development of a quantitative evaluation tool.

**Methods:** The mixed-method evaluation involves a triangulated approach with refugee trainees, social workers, and company instructors, involving semi-structured interviews and focus groups. Three cohorts of refugee trainees (n=3x10) are recruited through the program and interviewed at several timepoints (pre, post, follow-up) over an 18-month period. Particular efforts are made to interview participants that dropped out of the program. Key informant interviews are conducted with participating social workers and other specialty personnel (n=3+). Company instructors (n=9+) were individually interviewed at one time. Initial interviews have been almost exclusively qualitative to inform further development of the (mixed-methods) protocols. Semi-structured interviews are audio-recorded and last about 60-100 minutes. Data are transcribed and analyzed concurrently to the data collection process through thematic descriptive analysis. To date, over 35 individual interviews and 1 focus group have been conducted with more post and follow-up interviews to follow. Analysis for this presentation focuses on triangulating the perspectives of the various participant groups to discover processes that facilitate or hinder program completion and entry into an apprenticeship.

**Results:** Analysis of refugee trainee data indicates a range of challenges in multiple areas and high need of support, not only with regard to work-related issues, but also their personal situation. The important role of supportive and mentoring relationships with social workers and company instructors repeatedly emerged. Yet despite considerable challenges three-quarters of refugee trainees completed the program and entered apprenticeships. Converging aims and recognition of the importance of entering an apprenticeship program contributed to the attainment of program goals. A lack of fit between refugee trainee interests and abilities and the apprenticeship was a primary reason for dropping out of the program and the social workers’ role in recruiting and matching refugee trainees will be explored. Further challenges to program completion are programmatic structures which by some refugee trainees are experienced as too rigid. Language and communication were reported as primary concerns by both refugee trainees and company instructors. This involves both expectations for language competency and specialized vocabulary as well as misunderstandings due to differing cultural norms around time, gender relations, etc. Interestingly, cultural differences were perceived as problematic by some instructors and as enriching by others. Social integration within and outside of the project was also raised as an important issue that seems to influence how refugee trainees perceive the project.

**Implications:** Findings point to the central role of social workers in brokering services and providing support to trainees and instructors. Also, instructors are key to ‘leveling the pathway’ into the labor market and the challenges they encounter in their work with refugee trainees involve tasks that at times go beyond their ‘normal’ job description. Process evaluations, such as this, are important in informing program development, thereby...
removing structural barriers to integration and improving outcomes for young refugees.
Mothering Experienced as an Object of Governmental Intervention. The Narratives of Romanian Mothers in Norway

Thursday, 4th October @ 10:45: Social Barriers in Minority Groups (Venue: S. João)

Ms. Raquel Herrero Arias (University of Bergen), Dr. Åse Elisabeth Vagli (University of Stavanger)

Background: Mothering has been an object of political intervention especially since the modernization of nation states. By monitoring mothering practices, states have taken responsibilities and control of children well-being and protection. Similarly, the public intervention in childrearing contributes to the reproduction of the nation by promoting the standard norms of family and citizenship. Coming from a different society and system, migrant mothers encounter the host society's discourses on childcare and family, as well as the state intervention in their mothering practices. Based on a study on the experiences of mothering among Romanian women in Norway, this paper aims to explore migrant mothers' experiences of mothering as an object of governmental intervention by the Norwegian welfare institutions.

Method: This qualitative study had an ethnographic approach. Data collection, between February-May 2016, used narrative interviews and participant observations. The study prioritized getting data that were context-dependent and rich in detailed descriptions about informants' experiences of mothering in Norway. Study participants were 4 Romanian mothers who had lived in Norway for 2 to 7 years. The analysis provides insight into how mothers deal with expert-knowledge, and negotiate, reproduce and resist meanings about mothering. The Foucauldian perspective of governmentality was used in our analysis of mothers' experiences of state intervention in their mothering. This study was part of a project that explored Romanian mothers' meaning-making of mothering in the Norwegian context.

Results: Across informants' narratives, a shared experience of doing mothering in the face of Norwegian discourses on childhood, mothering and citizenship emerged. Mothers articulated these discourses in their narratives of their encounters with the Norwegian welfare institutions and community. From their perspectives, the host society and its institutions monitor migrant women's mothering practices in their attempt to ensure that mothers adopt Norwegian norms of mothering and citizenship. Child Welfare Services emerged as a prevalent theme across the data set. From mothers' perspectives, this institution corrects and sanctions maladjustments to Norwegian norms of “good mother” and “good citizen”.

Conclusions: The narratives of Romanian mothers bring knowledge about how mothering is experienced as a target of governmental intervention. Mothers' perceptions of legitimized norms of childrearing in Norway had an impact on their experiences of motherhood in migration. The analysis provides insight into informants' subjectivities, agencies and meaning-making processes that overlap with discourses and knowledge relations. By sharing Romanian mothers' experiences, the study sheds lights on Norwegian popular imaginings of mothering, children, immigration, and citizenship. It contributes to current debates on doing mothering in the Norwegian context.
Forced Return of Embedded Asylum-Seeker Children from the Netherlands to Armenia: Well-Being, Child-Rearing and Feeling at Home

Thursday, 4th October @ 11:00: Social Barriers in Minority Groups (Venue: S. João)

Ms. Grytsje Bonhage-Talsma (University of Groningen), Dr. Elianne Zijlstra (University of Groningen)

Objectives: this study aims to explore the forced return of embedded asylum-seeker children from the Netherlands to Armenia, their well-being, the quality of the child-rearing environment and whether children feel at home in Armenia. Method: data was collected through a semi-structured interview with seventeen children and their parents who were forced to return to Armenia. The children stayed in the Netherlands for five years or more and the interview took place two to thirteen months after return. The age of the children ranged from 1-18 years, the average age was 9:9. The interview protocol consists of topics related to well-being, quality of the child-rearing environment in Armenia and the child's experiences of the return process and feeling at home. The interviews were transcribed literally and analyzed qualitatively. Results: the children did not expect the forced return, nor were they prepared for it. They were detained and have negative memories of the return process. After return to Armenia, most children experience psycho-social problems such as depression, sleeping difficulties, sadness and anxiety. Children also report on psycho-somatic complaints. They experienced difficulties adapting to the Armenian society. All children preferred to stay in the Netherlands before return and most of them still do after return. Most children consider themselves Dutch, some feel Armenian or in between. The child-rearing environment lacks financial security, safety, availability of parents, stability and continuity. Access to school is limited and children find it hard to connect with peers. The children have trouble speaking, writing and reading the language, hindering their transition to school. Some do not go to school and others go to classes with younger children, with whom they do not connect. Conclusions: children, who are embedded in their host country, are vulnerable after forced return. The return process is a traumatic experience and the children are exposed to multiple risk factors for developmental problems after return. Implications: decision-making in asylum procedures should include an assessment of the child-rearing environment after return and children should be well-informed and prepared for return. Child welfare organizations should play a role in supporting children after return. Returned asylum-seeker children should be monitored to gain more knowledge about their situation after return.
Introduction to a Conceptual Framework for Designing Trauma Responsive Systems

Thursday, 4th October @ 12:00: Designing a Trauma Responsive Organizational Culture in Child-Serving Agencies (Venue: Infante)

Prof. Virginia Strand (Fordham University)

Objectives:

- Describe an effective phase, oriented framework for treating traumatized children and their families;
- Apply that framework to workforce development;
- Communicate strategies for developing a trauma responsive organizational culture and workforce.

Trauma is defined as an adverse life experiences that overwhelm an individual’s capacity to cope and to adapt positively to whatever threat they face. Knowledge about the impact of trauma on children can be used to understand the impact on child welfare agency culture and other organizations where staff are consistently interfacing with clients whose history of abuse and neglect bring them to the attention of child serving organizations. We know a great deal about what works effectively with traumatized children, adolescents and adults which can be used to inform the development of a trauma-informed workforce. Phase-oriented trauma treatment is widely accepted as a defining characteristic of trauma-informed interventions (Brown, Schefflin & Hammond, 1998, Courtois, 2004) and most interventions acknowledge either explicitly or implicitly a stage oriented approach for effective intervention which includes 1) Stabilization (focus is on the present), 2) Integration (focus is on the past) and Consolidation (focus is on the future). Aligning a phase-oriented trauma intervention theory with the goals of achieving safety, permanency and well-being for child welfare organizations provides a framework for designing a trauma responsive culture. Phase One in trauma interventions can be accomplished for organizations through establishing physical and psychological safety for staff. Phase Two, Integration, can be understood in an organizational context as the development of agency capacity to support staff in processing on-going exposure to direct and vicarious trauma in their work. Phase Three, Consolidation, can be achieved through developing and sustaining future-oriented learning organizations that support, nurture and sustain staff in their work of helping children and families move toward well-being.
The importance of addressing the impact of secondary traumatic stress on the workforce is well-supported in the literature, and a critical component of creating a trauma-responsive child welfare workplace. Several decades of research document the significant, pervasive and negative effects of indirect trauma exposure on workers and organizations including but not limited to, secondary traumatic stress (Bride, 2007; Sprang, Craig & Clark, 2011), increased conflict at work (Opp, 2008), higher turnover intentions, reduced quality of work and presenteeism (Guest & Conway, 2005; Boyas, Wind, & Kang, 2012). As we work to infuse trauma responsive practices and protocols in our organizations, special care must be taken to protect those exposed to indirect trauma, and to promote resiliency in the child serving workforce. This session is for organizational leaders, direct care providers and evaluators who are interested in a basic understanding of STS, how it impacts the workforce, and who are interested in developing a plan to address STS in their workers. This session will provide an overview of research on secondary traumatic stress in the workplace, and strategies for evaluating an organization's ability to address this phenomenon. Participants will receive an assessment tool to utilize to assess their agency's policies and practices and identify areas for improvement.
Organizational Challenges Facing Those Working with Vulnerable Children in Care: Strategies to Support the Workforce

Thursday, 4th October @ 12:30: Designing a Trauma Responsive Organizational Culture in Child-Serving Agencies (Venue: Infante)

Dr. Barbara Lill-Rastern (MCI - Management Center Innsbruck)

Objectives

- To describe the challenging situations, including the nature of trauma exposure, of children served by the agency
- To explore strategies for helping care workers and professionals from many disciplines cope with the trauma experienced by children in their care.

This presentation will describe the challenges facing an organization that seeks to work to meet the needs and protect the interests and rights of children. A multi-service agency that serves orphaned, abandoned and other vulnerable children whose scope of traumatic exposure for children ranges from natural disasters to humanitarian crises created by political instability, widespread poverty and weak state institutions. Agency practice is informed by the basic human rights as established in the Convention on the Rights of the Child. The impact of trauma is often severe – and of primary concern is the impact on the development of secure attachment, but affective, cognitive, behavioral as well as somatic functioning is typically impacted along with the child's attachment. To address this need, the agency seeks to keep children at home, or, when this is not possible, to build families for orphaned, abandoned and other vulnerable children. Because the impact of trauma often results in distorted perceptions of self and others, the world in general is viewed as unsafe. As children and adolescents seek to cope with these adverse experiences and changed worldview, they may employ avoidance strategies, demonstrate hyperarousal to trauma reminders, and have difficulty modulating feelings or regulating behavior. Interpersonal relationships may be perceived as a source of danger, leading to isolation or hostile interactions with others. To address this, the agency employs psychiatrists, social workers and others from the helping professionals to work with traumatized children. The success and challenges of a range of strategies to support staff in their work will be described.
Most of the adolescents living in residential care had a childhood marked by experiences of abuse and neglect that are already identified as a source of developmental trauma. This kind of trauma is known to have consequences on the ability to self-regulate the emotions, the quality of the relationships with others and on self-perception. Not rarely, dissociation is a coping mechanism that victims of trauma use to deal with adversity and suffering. One possible outcome of developmental trauma and maladaptive trajectories of life is psychopathology. These children sometimes communicate their difficulties and maladaptation through non-suicidal self-injury behaviours (NSSIB). With this study we aimed to analyse: a) the relation between trauma, dissociation and non-suicidal self-injury behaviours (NSSIB) of adolescents in residential care; b) the mediating role of dissociation on the relation between trauma and NSSIB. Sample comprised 87 adolescents living in residential care, both sexes (64.4% girls), aged between 12 and 18 years old (M=15.71; SD=1.73), to whom it was applied the Childhood Trauma Questionnaire – Short Form, the Adolescent Dissociative Experiences Scale and the Impulse, Self-harm and Suicide Ideation Questionnaire for Adolescents. These adolescents report to have lived few traumatic experiences in their childhood, to rarely dissociate and rarely exhibit NSSIB. In this sample, the experience of traumatic events of child abuse correlate weak to moderately with NSSIB, except in the case of emotional neglect. Physical abuse and emotional neglect do not correlate with dissociation that only correlates, positive and weakly, with sexual and emotional abuse. Dissociation predicts NSSIB but do not mediate the relation between childhood traumatic experiences and NSSIB. The results are discussed considering two possible explanations. In one hand, adolescents in residential care may tend to report their experiences based on a survival self that makes them devalue the traumatic nature of the reasons for their removal and hide their weaknesses and vulnerabilities. On the other hand, the experience of residential care may be fostering their resilience, contributing to more adaptive and resourceful pathways. More research is needed to have a clearer view of the experiences of a traumatic childhood, dissociation and non-suicidal self-injury behaviours of adolescents in residential care.
Nonformal Education (NFE) is an educational-pedagogical approach that was developed in extracurricular educational and community organizations. In essence, it is lifelong learning that is independent of formal education. NFE activities usually take place during leisure time, and those who engage in them do so on their own initiative and free choice.

At the core of NFE is the assumption that educational and social goals can be achieved by using principles, contents, and tools with a flexible level of institutionalization, free of the structural and formal preconditions of formal education. NFE is basically pluralistic, multi-dimensional, and flexible, to accommodate the needs of varied individuals and groups. For young people, NFE has the potential to grant a sense of freedom, allow spontaneous behavior, and give the legitimacy to interact in an open, liberal manner, in an environment that is based on symmetrical relationships between adults and youth.

Nonformal education has developed from daily practices and oral practices in traditional societies into institutionalized and written ones in modern and post-modern societies. It is an important part of the social and civic education of young people, yet has been little researched, lacks methodological and systematic theorization, and is in need of appropriate research tools.

In the 1970s, Kahane formulated the Code of Informality – behavior that characterizes nonformal educational frameworks. The Code represents a fluid type of order and provides contexts for an authentic and meaningful behavioral pattern. Among the main dimensions of Kahane's Code are: Voluntarism - free choice to join a framework, participate in its activities, or leave it; Multidimensionality - having a wide range of diverse fields of activity, which are of equal importance and social value; Symmetry - a relationship based on equality; Moratorium - a broad area of legitimacy for trial-and-error learning within and outside institutional boundaries.

Nonformal education takes place in four main arenas: (1) various educational sectors; (2) extracurricular activities in youth movements, community-based programs, and residential educational institutions; (3) within schools; for example, in Israel this would include extracurricular activities and projects initiated by the establishment such as the Social Commitment Project for volunteering within the local community, youth journeys to Poland for on-location Holocaust studies, and creating Just Communities, a program designed to enhance moral education; (4) non-formal educational settings for populations with special needs as a unique alternative to formal settings. This relates directly to our topic about care programs for adolescents and young adults at risk.

The advantages of the concept of NFE is not only the description of general characteristics which design the direction towards creating an appropriate atmosphere. It could also present a set of dimensions that formulate, define and lead activities or interventions, for planning effective care programs for adolescents and young adults at risk. Therefore, applying the concept of nonformal education to broader populations requires not only a general theoretical approach but evaluation and assessment tools. Recent study(Gruner, 2018) have used qualitative and quantitative methods to explore sub-dimensions of the Code of Informality in three nonformal education settings – community centers, youth movements, and Child and Youth care units. Participants were samples from counselors, coordinators, and institutional directors. The quantitative tool was constructed to identify and assess NFE dimensions and to compare different NFE settings using relevant models. The findings of this research as we will discuss can contribute a theoretical, managerial, and practical contribution to the nonformal education (NFE) concept in general and specifically to a planning of effective care programs for
adolescents and young adults at risk.
Application of Nonformal Concepts in the Development of Learning Programs in Residential Care in Israel

Thursday, 4th October @ 12:15: Non-Formal Education, Social Pedagogy, and Social Education: How Three Concepts Relate in Designing Care Programs for Adolescents and Young Adults at Risk (Venue: Arquivo)

Prof. Emmanuel Grupper (Ono Academic College)

Research has demonstrated that children and adolescents placed in residential care facilities were found to have weaker academic achievements compared to similar youth populations who stayed at home (Courtney, Dworsky, Lee & Rapp, 2010; Stein, 2006; Cashmore & Paxman, 2006). In Israel too, the focus in residential programs was traditionally not given to priorities success in the learning process at high school, which is part of educational residential programs in Israel. These findings were detriment for the opportunities of young people to join higher education institutions as Universities and Academic Colleges (Casas & Monserrat, 2010; Jackson & Cameron, 2010). Benbenishty, Zeira & Sofi Arzev (2015), who studied this in Israel claim, that the challenge for care leavers to join and complete successfully higher education could be meaningful variable to evaluate their opportunities for breaking the vicious circle of being at the margin of society. The rational for a most needed policy change was the understanding that these young people joined the residential schools (youth villages) with the hope to be empowered by a 24/7 educational and care services in the youth village and thus get a new and better chance for their future. This attitude change lead to the development in residential schools of various programs reflecting a policy change that included also priority changes in alocating of financial resources. One important component was the creation of “after-school learning centers” or evening classes all applying Nonformal pedagogical methods and informal atmosphere. These new programs were applied by direct care staff together with the school teachers. However, they were given clear messages that these programs should use alternative nonformal pedagogical principles. Interaction between educators and youth, as first example. Using a nonformal principle called “symmetry”, becomes indispensable. It means that the interaction should be horizontal as between equals contrary to the formal school situation where interaction are often going from those who have the authority and power towards students who are bound to accept it. Another nonformal principal is creating a state of “Moratorium” for adolescents in care. This means that young people coming to these evening classes are authorized and even encouraged to experience learning new matters by “trial-and-error” processes, without risking any sanction or being blamed for making faults or errors during the learning process. Application of such methods is resulting in the creation of a pleasant and friendly atmosphere that is encouraging youth who failed to cope with learning challenges in the school classroom, to have a second and better chance in these nonformal learning programs. Due to the application of these principles among the whole network of residential network in Israel, Residential schools are nowadays reporting about a net improvement in the academic achievements of youth under their care. Consequently, a great variety of support systems were developed in Residential schools. All of them geared towards helping youth to excel in their high school challenges. Such activities, which started in 2011, are creating a completely different “ecological environment” for young people in residential education and care facilities. These changes have succeeded to create meaningful improvement in youths’ scholastic achievements. Systematic follow up of residential school graduates’ success rate in National Matriculation tests show a net positive effect. Starting with 36% of success in 2012, it moved to 46% in 2013, 54% in 2014, 57% in 2015, 59% in 2016 up to 60% in 2017. These figures are showing that nowadays, academic achievements of youth in residential care are being priorities and results are indicating a clear tendency of improvement.
Perceptions and Evaluations of Children in Residential Care: Implications from the Perspective of Social Education

Thursday, 4th October @ 12:30: Non-Formal Education, Social Pedagogy, and Social Education: How Three Concepts Relate in Designing Care Programs for Adolescents and Young Adults at Risk (Venue: Arquivo)

Dr. Carme Montserrat (University of Girona), Dr. Gemma Crous (University of Girona), Dr. Joan Llosada-Gistau (University of Girona)

Introduction and Objectives: Around 40% of children in the care system in Catalonia (Spain) are in residential centres and the practitioners are social educators. The aim of the study is to understand and analyse the perceptions and evaluations that adolescents between 12 and 14 years old who live in residential centres have regarding the residential care, with the objective of identifying what factors from their life have an impact in their subjective well-being and the implications from Social Education in order to design care programs.

Method: This is a transversal study conducted in Catalonia. A mixed methodology has been used. Regarding quantitative data, questionnaires were administrated to 379 adolescents between 12 and 14 years old in residential care (70% of response rate in Catalonia). For the qualitative part, two focus groups were conducted with a total of 16 participants. The script used for the focus groups was built taking into account the same domains that organised the questionnaire, and this let us triangulate the information. A multiple linear regression with the quantitative data and a content analysis with the qualitative data have been carried out, and then the data was triangulated.

Results: The descriptive analysis of the quantitative data reported really interesting data: a large proportion of participants feel safe in the centre where they live (72.6%), 70.8% agree or agree a lot with the sentence the social educators listen to me and take me into account. However 23.5% say to be not at all or very little satisfied with living in a residential centre. The content analysis permit to organise the answers of the participants from the focus groups in 6 categories: having material needs covered or not, having more opportunities and access to educational and free time activities, problems with having access to ICT, participation and being listened, satisfaction and dissatisfaction with living in a centre, perceptions about the city or town where they live, and aspirations with the future.

Conclusions and implications: Findings point out relevant implications for social education intervention and childhood policies that could improve the subjective well-being of this adolescents living in residential care. For example, some interventions regarding enhancing the interpersonal relationships of these young people, promoting their participation in the decisions that affect their lives, making sure they have an adequate space to be able to study, and procuring they have access to free time activities and ICT. Results also suggest the importance of reviewing the regulations of the centres from the point of view of social education, since they are perceived as very strict and rigid, and these stigmatizes and deprives them of having the same opportunities as their peers. Likewise, the results expose that having good relationships with their social educators and being in agreement with living in the centre increase their life satisfaction. All these factors not only influence their subjective well-being, but could also act as compensating or protective factors for the situation of vulnerability in which they live.
A Social Pedagogy Approach to Residential Care

Thursday, 4th October @ 12:45: Non-Formal Education, Social Pedagogy, and Social Education: How Three Concepts Relate in Designing Care Programs for Adolescents and Young Adults at Risk (Venue: Arquivo)

Prof. Mark Schrödter (University of Kassel), Dr. Vinzenz Thalheim (University of Kassel)

The presentation poses the question, which paradigm contemporary residential care is aiming at and should aim at. It is argued, that residential care typically follows the safekeeping model, resembling the hotel; and the therapy model, resembling the sanatorium. The paradigm of the hotel is not endorsed in the residential care theory, but, it is argued, many institutions follow this model unintentionally by trying to provide youth with a safe place to be cared for resembling the family. By contrast, the paradigm of therapy is widely shared. In this paradigm, youth are mainly seen as vulnerable and their often traumatic experiences of the past addressed. Therapy is provided in special sessions and, by shaping a therapeutic milieu, “in the other 23 hours”.

It is argued, that safekeeping, the therapeutic sessions and the therapeutic environment are important aspects of residential care, but do not constitute the essence of it. Based on virtue theory by Alasdair MacIntyre and the philosophy of education by Richard S. Peters it is demonstrated that the proper mission of residential care is education. Education is prior to safekeeping and therapy. If residential care is to fulfill its mission of education, it has to be built on an Aristotelian «practice» (MacIntyre), in which the social worker initiates the child (Richard S. Peters), both participating in it at the same time. That constitutes a genuine social pedagogy perspective. Residential education would for instance follow the model of the school, the workshop, the farmyard, or the gymnasium. This social pedagogical approach would be vital for transforming residential care into «residential education» (Bethany Lee/Richard Barth) by putting the question of the good life into the center of the practice. This re-reading of the German social pedagogy approach of life-world- and every-day-life-orientation (Hans Thiersch) in the tradition of Frankfurt School critical theory has tremendous political consequences for addressing social inequalities. With an example drawn from an ethnographic research project on child protection it will be illustrated, that traditional residential care focusing on safekeeping and therapy functions to control the poor (residential care), while interventions for the middle class are more educationally oriented (boarding schools). The author shows on the basis of concrete examples of residential institutions, how residential education might be organized as to do justice to the socially deprived youths and provide them with education the wealthy already enjoy.
Pre-School to Post-Secondary Educational Outcomes of Young People in Care in Ontario

Thursday, 4th October @ 12:00: Educational Outcomes for Children and Young People in Out-of-Home Care (Venue: Auditório)

Prof. Robert Flynn (University of Ottawa), Ms. Andrea Hickey (University of Ottawa), Ms. Meagan Miller (University of Ottawa), Dr. Barbara Greenberg (University of Ottawa), Mr. Erik Michael (University of Ottawa), Ms. Cynthia Vincent (University of Ottawa)

Objectives
This paper identifies key educational outcomes among young people in care in Ontario (Canada) of pre-school, elementary, secondary, and post-secondary age. It also describes protective and risk factors that predict these outcomes and long-term consequences resulting from them.

Method
Samples. Four samples were drawn from the data-base of the Ontario Looking After Children (OnLAC) project, which monitors annually the service needs and developmental outcomes of some 6,000 young people in care:

- 520 pre-school-aged children (12-47 months), assessed in 2013-2014;
- 1,179 elementary-school aged children (6-13 years), in grades 1-8 in 2016;
- 1,639 secondary-school aged youths (14-17 years), in grades 9-12 in 2016; and,
- 268 post-secondary-aged youths (18-21 years), in post-secondary education (PSE) in 2016-2017 (e.g., university or community college) or else not currently in school.

Measures. The pre-school-aged sample was assessed with the standardized Motor and Social Development scale from the US Longitudinal Survey of Youth (1979). Functioning in reading and math of the elementary and secondary-aged sample members, relative to their chronological ages and current grades, was rated by their child welfare workers (Excellent = functioning above grade level; Good = at grade level; Fair = below grade level; or Poor = much below grade level). The workers also identified the PSE-aged youths' current educational enrollment and highest diploma attained.

Results: Educational Outcomes of Different Age Groups

Pre-school-aged sample. The mean score of the sample was 88.7 (SD = 15.7), compared with 100.0 (SD = 15.0) for the general population. Their median score of 89.0 was at the 23rd percentile, 27 percentiles below the average of the general population (i.e., the 50th percentile).

Elementary-aged sample. In reading, 46% were rated as Excellent (11%) or Good (35%), versus 54% as Fair (32%) or Poor (22%). They were weaker in math, with 42% rated Excellent (6%) or Good (36%) and 58% Fair (35%) or Poor (23%).

Secondary-aged sample. In reading, 56% were rated as Excellent (14%) or Good (42%), versus 44% as Fair (25%) or Poor (19%). Math was again somewhat weaker, with 41% rated as Excellent (7%) or Good (34%), versus 60% as Fair (35%) or Poor (25%). Also, it was estimated that only about 46% usually graduated from the 4-year Ontario secondary school curriculum within a 4-5 year period.

Post-secondary-aged sample. Fifty-four percent were enrolled in education or training (6%, university; 13%, community college; 22%, secondary school; 11%, alternative or adult high school; 2%, “other” education or training), and the remaining 46% were not currently in school. Also, 4% had attained a PSE diploma (almost exclusively at the community college level), 46% a secondary-school diploma, and 50% grade 11 or less.

Discussion
Improved educational outcomes are needed at each of the four age levels examined. Tessier, O’Higgins, and Flynn (2018) identified recurring factors that help explain why some young people in care experience greater...
educational success than others. The protective factors were female gender, youth educational aspirations, caregiver educational aspirations for the young person, a longer time in the current placement, greater developmental assets, and more positive mental health. The risk factors included pre-care neglect, grade retention, special educational needs, ethnic minority status, greater behavioural problems, and soft-drug use.

Swedish researchers, with their register-based longitudinal research, have identified several serious long-term consequences of educational failure, finding that poor school performance was causally associated later, in young adulthood, with major economic hardship, illicit drug use, and mental health problems. Thus, improved school performance by young persons in care today is likely to improve their life chances as adults tomorrow.
Exploring Social Care Histories and Educational Outcomes among Children in England: Strategies Using Administrative Data

Thursday, 4th October @ 12:15: Educational Outcomes for Children and Young People in Out-of-Home Care (Venue: Auditório)

Dr. Louise Mc Grath-Lone (Rees Centre for Research in Fostering and Education, University of Oxford), Prof. Steve Strand (Department of Education, University of Oxford), Dr. Nikki Luke (Rees Centre for Research in Fostering and Education, University of Oxford)

Associations between being in care and poorer educational outcomes for children are well-documented (O’Higgins, Sebba & Luke, 2015). In England, outcomes for children who are looked after (i.e. under the care of the state) are routinely monitored by the Department for Education (DfE), with a focus on children who have been looked after continuously for at least one year at the time of exams (Department for Education, 2018). In our previous project, presented to EUSARF in 2014 and 2016, we examined the educational attainment of young people in care at the end of secondary schooling (Sebba et al., 2015). However, given the complexity of children’s longitudinal care experiences, this sub-group of children (and their outcomes) are not likely to be representative of the overall population of looked after children, many of whom remain in care for short periods of time and/or enter and exit care repeatedly. In addition, outcomes for children identified as being vulnerable but who are not looked after (known as children in need) are monitored using cross-sectional statistics only. To address these knowledge gaps, we are currently undertaking a quantitative analysis of linked administrative education and social care data to build on our previous work by (1) describing the longitudinal histories of contact with social care services for a cohort of children in England and (2) exploring the relationships between children’s social care histories and their educational outcomes. This presentation will outline our plans for and progress with this project, focusing on potential methodological strategies for describing longitudinal social care histories of contact. Examples of how complex and diverse care histories can be classified using pre-specified typologies, latent class and sequence analysis approaches will be presented to illustrate their relative strengths and limitations.
Exploring Perceptions of the Impact of Family Resources on the Educational Attainment and Progress of Children in Need

Dr. Eleanor Staples (School for Policy Studies, University of Bristol), Prof. David Berridge (School for Policy Studies, University of Bristol)

Objectives:
This paper discusses the qualitative strand of a mixed methods research project (in progress) examining the educational attainment and progress of children in care (CIC) and children in need (CIN - those living at home but receiving social work support) in England.

In this project, qualitative interviews with birth parents (n=30), carers (n=30), children (n=60), teachers (n=60) and social workers (n=60) explore a wide range of topics relating to overall factors affecting the educational progress and attainment of CIC and CIN. Educational ‘timelines’ are used to do this. This paper focuses upon a relatively under-researched area: the impact that family resources/socio-economic circumstances are perceived to have upon the education of CIN.

Methods:
Semi-structured interviews with parents of CIN took place in the family home. The social work ‘home visit’ has been identified as complex, where power relations and wider political and ideological motivations are contested (Winter and Cree, 2016). Mindful that discussions about poverty have the potential to elicit difficult feelings, a series of statements were drawn from a recent major study into living standards in the UK (Gordon et al, 2013). Parents were asked to comment on resources they had, did not have, or did not want, before linking this to their child’s education. Statements included items such as ‘two proper meals a day’, ‘a home that isn’t damp’, and in relation to children, ‘a warm winter coat’. In addition, professional interviews included questions about the family resources of the children and families they worked with.

Discussion:
Little is known about the educational experiences, needs and progress of children who live at home but who require social work support, some of whom have care histories or live ‘on the edge of care’. Research indicates that this group of children have poorer educational outcomes than children in care (Sebba et al., 2015). Additionally, the impact of austerity policies and politics, both in the UK and internationally, is likely to be very significant for this group of children and families. This paper builds upon developments in child welfare inequalities research in the UK (Bywaters et al., 2016), which has been largely quantitative in focus. It will present anonymised case studies to illustrate the extent and nature of the perceived impact of socio-economic circumstances on the educational attainment and progress of CIN from the perspectives of parents and carers, teachers and social workers. It will then consider the strengths and challenges of engaging parents and carers who have had social work intervention in discussions about family resources.

The audience will be encouraged to contribute to discussions about methods and the case studies, and offer perspectives from the national context in which they work about the effects of poverty in relation to child welfare and education. Possibilities for developing this area of research, and for policy and practice, will also be considered.
The Role of the Virtual School in Supporting Improved Educational Outcomes for Children in Care

Thursday, 4th October @ 12:45: Educational Outcomes for Children and Young People in Out-of-Home Care
(Venue: Auditório)

Prof. David Berridge (School for Policy Studies, University of Bristol), Prof. Judy Sebba (Rees Centre for Research in Fostering and Education, University of Oxford)

Objectives
England and Victoria, Australia it seems, are the only educational systems to have ‘Virtual Schools’ which, in each administrative unit, oversee and support the educational progress of children in care. This paper reports on the analysis of 16 interviews with Virtual School Head Teachers that were part of two mixed methods research projects on the educational progress of children in care (Sebba et al., 2015; Sebba et al., 2016).

Methods
The overall aim of one of the two studies was to identify care and educational factors associated with the progress and attainment of children in care between the ages of 11 and 16. It did this by linking data from two national datasets, the National Pupil Database and Children Looked After in England. Alongside this quantitative analysis, interviews with young people and those who provided them with support were undertaken. This included in-depth interviews with the Virtual School Heads of the six local authorities which participated in the study. These interviews explored their role; the types of support they offer young people in care; what they see as the key factors about a young person’s individual characteristics and care experiences that influence their educational outcomes; how schools support young people in care; and the influence of the foster carer/residential staff on the educational outcomes of these children. Similar questions were asked of 10 Virtual School Heads in a second study which was an evaluation of the London Fostering Achievement Programme run by the Greater London Authority to improve educational outcomes of children in care in London.

The 16 interviews were analysed using NVivo and emerging themes were considered in relation to the literature on the education of children in care and theoretical frameworks that focus on agency (Berridge, 2017), resilience (Ungar, 2012) and the dilemmas of difference (Norwich, 2009).

Discussion
The paper will draw out the main findings which explore the status and role of Virtual Schools in England, their functions, strategies and what they seem to contribute to improving outcomes. Alternative interpretations for these findings will be discussed and future directions considered. The international audience will be invited to consider the role played by Virtual Schools in improving educational outcomes and if, and how, the functions they perform are undertaken in other countries.
Adoption Instability in the Pre-Adoption Period in Portugal: Differences between Intact and Disrupted Families

Thursday, 4th October @ 12:00: Multi-National Perspectives on Adoption Instability (Venue: D. Luís)

Prof. Maria Barbosa-Ducharne (University of Porto), Ms. Joana Soares (University of Porto), Ms. Sara Ralha (University of Porto), Dr. Sylvie Marinho (University of Porto)

Background: The first months after the child's placement into an adoptive family are often described as particularly pleasing/satisfactory for both children and parents. This is also a particularly critical time for both children and parents in bonding, in learning to know each other and in regulating each other's behaviour within the broad purpose of constructing a new parent-child relationship. Most adoption placements remain stable over time and achieve the goal of lifelong permanency. However, some families face serious difficulties culminating in the separation of the children and their new parents, thus accounting for adoption breakdown. When adoption breakdown occurs during the pre-adoption period, before the final legalization of adoptive placement, it is called adoption disruption. The current study analyzes the pre-adoption period in intact and disrupted placements in Portugal, where the adoption disruption rate was 5.8%. Objectives: The main goals of this study were: a) to identify differences related to the child, parents and professional services, both before and after the child's placement, between intact and disrupted adoption casefiles; b) to analyse the stability/change of the children's behaviours before and after placement; c) to explore the impact of the parents' characteristics and behaviours after placement and during the pre-adoption period, on the change/stability of the children's behaviours. Method: This study used a matched design involving a casefile analysis of 71 disrupted and 71 intact pre-adoptive placements. The analyses focused on variables related to the child, parents and professional services before the child's placement for adoption and afterwards, during the pre-adoption period. Results: Results showed significant differences between the intact and disrupted casefiles regarding the child and parents' variables related to both the period before and after the child's placement. In relation to the stability/change of the child's behaviours before and after the placement in an adoptive family some differences were also identified. These seem to be related to different patterns of adoptive parents' behaviours during the pre-adoption period. Moreover, the intervention of adoption services before and after placement showed significant differences between disrupted and intact family casefiles. Conclusions: The present study suggests that instability and difficulties are frequent during the pre-adoption period both in disrupted and non-disrupted casefiles and that adoption disruption is more the result of an accumulation of factors related to the child, the adoptive parents and the professionals' practices. The impact of risk factors related to the child before placement can be buffered by protective factors related to parenting behaviours during the pre-adoption period. Also, the findings allow for some recommendations concerning the prevention of disruption by the adoption professional services.
Sibling Violence in Adoptive Families

Thursday, 4th October @ 12:15: Multi-National Perspectives on Adoption Instability (Venue: D. Luís)

Prof. Julie Selwyn (University of Bristol)

Objectives: In the UK, policy and practice supports the placement of siblings together in substitute family care. But the evidence base on whether siblings should be separated or kept together is weak. There is a general lack of knowledge on the effects of trauma and abuse on sibling relationships although evidence suggests that sibling aggression is more common when children have experienced domestic violence and maltreatment. In England and Wales, the majority (75%) of children being placed for adoption entered care as the result of maltreatment, yet there is little research on sibling conflict in adoptive homes or the role of sibling relationships in disruptions. The purpose of this study was to investigate whether sibling relationships had influenced the outcomes of a sample of adoptive placements that had broken down post order or were in crisis.

Methods: The study used secondary data analysis drawing on in-depth interviews with 41 families who had experienced an adoption disruption and 42 families who described the adoptive placement as being in crisis in England and in Wales. All the children had been placed from foster care into the adoptive families. The families contained 214 adopted and birth children. Transcribed interview text which referred to siblings was selected and a new word document created and analysed using a thematic framework approach.

Results: Only eight of the 41 disruptions were directly attributed by parents to conflictual sibling relationships. However, the majority of disruptions and the adoptions that were in crisis, were indirectly influenced by abusive sibling relationships. By adolescence only 18 of the 83 families described normal sibling relationships. For the majority, siblings had been abusive and harmed each other placing enormous stress on the adoptive parents. Unlike normative sibling relationships the aggression had not diminished as the children grew up but had escalated and for some siblings was life threatening. Decisions made by social workers to keep siblings together to maintain sibling relationships had not done so, as siblings avoided contact with each other and relationships were generally very poor. Siblings placed together were statistically more likely to disrupt in comparison with sequential placements but that may have been the effect of parentified children in joint placements rather than the way the placement began.

Conclusion: The findings from this study suggest that a) more research is needed on the effects of being a parentified child and the impact on sibling relationships, b) greater understanding of the negative impact of parental differential treatment and c) Interventions to improve sibling relationships in foster and adoptive care in the UK need to be trialled. Adoption is a powerful intervention but on its own cannot be expected to repair dysfunctional sibling relationships.
Reentry into Foster Care After Adoption in Two U.S. States

Thursday, 4th October @ 12:30: Multi-National Perspectives on Adoption Instability (Venue: D. Luís)

Dr. Nancy Rolock (University of Wisconsin-Milwaukee), Dr. Kevin White (East Carolina University), Dr. Kerrie Ocasio (West Chester University), Ms. Lixia Zhang (University of Wisconsin-Milwaukee), Dr. Michael Mackenzie (McGill University), Dr. Rowena Fong (University of Texas)

Objective: Between 2000 and 2013, the number of children in foster care decreased by about half (290,000 v. 159,000), while the number of children in adoptive homes nearly doubled (228,000 v. 432,000). This was largely a result of federal policies that emphasized the movement of children out of foster care and into legal permanence where it was presumed that they would live 'happily ever after.' Extant research suggests that the vast majority (about 85%) of families do not experience post-permanency discontinuity. However, for the approximately 15% who do, it is often a difficult experience for the entire family. This study examined longitudinal administrative data to examine outcomes for families who have adopted through the child welfare systems in two large U.S. States: Illinois and New Jersey.

Methods: Using data obtained from two state-wide child welfare agencies, this study examined long-term outcomes for a population of former foster children (N=26,199 in Illinois and 12,230 in New Jersey) who exited care through adoption between 2000 and 2010. Survival analysis examined pre-permanency factors associated with post-permanency return to care up to the age of majority.

Results: Descriptive analyses showed that of children adopted from the public child welfare system in Illinois and New Jersey, 6% and 4% experienced a return to care respectively. Multivariate survival analyses indicated that, controlling for other characteristics, children adopted at the age of three or older were 2.3 times more likely to reenter foster care after adoption finalization than younger children. Hazards for reentry increased with each move a child had in foster care (HR=1.15). African American children were more likely to reenter care (HR=1.30) in the overall model; this difference remained statistically significant for children in Illinois (HR=1.39) but not in New Jersey (HR=1.12). Children adopted by relatives were no more likely to reenter care (HR=0.99), and children who spent long periods of time in foster care (three or more years) were no more likely (HR=1.00) to reenter foster care

Conclusions: This study suggests that children in adoptive homes experience lower placement instability than is commonly feared by many practitioners and policy-makers. A unique aspect of this study was the ability to compare results from two states, with different policies and practices. While there were similarities in the findings from both states, there are some notable differences that require additional research to better understand the practice and policy implications. A key difference is in the rate of post-adoption reentry into foster care: 4% in New Jersey and 6% in Illinois. While at first a 2% difference may seem like a small difference, in the context of an event that occurs rarely, and given the large sample sizes, this difference has greater meaning. By including data from two large, diverse states, the current study provides information that can be helpful to policymakers and practitioners when determining preventive services.
Adoption Breakdown in Spain: Domestic/Intercountry, Pre and Post-Adoption Period

Thursday, 4th October @ 12:45: Multi-National Perspectives on Adoption Instability (Venue: D. Luís)

Prof. Jesús Palacios (University of Seville), Dr. Jesús M. Jiménez-Morago (University of Seville), Ms. Carmen Paniagua (University of Seville)

Objectives: Most adoption breakdown studies refer to domestic and finalized adoptions. Findings to be reported here encompass both domestic and intercountry adoptions and refer to both pre- and post-legalized adoptive placements. The main objective is to report the main research findings and some of the practice implications of an investigation carried out in Southern Spain. Method: Using adoption caseworkers reports, all the breakdown cases identified for the period 2003-2012 were analyzed. The characteristics of the children's birth-parents, the children themselves, their adoptive parents and the professional activities around the adoption, as reported in the adoption agency data sets and individual files, were considered. Data were analyzed using survival analysis, Cox regression, chi-square and rate ratio analyses. Results: The duration of the adoptive placement was explored first, with significant differences between domestic and intercountry adoptions, and depending on characteristics of the child, the adoptive parents and the professional interventions with them. The specific role of age at placement was then analyzed, with results similar to previous studies highlighting the importance of this variable. Conclusions: The findings underscore the complexity of the adoption breakdown experience, the important role of some children's (e.g., age at placement and behavioral problems) and adoptive parents' (e.g., expectations, rearing abilities) characteristics. Important implications for adoption professional practice and the development of post-adoption services are also considered.
The aim is to explore the benefits that the newly gained work experience brings into the lives of young adult care leavers. To discover how the work affects development of their identity, independence and social integration. We're aiming to describe the ways and areas positively affected by obtaining a job through a young person's eyes.

The research-project “Pathways from care to work” is part of an international research project including five countries: Ireland, Spain Belgium, Sweden and Czech Republic. The project is based on national case studies with comparative reviews.

The project focuses on different aspects of young people's work experiences after leaving out of home care. More than 50 half-structured interviews were held with young people with extend work experience. The participants were in their mid-twenties and had previously lived independently for a few years. All of them had positive work experience and were successfully involved in society. The presentation will focus on benefits regarding personal growth, their involvement in society and practicalities of everyday life itself.

Learning about personal experiences of young people out of home care not only brings interesting new light to the politics and theory but also to the practice. The outcomes could help to improve the system of supporting young people before, and after leaving the home care.
Background. There is a dearth on research focusing on early work experiences of young people (under the age of 18). However, when performed under the right circumstances, such experiences can be very relevant: working can provide young people with increased independence and a sense of responsibility, money to spend on their favorite past-times, a positive attitude to team work, new connections, key work-skills, money management skills and preparation for full-time employment. While research on care leavers almost unanimously reports about lower educational degrees, lower employment rates and more unstable employment trajectories in this group compared to general population, there is also evidence that work is associated with positive outcomes for young people that have left care. Learning more about the early work experiences of care leavers can contribute to knowledge on their access and functioning in the world of work.

Objectives. The aim of this study is to explore the lived experiences regarding early work of young adult care leavers and to look how they have benefitted from these early experiences in later life.

Methods. “Pathways from care to work” is an international research project including five countries: Catalonia (Spain), Czech Republic, Flanders (Belgium), Ireland and Sweden. The project focuses on different aspects of young people’s work experiences during and after leaving out of home care. A total of 61 semi-structured qualitative interviews were performed with young people aged 21 to 33, with extend work experience. The participants all have extended work experience and lived independently for some years at the moment the interview was conducted. For this sub-study on early work experiences a thematic analysis was performed on the data.

Results. The data revealed three growth paths related to young people’s early work experiences, being an individual growth path (individual skill development and personal development), a social growth path (building social capital and becoming a citizen), and a growth path as an employee (entering the world of work and changing motives for work). These three growth paths are interconnected and driven by a strong pro-active attitude (being eager to learn and to work and to embrace support offered).

Conclusions. While care leavers are often expected to make an accelerated and compressed transition to adulthood, which denies freedom of choice and psychological opportunity to explore, early work experience can be supportive in preparing this transition. Cares can take an active role in stimulating these experiences while children are still in care.
The Influence of Employment on Resilience and Social Ecology in Youth Leaving Care: A Canadian Perspective

Thursday, 4th October @ 12:45: Young Adult Care Leavers in the World of Work (Venue: Arrábida)

Dr. Jill Stoddart (University of Toronto)

**Background.** Research from many countries including Canada, US and the UK has shown that youth aging out of care do not do as well in their transition to adulthood as their peers. They are less likely to graduate from high school or pursue post-secondary education and are more likely to be unemployed, live in poverty, experience homelessness, struggle with mental health issues and become involved in the justice system. Both individual and social ecology plays a role in building resilience and facilitating positive outcomes. Employment has been found to contribute to social ecology by providing resources and experiences that support positive adjustment including improved social inclusion, stability and social integration.

In Canada, more young adults are staying with their families well into their twenties. In 2006, 44% of young adults between the ages of 20 and 29 lived in the parental home, up from 32% just twenty years earlier. This opportunity to gain basic skills and better job prospects is often not available to youth who exit care and they often have trouble getting work. Exploring the lived experiences of former youth in care who are currently working can help us better understand what has helped these youth to find and stay in jobs, and may have relevance for policy and practice relating to former youth in care. It is important to learn from successful trajectories and good outcomes.

**Objectives.** The aim of this study is to explore the lived experiences for young adults who have transitioned out of the care system and examine how volunteer and work experiences have influenced their individual and social ecology contributing to their resilience.

**Methods.** “Pathways from care to work” is an international research project including six countries: Catalonia (Spain), Czech Republic, Flanders (Belgium), Ireland, Sweden and now Ontario (Canada). As the newest member of this research project, the Ontario study will soon complete semi-structured interviews with youth who have aged out of care and are now between the ages of 25 to 30. Following fieldwork, thematic analysis will be performed to explore what the young adults say about what helped them get into the world of work and how their volunteer and work experiences contributed to their individual and social ecology. The link between work and education will also be examined.

**Discussion.** Findings from this study will be discussed in relation to the larger policy context for the province of Ontario. Ontario is Canada’s most populated province with a child population of over 3 million. Almost 17,000 children are in care of the province’s Children’s Aid Societies. The Provincial Advocate for Children and Youth has taken up the cause of youth leaving care in the province of Ontario. This advocacy utilizing the voices of youth has resulted in significant focus on services and supports needed to improve the overall outcomes of youth in care transitioning to adulthood. Recent changes have included extending the age of protection from 16 to 18 and increasing educational and financial supports to youth leaving care up to age 25. The results of this study can make an important contribution to informing policy and practice and creating opportunities to engineer resilience in youth leaving care. The discussions will also explore the findings from Ontario in connection to the findings of the other five countries in the “Pathways from care to work” project.
Pathways from Care to Work Study – Some Key Learning to Date

Thursday, 4th October @ 13:00: Young Adult Care Leavers in the World of Work (Venue: Arrábida)

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

This overarching presentation for the Symposium complements the other four presentations which focus on thematic analyses of data from the cross-country study or present emerging analysis from aspects of one the country studies. This presentation gives a background to the other presentations by providing an integrative overview of the six-country Pathways from Care to Work Study – its origins, rationale, methodology and development. Based initially on a collaboration by Dr Laura Arnau-Sabates and Professor Robbie Gilligan, the first phase of the project involved a study conducted in two countries Ireland and Spain (Catalonia) leading to two papers to date and numerous presentations. Researchers in four other countries have joined the study in later phases:

Dr. Ingrid Hojer, University of Gothenburg, Sweden
Dr. Hana Pazlarova, Charles University, Prague, Czech Republic
Dr. Yvonne Sjoblom, University of Gavle, Sweden,
Dr. Veerle Soyez, VUB, Free University of Brussels, Belgium, and
Dr. Jill Stoddart, University of Toronto and Family and Children's Services, Waterloo, Ontario, Canada

The presentation will review certain key features of the study

- its focus on work and work experience as a potentially important (and relatively neglected) aspect of the care and transitions from care experiences
- a focus on learning from success, learning from adult former care leavers who have made a successful and sustained entry to the world of work
- a focus on learning from slightly older care leavers than is the case in many study of transitions from care
- a qualitative approach seeking to get a fine grain sense of the lived experience of the care leavers' work and related journey
- a cross country design which allows within country and cross-country perspective
- a shared but flexible template which allows adjustment to local need and circumstances in individual country studies but retains sufficient similarity for meaningful comparability
- a low budget approach despite the cross-national design which might typically be expected to impose additional costs

The presentation will also cover some of the key learning to date in terms of the overall methodology and its feasibility and effectiveness, and in terms of selected key insights from study to date.
Human trafficking, including the trafficking of children, has received substantial recognition as a global problem. In the United States of America (USA), special attention has been paid to the commercial sexual exploitation of children (CSEC), conceptualized as a particularly egregious form of human trafficking, and the role of the child welfare system in responding to this issue. Research suggests that youth in the child welfare system, and especially those with a significant history of trauma exposure, are at increased risk of victimization. However, the availability of empirical research on this phenomenon, including prevalence, risk factors, and effective approaches for prevention and responding to the needs of victimized youth, is limited. In fact, much of the information that is perpetuated is not empirically-based, and often lacks input from children and youth who have experienced exploitation. This presentation examines the context of CSEC and efforts to address it in the USA, drawing on four years of research with commercially sexually exploited youth in the child welfare system and agencies working with this population in a large, urban community.

The methodology for this study includes participant observation at interagency CSEC task force meetings, analysis of youth outcomes using standardized instruments, and semi-structured interviews with child welfare system stakeholders and commercially sexually exploited youth. The primary objectives of this presentation are as follows:

1. Describe the characteristics of commercially sexually exploited youth identified through this project;
2. Examine dominant stakeholder discourses and rhetoric regarding CSEC, and compare this with empirical data collected through the study;
3. Highlight youth perspectives regarding their needs and the services provided to them;
4. Describe the strengths and limitations of the current child welfare system response, and provide recommendations for ways the system might better meet the needs of vulnerable children and youth.

Results of this study indicate that there are considerable discrepancies between popular stakeholder discourses and the realities of CSEC, which may limit the effectiveness of efforts to address CSEC. Key findings that will be described include: 1) the significance of race/ethnicity and socioeconomic status in shaping CSEC risk, which are often down-played or ignored by stakeholders, 2) many youth enter into commercial sex work independently in contrast to stakeholder narratives that emphasize coercion and manipulation, 3) youth agency and voices are often denied, ignored, or silenced by the child welfare system, and 4) while effective therapeutic services are provided to youth, the need to increase self-sufficiency and socioeconomic conditions for these youth is seldom addressed. We argue that youth need to be given greater voice in identifying their needs and interests, and treated as equal partners in developing effective responses to address CSEC.
Justifying the Child’s Best Interest - A Comparison of Court Decisions in Norwegian Child Protection Cases of Violence in Migrant and Non-Migrant Families

Thursday, 4th October @ 12:15: Challenges in Migrant Families (Venue: Porto)

Mr. Audun Løvlie (University of Bergen), Prof. Marit Skivenes (University of Bergen)

The aim of this paper is to identify and analyse the justifications for decisions made in the best interest of children in care order cases concerning domestic violence in migrant and non-migrant families. The aim is to expand our understanding of the practice of the “best interest”-principle and the normative underpinnings of this in the Norwegian context.

Cases of violence and its detrimental effect on children are an internationally recognised and central focus from which practitioners draw knowledge when assessing cases. Cases of this nature, then, have the potential to identify normative aspects of the assessment of the best interest of the child within a given country.

The paper explores the following questions: what are the types of violence that are involved in these cases; what are the thresholds and the considerations that count for and against a care order in these cases, and what are the child’s best interest considerations in these cases? For each of the questions, we examine if there are differences between migrant cases and non-migrant cases.

We analyse all available care order decisions involving violence for the years 2016 and 2017. The cases are selected on the basis that violence is relevant to and present in the case proceedings. The comparison of non-migrant and migrant children will yield interesting results, for instance, where it pertains to the best interest principle of UNCRC (1989) article 3 and the Norwegian Child Welfare act (1992).

Through a critical exploration of the arguments applied for assessment of violence, parental capacities and the child’s best interest, the paper provides knowledge on rational decisions that are intended to recognise the best interest of the children. Using this type of analysis, we also identify how the negotiation and reasoning regarding what is good, just, and legal intersects with and is measured against criticism (Habermas 1998).

The findings contextualise the accusations of media, interest groups and laymen, that claim the courts treat migrants with (more, or) a kind of prejudice not found in non-migrant cases, but also highlights the varied contexts and therefore arguments used in these similar but distinct types of cases. As the interplay between legal areas must be accounted for, whether it is the immigration act or the criminal procedure act, there is always a normative perspective expressed in court rulings.
The Need for Numbers on Violence Against Children in Migration: Findings and Further Steps

Thursday, 4th October @ 12:30: Challenges in Migrant Families (Venue: Porto)

Dr. Andreas Jud (Ulm University), Mrs. Marion Jarzok (Ulm University), Dr. Rebecca Brown (Ulm University)

Objectives
In 2015 a total of 244 million people worldwide lived outside their country of birth including 31 million children in migration. Within a decade the number of child refugees more than doubled (~ 1 in every 200 children), due to political instability and warfare. In 2015 and 2016 nearly 800,000 children applied for asylum in Europe, including 170,000 who were considered unaccompanied – a number that increased dramatically since 2014. Especially the journeys of the child refugees are arduous and perilous, particularly when moving through irregular channels: deprivation of basic physical and emotional needs, subject to violence (beaten, raped), exploited for profit (prostitution, slavery). Thereby the Central Mediterranean route is one of the world’s deadliest (1 in 40 people who attempted to make the crossing died in 2016; – including an estimated 700 child deaths). Between the second half of 2016 and early 2017 75%-91% of 14-17 aged child migrants who came to Italy via that route suggest they may have been trafficked or otherwise exploited. Upon arrival, threats continue including xenophobia, peer-bullying, and violence at the hands of their parents. This places an enormous burden to a rapidly growing number of children in migration and particularly forced displacement. There is an urgent need but huge worldwide lack of epidemiological information on violence against children in migration that will be covered with this meta-analysis.

Methods
A threefold attempt is made based on PRISMA and MOOSE guidelines: First, all scientific articles were located using national/international databases (e.g. PsycINFO, MEDLINE, PubMed EMBASE etc). Second, web-based professional resources such as UNICEF, IOM, WHO, USAID, Amnesty international and other (inter)national aid agencies and organizations were screened. Third, dissertations were screened using Dissonline.de and NDLDT. Identified articles and reports will be categorized and sent to regional experts of the field to avoid publication bias. Search terms were applied in English, German and French language.

Inclusion criteria: published between 2003 – 2017, child migrants up to 17 years of age.
Exclusion criteria: Not covering epidemiological data on violence against children in migration (first generation), sample size N<100, report on adults 18+, not reporting A) context of victimization B) definition of violence C) reasons for migration.

Results
Study selection and data extraction is ongoing. On our current timeline, data synthesis and meta-analysis will be completed by Juli 2018.

Conclusion
This will be an exhaustive review and meta-analysis on violence against children in migration. Results and future fields of research will be presented and discussed. It highlights the need of basing the professional and political debate on comparable and reliable data.
Mother Blame in Migration: The Experiences of Southern European Mothers in Norway

Thursday, 4th October @ 12:45: Challenges in Migrant Families (Venue: Porto)

Ms. Raquel Herrero Arias (University of Bergen), Dr. Ragnhild Hollekim (University of Bergen), Prof. Haldis Haukanes (University of Bergen), Dr. Åse Elisabeth Vagli (University of Stavanger), Dr. Gaby Ortiz-Barreda (University of Bergen)

Background: Immigration to Norway is to some degree a recent phenomenon that has shaped family life. In this context, mothers, fathers, and children redefine their relationships when navigating social, institutional and cultural settings. Immigrant mothers construct and experience motherhood in relation to their perception of cultural understandings of “good mother” in Norway and their countries of origin. Most of the studies looked at how immigrant mothers navigate cultural values, mothering practices and expectations. However, the emotional implications of this navigation is a topic has been overlooked. This study explored the emotions of blame Southern European mothers go through when they do mothering and navigate transnational contexts.

Methods: The research design was qualitative and phenomenological. Data were collected in Norway between August-October 2017 through Focus Groups and in-depth interviews. Interviews were conducted with 16 parents from Greece, Italy, Portugal and Spain. Focus Groups were carried out with groups of mothers based on the length of their residence in Norway. Data were analyzed through thematic analysis. The study is part of a Ph.D. project on the experiences of Southern European parents raising their children in Norway.

Results: In their encounters with other parents and professionals working at welfare institutions, Southern European mothers adopt a cross-cultural approach and compare their mothering practices in relation to “Norwegian” and “Southern European” styles. Doing mothering under the perception of two mothering styles based on ethnicity, immigrant mothers not only navigate childrearing practices but also emotions of blame and inadequacy about their mothering. The exercise of blaming themselves for not living up to the expectations of the “Norwegian” or the “Southern European” mothering is reinforced by their perceptions of being judged by others for their mothering practices. Findings indicate that Southern European mothers feel judged by other parents and professionals for adopting mothering practices that differ from those considered proper in the host or origin societies.

Conclusions: The voices of Southern European mothers contribute to an understanding of how motherhood is constructed and experienced in migration. Mothers perceived different mothering styles in Norway and their countries of origin based on cultural differences, but also socio-institutional structures that can limit or facilitate the development of desired practices. Doing mothering in this context brings emotional outcomes that have an impact on women and children wellbeing. There is a need for further research on how doing mothering in a transnational context affects individual mothers’ self-perceptions of “being a good mother”. This knowledge is relevant for supporting practices that help mothers, families, and children to navigate transnational contexts. Mothering in migration brings challenges and opportunities for mothers, families, and children, but also for professionals, policymakers, and communities, in both origin and host societies.
Immigrant families account for a significant part of those receiving child protection services in major urban centers like Montreal, Quebec (Canada). Some groups are over-represented in this CPS system. The strong presence of these children in protection services raise questions. While the importance of taking the intercultural dimension into account in social work is officially acknowledged by Quebec government, little is known at present about the experiences of immigrant families in vulnerable situations.

The presentation will focus on the results of a qualitative research that explores the immigrant families’ experiences with child protection services, as well as their reactions towards social workers’ approaches in their cases. The study was conducted with fourteen mothers, seven fathers and twenty youths aged 12 years and over, receiving youth protection services in the greater Montreal area. The interviews were held in the language of their preference. The data was collected using semi-structured interviews. The results revealed a wide range of opinions about how culture is taken into account in intervention in CPS system.

Participants’ experiences vary throughout the process and have a straight relation with social workers’ attitudes towards their migration trajectories, their culture and their challenges and strengths in their integration and acculturation processes; as well as of the efforts that they make to respond to their singular needs. We could distinguish two different poles in intervention, each one with a attitudinal and action repertory. In the first pole, culture is used as a tool for intervention, in the second,we observed a lack of consideration for the culture and migration trajectories.

When culture is used as a tool, the intervention is based in respect, curiosity and empathy and leaves room for negotiation and family participation in the intervention decision-making process. The intervention leads to more openness, transparency and involvement of parents in the intervention. On the other hand, when there is a lack of consideration for culture, the intervention is more rigid and less open to negotiation. Families experience a feeling of indifference and contempt on the part of the social worker. This type of intervention leads them either to rebel or to compliance reactions that do not contribute to a transparent and positive relation.

For participants to be able to appreciate the services and for the intervention to be positive and meaningful for them, they must be involved in the intervention decision-making process. These findings evidence the variability experienced by immigrant families who receive child protection services. It shows the importance of social workers’ attitudes towards otherness and the Importance of adapting services to the singularity of immigrant families’ needs and strengths, as well as to see beyond the child protection warrant and look the special families’ needs related to the integration and acculturation processes.
The Complex Link between Poverty and Child Abuse and Neglect: A Systematic Review

Thursday, 4th October @ 12:00: Child Abuse and Neglect (Venue: D. Maria)

Dr. Cláudia Camilo (Instituto Universitário de Lisboa (ISCTE-IUL), Cis-IUL), Prof. Margarida Vaz Garrido (Instituto Universitário de Lisboa (ISCTE-IUL), Cis-IUL), Ms. Ana Fonseca (Instituto Universitário de Lisboa (ISCTE-IUL)), Prof. Maria Calheiros (Centro de Investigação em Ciência Psicológica, Faculdade de Psicologia, Univ. Lisboa)

Child abuse and neglect have often been addressed using Bronfenbrenner’s (1979) ecological model of human development. The role that socioeconomic factors play in partially explaining these phenomena is already well established, namely that the risk of abuse and neglect increases in contexts of low socioeconomic resources. However, this association is not direct and encloses a set of moderation/mediation effects of individual, familial and community variables.

Specifically, several explanations have been advanced regarding these relationships: (1) the stress associated with poverty transfers to parent-child interactions and some parents may engage in harsh behavior towards their children; (2) poor families are simply more likely to be reported; (3) poor families are reported for neglect more frequently because they cannot afford to adequately provide for their children due to lack of material resources; and (4) poverty and neglect are apparently correlated, but in fact other underlying factors are motivating this association (Waldfogel, 2000).

In order to systematize and clarify the apparent association between poverty and child maltreatment, we conducted a systematic literature review with the following objectives: a) to map the research exploring the association between poverty indicators (proximal or distal) and child abuse and neglect; b) to identify the individual, familial or community variables that moderate or mediate this association; and c) to design an explanatory theoretical model of the relation between poverty and child abuse and neglect.

A systematic electronic search was conducted in eight databases, namely Academic Search Complete, ERIC, PsycARTICLES, PsycINFO, Psychology and Behavioral Sciences Collection, PubMed, Web of Science and Scopus. The studies were identified using all possible combinations of the following groups of search terms: (a) “child maltreatment” OR “child abuse” OR “child neglect” OR “abusive parent*” OR “parental neglect” OR “risk parents” OR “family violence” OR “maladaptive parenting” OR “dysfunctional parenting”; AND (b) “poverty” OR “low income” OR “low status” OR “family income” OR “poor famil*” OR “economic disadvantage”; NOT (c) “child sexual abuse”. Additionally, a hand search was performed in the references of the relevant papers and on previous literature reviews on this subject. According to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) Statement (Liberati et al., 2009), we conducted a four-phase process to select the relevant studies based on a sequential examination of the title, abstract and full text, based on a set of eligibility criteria.

The research reviewed is likely to present an important contribution to disentangle the extent to which poverty and maltreatment relationships may be causal, as well as the effects of other variables in the explanation of this association. Moreover, the theoretical model advanced may constitute an important tool in the design of policies and intervention programs in the domain of child abuse and neglect.
Violence against Children in Humanitarian Emergencies: A Systematic Review

Thursday, 4th October @ 12:15: Child Abuse and Neglect (Venue: D. Maria)

Mr. Hamed Seddighi Khavidak (University of Social Welfare and Rehabilitation Sciences), Dr. Mehrab Sharifi (Iranian Red Crescent Society), Mrs. Saeideh Seddighi (Iranian Ministry of Interior), Dr. Ibrahim Salmani (Department of Health in Emergency and Disaster, Shahid Sadoughi University of Medical Sciences, Yazd)

Background and Objectives: Violence against children affects not only on children's emotional, social and physical development but also has economic, social and political consequences for society. Emergency situations, such as natural disasters and conflicts, will expose children to more violent situations and should be surveyed by the organizations in order to assess the prevalence of violence against children in emergencies, their incidence, and prevention for the violence against children.

Method: This paper uses a systematic review method to examine the subject. 691 papers were selected in various electronic databases in the initial search, and after review, the final 10 papers were selected for full review. The cases reviewed included the year of publication, emergency situations, geographical area, type of violence, age, gender, and perpetrators.

Findings: Most families affected by natural disasters, especially those in lower socioeconomic conditions, face greater social and economic pressures, especially food and shelter, more committed violence against children. On the other hand, in emergencies, while violence is rising, the incidence of violence reporting is much less than actual incidence because lack of infrastructure and reporting mechanisms. Sexual violence against girls is higher in emergencies, especially during conflicts. Children after the disaster are victims of physical violence and other forms of violence by the family and other violent people, and subsequently suffering from shock after the accident, and because of this kind of behavior and lack of understanding of the surrounding people, more violence against them by the family, Supervisors, relatives and teachers and a kind of loop of violence against them. The history of child and family trauma, alcohol and drug abuse by parents, poverty, and child labor are predictors of violence against children in emergencies.

Conclusion: Sexual violence against girls, especially after conflicts and physical violence, especially against boys after emergencies, are among the most common forms of violence. So gender-based violence should be noticed in preparedness, response and recovery after disasters. Paying attention to the livelihoods of families, especially the head of household in emergencies, helps reduce violence. Given the predictors of violence, such as alcohol, drugs, history of violence, etc., humanitarian organizations can, by identifying the status of these predictors in countries and local regions ahead of time, have different plans to reduce violence before, during and after Have disasters. Since violence against children is less than reported in reality or a reporting mechanism is not available, humanitarian organizations must assume that this type of violence is happening, even if no report has been received.
Typologies of Abuse for Sexual and Gender Minority Adolescents

Thursday, 4th October @ 12:30: Child Abuse and Neglect (Venue: D. Maria)

Dr. Laura Baams (University of Groningen)

Objectives. Lesbian, gay, bisexual, transgender, questioning (LGBTQ), and gender nonconforming adolescents are more likely to experience rejection and abuse from their parents (Friedman et al., 2011). Most studies on adverse childhood experiences use a cumulative risk approach, and show that LGBTQ and gender nonconforming individuals experience more types of abuse (polyvictimization; Chartier et al., 2010; Felitti et al., 1998; Horan & Widom, 2015). With previous research, it was not possible to conclude whether certain adverse childhood experiences are more likely to co-occur than others, and it is unknown whether LGBTQ adolescents or adolescents with high levels of gender nonconformity are at-risk of experiencing certain patterns of abuse. The current study identifies typologies of adverse experiences, and disparities for LGBTQ and gender nonconforming adolescents.

Method. Data are from the 2016 Minnesota Student Survey, provided by public school students in Minnesota. The sample comprises 81,885 adolescents ($M_{age}=15.51, SD=1.13$), enrolled in 348 schools. Sexual orientation, gender identity, gender nonconformity, and adverse childhood experiences were assessed in a survey. Patterns of childhood adversity were identified with a latent class analysis, and disparities for LGBTQ and gender nonconforming adolescents were examined using a three-step latent class analysis. All analyses controlled for age, race/ethnicity, and SES.

Results. Based on fit statistics, a four-class model was determined to be the best fitting model. Classes could be described as 1) No/low adversity (with low probabilities of childhood adverse experiences), 2) Household dysfunction (with high probabilities of household dysfunction and low probabilities of abuse), 3) Polyvictimization (with high probability of all adverse experiences), and 4) Psychological, physical abuse (with low probabilities of household dysfunction and sexual abuse, but high probabilities of psychological and physical abuse). The three-step latent class analysis showed that compared to heterosexual and non-transgender adolescents, LGBTQ adolescents were more likely to be classified into profiles characterized by polyvictimization and psychological/physical abuse, compared to the no/low adversity profile. A higher level of gender nonconformity predicted a higher likelihood of being classified into each adversity profile, compared to the no/low adversity profile.

Discussion. LGBTQ and gender nonconforming adolescents are at-risk of experiencing different patterns of abuse compared to heterosexual adolescents. Although the proportion of adolescents experiencing polyvictimization is small, the current study identifies severe disparities for LGBTQ and gender nonconforming adolescents. Awareness of patterns of childhood adversity could help physicians and pediatricians to monitor these experiences.
Prevalence and Perpetrators of Child Maltreatment in Residential Care

Thursday, 4th October @ 12:45: Child Abuse and Neglect (Venue: D. Maria)

Dr. Eric Van Santen (German Youth Institute), Dr. Liane Pluto (German Youth Institute)

Objectives
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 becoming again victims of maltreatment (e.g. Hindley/Ramchandani/Jones 2016). Empirical research (e.g. Allroggen et al. 2017; Derr et al. 2017, Deutsches Jugendinstitut 2010) shows that residential care cannot be generally understood as a safe place. In the public discussion on child maltreatment in residential care institutions, the danger posed by the staff is at the forefront. The question is, does this correspond to reality? So the research question is, whether residential care institutions in Germany are a safe place for children. Since the study also covers the perpetrators it is able to distinguish child maltreatment during a residential care placement from maltreatment by the staff of the residential care unit. The study presented is the first German representative study providing data on child maltreatment in residential care institutions in combination with information on activities of residential care institutions to prevent child maltreatment.

Method
The study was done as a standardized postal survey among 908 residential care institutions in Germany as a part of a monitoring of child and youth welfare institutions in Germany. The response rate was 45 % (N=409). Among other topics concerning child protection in residential care, institutions were asked for the number of allegations for child maltreatment in their institution during the last year, the number of substantiated child maltreatment during the last year and who was the perpetrator. The list of possible perpetrators covers the members of the staff as well as the biological parents, youngsters and other adults, who are (not) living in the residential care institution. The results allow an estimation of the number of allegations and substantiated cases of child maltreatment in residential care per year. Furthermore a comparison with the maltreatment prevalence rate per year of children not living in out-of-home care is possible. Also aspects of the action of the professionals in the residential care units, e.g. talking about forms of sexuell harassment, carrying out trainings or strengthening the participation of 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. The prevalence of maltreatment per year among children in residential care is much higher than for the population not in out-of-home care and children in foster care. The vast majority of the perpetrators are parents, followed by other children in the residential care unit. Compared to other perpetrators, staff account for a small proportion. The ratio between reported and unreported cases of maltreatment in residential care institutions compared to reported and unreported cases of maltreatment in birth families will be discussed.

Conclusions
The results signalize the necessity for further efforts to make residential care institutions 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 staff recruitment, training and supervision should take the possibility of child maltreatment in care into account.
Temporary placements, that is placements for 30 days or less, are often used to immediately protect children who undergo or are at risk of undergoing physical abuse. In Quebec, Canada, nine out of ten children placed in substitute care will have at least one temporary placement in their placement trajectory. The little information we have on temporary placement seems to point out to physical abuse as one potential trigger to the use of those placements, notably because of the immediacy in the need of protection for this particular kind of maltreatment.  

**Objective:** This presentation will describe the association between temporary placements and physical abuse. Considering the dual mandate of child protection services in Quebec between urgent protection and chronic need, two hypothesis were tested: 1) physical abuse would be more associated with temporary placements and; 2) children having only physical abuse as a motive to CPS would be less likely to have planned placements.  

**Method:** This study analyzed data from a clinical population cohort of children investigated by CPS from 2007 to 2009. These children were followed for four years from the point of the investigation. Propensity weights were used to control for possible differences in the clinical profile of children served for physical abuse compared to all other forms of maltreatment. Propensity weights were applied to a multinomial regression examining the likelihood of children experiencing temporary placements, planned placements or combined placements (temporary and planned).  

**Results:** The findings tend to confirm the two hypothesis. Specifically, temporary placement only is associated to being an adolescent girl with no history of services reported for physical abuse only. Combined placement trajectory is most frequent for the youngest children (0 to 5 years old) with history of services who are reported for physical abuse combined with another motive. Planned placement only is associated to children aged from 6 to 11 years old reported for other reasons that physical abuse.  

**Conclusion:** The implications of our study will be discussed within the context of the dual mandate in child protection services and the etiological profile of physical abuse.
Services According to Need for Youth in Foster Care?

Thursday, 4th October @ 12:00: (Des)Medicalisation and Mental Health Promotion (Venue: Miragaia)

Dr. Marit Hjellset Larsen (Uni Research Health), Dr. Valborg Baste (Uni Research Health), Dr. Ragnhild Bjørknes (University of Bergen), Dr. Trine Myrvold (OsloMet - Oslo Metropolitan University), Dr. Stine Lehmann (Uni Research Health)

Objectives

Foster children have a high risk of mental disorders. This has contributed to increased attention to service utilization for youth in foster care internationally. Knowledge about service utilization in this group, relative to their need for services, is essential to better understand the mechanisms of service access, and ensure availability and right dimensioning of services. The aim of this study is to examine if youth in foster care receive services according to need.

Method

This study uses a multi-informant design. Detailed information on type and frequency of mental health- and child welfare service use during the last two years, and youth mental health were collected from foster youth and their carers in Norway (n = 405, aged 11-17 years) through online questionnaires. Mental health was assessed with the Strength and Difficulties Questionnaire. Statistical analyses were conducted using descriptive statistics, and log-binominal regressions.

Results

In total, 74.5 % of the foster families had contact with services. Among foster youth, 48.8 % had mental health problems. More symptoms of mental health problems, and living in non-kin foster care were associated with service use. Youths with mental health problems had twice the probability of receiving services from the child and adolescent mental health service (CAMHS) and primary health care services, compared to youths without problems. Still, only 43 % of youths with mental health problems, had contact with the CAMHS.

Conclusions

Service use among foster youths were associated with service need, rather than demographic and placement characteristics. The majority of youths with mental health problems did not receive services from CAMHS. However, many of them were in contact with primary health care services and might get their service needs met there. To secure stepped care, screening procedures should be used in primary health care services to identify the youths in need for more specialized services. Further, as youth in foster care often are in contact with several service providers it is important to have a good collaboration between services.
The Medicalisation of Children’s Distress in English Mental Health Services

Thursday, 4th October @ 12:15: (Des)Medicalisation and Mental Health Promotion (Venue: Miragaia)

Prof. Christopher Ward (University of Nottingham)

The mental health needs of young people in care or at high risk of care can often be understood in terms of systemic factors such as economic, social and home circumstances, together with previous experience of neglect, abuse and other trauma. Alternatively, needs can be framed in terms of psychiatric diagnoses. This paper concerns the tension between the two approaches to interpretation. I will suggest that in Britain, at least, the structure and context of services produces a bias towards medicalisation. To support this argument I will use observations from a locality-based Child and Adolescent Mental Health Service (CAMHS) in the English midlands, illustrated by means of anonymised clinical examples, including young people with current or recent experience of care.

According to current UK policy, mental health services ‘should not be based solely on clinical diagnosis, but on the presenting needs of the child or young person’. Three systemic factors militate against this ideal. The first concerns the structure of evidence. Commissioners of research such as the Department of Health and the medical charities are oriented towards a medical model, as are medical schools and other research providers. Moreover, medical labels such as ‘autism spectrum disorder’ and ‘attention deficit hyperactivity disorder’ are a convenient way of operationalising psychological difficulties for research purposes. These factors help to explain why the effectiveness of interventions such as cognitive behavioural therapy (CBT) is largely oriented towards diagnostic categories rather than other indicators of distress.

The structure of British service provision is a second systemic factor encouraging medicalisation. CAMHS are based on a medical model, only accepting a referral if a young person has a psychiatric diagnosis. The marketization of health services, which the current British government promotes, encourages diagnosis-led commissioning because a medical label is a convenient ‘brand’ whereby a ‘product’ can be defined. This is one reason why CAMHS teams are typically organized around diagnostic pathways such as ‘neurodevelopmental difficulties’ and ‘eating disorders’. Family-oriented work and other non-medical interventions are less easily seen as CAMHS ‘business’. CAMHS use a government-endorsed framework called Children and Young People’s Increasing Access to Psychological Therapies in which evidence-based outcome measures and interventions are paramount. This creates a bias towards interventions such as CBT where diagnostic categories are dominant and outcomes relatively easily measured.

For all these reasons a young person’s family and social contexts are viewed as subsidiary, albeit important, considerations in CAMHS work. Theoretically, non-medical children’s services can meet such needs but in practice the complex distress experienced by young people often gravitates towards CAMHS under labels that mandate medical involvement, for example ‘anxiety disorder’ and ‘self harm’.

Professional structures are a third systemic factor encouraging a medical model. In the CAMHS multidisciplinary team (MDT) the medical ethos gives a special position to psychiatrists, who have status markers such as higher rates of pay that make it more difficult for the MDT and partner agencies to challenge the diagnostic authority of doctors.

Despite in-built biases towards medicalisation, systemic interpretations of young people’s troubles are re-
spected and widely used by psychiatrists, as they are by other professionals in the CAMHS team. This produces profound ambivalence about medical diagnoses among psychiatrists and other MDT members. Even though a medical diagnosis may ‘trump’ other interpretations, the meaning of that diagnosis often seems ambiguous and contestable within the MDT. More transparency about this issue would benefit CAMHS practitioners, non-medical services, families, and above all the young people themselves.

The Need for Deprescribing Guidelines for Youth in Foster Care in the U.S.

Thursday, 4th October @ 12:30: (Des)Medicalisation and Mental Health Promotion (Venue: Miragaia)

Dr. Christopher Bellonci (Judge Baker Children’s Center, Harvard University)

The American Academy of Child and Adolescent Psychiatry has numerous Practice Parameters that attempt to define the standards of care for the field of children’s mental health. Almost without exception, these parameters are silent about when or how to discontinue a medication while providing support for how to initiate prescribing. The author is currently working on a draft Clinical Guideline to address this gap in our scientific literature and will present on some of the key elements of this practice brief.

In the United States, foster youth are prescribed psychotropic medications at rates four times that of the general child population. In some jurisdictions, as many as half of the youth in the child welfare system are taking a psychotropic medication and of those, most are taking more than one medication at a time. Concerns about these prescribing trends and the relative lack of data on safety and efficacy of these medications when prescribed to youth are leading to federal and state oversight and monitoring requirements. However, the field of child psychiatry has been slow in developing clinical guidelines to facilitate periodic reassessment of the need for medications as outlined by Scott, et.al. in their formative paper on Deprescribing in the Elderly.

Deprescribing is the systematic process of identifying and discontinuing drugs in instances in which existing or potential harms outweigh existing or potential benefits within the context of an individual patient’s care goals, current level of functioning, life expectancy (this definition comes from literature on the elderly), values and preferences. Deprescribing is part of the good prescribing continuum, which spans initiation, dose titration, changing or adding drugs, and switching or ceasing drug therapies (Scott et. al. 2015).

Deprescribing is not about denying effective treatment to eligible patients. It is a positive, patient-centered intervention, with inherent uncertainties, and requires shared decision making, informed patient consent, and close monitoring of effects-the same good prescribing principles that apply when drug therapy is initiated. Deprescribing considers not only the risk associated with individual drugs but also the cumulative risk from multiple drugs due to pharmacokinetic and pharmacodynamic interactions.

Deprescribing, like prescribing, starts with a comprehensive psychiatric assessment. This is especially important when a youth is entering the clinician’s care already on medications. The clinician should make every attempt to review the records of past psychiatric treatment and any past testing to understand the rationale for the current medication regimen and in their absence exercise sound professional judgment. Developing an independent biopsychosocial formulation is critical to guide any consideration of deprescribing. Consideration of whether the current medication regimen may actually be contributing to side-effects or symptoms that might be mistaken as remaining targets for medication intervention should prompt thoughtful consideration of deprescribing rather than treating with additional medications. Periodic reassessment of the diagnosis and formulation is indicated, especially as additional historical information is obtained and the clinician is able to observe the response to treatment interventions including deprescribing.

These ideas on the rationale for deprescribing in Child Psychiatry will be elaborated upon during this presentation.
Psychotropic Medication Discontinuation, Aggression, and Restraint in Two Residential Treatment Programs in the US

Thursday, 4th October @ 12:45: (Des)Medicalisation and Mental Health Promotion (Venue: Miragaia)

Dr. Jonathan Huefner (Father Flanagan’s Boys’ Home), Dr. Christopher Bellonci (Judge Baker Children’s Center, Harvard University)

Youth in out-of-home settings in the US typically experience higher levels of psychotropic medication use than their peers living at home, even when controlling for the severity of clinical issues. The purpose of the current study was to examine the effects of a psychotropic medication reformulation for youth residing in two non-affiliated residential treatment settings while also observing the impact on the youth's level of aggression and need for physical restraint.

We studied two residential programs where the psychiatrist responsible for medications held the same basic philosophy about psychotropic medication management. Their basic approach was that youth should only be on the medications necessary to meet their treatment needs and no more (the principal of sufficiency). In both residential programs, multi-disciplinary teams including learning disability specialists, speech and language therapists, child behavioral specialists, nurses, and psychiatrists create a treatment plan that takes into account the biological, psychological, social, and educational contributors to the youth’s problem behavior. An integral part of the treatment plan includes a medication plan which often involves a planned taper of the admission medications. The medication plan sees the residential stay as an opportunity to reassess the effectiveness of each medication the youth is taking.

Data for 531 youth who were consecutively admitted to the two non-affiliated intensive residential treatment programs, one in the Midwest and one in New England regions of the US, was analyzed. Over half of the youth (n=292, 55%) had their medications reduced during their stay and only 14% (n=76) were prescribed more medication at discharge than they had been taking at admission. The remainder either saw no change during their stay (n=104, 20%) or were never on medication at any time (n=59, 11%). From admission to discharge there was a 62% decrease in the number of assaultive incidents as well as a 72% decrease in the use of physical restraints. Over half the youth experienced a reduction in psychotropic medications during their residential stay. This indicates that the attending psychiatrists found that the majority of youth entering these programs to be on higher levels of medication, unnecessary medications, or on the wrong types of psychotropic medication than were deemed appropriate to their clinical needs. Additionally, these youth experienced significant reductions in the use of restraint between the first two weeks and the last two weeks of their residential stay: 79% reduction in restraints and a corresponding 78% reduction in assaults. This was accomplished at the same time as a 60% reduction in the number of psychotropic medications. The psychosocial/behavioral interventions and program supports utilized by these programs were effective in reducing problem behavior while allowing for reduction in the number of medications for the majority of the youth. We argue that residential treatment programs have expertise in treating emotional and behavioral disorders and bring additional resources to the task that are not available in most outpatient and inpatient settings. Psychosocial and behavioral treatments require many weeks or months to show effect and are therefore short inpatient stays ideal for determining the effectiveness of changes in psychotropic regimens. Similarly, outpatient prescribers struggle to find therapists trained in evidence-based psychosocial interventions and are rarely part of a multi-disciplinary team necessary to manage children with aggressive behaviors. Without these resources the outpatient prescriber are frequently reluctant to taking children off of a medication for fear of destabilizing them further, even when the efficacy of the medications are unclear. Residential treatment can provide a treatment milieu that allows for thoughtful reassessment of the clinical basis for behavioral disorders in children that can achieve the dual goals of medication reduction and behavioral stabilization.
The high rate of mental health problems of institutionalized children seems to gather consensus in the research (Egelund & Lausten, 2009, Gonçalves, Almeida, Guimarães & Alves, 2005; McDonald, Allen, Westerfelt & Piliavin, 1996) and many studies show that institutionalized children appear to have a higher incidence of behavioral problems and deficits in adaptive functioning compared to children of the general population (Clausen, Landsverk, Ganger, Chadwick & Litrownik, 1998; Pecora, Jensen, Romanelli, Jackson & Ortiz, 2009). Ellermann (2007) also mentions the high incidence rate of mental health problems with institutionalized children advocating that this audience highlights complex and unique needs in terms of mental health which need to be addressed.

While there are difficulties in intervening in this area, several authors conclude, based on research results, that priority should be given to interventions in the field of mental health with children living in host institutions with behavioral problems and some deficit in social skills (Clausen et al., 1998; Dimigen et al., 1999; Minnis, Everett, Pelosi, Dunn & Knapp, 2006; Jamora et al., 2009).

Given these assumptions, APDES implemented the Chapéu de Chuva project, a health promotion program for children in foster care. The intervention was operationalized through three lines of action: a) group intervention (through personal development groups, sessions in the community and Health Holidays); b) individual intervention (through psychological assessment and counselling); and c) indirect intervention (through counseling to technicians and caregivers of host houses).

This program has been evaluated as a 2 year project. The study sample is composed of 45 children in institutional care, between the ages of 6 and 12 (Mdn = 9). The instruments used to evaluate the results between the pre- and post- test activities/actions include the Kidscreen 27 and the “Sede de Viver”. Statistically significant improvements were found in terms of psychological wellbeing, as well as in the decision making capacity, assertiveness and resistance to peer pressure. The improvements found in fundamental aspects of mental health and the high levels of satisfaction and involvement in the target group, leads one to reflect on the importance of giving continuity to interventions of this nature with this vulnerable population group.
Public Knowledge and Perceptions on Family Foster Care: Contributes to the Development of Foster Care in Portugal

Thursday, 4th October @ 12:00: Foster Care System Needs (Venue: Ribeira I)

Prof. Mariana Negrão (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Dr. Marina Moreira (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. Lurdes Veríssimo (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. Elisa Veiga (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa)

Family foster care is a common child protection measure in Europe. Research in the last decades underlines its adjustment to children's needs of a family environment, relational proximity and developmental stimuli. However, in Portugal, only 3.2% of looked after children are included in family foster care, whilst the large majority remains in residential care facilities (ISS, 2016). In 2015, an alteration of the Portuguese child protection law made clear the preference for family foster care, especially when placing children under six years old in out of home care (Decreto- Lei 142/2015, artigo 46º). However, this legislative alteration calls for profound transformations in the way to promote and develop this measure, still very fragile in terms of awareness campaigns, recruitment, selection, training and monitoring of families (Delgado, Lopez, Carvalho & Del Valle, 2015).

Beyond many complex political, legislative and financial factors, the ability to promote family foster care may also depend on the knowledge and perceptions on this matter from the public. The main goal of this study was to analyze public knowledge and perceptions of family foster care of Portuguese citizens. More specifically the present study aimed to: (a) describe the knowledge about foster care measures, (b) capture the perception of positive effects and risks of family foster care, (c) describe perceived motivations, conditions and obstacles to family foster care, (d) know the (un)availability to become foster family and the reasons why (not).

270 Portuguese citizens, from 18 to 65 years old, answered the Perceptions of Foster Care Questionnaire (Negrão, Veiga, Veríssimo & Moreira, 2017).

Main results show little public knowledge of foster care reality, but a favorable attitude towards family foster care and high availability to foster a child. Results also reveal the importance of relations as a main factor to ponder when deciding about family foster care: the importance of relational and affective qualities of families who foster, the added value of the development of healthy family relations in foster families (against residential care), but also the concern of the later relational disruptions as justifications of those who prefer residential care as a response to child endangerment. Lastly, results put in evidence some themes that fracture public opinion, as the importance of the financial retribution for the fostering services, or the importance of the contact between foster families and biological families.

Although not conducted with a representative sample, this study is, to our knowledge, the only that reports public perceptions of family foster care in Portugal. Thus, it can produce valuable insights in terms of awareness raising about conditions needed to expand family foster care in Portugal. Discussion will emphasize these implications of results towards the development of the family foster care measure in Portugal.
Permanency Legislations for Children Placed in Family Foster Care in England, Norway, Portugal, and The Netherlands

Thursday, 4th October @ 12:15: Foster Care System Needs (Venue: Ribeira I)

Ms. Anne Steenbakkers (University of Groningen), Ms. Ida Bruheim Jensen (University of Stavanger), Ms. Vania Salvador Pinto (University of Oxford)

Objectives

When children are placed in family foster care, planning for care provision and permanency are at the centre of the decision making process. Research has shown the relevance of permanency, since it contributes to the development and well-being of children, and promotes a sense of belonging (Biehal, 2010). There are several ways in which permanency for children can be reached, namely continuation in care, reunification, guardianship or adoption. Child protection legislations give an indication of how permanency is conceptualised in a country, by determining what permanency solutions are available and which are preferred. The aim of this study is to compare family foster care legislations in England, Norway, Portugal, and The Netherlands. According to Hantrais (2004), these countries reflect different welfare regimes, meaning they have different understandings of family and state responsibility in family life and the best interests of the child.

Methods

In this study, by following Mill's method (1843), we explored whether these competing orientations relate to how permanency is interpreted into national child protection legislations, and if countries' differences or similarities regarding the notion of permanency can be explained by welfare regime characteristics. Acknowledging that the notion of permanency is not clearly framed in the legal documents of the different countries, a context analysis of the legislation documents was conducted based on proxy concepts such as reasons for children's removal, placement aim, and aspects of the care plan revision. Secondly, the relevance given to long term placement, guardianship, adoption, and family reunification was explored.

Results

The findings illustrate the differences and similarities between the four countries and how these relate to their welfare regime. Furthermore, the findings are discussed taking into account national statistics and relevant research in the field, allowing reflection on the concordance between welfare regimes, legislations, practices, and the rights that the children have in each of these countries.

Conclusion

This study has contributed to a better understanding of each country's welfare regime and provided a reflection of what each regime could learn from each other regarding the notion of permanency in family foster care.
Children for Sale: The Unexpected Cost of Purchasing Temporary Out-of-Home Placements in Australia

Thursday, 4th October @ 12:30: Foster Care System Needs (Venue: Ribeira I)

Ms. Jenna Meiksans (Australian Centre for Child Protection, University of South Australia), Prof. Fiona Arney (Australian Centre for Child Protection, University of South Australia)

Background

Many recent inquiries into child protection systems in Australia have been conducted to examine what is essentially an out of home care sector in crisis, revealing that some children in out of home care tragically continue to have unmet needs. The limited availability of foster and kinship care placements that can meet the needs of children has led to several Australian jurisdictions purchasing emergency or temporary accommodation for children through commercial arrangements in a search for solutions to this problem. Intended for short-term care only, these purchased temporary arrangements have become increasingly relied upon as permanent solutions, leaving children and young people languishing in placements not designed to meet their physical and psychosocial needs.

Objectives

Drawing upon a review of the findings of recent inquiries and reports, this paper aims to examine and discuss the consequences of the increasing reliance upon purchased models of out of home care in Australia, and the implications for international jurisdictions seeking similar solutions to limited placement availability for children and young people in out of home care.

Findings

The purchase of short-term out of home placements has had long-term consequences for children and young people in out of home care. Designed with the child’s best interests in mind, these arrangements are intended to provide children with a safe environment until they can be reunified with their families or until the most appropriate longer term placement can be identified.

In practice, these purchased arrangements, which include children being placed in hotel rooms or caravans and cared for by rotating workers with minimal specialist training, have deviated significantly from how they were designed to work. Model drift, coupled with increasing pressure on all parts of the child protection system, has seen these temporary solutions morph into accepted permanent care arrangements for children, with children spending an average of 157 days in emergency accommodation in South Australia, and some living in temporary arrangements for years. In addition, the procurement process means that the right to provide temporary care may be sold to the most competitive bidder, as opposed to the care provider best able to meet the child’s needs.

The consequences of this include children being cared for in unsuitable environments, without the appropriate standards, monitoring or legislative provisions in place to ensure that they are cared for in the way that meets their needs. The difficulty placing children with highly complex needs means that it is often the children with the most complex needs placed this way, in the most uncertain placements and with the least experienced caregivers.

The reliance upon these arrangements has the potential to further diminish the capacity to place children in foster and kinship care – worsening the very problem they were designed to overcome.

Implications

The creation of a market for temporary care in Australia has had unexpected consequences for the long-term safety and wellbeing of children in out of home care. Reliance upon purchased models of care does not focus on
the long-term best interests of the child, but takes a crisis-driven response that focuses on the child's immediate safety. Urgent and innovative solutions are required to overcome the short-term problems facing out of home care without sacrificing the child's best interests.
The Challenges of Designing a Feasibility Study of Low Cost Home Based Interventions in Family Foster Care

Thursday, 4th October @ 12:45: Foster Care System Needs (Venue: Ribeira I)

Dr. Siddhartha Baviskar (University College Copenhagen), Dr. Morten Hulvej Rod (National Research Centre for Disadvantaged Children and Youth), Dr. Sofie Danneskiold-Samsøe (University College Copenhagen), Dr. Kresta Sørensen (University College Copenhagen), Dr. Freya Semanda (University College Absalon), Dr. Nina Madsen Sjoe (External Consultant)

Objectives
It is well documented that children placed in out-of-home care in Denmark perform poorly on a wide range of short-term and long-term outcomes compared to other children. This paper describes the core components of an innovative project that will attempt to address some of the major weaknesses of previous interventions and which, if successful, will be rolled out across foster care families nationwide. The paper also discusses a range of issues uncovered in the project’s first phase that are of relevance to child care professionals across the world.

[Method]
Designed as a four year feasibility study, the €2.3 million project aims at improving the wellbeing and educational outcomes of children in family foster care through two elements: a) systematic and regular documentation of these outcomes by the foster family coupled with b) a catalogue of interventions that the foster family itself can implement with a minimum of external professional support. These two elements constitute the project's infrastructure, which has a number of unique characteristics. First, it will be anchored in the foster family. Second, it will be responsive both to the interests of major actors and interest groups in the field and the requirements of the legal framework of child care. Third, it will make use of an existing digital platform used by two-thirds of the country's municipalities.

[Results]
We start by systematically documenting the scientific, institutional and juridical issues raised by the project’s complexity. Some central questions we examine are: What valid and reliable routine outcome measurement tools exist that are easy and quick to use, relatively cheap and sufficiently sensitive to capture change in relevant dimensions of wellbeing? How does one identify or develop a set of low cost, home based, easy to implement interventions requiring a minimum of external professional support? What factors need to be addressed to ensure the active cooperation of the project participants – foster children and their families, municipal case-workers and consultants – and the support of key interest groups? Perhaps most important, how does one resolve the potential tension between the stringent demands of evidence-based interventions and the need to ensure that the project infrastructure is meaningful to the foster family? Our findings will be disseminated through a range of channels including systematic reviews and will feed directly into the pretest phase and large scale trial phase of the infrastructure.

[Conclusions]
The project infrastructure and its implementation are of relevance to professionals in the field grappling with the enduring challenge of ensuring the scientific integrity and sustainability of interventions aimed at improving the lives of children in foster care.
Economic Causes and Consequences of Foster Parenting - Evidence from Denmark

Thursday, 4th October @ 13:00: Foster Care System Needs (Venue: Ribeira I)

Ms. Petra Gram Cavalca (University of Copenhagen)

The recruitment and retention of skilled foster parents is crucial to ensure that the most disadvantaged children in our societies are given the best possible chances to succeed in life. In spite of this, surprisingly little is known about foster parents, who they are and how they make economic decisions. This paper contributes with evidence on the decision-making of foster families on both the extensive and intensive margin of labor supply.

I present a simple, static model, describing foster parents' decision-making. Testing the model predictions against rich individual-level data provides a new understanding of how foster parents differ from other families and how they adapt to the economic circumstances of the foster care market. Using propensity score matching and exploiting the longitudinal dimension of the data to construct an event-study analysis, I show that regular labor market income decreases drastically for families as they enter the foster care market, but that this decrease is more than set off by the increase in foster care compensation, resulting in a net increase in available household income.
Introduction
The concept of empowerment is a multi-level and complex concept. It consists of individual, organizational and community empowerment. Each level consists of various elements such as leadership, social support, alliance building and implementing community actions. The literature is not clear on how these levels and elements influence each other. Therefore, a further conceptualization of the concept of empowerment is needed. A systematic literature review was executed on the organizational level using the model of Organizational Empowerment (OE) as a starting point. OE consists of three components: intra-, inter- and extra-organizational empowerment and refers to ‘organizational efforts that generate individual empowerment among employees and organizational effectiveness needed for goal achievement’ (Peterson and Zimmerman, 2004, p.130). Since the OE model was presented no systematic review has been performed.

Objectives
We reviewed the OE literature from 2004 through 2018. By gaining an overview of antecedents that influence OE, as well as the consequences of OE and the relationships between the different characteristics, we aim to further conceptualize OE and identify recommendations for future research. By doing so, this presentation contributes to the knowledge on the organizational dynamics that influence empowerment, which is useful for professionals, leaders in organizations, researchers and educators in the field of human service organizations.

Method
We searched for articles published between 1 January 2004 and 1 March 2018 in Google Scholar. We focused on articles that cited Peterson and Zimmerman’s (2004) original model. The search resulted in 305 articles. We included full text, peer-reviewed English, articles that specifically studied characteristics and components of OE and that were of a theoretical or empirical nature. In total, we extracted data from 22 articles.

Results
The literature review reveals that several processes contribute to the development of OE. For instance, findings suggest that linkages between groups in an organization play a key role in increasing empowerment. The review also confirmed Peterson and Zimmerman’s (2004) statements that empowering leadership and social support increase organizational empowerment. We found additional processes that enrich the model. For example, the literature review revealed that team empowerment increases OE. Also, the review revealed that empowerment on the intra- and inter-organizational level functions as a foundation for the extra-organizational level.

Conclusions
Fourteen years after the OE model was first presented, evidence has generally increased at the level of intra-organizational empowerment. Here, we found that organizational learning increases the viability of an organization. Findings on the level of inter-organizational empowerment reveal that the process of participation in alliance building is heavily influenced by the intraorganizational processes of the lead organization and that an alliance must contain several organizations with separate sets of empowered processes. On the extra-organizational level we found that organizations which are part of an alliance have the opportunity to influence public policy, although this influence is limited. The enrichments lead to a further developed model and positively contribute to enhancing OE. Further research is needed on all levels, but specifically on the intraorganizational outcomes, inter- and extra-organizational levels, since the review showed that evidence on these levels is limited.
Implementing Child Welfare Prevention Programs: Cultural and Organizational Challenges

Thursday, 4th October @ 12:15: Organisational Aspects Matter! (Venue: Ribeira II)

Prof. Anat Zeira (The Hebrew University of Jerusalem), Dr. Shani Oppenheim-weller (Hadassah Academic College)

Child welfare prevention programs are considered a key feature in reducing child abuse and neglect and in increasing child and family well-being. Many times, such programs that were developed to prevent child maltreatment in one context are being implemented in other cultures and different organizational contexts. Hence, administrators, program managers and professional workers are expected to implement programs that were designed and developed in a certain context and that had also been tested by researchers for their effectiveness in that same context. Several programs, and specifically those considered EBP (evidence-based program), include monitoring fidelity as a fundamental component. Implementing a program in a different context than the one for which it was originally developed could therefore potentially have an effect on its fidelity. While the vast majority of the child welfare prevention programs were designed and developed in English and for Anglo communities, many non-English speaking jurisdictions are struggling with implementing the programs in their local contexts. This presentation will present the challenges and describe the lessons gathered from the process of implementing SafeCare® in Israel. SafeCare® is a structured manualized home-based EBP that was developed in the USA and is currently practiced internationally. SafeCare® was designed to prevent child abuse and neglect and to improve parent-child interactions for children ages 5 and below. Wide-ranging research show effectiveness with reported parents from diverse backgrounds. Currently, SafeCare® is being implemented in several states in the USA (e.g., Oklahoma, Montana, Colorado, California, Georgia) as well as internationally (e.g., Australia, Belarus, Canada, Spain, United Kingdom, and Israel).

A small-scale qualitative feasibility study that includes interviews with six mothers and three social workers illustrates the process of importing interventions between contexts. This process involves two types of interrelated adaptations: procedural and content. That is adaptation of the procedures of implementing the intervention (e.g., how families are being recruited for the program), and adaptation of the contents of the intervention (e.g., adding or removing culturally associated topics). While each type of adaptation is required to better fit the needs and characteristics of the new context, they each stem from a different motivation and they each have a unique toll on the fidelity of the program. Yet, these two types of adaptation are interrelated: a procedure adaptation might lead to a content adaptation and vice versa.

Consequently, several challenges may emerge: how to culturally adapt a program without compromising its validity? how to engage front-line professionals in using a new program? how to build an organizational climate that will allow implementing new interventions that require on-going monitoring? and how to create a successful ‘fit’ between families’ characteristics and the intervention goals? Using examples from our study I discuss these challenges. For example, how social workers adapted the content of SafeCare® to fit the Israeli context; and what measures were taken in order to successfully carry out SafeCare® in Israel. Conclusions include future directions for improving international implementation of EBP programs such as SafeCare®. For example, having a better definition of potential populations for the program; and developing a different, yet objective, method to measure its effectiveness in a new context.
Strategies and Challenges for Sustaining Inter-Organizational Partnerships Around Children: Case of AIDES Initiative in Canada

Thursday, 4th October @ 12:30: Organisational Aspects Matter! (Venue: Ribeira II)

Prof. Claire Chamberland (Université de Montréal), Mrs. Danielle Lessard (Université de Montréal), Prof. Carl Lacharité (université du Québec à Trois-Rivières), Mrs. Catherine Jauzion-Graverolle (Université de Montréal)

The purpose of this presentation is to describe the measures taken to ensure the sustainability of a social innovation focused on responding to the developmental needs of vulnerable children in Québec (Canada). Since 2007, the AIDES – Intersectoral Action for Child Development and Welfare – initiative has developed an innovative intervention practice between caregivers and parents of neglected or at-risk children aged 0-12. The approach and tools promoted by AIDES take into account the needs of children while supporting concerted action and shared responsibility for their well-being. AIDES was inspired by work in the UK in the field of intervention with children in need. The project was initially implemented as part of a child neglect program supported by Québec's Ministry of Health and Social Services and was gradually extended to other programs aimed at youth in difficulty or with special needs. The AIDES program was conducted in three phases, the first two focusing on research and the third on sustainability. The latter represented the final implementation stage of this social innovation. The current challenge is therefore to consolidate and expand the adoption of AIDES in the various regions that have already received or wish to receive training in the ecosystem framework for the developmental needs of children and its associated tools, in order to ensure the viability of AIDES over time. Currently, 11 national and nearly 500 local facilitators have provided training in 14 of the 22 health and social service regions of Québec and two First Nations territories. The training is intended for social workers in prevention and protection and those working in community family organisations, daycares, and schools. In 2016, a committee of researchers and representatives of various organisations was set up to develop measures to maintain the AIDES practice, and to enhance it. The committee began by drawing on the work of Wolff (2010) in community psychology. Discussions quickly suggested that the practices promoted by AIDES were well established in the social service institutional network (prevention and protection) but to a lesser extent in the community organisation, daycare, and school networks. This observation led the AIDES team to consider the actor-network theory (Latour, 2005) to explore how these organisations can better adopt the approach and tools. The sustainability plan comprises 13 objectives, including access to training, availability of an intersectoral implementation guide, entrenchment of AIDES in the various programmes of three key ministries that oversee the main relevant intervention networks (Health and Social Services, Family, and Education), and interministerial actions to support collaborative interventions between the networks. The two models mentioned above, on which the sustainability strategies used in the project are based, will be presented along with the deliverables underlying the objectives. Recommendations for early involvement and consultation among actors in the various networks will be discussed.
Objectives
Do residential child care units cooperate with other organizations to deal with their challenges or do they act as isolated players? Residential care units can benefit from cooperation with other institutions, because in highly differentiated systems (e.g. social welfare services, health services and educational services) the necessity for cooperation to overcome the disadvantages of high specialisation increases (van Santen & Seckinger 2003; Seikkula & Arnkil 2007; Sydow 2009). Residential care units influence the life of young people not only for a short while but often for several years. They are the place children live their lives and are in charge for upbringing these children. One task the residential care units have to manage is to connect the children with the real world outside the residential care unit. One way to do this is to cooperate with other professional organizations which are important for children and their families (e.g. child welfare services, schools, health services, organization which provides vocational trainings or leisure time activities. 

In this presentation the results of empirical tests to the following three hypotheses are presented:
1) The cooperative networks of residential care units have become more diverse in the last 15 years
2) The focus on needs of children which causes a separation from the birth family has changed over time. This is mirrored in the cooperative relationships of the residential care units.
3) The quality of the cooperative relations changes with time. The longer cooperation partners work together, the higher the quality of cooperation becomes. With the duration of cooperation trust is growing and the knowledge about the partner rises. Both, duration of cooperation and knowledge about the others, influence the quality of cooperation in a positive way.

Methods
The hypotheses are tested on the basis of four waves of a nationwide survey of residential care units in Germany. The research project “Child and Youth Welfare Services and social Changes” at the German Youth Institute undertakes a periodic survey of residential care units in Germany. The results presented are based on the results of the waves in the years 2001 (n=363), 2004 (n=405), 2009 (n=363) und 2013 (n=410).

Results
1) The comparison over time shows an increase of the average number of cooperative partners per residential care unit.
2) The example of the discussion about the effects on children having parents with mental health problems show that residential care units orientate their professional networks along current discourses.
3) The ratings of the quality of cooperation improve over time for a lot of partners of residential care units.

Conclusions
The results show that residential care units are well connected with other professional institutions. They are – in respect to the number of cooperative actions – no isolated places and they offer the possibilities for social contacts for the children living there. In spite of this, the social networks of children living in residential care
units are still smaller as the social networks of children living with their families (Nestmann et al 2008). Here improvements are still necessary. Residential care units enlarge more or less promptly their professional networks as new insights in needs of families are available. The better ratings for partners with whom the residential care units work together for a long time support the insight that residential care units can profit from investments in partnerships with other institutions. But they have to face a lot of challenges (e.g. van Santen & Seckinger 2005; Dittmann & Raabe 2018)
Marketing Residential Care

Thursday, 4th October @ 13:00: Organisational Aspects Matter! (Venue: Ribeira II)

Prof. Tommy Lundström (Department of social work, Stockholm university), Prof. Gabrielle Meagher (Department of social work, Stockholm university), Prof. Marie Saltnäs (Department of social work, Stockholm university), Dr. Emelie Shanks (Department of social work, Stockholm university), Dr. Stefan Wiklund (Department of social work, Stockholm university)

The field of residential care for children and youth in Sweden has during recent decades been subjected to extensive change and has by today become quite a turbulent market. One prominent tendency during the last three decades has been the increased influx of for-profit providers, another the dramatic expansion of the field in later years.

Unlike on most markets, it is not the consumer that chooses or purchases the service on the residential care market. Rather, it is the municipalities that buy the care on behalf of the end user. The purchase decisions are made within a system formally governed by a mix of professional, political, bureaucratic and market norms and procedures, but also in accordance with procurement requirements decided by national and local politicians and administered by local bureaucrats. In order to be accepted, noticed and chosen within this system, residential care companies engage in different forms of activities in which they represent themselves. The aim of this paper is to analyse the residential care companies' opportunities to self-represent and market their services, and to analyse the content of such representations/marketing. We attempt both to give a broad overview over the forums in which the opportunities for self-representation arise, as well as to discuss the content of self-representation in the different forums. Finally, we will approach the implications of the self-representation/marketing for social workers in the child protection services who, in the end, are responsible for choosing residential care together with their clients.

In short, three significant forums for self-representations/marketing may be discerned: 1) To formally enter the market of residential care, all private companies must get a licence issued by the state. Gaining a licence is a formalised procedure, which entails submitting a completed application form. 2) After licencing, the residential care companies are likely to engage in activities granting them an entry to the formally organized market, which is regulated by the Public Procurement Act and often organised through framework agreements. When participating in the municipalities' procedures for signing such agreements, the companies are given the opportunities to describe their services in tender documents. 3) Some municipalities lack framework agreements and in addition, many municipalities with framework agreement have stipulated options to purchase outside the agreement. These circumstances give rise to a spot market in which purchases are made outside the formal arrangements. In order to be chosen on the spot market, the companies engage a number of marketing/profiling activities such as creating company web-sites, getting listed in web intermediates' contact areas for suppliers and buyers, holding courses and conferences, marketing in journals and trade fairs, merchandising, informal interactions possible purchasers etc.

The different forums for self-representation are associated with different levels of structure and pre-definition, as well as different levels of personal contact between providers and purchasers. This means a continuum in how much control providers have over the elements, tone and message of their self-representations/marketing, which is connected to different benefits and risks for the companies. In addition, the self-representation is directed to – and reach – different actors. These variations have implications for the content of the self-representation. As a general rule however, the self-representation/marketing that reach the social workers rarely reveal much information regarding important quality aspects such as such as staff/child ratio, educational level of the staff, etc. Hence, the social workers have limited possibilities to assess and compare different residential care settings based on such aspects, which makes the field of residential care for children difficult to overview and poses significant challenges in making informed choices on behalf of the clients.
Abstract:

Introduction: There seems to be an increase in the use of standardized programs in child welfare services (CWS), which may possibly restrict the use of professional discretion among CWS workers. This represents a change in the field of social work, which may influence professional practice and professional role of the social worker. Standardized programs have been criticized for undermining professional work, whereas others argue that it strengthens the quality of professional work. However, there is a lack of more concrete knowledge on in what way standardizations influence professional work.

Objectives: In an ongoing study, we critically examine how standardized tools are adapted into Child Welfare practice and how it influence professional CWS work. In this presentation, we will focus on the CWS workers experiences of using the Norwegian assessment tool (‘Kvello’), in which assessing risk- and protection factors are key elements of the program. Additionally, how the tool influence their role.

Method: The study has a case study design. In the presentation, we draw on semi-structured interviews with 22 frontline workers and 6 supervisors in two child welfare offices. Key theme in the interviews is CWS workers experiences using standardized assessment tools in their daily work. Data will be analyzed using qualitative content analysis.

Results: Preliminary findings suggest that standardized programs may increase the social worker’s professional skills in expressing their knowledge, thus granting them community membership. Conversely, managing and analyzing information is found to be challenging, in addition the professionals see a need for making adjustments of the tool. It also seems that such approaches may represent a change of responsibility, from the professional to the standardize framework. Both when negotiating for meaning and in their reasoning in decision-making.

Conclusion: Based on these findings, we argue that the social workers find the standardize assessment tools supportive to their professional role and in their work, including in the decision-making process. Furthermore, there seem to be a tokenism in the use of such tool, which limit the restricted impact such tools may have on professional discretion. Practical implications of these findings will be discussed.

Keywords: Knowledge-based practice, decision-making, standardization, social work, professionalism
Child Welfare and Protection (CWP) has been subjected to many reforms. These reforms are influenced by a changing societal environment towards (i) managerialism, in which increasing efficiency became a primary objective and (ii) risk-reduction, in which society attempts to prevent young children from harm by any means necessary.

In order to meet the challenges of this changing environment and the goals that are attached to it, governments worldwide are keen to invest in decision-making and assessment tools. These governments believe that these tools will solve a wide range of economic and social problems by creating a more objective, rational and transparent CWP practice where the needs of children and their families are being met in a responsive way. Gillingham and Graham (2016) argue that the implementation of decision-making and assessment tools has made the daily work of practitioners visible in ways that social workers in the 1970s and 1980s would have find unimaginable.

In this presentation we draw on results of an empirical study in which we performed qualitative semi-structured interviews with front line practitioners which have to evaluate and interpret the content of a decision-making and assessment tool in order to assign the appropriate help as well as with local managers who are responsible for implementing the decision-making and assessment tools in their organisation.

The research took place in Flanders, the Dutch speaking part of Belgium. Flanders is a compelling case as the Flemish CWP system has recently been restructured in which various decision-making and assessment tools were implemented as a way forward to a more efficient, effective and above all transparent CWP system.

The results show how decision-making and assessment tools are capable of increasing transparency since (i) the government now has the chance to gain a better insight into areas of concern; (ii) the tools allows the views of all actors involved to be discussed and creates a bigger picture of all decisions made, avoiding tunnel vision and (iii) the tool can be filled in together with the client, which inhibits the development of hidden agendas from practitioners towards clients.

However, at the same time, our findings also reveal how decision-making and assessment tools equally make the daily practice invisible in ways that social workers and governments in the twenty-first century would find unimaginable. Our findings therefore show a complex struggle in which practitioners show how decision-making and assessment tools are capable of increasing transparency while hindering the creation of transparency at the same time. In doing so, the study highlights the complexity and strain embedded in using these tools to develop transparent social work. However, we do not argue that these tools are incapable of making certain actions visible, but rather that the notion that these tools have made the daily work ‘visible in ways that social workers in the 1970s and much of the 1980s would find unimaginable’ cannot be taken for granted.
Professional Judgement and Legitimacy in Leadership in Child Protection Services

Thursday, 4th October @ 12:30: Using Assessment Tools in Decision-Making (Venue: S. João)

Prof. Kjell Aage Gotvassli (Nord university), Ms. Torill Moe (RKBU/NTNU)

Background
Good quality assessments have a significant role to play in contributing to better outcome for children in need for protection, so it is important to understand how the quality of the assessments can be improved (Samsonsen & Turney 2016, p. 113; Gotvassli & Moe, 2014, p. 41-58). With this background, we discuss what support the best practice for making good quality assessments. The question is how to improve the quality of professional judgements in order to strengthen the legitimacy of decisions that are taken.

Objectives/research questions
Our starting point is the debate concerning use of professional judgement versus use of standardized assessments framework. We wish to shed light on into the leadership mechanisms used by child-protection service leaders to improve the quality of professional judgements in order to strengthen the legitimacy - to different stakeholders - of decisions that are taken.

Research question: Which leadership mechanisms do child-protection service leaders use to improve the quality in use of professional judgement, in order to strengthen the legitimacy of decisions that are taken?

Theories and concepts
We look at the consent of tame or wicked problems (Devaney & Pratt, 2009) to discuss how the situation is being framed.

Tame problems have a clear indication of good or bad solutions, and we can find good solutions by searching for indications of the problem. Wicked problems are complex, they can have many solutions and the solutions can be hard to find. Framing the situation as a tame problem will often lead to use of structured assessments. If the situation is seen as a wicked problem, it calls for sensemaking and processing of information from different sources, to form a professional judgement.

Decisions taken by a child-protection services leader will often have an impact on many stakeholders/persons (Cyert & March, 1992) and may be contested. It is vital for the child-protection services' legitimacy (Suchmann, 1995) that such decisions can be accounted for and that a professional and sensible justification can be presented for them.

In discussion of to make better decisions we use Molanders (2013, p. 44 – 54) terms structural mechanisms (forms, regulations..)and epistemological mechanisms (motivation, coaching, knowledge creation...). Structural mechanisms restrict the scope for judgement and/or place restrictions on the behavior of an individual who has the authority to make judgements, while epistemological mechanisms are intended to improve the basis for and the quality of the reasoning that leads to assessments and decisions within the individual's discretion.

Methods
The empirical basis for our research consists of 2 parts:
A group study looking at various aspects of the exercise of professional judgement in child-protection leadership.
Interview with six child-protection service leaders in mid-Norway

Result and discussion
Our study shows that use of professional judgment must been seen in shed of how complex the judgment situation is. Most of the problems are what we called Wicked Problems. They are hard to define, they are complex, they can have many solutions and the solutions can be hard to find, and a variety of interpretations and responses can be identified. If the situation is seen as a Wicked Problem, it calls for sensemaking (Weick, 1995) and processing of information from different sources, to form a professional judgement. Sound professional judge-
ment supported by structural and epistemic mechanisms, and purposive use of assessments tools/measures when appropriate, can help practitioners reach good quality decisions that calls for legitimacy. Our findings from the study described indicate that assessment practice is as much a practice-moral activity as a technical-rational one. It is both a head and heart activity.
Evaluating the Quality of Social Work Supervision in UK Children’s Services: Comparing Self-Report and Independent Observation

Thursday, 4th October @ 12:45: Using Assessment Tools in Decision-Making (Venue: S. João)

Ms. Munira Khan (University of Bedfordshire), Ms. Fiona Newlands (University of Bedfordshire), Dr. David Wilkins (Cardiff University)

Introduction
Supervision is widely considered to be an essential form of support for good social work practice and in the UK, as elsewhere, social workers employed by the state in child welfare services are required to have regular supervision (Tsui, 2004). There is reasonably good evidence to support the claim that good supervision helps improve worker-related outcomes, including self-efficacy, confidence, stress levels and retention in the workforce (Kadushin and Harkness, 2014). However, there is much debate over what constitutes good supervision in specific contexts, how different forms of supervision can support good social work practice and how supervision might influence outcomes for people who use services.

Measuring the relationship between these complex phenomena is made more difficult by the absence of reliable and valid evaluative measures, particularly in relation to supervision. Many studies and much informal analysis of supervision relies on self-report (Davys et al., 2017), yet there are well known limitations with this method. As part of a larger attempt to develop a reliable and valid framework of analysis for supervision within UK children’s services, we became interested in how self-report feedback would compare with research-led assessment.

Our research questions were:

• Using an existing (and still developing) supervision skills framework developed for use in UK child welfare services, can we reliably assess the skills used by managers in simulated sessions of supervision?
• Using a self-report questionnaire derived from the same framework, how would social workers assess the quality of their supervision?
• How would results from the two methods compare?

Method
The study was undertaken in one outer London local authority with twelve managers and nineteen social workers. We observed twelve social work supervisors in a simulated session of supervision, offering support and guidance to an actor playing the part of an inexperienced social worker facing a casework-related crisis. These sessions were analysed by a team of researchers using a bespoke skills-based coding framework. In addition, nineteen social workers completed a self-report questionnaire about their general experiences of being supervised by the same group of managers.

Results
Our analysis demonstrates a marked difference in the scores given by the research team in relation to the simulated observations and those given by social workers in relation to their actual experiences of supervision. According to the researcher-led analysis, the supervisors demonstrated relatively low levels of skill and there were low levels of correlation between different skills. According to the questionnaire data, supervisors had relatively high levels of skill and there were high levels of correlation between different skills.

Conclusion
The results also indicate that while self-report measures of supervision may provide a helpful way of evaluating the quality of the supervisor-supervisee relationship, they may be less helpful for evaluating the specific skills used by supervisors.
The significant differences between the two datasets suggest a number of different-but-plausible explanations. The next steps for the development of the coding framework are (i) to improve reliability, (ii) to apply the framework to analysis of real, rather than simulated, sessions of supervision and (iii) to relate measurements of supervision using this framework with levels of practice skill and family outcomes.
Continuity of Children Placed in Out-of-Home Care – Negotiations between Social Workers and Parents

Thursday, 4th October @ 13:00: Using Assessment Tools in Decision-Making (Venue: S. João)

Mrs. Anne-Dorthe Hestbæk (VIVE - The Danish Center for Social Science Research), Ms. Kirstine Karmsteen (VIVE - The Danish Center for Social Science Research)

Research from the latest decades has provided unambiguous evidence that continuity is in the best interest of the child. Thus, the UN Convention of the Rights of the Child (Article 20) underlines that states must account for the desirability of continuity in a child’s upbringing, if he or she cannot remain living with the parents. However, we also know that many children in out-of-home care are exposed to unstable life conditions, for example entering, exiting, and re-entering care, care break downs, multiple school changes etc.

In response, the Danish Government introduced a Continuity Reform that came into force in 2009. The reform included several new paragraphs, of which two might be assessed as being of a very intrusive character, viewed from the parents’ perspective. The first paragraph allows the local Child and Youth Committee to decide - given certain conditions - that a young child 0-1 year old can be placed for the next three years without any possibility of re-consideration in the Committee. The other intrusive paragraph allows the Child and Youth Committee to decide that a child must stay in out-of-home care for the rest of his or hers upbringing. For this paragraph to come in to force, the child must have been placed in care for at least three years.

The objective of this presentation is to pass on highlights from the evaluation of the Continuity Reform. The evaluation aims at examining, first, to which extent the local governments use the paragraphs. Second, the evaluation examines the dynamics in the relation between caseworker and parents with a child in care, when the caseworker introduces the possibility of “holding back” the child in care without consent, which is the focus of this presentation.

Methodologically, we have carried through long, in-depth interviews with parents as well as with caseworkers to provide knowledge of these questions, combined with analyses on national administrative data as concerns the frequency with which the local governments use the paragraphs.

In our presentation we will highlight the results on the main experiences from both interviewed parts – the parents’ perspective and the case workers’ perspective. How do parents react, and why do they often end up opposing cooperation, thereby putting the child in an unsecure position with loyalty conflicts threatening continuity? And why do caseworkers refrain from using the paragraphs, even when a professional assessment tells that it is in the best interest of the child to stay in the foster family? Our analysis yields new perspectives and conclusions on the barriers for applying intrusive interventions that on one hand are in the best interest of the child, but for obvious reasons on the other hand can be conceived as a threat to the parenthood of parents in vulnerable positions. Also, we end up with a set of recommendations to support social work in cases characterized by high levels of conflict between parents and caseworkers, aiming at increasing continuity and at protecting the best interest of the child.
Research from a host of countries, spanning several decades, has consistently reported that children/youth in out-of-home care (OHC) have radically higher rates of somatic, dental and mental health problems/health care needs than other children. Therefore the research community (and others) have repeatedly argued for the establishment of systematic routines for health assessments and health monitoring of children/youth in OHC.

In this keynote, Bo Vinnerljung a) reports the results from a survey of how 24 European countries have organized health care for their children in OHC b) discusses promising examples of good practice, using results from a large literature review as background.
Let’s Get This Straight - We Aren’t: Building Competency Toward Working With LGBTQ Youth in Schools and Residential Settings

Thursday, 4th October @ 15:00: Reviewing Specific Needs in Child Welfare (Venue: Arquivo)

*Dr. Gerald Mallon (Hunter College in New York City)*

By virtue of the fact that they are an often-invisible population or in some cases because they are perceived as being “different,” lesbian, gay, bisexual, transgender and questioning (LGBTQ) children and adolescents are at high risk for neglect, abuse and violence within their own family systems, in schools and in residential settings. In case after case, self-identified LGBTQ children and adolescents, and those perceived to be because of gender non-conforming behaviors or mannerisms, reported that they were the victims of abuse, neglect, and violence at the hands of their own families and in many cases within the very schools and child welfare systems that are designed to care for and protect them, largely due to the fact that most professionals are not trained to competently care for them.

Drawing on insights gained from clinical practice, research, and program development experiences with LGBTQ children, youth, and their families, this presentation offers a conceptual framework for examining, understanding and intervening with LGBTQ children, youth, and families as one works toward building professional competency. Guidelines for educators and child welfare practitioners concerned about how and in what ways can they work to build competency with LGBTQ children and youth will also be presented.
Attachment Disordered Behaviour in Institutionally Reared Children: The Putative Role of Epigenetic Mechanisms

Dr. Ana Mesquita (University of Minho, School of Psychology), Prof. Jay Belsky (University of California at Davis), Dr. Adriana Sampaio (University of Minho, School of Psychology), Dr. Joana Baptista (University of Minho, School of Psychology), Dr. Maria Torres (Grupo de Medicina Xenomica, Universidade de Santiago de Compostela, Centro Nacional de Genotipado—Plataforma de Recursos Biomoleculares y Bioinformaticos—Instituto de Salud Carlos III (CeGen-PRB2-ISCIII)), Prof. Isabel Soares (School of Psychology, University of Minho), Prof. Angel Carracedo (Grupo de Medicina Xenomica, Universidade de Santiago de Compostela, Centro Nacional de Genotipado—Plataforma de Recursos Biomoleculares y Bioinformaticos—Instituto de Salud Carlos III (CeGen-PRB2-ISCIII))

The institutionalization of children has long been regarded as a multidimensional deprivation experience due to the limited physical conditions of many institutions and the poor quality of care provided. The absence of individualized and responsive care, especially provided by consistent caregivers, are defining characteristics of these institutional settings, ones which add to and perhaps amplify the adverse effects of pre-institutional family rearing, including the development of attachment disordered behaviour (ADB) (Bakermans-Kranenburg et al., 2011).

What seems especially noteworthy is evidence that even when the quality of care and relational experiences improve—as a result of adoption or foster care—the disordered attachment behavior are often maintained (Rutter et al, 2007). Such enduring effects raise the possibility of biological programming induced by early life adverse experiences. Even if this is the case, what still remains to be elucidated is how exactly these developmentally influential experiences “get under the skin” and engender disturbances in attachment and the problematic developmental trajectories associated with them.

In fact, the field of epigenetics, concerned as it is with the dynamic interplay of genes and environment, offers a new and promising avenue of empirical inquiry that could illuminate biological processes by which institutionalization increases the risk to develop ADB and, thereby, problematic future functioning, especially in the social-emotional realm.

Thus in the present study we assessed twenty-five institutionalized children (6 (24%) girls) recruited in 13 Portuguese institutions, along with their institutional caregivers. Children were 37 to 70 months old (M = 57.2, SD = 11.3) at the time of assessment. Their age at admission to the institution varied from 7 to 61 months (M = 38.4; SD = 16.1), and remained institutionalized on average for almost 18 months. A group of twenty-four family-reared children (13 (54%) girls) aged between 48 and 76 months old (M = 58.9; SD= 7.1), with no history of institutionalization, was also recruited. The Disturbances of Attachment Interview (Smyke & Zeanah 1999) administered to each child's caregiver was scored for inhibited and indiscriminate behaviour assessment. DNA was extracted from saliva samples collected using OraGene 500 devices (DNA Genotek) and quantitative DNA methylation analysis of the Glucocorticoid receptor gene (NR3C1) was performed through EpiTyper technology and MassARRAY system (Agena Bioscience Inc).

In this study we found that institutionalized children presented lower levels of GR methylation when compared to children living with their biological family (t (38.5)= 2.40; p=0.021). Additionally, lower levels of GR methylation in three CpG units of the gene were associated with increased inhibited attachment disordered behaviour (r=−0.45; p=0.001; r=−0.48; p= 0.001; r= −0.38; p= 0.007).

Although GR methylation has been widely studied with regard to early adversity both in animals (Weaver et al., 2004) and humans (McGowan et al., 2009), this is the first study addressing the methylation levels of this gene in currently institutionalized children. Results will be discussed regarding the impact of the quality of early life
experiences on HPA axis regulation and its implication for ADB development and future psychopathology.
Attachment Security and Attachment Disorder Symptoms in Foster Children in Germany and Georgia

Thursday, 4th October @ 16:15: Attachment Disturbances in Residential and Foster Care: Research and Intervention (Venue: Arquivo)

Prof. Gottfried Spangler (University of Erlangen-Nuremberg), Ms. Nino Jorjadze (University of Erlangen-Nuremberg, Germany; Tbilisi University, Georgia), Dr. Ina Bovenschen (University of Erlangen-Nuremberg)

The main objective of our investigation is the development of attachment and attachment disorder symptoms in children raised in normal and adverse caregiving environments. Specifically, we are interested in attachment development of children placed in foster care after having experienced adverse environments at their biological homes or in institutions. Placement in foster care provides a significant change of the environment characterized by the availability of continuous and sensitive attachment caregivers and thus should provide an opportunity to form secure attachment relationships.

Findings from two studies conducted in Germany and Georgia will be reported: (1) a sample of German foster children with pre-experience of abuse and neglect (N=52) studied during the first year after placement in their foster family, (2) two samples of foster children in Georgia with pre-experiences of abuse and neglect, one with preceding institutional care (N=30) and one with preceding home care (N=30) as well as a control group of children being raised in their biological families. Data assessment included the assessment of attachment security and attachment disorder symptoms in children and quality of caregiving behavior in foster mothers, as well as additional risk factors.

The findings from the German foster children show that the children were able to form secure attachment relationships during the first year after placement with the foster children’s security scores being comparable to no-risk samples. Also similar to no-risk samples, foster parents’ sensitivity proved to be a significant predictor of attachment security. At the same time, there was a decline in inhibited attachment disorder symptoms as well as disinhibited social engagement disorder symptoms. First analyses from the Georgian samples revealed lower scores of attachment security and a higher prevalence of attachment disorder symptoms in both groups of foster care, compared to the control group. In still running analyses we will investigate the contribution of the Georgian foster parents’ caregiving behavior to attachment security and symptoms of attachment and social engagement disorder.
Observation of Inhibited Reactive Attachment Disorder Behaviors in School-Age Children

Thursday, 4th October @ 16:30: Attachment Disturbances in Residential and Foster Care: Research and Intervention (Venue: Arquivo)

Prof. Peter Zimmermann (Wuppertal University), Dr. Alexandra Iwanski (University of Wuppertal)

Although clearly defined, the criteria for the inhibited form of reactive attachment disorder are not always easy to observe, compared to the disinhibited form of RAD. Therefore, the aim of the present study was the development of observational situations and reliable observational criteria for inhibited attachment disordered behavior comparing children with RAD risk to non-clinical controls. The sample included 64 children aged 5-10 (mean age 7.9 years; 40% male) including 32 subjects who were at risk of developing or having attachment disorders (e.g. living in children's homes, having a history of social neglect, RAD diagnosis).

Children's attachment disorder behaviors were observed during emotion-eliciting dyadic interaction with the primary caregiver and an unknown adult. In both interactions, the adult was asked to lose the first game and win the second, so positive and negative emotions were elicited in the child. The observational coding system adapted and extended the ICD 10 and DSM-V criteria of inhibited and disinhibited attachment disordered symptoms to the specific situation. Caregiver report on RAD symptoms was assessed with the Relationship Problem Questionnaire (Minnis et al., 2002) and the Disturbances of Attachment Interview (Smyke & Zeanah, 1999). In addition, children's self-concept was assessed.

Children of the RAD risk group had higher scores in RAD as reported by caregivers in the RPQ (p<.001) and, the DAI (p<.001). In addition, they also had a higher frequency of RAD signs as observed in the dyadic interactions (p<.005). Moreover, RAD signs were significantly associated with a more negative self-concept. The study suggests that specific dyadic emotion-eliciting situations can be used to observe inhibited attachment disordered behaviors and make the symptoms observable in research and clinical practice.
There are currently over 70,000 looked after children in England, and of those 74% are cared for in foster placements. Looked after children are at significantly greater risk of experiencing mental, emotional and behavioural problems, including sub-optimal attachment patterns and increased rates of attachment disturbance. Despite this, access to children’s mental health services and therapeutic interventions is highly variable and children are often denied access to specialised services. Furthermore, many interventions to treat emotional or behavioural difficulties or to promote positive wellbeing and attachment have not been tested rigorously among looked after children. There is thus an urgent need for effective and cost-effective interventions to be developed and made available for this large group of highly vulnerable children. Video-Feedback to Promote Positive Parenting (VIPP) is an extensively evaluated and effective treatment for promoting sensitive parenting and increasing rates of secure attachment. With the guidance of experts in the field we intend to refine and optimise the VIPP–Foster Care (VIPP-FC) intervention for use in the context of children in foster care with Reactive Attachment Disorder (RAD) in the UK. The identification of children in foster care with RAD is possible by setting up the study with the support of local authorities (who act as corporate parents) to help us running our screening mechanism. We have now completed a series of case studies and the initial preparatory steps to begin a pilot randomised control trial. This process will allow us to determine a range of key feasibility parameters in preparation for a future full-scale trial of the effectiveness and cost-effectiveness of VIPP-FC for this population, as well as monitoring usual treatment. The aim of this presentation is two-fold: 1) to share the study set-up in the British context, obstacles faced, and lessons learned thus far; 2) to present preliminary findings from the case study series, particularly regarding screening measures. Analyses are underway.
PLANEA Program: Independent Life Skills Training for Children in Care

Thursday, 4th October @ 16:00: Equipping Young People for Their Transition to Adulthood from Care: Innovative Programs and Tools (Venue: Infante)

Mrs. Laura García-Alba (University of Oviedo), Mrs. Federica Gullo (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo)

Background: Transition to adulthood is considered a challenging period for all young people but becomes even more difficult for youths living in residential care homes. For this reason, one of the main challenges in child care is to provide them with support in key life areas (housing, earnings, qualifications, employment, etc.), a need that has been recently recognized by Spanish laws. However, the transition from the protective environment of children's homes to independent life requires a large array of skills in order to promote a successful adjustment to the new situation. As a consequence, there have been some training programs to develop this kind of skills, such as the Umbrella program. This program was designed as a book of activities and became an interesting proposal to work with teenagers in children's homes across different European countries since it was translated into six languages, including the Spanish version our team developed in 2006. Nevertheless, taking into account that young people can now be considered as digital natives, learning environments can benefit from the inclusion of new technologies to make learning more attractive and interesting for them. On that basis, our objective was to design a new program (PLANEA) to be used in residential child care with young people aged 14-18 to develop skills for independent life.

Methods: Program contents were updated and broadened taking into consideration the main challenges and tasks that most of young people could face in their everyday life as independent young adults today. In that sense, activities were created to be simple but significant, allowing youths to engage in a learning-by-doing experience. Contents were also designed to fit a digital layout in order to be completed in an online platform.

Results: The resulting set of contents was divided into 9 areas: health care, family and social relationships, studies, getting a job, money management, citizenship and identity, autonomy development, setting a home and personal growth. These areas are further divided into sections, whose number may vary from one area to another. The activities are designed to be chosen and completed in close partnership between the youth and their key social educator. Its participatory approach also promotes an active involvement of youths in their own skill development. The main feature of the program is that activities were implemented in an online platform (www.proyectoplanea.com) where youths can interact with their key social educator to complete them. This environment enables the intervention with the program to be flexible and hence tailored to each youth's case plan, as activities can be completed in different order depending on their individual needs. In addition, the PLANEA program can be used for group activities, creating experiences of collaboration.

Conclusions: PLANEA program comes as an innovative intervention tool to train independent life skills with youths in residential care homes and is currently being piloted in a region of Spain (Castilla-La Mancha). Our future prospects are to test the efficacy and efficiency of the program, including possible improvements spotted and to disseminate the program to other regions in the country.
Hooray! You are 18! For most young people, this is a fantastic event. Maturity, driving a car, voting, making your own choices. For young people with youth care experiences turning 18 means much more. Changing a place with supervision for complete independence. At first, party time, since they are allowed to make choices independently. Secondly, often a tragedy, since many bills and paperwork from official bodies are landing on the doormat….. In case there is a doormat*……. (*Note: unfortunately lots of careleavers end up homeless).

One stable factor is almost always present in the lives of young people. The mobile phone has become a loyal companion and young people are often 24 hours a day online. Young people themselves came up with the idea of developing an app where you can find information about everything that comes at you when you turn 18. A handy digital to-do-list is also part of the app so young people can easily check what they already did and what they still have to do. Careleaver and co-creator Michelle: “When I turned 18 I was still in high school. I had no idea what my rights were related grants, health care benefits or how I had to apply for those grants. My classmates and friends also knew little about it. Shortly thereafter I had to leave the institution and rent a room because I went to university. Fortunately I received some aftercare from a social worker who supported me on a voluntary base. Besides that I’m luckily quit talented in organizing things. I think it’s very important that young people are well informed about their rights and the things they have to organize. Kwikstart helps them to work towards an independent future”.

The app was an idea of young people and is made together with young people. During this presentation you get an insight in the application and the development process.
The Social Connections Tool: Measuring the Support Networks of Care Leavers in England

**Thursday, 4th October @ 16:30: Equipping Young People for Their Transition to Adulthood from Care: Innovative Programs and Tools (Venue: Infante)**

**Dr. Eran Melkman** (Rees Centre for Research in Fostering and Education, University of Oxford), **Dr. Mariela Neagu** (Rees Centre for Research in Fostering and Education, University of Oxford), **Dr. Lisa Holmes** (Rees Centre for Research in Fostering and Education, University of Oxford)

**Objectives:** Supportive connections throughout an individual's development are an important resilience factor related to improved socio-emotional well-being. This is particularly so for care-experienced young adults. Nonetheless, the removal from their home environment, frequent changes in their placement and schools and exit from care, often leave them with few long-lasting connections to rely on for support as they make the complex transition to adulthood. Internationally, child welfare agencies have recently increased efforts to strengthen support networks for young people in and leaving care. This paper aims to describe the development, initial pilot-testing and administration of the Social Connections Tool - Care Leaver version (SCT-CLV) devised to measure such efforts by assessing various attributes of the support networks available to care leavers aged 16 or over.

**Methods:** The SCT was developed as a research and practice tool as a part of a three-year evaluation of the UK-based Lifelong Links programme being implemented by the Family Rights Group. The programme aims to support the development of long-lasting support networks for young people in care and is being evaluated across seven local authorities in England. In three out of the seven participating local authorities the programme is also being implemented and evaluated among young people who have already left care. Drawing on social support literature, the tool includes measures of support network size and adequacy, tie strength and social strain, across seven domains of support. A pre-pilot test phase involved individual administration and focus groups with care-experienced young people. Subsequently, in March 2018, as a part of the first data collection wave, the tool will have been administered to all care leavers eligible for Lifelong Links (i.e., young people who had been looked after for at least 13 weeks which began after they reached the age of 14 and which ended after they were 16 years of age) in the three relevant local authorities. Further, administrative individual-level personal background, care educational and main activity characteristics will have also been collected.

**Results & Conclusions:** The paper will present initial findings gleaned from the SCT-CLV, its links to other domains of well-being, and discuss strategies for implementing the SCT-CLV and its potential as an evaluative and case planning tool in child welfare.
This presentation provides an overview of an eight-week intervention program that was designed to facilitate mutual support among youth in relation to the emotional demands of a discharge from care. This innovative approach was developed as a response to the inadequacies of life skills training alone to engage youth who were leaving care and to provide meaningful preparation for the transition out of placement.

It had been observed that despite intensive efforts to offer workshops and one on one support, not all youth in a given cohort of a large child welfare agency in Montreal were making use of these services. Perhaps more troubling was that a significant percentage was running away in the final months of their time in care, and seemed to experience the transition out of care as a significant psychological crisis. Many years earlier, Gordy-Levine (1990) had written that leaving care re-stimulates the losses associated with being placed, so that the transition out of placement represents “a time to mourn again” (p.1). In fact, in a subsequent study, this author analyzed accounts of care leavers who described leaving placement as a complex and difficult emotional process, with the greatest volatility and sadness experienced just prior to leaving (Mann-Feder, 2011).

The Program

The Movin’ On Group is a structured program that emphasizes voluntary participation, collective decision making and peer support. Two staff leaders act as facilitators, providing a permissive environment in which arts-based activities stimulate discussion of experiences of being placed and exploration of fears and hopes related to the future. These activities were formulated on the basis of Psychodynamic Theory, and are based on the assumption that a departure from care brings up unresolved issues related to loss and the reconciliation of a placement career with identity formation. The methodology of Movin’ On also aligns with Narrative Identity Theory that stresses the telling of stories as key to identity formation. The link to the program manual is provided in the reference section below.

Evaluation

The program has been implemented continuously since the late 90s, with over 20 cohorts of youth leaving care both in English and French agencies in Montreal. It was evaluated twice, in 1999 and in 2011, and results suggest that the program provides a positive and unique space for the validation of feelings and the creation of networks of mutual support for youth leaving care. Movin’ On is also experienced as an empowering intervention, where the youth participation is highly value. At the same time, agency staff acknowledge that shifting from their habitual directive role to that of a facilitator is unfamiliar and difficult, requiring additional training.
Evaluation of the Youth Villages Transitional Living Program

Thursday, 4th October @ 17:00: Equipping Young People for Their Transition to Adulthood from Care: Innovative Programs and Tools (Venue: Infante)

Prof. Mark Courtney (University of Chicago)

**Background**: The transition to adulthood is a critical and often trying time for young people generally. For youth who have spent time in foster care or the juvenile justice system, this transition is often particularly challenging (Institute on Medicine, 2014; Osgood, Foster, & Courtney, 2010). Yet, evidence of the effectiveness of interventions targeting these youth is lacking (Montgomery, Donkoh, & Underhill, 2006). This study evaluates the impact of the Youth Villages’ Transitional Living (TL) program on outcomes for young adults with a history in the foster care or juvenile justice system. TL provides intensive and individualized clinically focused and community-based case management, support, and counseling for eligible young adults. Over an average of nine months, youth receive support for education, housing, mental or physical health, employment, and life skills.

**Methods**: Program impacts were evaluated using a random assignment design. Eligible youth were between 18 and 24 years of age who had been in the custody of the child welfare and/or juvenile justice systems in the state of Tennessee for at least 365 days after age 14 or at least one day after age 17. Additional assessment was conducted to determine whether youth had the capacity to live independently with appropriate supports. Eligible individuals were assigned at random to a program group (n=788), which was offered TL services, or to a control group (n=534), which was provided with a list of social services available in the community. Baseline assessment of youth across key functional domains was obtained through a paper-and-pencil survey and impacts were assessed approximately one year after baseline via phone and in-person surveys of the youth. Follow-up surveys were completed by 1,114 of the 1,322 sample members representing a response rate of 84.3 percent (83.6 program group; 85.2 control group). The survey asked questions about targeted outcomes, including service receipt, educational attainment, employment and earnings, housing stability, economic wellbeing, social support, delinquency and criminal justice involvement, and health and safety. Intent-to-treat analyses were conducted to assess the impact of the program on these outcomes.

**Results**: The TL group received considerably more services than the control group across all domains of service receipt assessed (p < .05). TL had impacts on several outcomes (all differences significant at p < .05): 17% increase in earnings; decreased housing instability, including a 23% reduction in homelessness and a 19% reduction in couch surfing; decreased economic hardship, including a 22% reduction in the need to delay paying a bill to buy food and a 19% reduction in the inability to buy needed clothes or shoes; reduction in mental health problems (effect size = .16); and a 28% lower likelihood of being in a violent relationship. The program had no impacts on education, social support, or criminal behavior and justice system involvement.

**Conclusions**: The TL program is the first rigorously evaluated intervention to show impacts across multiple domains of functioning for youth formerly in state care. Future evaluations should assess the impact of TL in other policy contexts, particularly states that have extended foster care to age 21. The findings of the evaluation highlight the need to assess whether traditional models of case management used for minors in care are appropriate for young adults.
Building a Research Agenda for Reunification: Prognosis, Services, Compliance, and Support

Thursday, 4th October @ 16:00: Understanding Reunification from Care: Messages from Research, Policy and Practice (Venue: D. Luís)

Prof. Jill Berrick (University of California)

The research evidence about “what works” to support family reunification for children who have been separated to out-of-home care is remarkably thin. According to the California Evidence-Based Clearinghouse for Child Welfare, there are no programs “well-supported” by research evidence, and only one program is featured as “supported.” Some evidence suggests that parental “compliance” with a case plan is a better predictor of reunification than changed behavior. Yet every year, tens of thousands of children enter out-of-home care in the U.S. and other countries and social workers have little to offer that might provide assurances to parents that we “know” how to get their children home.

This presentation will lay out what is known about reunification programs for families, and what hints we might glean from the literature about the potential for developing a knowledge-based related to reunification prognosis, services, compliance, and support.
The Effects of Socioeconomic Vulnerability, Psychosocial Services and Social Service Spending on Family Reunification: A Multilevel Longitudinal Analysis

Thursday, 4th October @ 16:15: Understanding Reunification from Care: Messages from Research, Policy and Practice (Venue: D. Luis)

Dr. Tonino Esposito (Université de Montréal), Dr. Nico Trocmé (McGill University)

Over 200,000 children are investigated every year by Canadian child welfare authorities because of concerns related to child maltreatment and on any one day, approximately 62,000 children are living in out-of-home care. In the majority of these cases there is no immediate concern to the child's safety, rather the concerns relate to the well-being of a child living in difficult conditions. Labelled as neglect, emotional maltreatment, and exposure to violence or inappropriate punishment, these situations typically involve the toxic combination of families living in difficult socioeconomic conditions with limited access to resources, who struggle with difficulties related to potential issues from health problems, disability, addiction, or interpersonal conflict. While these types of problems are challenges for any family, families living in socioeconomically vulnerable conditions are less likely to have the resources needed to overcome these crises, which may impede the reunification of families with placed children. This study examines the extent to which socioeconomic vulnerability, psychosocial service consultations, and preventative social services spending impacts reunifying families.

This study uses a multilevel longitudinal research design that draws data from three sources: (1) province-wide administrative data from Quebec's child welfare agencies; (2) 2006 and 2011 Canadian Census data; and, (3) intra-province health and social services data. The final data set includes all children (N = 39,882) placed in out-of-home care for the first time between April 1, 2002 and March 31, 2013, and followed from their initial out-of-home placement. Multilevel hazard results indicate that socioeconomic vulnerability, controlling for psychosocial services and social services spending, contributes to the decreased likelihood of reunification. Specifically, socioeconomic vulnerability, psychosocial services and social services spending account for 24.0% of the variation in jurisdictional reunification for younger children less than 5 years of age, 12.5% for children age 5 to 11 years and 21.4% for older children age 12 to 17 years. These findings testify to the need for decision makers, funding agencies and child welfare agencies to expand efforts to ensure that jurisdictional resources are in place to reduce the impact of socioeconomic vulnerability on reunifying families.
Background and aims
Children who enter care are frequently from families who are disadvantaged economically, socially and emotionally. Such disadvantage often co-exists with other risk factors including a history of abuse as well as socio-cultural differences such as being from a minority or an Indigenous background where there can be additional issues such as social marginalisation or prejudice. Care systems can often compound these problems by exposing children to further loss and disruption of attachments or unstable placements, and often struggle in returning children home to parents experiencing a high burden of disadvantage and significant poverty. In this paper, we report the findings of an Australian study that examined longitudinal data to identify reasons for entry to care, trajectories in care and patterns of reunification and factors associated with returns.

Method and findings
Case-file reviews and placement tracking analyses were conducted for 502 children to identify predictors of reunification. Analytical techniques included cluster analysis and proportional hazards models to examine the reunification trajectories of different groups of children and families. Most reunifications were found to occur within 12 months. Poverty in the form of financial problems, poor housing habitability, and homelessness emerged as predictors of a lower probability of reunification, along with Indigenous status and family structure. The implications of these findings are discussed in terms of policies and practices that could influence the child, family and environmental characteristics associated with entry to care and reunification.

Implications for policy and practice
Given the consistent finding that parents often had inadequate housing and capacity to care for children, and were often affected by substance abuse problems and domestic violence, the results highlight the potential value of a number of policy and practice approaches: (a) the provision of well-maintained and suitable public housing; (b) outreach services that provide support to parents and as well as women affected by domestic violence, (c) the need for a triangulation of services across sectors that encompassed a ‘team around the family’ approach to address the fundamental needs and problems faced by the family at the time the child enters care; (d) the need for early intervention strategies that take a more proactive role in enhancing the economic and social ecologies of neighbourhoods which appear to have differentially high rates of child protection notifications and children in care; (e) commitment to investing in preventive and supportive services including community capacity building for Indigenous families and children.
The Reunification Partnership: Re-Focusing Foster Care on the Family

Thursday, 4th October @ 16:45: Understanding Reunification from Care: Messages from Research, Policy and Practice (Venue: D. Luís)

Mr. Leon Ankersmit (University of New South Wales)

In Australia, policy guiding child welfare and out-of-home care practice is increasingly focused on prevention, family preservation and reunification of children with their family of origin. Prior to reunification, foster carers offer children in out-of-home care a safe and nurturing substitute family, which often includes some interaction with the child’s birth family. Historically, out-of-home care practice has not focused on interaction between foster carers and birth families, to preserve the safety of out-of-home care placements and to enable foster carers to focus on the child. The prospect of family reunification shifts the focus from one of child protection to one of family support, as services and families work together to develop capacities and achieve successful family reunification. For foster carers working with reunification objectives, supporting the child with regard for their future family invites a similar re-focus to a more family inclusive model of foster care.

This paper examines the opportunities for collaborative working relationships between foster carers and birth parents, to facilitate placement outcomes including family reunification. It presents findings from recent research examining partnerships between parents and carers in out-of-home care, including how this working relationship is currently perceived and experienced by foster carers, parents and case managers, what factors contribute to positive and negative experiences of the relationship, and how the quality of this relationship is associated with outcomes in out-of-home care. The wellbeing of children in foster care is considered through the lens of this working relationship, from the perspectives of parents, carers and case managers. It finds that the relationship between foster carers and birth parents may be instrumental in contributing to outcomes in out-of-home care, especially when reunification is the placement goal. Factors that contribute to the development of collaborative relationships are discussed, as are strategies for practice that facilitate better working relationships in this context.
Using Research on Good Practice to Develop a Reunification Practice Framework

Thursday, 4th October @ 17:00: Understanding Reunification from Care: Messages from Research, Policy and Practice (Venue: D. Luis)

Prof. Elaine Farmer (University of Bristol)

Objectives

Whilst there has been considerable attention in research and practice to entry to care, foster care and adoption, until recently research on reunification in the UK has been limited. This lack of attention is paradoxical since return to parents from public care is not only the most likely permanence option for children, it is also much riskier for children than remaining in care.

Awareness of the poor outcomes of reunification led the Department for Education in England to fund a project by the University of Bristol and NSPCC. The objective of the project was to create, in partnership with local authorities, a research-informed Practice Framework for Reunification, to implement it and to evaluate how likely it was to improve reunification practice. It built on previous NSPCC guidance which had been tested in nine local authorities. The first part of the project was a literature review to inform the Practice Framework.

Methods

The literature review, which had a focus on good practice in reunification, examined international research from 2004 as well as literature reviews of earlier relevant research. The quality of the research was considered although not exposed to full critical appraisal, other than for the studies most relevant to current policy and practice in England. Search terms included reunification, family reunification, reunion, family reunion, return, return from care, + foster care, children in care, looked after children and when evaluation of services were considered the term family preservation was also included. A range of databases were searched.

The literature review informed the development of a Practice Framework to support practitioners to apply professional judgement to decision-making about whether a child can be returned home and informs their work with families throughout the reunification process and after return. It addresses which services are likely to ensure reunification stability 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.

Findings

The research review examined the timing and likelihood of reunification occurring, the factors related to return breakdown and stability and the outcomes for children who return home. In addition, a wide range of specific practice issues were covered. Using these research findings, a Practice Framework was developed, implemented in three local authorities in England and evaluated.

The evaluation showed that practitioners and managers found the Framework clear, practical, evidence-informed and showing how reunification could be managed. They liked the emphasis on engaging children and parents in the process. The risk assessment tool was highly valued and they considered that the Framework would be useful for the key tasks involved in reunification. There were some significant positive changes by the end of the project and an increased awareness of the research which underpinned the practice changes addressed.

Conclusions
The literature review 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 research evidence which informs the Practice Framework, key elements of the Framework and findings from the evaluation. The literature review ‘Reunification from Out-of-Home Care: A Research Overview of Good Practice in Returning Children Home from Care’ (Farmer 2018) and the Practice Framework are available on the University of Bristol and NSPCC websites.
European countries have seen a dramatic increase in the number of unaccompanied refugee minors (URMs). In the most recent figures, the number of unaccompanied asylum-seeking children in England have risen 134% compared to 2013 (to 4,560), and they account for the majority of the rise in looked after children (DfE, 2017). Many social workers, virtual schools for looked after children, teachers, and policymakers would like to know how to better serve them.

URMs experience disruptions in geography, culture, and education amongst others, but they often view both housing and schools as important locations for stability and development, from peer relationships to learning to wellbeing (Wade et al., 2012). They report higher levels of post-traumatic stress disorder and major depressive disorder compared to the general population (e.g. Bronstein and Montgomery, 2011), and they are vulnerable to being excluded from education because of lack of language, arrival part-way through the year, age disputes, and unstable living arrangements. It is currently unknown what educational provision URMs receive in England and whether their provision meets their learning needs given their particular histories and psychological needs. This presentation presents the findings from two high-quality, pre-registered systematic reviews on the impact of accommodation type for URMs and on the outcomes of the educational provision for refugee children in high-income countries. It complements the presentation of these findings with primary research in England including semi-structured interviews (n=12) with social workers, virtual school heads, teachers, and third sector providers on the education of unaccompanied asylum-seeking children, document analysis, and analysis of administrative data where available. These methods provide an overview about what is known about accommodation and education of URMs and their relationship with wellbeing and resilience of URMs.

An exploratory meta-analysis shows URMs placed in family foster care have better mental health than those placed in other forms of accommodation, but education and health outcomes as well as mechanisms for these outcomes need further research. Preliminary analyses indicate that some URMs in England receive education provision that does not meet their needs or statutory obligations while others receive tailored and thoughtful provision. Findings also indicate consensus among practitioners not only that unaccompanied refugee children have particular educational and accommodation needs tied with wellbeing, language acquisition, past trauma, and acculturation, but also that these young people demonstrate a marked resilience given their past histories.
Assessing Personal Well-Being and Emotional and Behavioural Problems in Unaccompanied Immigrant Young People in Residential Child Care

Thursday, 4th October @ 16:15: Unaccompanied Refugee Minors: Well-Being and Care (Venue: Auditório)

Dr. Iriana Santos (University of Cantabria), Prof. Amaia Bravo Arteaga (University of Oviedo), Prof. Susana Lázaro-Visa (University of Cantabria)

According to the latest official data, there are 2,392 unaccompanied asylum seeking children (UASC) in residential care in Spain (Observatorio de Infancia, 2017), accounting for about 17% of children in out-of-home care in this country. After a period of decreasing figures of migratory flow from African countries to Spain, a growing number of UASC are arriving again to our country, becoming one of the most challenging problems of our child care system. The difficulties experienced by those young people in their own countries, as well as the risks of the migratory process and the problems of adaptation to a foreign country and culture, suppose risk factors for the development of emotional and behavioural problems and could affect their quality of life. The main objective of this research was to analyze the emotional and behavioral problems and the subjective well-being of a sample of 92 UASC between 13 and 17 years old, (94.6% males), being placed in residential care with a paired sample in terms of age and gender of non-immigrant young people also in residential care. A second objective of this work was to compare the well-being levels in different aspects between both samples.

Instruments included a series of standardized tests such as the hetero-informed version of the ASEBA screening system (Achenbach and Rescorla, 2001) - Child Behavior Checklist (CBCL) - To analyze personal well-being, the validated Spanish version (Casas et al., 2013) of the Cummins Personal Well-Being Index (PWI) was applied (Cummins et al., 2003). The PWI includes items that assess satisfaction in different life areas. Each item is valued on a scale of 0 (completely dissatisfied) to 10 points (completely satisfied). In the absence of final results, some results can be advanced on the UASC sample. According to the assessment made by educators, 21.3% of young people are in clinical range in disruptive behavior and there are also 21.3% in aggressive behavior. Regarding broadband scales, 22.5% of the participants are clinical in the internalizing scale, 33.7% in the externalizing scale and 31.5% in the total scale. Regarding wellbeing, we analyzed differences between the perception of the quality of life of the participants who had been clinical in the screening test and those who did not. Thus, nonclinical young people in the CBCL showed a more positive perception of wellbeing in the PWI Index as well as the standard of life item. Results confirm the prevalence of emotional and behavioral problems according to the screening criteria. More detailed analyzes should be carried out to explain the relationship between the problems detected in the screening tests and the wellbeing of the UASC in residential care. However, the figures of emotional and behavioural problems provide important implications in this area of intervention.
Introduction

The decision regarding allocating care facilities to unaccompanied minors after arriving in the Netherlands should be in line with the Convention on the Rights of the Child (art.3, art.6). Several studies recognise that the best outcomes for most unaccompanied children are obtained by offering them highly supportive environments (Nidos, Salar, & CHBT, 2015; Ni Raghallaigh, 2013; Wade, 2011; Zijlstra et al., 2017). Limited research is available on the quality of the rearing environment and mental health outcomes of unaccompanied children. The present study aims to gain insight into the opinions of unaccompanied refugee children, living in various care facilities in the Netherlands, on their mental health, their needs for health care, and their rearing environment.

Method

This research is part of the annual monitor of unaccompanied minors, performed on request of the organisation for guardianship in the Netherlands (Nidos Foundation). Interviews with 98 minors were held focusing on the quality of the child-rearing environment and their mental health. The SDQ was used to screen the children's mental health. With the BIC-Q the quality of the living environment in the different types of care facilities was evaluated. The interviews were both qualitatively and quantitatively analysed. Regression analysis was used to determine the relation between the quality of the child-rearing environment and the children's mental health.

Results

The results indicate that children in family foster care face the least mental health problems and children in large reception centres struggle with the most mental health problems: they often feel lonely and sad. The access to health care is limited for all children. The quality of the child-rearing environment in large reception centres was assessed as 'insufficiently' or 'moderate' on average and in foster families as 'sufficiently' or 'good'. Regression analysis shows that the quality of the rearing environment is associated with mental health: the better the living environment, the better the children's mental health.

Conclusion

There is a growing body of knowledge on the relative merits of highly supportive environments for unaccompanied children in host countries (Kalverboer et al., 2017; Ni Raghallaigh, 2013; Wade 2011). The results of our study point in the same direction: compared to children growing up in less supportive environments, children in foster care fare best. Reception policy should take the child's right to stay in a highly supportive rearing environment as a starting point.
Concept Mapping the Needs of Flemish Non-Kinship Foster Parents who Take Care of Unaccompanied Refugee Minors

Thursday, 4th October @ 16:45: Unaccompanied Refugee Minors: Well-Being and Care (Venue: Auditório)

Dr. Frank Van Holen (Pleegzorg Vlaams Brabant), Ms. Nina Meys (Vrije Universiteit Brussel), Ms. Lenny Trogh (Pleegzorg Vlaams-Brabant en Brussel), Mrs. Delphine West (Vrije Universiteit Brussel), Prof. Johan Vanderfaeillie (Vrije Universiteit Brussel)

Objectives

The present study examines what non-kinship foster parents from Caucasian ethnicity in Flanders (Dutch speaking part of Belgium) who take care of unaccompanied refugee minors (URM) consider important to be a good foster parent.

Method

Concept mapping was used to investigate the needs to be a good foster parent for URM. This procedure consists of the following steps: (1) generating statements to one well-defined question (“What do you as a foster parent need to be a good foster parent for the URM?”), (2) selecting unique statements, (3) structuring and scoring statements, (4) analyzing the data using multidimensional scaling and hierarchical cluster analysis, (5) interpreting the results, and (6) translating this interpretation and generated meanings into policy.

Results

Step 1 and 2 resulted in 50 unique responses of 30 non-kinship foster parents. In step 3, these statements were sorted by 15 foster mothers. Furthermore, foster mothers were asked to indicate the degree of importance of each statement. Multidimensional scaling and cluster analysis of the 50 unique statements resulted into 8 clusters (step 4). In descending order of importance these clusters referred to (1) good parenting skills and a good fit of the URM into the foster family, (2) good parenting conditions and personal skills, (3) tolerant society and information about options for reunification, (4) support (material, medical, psychological, school) for the URM and certainty about the future, (5) information of and open attitude for the background and friends of the URM, (6) good preparation of the URM and reassuring contacts with the biological family and others, (7) good support conditions and fellow contacts for foster parents, and (8) support in the context.

Conclusion

The needs of foster parents bringing up URM were largely in line with the needs of regular foster parents. However, they also reported needs related to their particular situation and to the specific needs of URM. An important task for foster care services in general and foster care workers in particular is to support foster parents, provide information and offer solutions to the problems they encounter when parenting URM. In short, next to the offer of regular support, it seems important to address needs linked to the peculiarities of URM in foster care.
A Study on Successful Foster Placements: Perspectives from Unaccompanied Refugee Children, Their Carers and Guardians

Thursday, 4th October @ 17:00: Unaccompanied Refugee Minors: Well-Being and Care (Venue: Auditório)

Ms. Jet Rip (University of Groningen), Dr. Elianne Zijlstra (University of Groningen), Dr. Wendy Post (University of Groningen), Prof. Margrite Kalverboer (University of Groningen), Prof. Erik J. Knorth (University of Groningen)

Objectives

In the Netherlands, unaccompanied refugee children under 15 years old are accommodated in foster families, preferably in families that match the ethnic background of the child. There is hardly knowledge regarding the perspectives of these children or carers on the placement (Hek, 2007; Ni Raghallaigh & Sirreyeh, 2015), including the influence of cultural similarity between children and foster carers on the success of the placement. Although cultural matching is seen as important (Wade, Mitchell, & Baylis, 2005), Ni Raghallaigh (2013) concludes that the process of matching children to foster carers is complex, involving consideration of numerous factors. The existing literature on children in care highlights several factors that are potentially affecting the success of a foster placement (e.g., Ni Raghallaigh & Sirreyeh, 2015; Wade, Sirreyeh, Kohli, & Simmonds, 2012). The present study explores the (cultural) factors that are related to successful placements of unaccompanied refugee children in foster families.

Method

Semi-structured interviews were held with a (convenience) sample of unaccompanied refugee children who were living in foster families in the Netherlands (n=5), their foster carers, and their guardians. The children and carers were also asked to fill in questionnaires related to their cultural background, the child's mental health, and the quality of the child-rearing situation. At the end of each interview, all participants were asked to rate the success of the foster placement. In addition, former unaccompanied refugee children who previously lived in a foster family (n=5) were also included in the study, among other things to get an understanding of the relationship between these children and the families.

Results & conclusions

Preliminary results show several factors that seem to be related to the success of the placement. For instance, emotional and practical support from foster carers and guardians, as well as the social network of the child, seem to be related to the success of the placement. In addition, where consistent stories about the placement were told by the child, carers and guardian, the placement seemed more successful.

We will discuss the implications our findings might have for theory and practice. This exploratory study into different perspectives on successful foster placements offered guidance in developing the longitudinal study, in which the development of the relationship between children and carers within family foster placements is an important aspect.
Presentation of the Change Factory (Forandringsfabrikken) by Young Pro’s

Thursday, 4th October @ 16:00: We Want to Change Child Welfare! Children as Professional Advisers (Pro’s) for Child Welfare Services (Venue: Porto)

Ms. Anika Proff (Change Factory), Mr. Fredrik Proff (Change Factory), Ms. Glorija Proff (Change Factory), Ms. Michelle Proff (Change Factory), Mrs. Marit Sanner (Change Factory), Mr. Frederick Reiersen (Change Factory)

The Change Factory (Forandringsfabrikken) is a foundation aiming to engage children and young people in the design and development of welfare services and social programs that directly affect them, through facilitating their participation and involvement as expert evaluators (advisors) and lobbyists (a force) for change.

The idea is simple, but highly effective: if the society listens to what children and young people say is helpful, and what needs to change in order for the help to be useful – we will get systems that is getting better at ensuring useful help. The children and young people in The Change Factory are called “Pro’s”, because their experience makes them professionals in the system’s they are involved in. For example, there are: “SchoolPro´s”, “ChildwelfarePro´s” and “MentalhealthPro´s”.

The Change Factory Knowledge Center opened in August 2017, this is believed to be Europe’s only center that only publishes knowledge from children and young people, without analysis and interpretation from adults. “Children´s knowledge” is defined as their experiences and advices. The knowledge is gathered from children and youth in gatherings and conversations, through the “Change Methodology”, that is self-developed and based on the well evaluated methodology Participatory Learning and Action (PLA). The key is to gather honest and deep answers.

The Change Factory Knowledge Center opened in August 2017, this is believed to be Europe’s only center that only publishes knowledge from children and young people, without analysis and interpretation from adults. “Children’s knowledge” is defined as their experiences and advices. The knowledge is gathered from children and youth in gatherings and conversations, through the “Change Methodology”, that is self-developed and based on the well evaluated methodology Participatory Learning and Action (PLA). The key is to gather honest and deep answers.

The Change Factory has, since 2008, collected knowledge from children and young people with experience with child welfare services, justice authorities, mental health services, schools and more. The knowledge and advice from the children and young people are summarized and published online, in booklets, magazines and in films – without analysis or comments by adults. Young “Pro’s”, with experience from the systems, present the collected advice to politicians, government officials, professionals and students. The Change Factory facilitates the meeting between young pro’s and people with power to change the systems.

Philosophy:

The founding idea of The Change Factory is that children and youth have a lot of knowledge about their own life, and that they have the same value as adults. They need love, to be believed in, and have their opinions taken seriously. The work The Change Factory do is all about being open, humble, collaborative and loving.

Some recent achievements:

In 2017, The Change Factory was nominated by the organization Accelerating Change for Social Inclusion (ACSI), and later pointed out by juries in Barcelona and Rotterdam, as one of Europe’s greatest social entrepreneurs for children and youths in vulnerable situations.

The “ChildwelfarePro’s” were one of the main forces behind a new legislation, which made Norway the first country in the world (as far as we know) to pass a (child welfare) law which says “all children should experience love”.

The Change Factory facilitates different development programs in welfare services, with young people’s knowledge as fundament for change of routines and framework.

These programs include:

• 2/3 of Norway’s Child Welfare Services
• Children’s and young people’s psychiatric clinic's (BUP) in 1/4 of Norway's hospitals
• 20 Child Welfare Residential Care Institutions

The Change Factory Knowledge Centre is publishing academic books with summarized advice from young people with experience with Norway’s Child Welfare Services. One of the books is written by seven young “Pro’s” together with leaders in Norway's Child Welfare Services. More books are expected in 2019, one with advice to mental health services, one with advice from children with experience of violence and abuse. The goal is acknowledgment as sources in academic work and decisions in authorities.
Cooperating with Children in the Child Welfare Services - A Shifting Paradigm in the Understanding of Child Protection

Thursday, 4th October @ 16:15: We Want to Change Child Welfare! Children as Professional Advisers (Pro’s) for Child Welfare Services (Venue: Porto)

Mr. Roar Sundby (Norwegian University of Science and Technology), Mrs. Anne Grytbakk (Norwegian University of Science and Technology)

Do the working methods in the child welfare services and the competence of their social workers change when they really listen to children’s experience with these services? A child welfare service more focused on cooperation and communication with children, than advanced behavior therapy or formal bureaucratic proceedings, seems to be one of the outcomes. This paper focus on social workers in the child welfare services, from an innovation project that prioritized listening to children.

The innovation projects My life cooperation involve cooperation between: Children with lived experience participating in the Change Factory, six Child Welfare Services (CWS) in central Norway and NTNU (Norwegian University of Science and Technology).

The projects objective is to include the child’s voice in public services for children and to demonstrate experience based good practice in the field of communication and cooperation in child welfare. Communication theories were applied, Development of routines and models for better cooperation with children were also central features of this innovation. The methodology in the innovation projects is heavily influenced by the principles in Participatory Action research, including group meetings for planning and reporting, qualification by discussions and lectures, structured qualitative interviews with the involved partners in child welfare, evaluations and observation of new routines in the services.

The research project presented in this paper is a result of the cooperation with The Change Factory and the child welfare pro’s. It must be understood in the context of the work initiated by the Change Factory where children describe their experience with, and give advice to the child welfare services in Norway. In the light of these advices, a number of Child Welfare Services (CWS) have revised their working methods and values.

The presentation will give a general overview of the background for the project, first by briefly describing child welfare services in Norway and the social movement initiated by the Change Factory and introducing some of the advices given by children and the resulting innovations.

190 child welfare services in the municipalities have now adopted a common basis for working with children and have adopted common values that imply that 1) Children know a lot about their own lives; 2) that they have the same values as adults 3) They need love and to be believed and taken seriously. An increased enthusiasm and involvement for their work among the Child Welfare workers seemed to be one of the outcomes.

In the second part, we describe the interviews with the child welfare workers and their experience and evaluation of the implementation of new principles and methods of cooperation in child welfare work generated in the project.
This paper will focus on an ongoing project where we are conducting a document analysis of child welfare files in a Norwegian municipal CWS. What can case files and focus group interviews tell us about children's participation in child welfare processes?

In 2010, I conducted a document analysis, exploring how and how much the CWS workers talked to children. The 2010 study showed that the CWS talk with a significantly smaller amount of children than expected, and that the documentation of children's participation was inadequate. Trondheim municipality, where the study was conducted, has implemented an competence enhancement regarding communication with children. In this study we are currently conducting, we are focusing on to what extent we can see an increase when it comes to children's participation and documentation of communication with the children since the previous study from 2010. The CWS workers might have become better at communicating with the children, but so far, the documentation seems to reveal much less cooperation than expected, both when it comes to quantity and quality. We have also looked at the impact the conversations has for the assessments and decisions made by the child welfare.

The ongoing research project analyses CWS' journals in one of the larger Norwegian municipalities child welfare services. Data from approximately 200 child welfare files, for children between 7 and 12 years are collected. In the analyzes we have focus on how many times the CWS worker communicates with the child, and what are the topics and focus in these conversations. Is the content of these conversations documented in the file? How often is the child's statements and opinions documented in the files? And what consequences does the communication with the child have for the assessments and decisions made by the CWS?

We have started focus group interviews, which will help to illustrate contexts and deeper understanding for what we see in the documents.

So far we have obtained data from more 160 case files. Early findings indicate that policy decisions and practice goals in terms of children's participation have not been reached.

The research question: Are children really participating in their own child welfare processes? I seek to answer the research issue through the following questions:

1. Has the degree of involvement increased since the study conducted in 2010?
2. Does what the child say and convey have an impact on the CWS's assessments and decisions?

All internally produced and received documents are reviewed to look for traces of children; has it been recorded that they have said something, been present at conversations, meetings or home visits, or if someone refers to something the child has said. Child protection services is a complex field of work, where different conditions affect the practice that is exercised. If we throughout the study find signs of increasing participation, it may be due to several other factors. I assume that both competence, access to resources, employees and the organisation's attitudes towards children will affect children's opportunities for participation. Knowledge of children and how they are included, dilemmas related to the contradiction between the children's need for protection and the right to participation, as well as the power-ratio adults - children, affect children's opportunities for participation.
How can the Child Welfare Services improve the child's participation in the assessment?

Thursday, 4th October @ 16:45: We Want to Change Child Welfare! Children as Professional Advisers (Pro's) for Child Welfare Services (Venue: Porto)

Ms. Hanne Elisabeth Soerlie (Norwegian University of Science and Technology)

How can the Child Welfare Services (CWS) improve the child's participation in assessment? This paper's aim is to give some possible answers to this question, and it has its origin from a recent case study of children's, parent's and caseworkers experiences of a CWS assessment in Norway. RKBU (Regional Centre for Child and Youth Mental Health and Child Welfare) in NTNU (Norwegian University of Science and Technology) is responsible for the project, and it was financed by the Wøyen Foundation.

The assessment is an important task for the CWS. After receiving a concern about a child, the child protection has a right and a duty to assess the child's situation. The assessment will clarify if a child is in need for help, and if so which measures are most relevant. The recent years there has been an increased focus on the CWS work with assessments in Norway. This is due, among other things, to critical reports from the Norwegian Board of Health and Safety (2012) and the Office of the Auditor General (2012). The reports pointed out important weaknesses. One of them was the lack of child participation. Child participation is mandatory in child protection Assessment in Norway, according to the UN's children's rights convention (CRC) and Norwegian Child Protection Act. A study on CWS work with assessments (Lurie et al., 2015), based on interviews with CWS professionals, highlighted the lack of children's participation as one of the central findings. The CWS workers talked to the children during the assessment, but mainly as sources of information. The children were less involved in the investigation process in terms of genuine participation; It was not that common for CWS to give children information about CWS and what was going on in the assessment, nor using the children's information in decision-making and choice of measures. There are also other studies in Norway that show that children are not participating in their CWS-case like they are obligated to by Law.

The aim of the case-study was to obtain more knowledge about how the child, the parents and the CWS workers experience the assessment, more specifically how they experience the interaction with each other. The focus here is mainly the child's perspective. The study shows different factors that influence the child's participation in the assessment. Some of these factors will be revealed and explained closer. Knowledge about these factors can help CWS improve child participation in the assessment.
Training Relational Skills and Cooperative Practice: Children Participating in the Education of Child Welfare Workers

Thursday, 4th October @ 17:00: We Want to Change Child Welfare! Children as Professional Advisers (Pro's) for Child Welfare Services (Venue: Porto)

Mrs. Ann Kristin Larsgaard (University college of Southeast Norway), Mr. Roar Sundby (Norwegian University of Science and Technology)

How does the cooperation and communication with children with experience from child welfare services affect the pedagogical methods in the education and how are these changes evaluated by educators and students?

The aim of the education and training is to prepare students of child welfare education to work in the services, including changes in working methods, especially in cooperating and communicating with the children. Somehow, the education system is perceived as dysfunctional because it has a bias toward evidence-based methods and theories, but the practice field seems to ask for relational competences and practice skills.

The innovation and research project My Life education is a development project between; Children in the Change Factory, NTNU (Norwegian University of Science and Technology) and HSN (University College of Southeast Norway), Financed by NTNU, HSN and BUF-dir (The Norwegian Directorate for Children, Youth and Family Affairs). The children from the Change Factory; (Child welfare pros, children with experience from the child welfare services), have been long-term partners and a source of inspiration for changes in the child welfare education. The innovative elements in the project is testing and developing new models for children's participation in the child welfare education programs connected to the implementation of new working methods in the child welfare services with the aim to strengthen the co-production between children and the child welfare services.

This innovation project forms the basis for the research project presented and the problem formulation.

Some of the participants in the project are expressing their concern;
«What I think is so well put by the child welfare pro's is that, you enter this profession with the desire to help the kids. You have the focus on the kids. (....) Then, after three years education, it is gets so difficult. So we are leaving the original goal and the desire we had with this profession. » (Child welfare worker)

A teacher emphasizes the importance of cooperating with the Pro’s
“Through the cooperation with the pro's, we achieve a lot and things are developed in new ways. It affect and develop our understanding. Development and new thoughts are important for the education “ (Child welfare educator)

The students are also describing their experience with meeting the children
“It is important not to hide your feelings. In this way you create a genuine dialogue, and the relation is stronger when you feel you do not have to restrain yourself.” “Increased self confidence in the professional role is one
part of the outcome” (from students evaluation)

The innovation project represent a paradigmatic change in the child welfare services pointing towards a more humanistic practice. One of the main obstacles to improved cooperation between the children and the care workers seems to be the perceived lack of communication and relational skills. Therefore, the professional education serving the CWS, is consequently revising their education curricula with an increased focus on communication and cooperation skills. The development of methods for assessment and new approaches to practical work training is a core challenge in the project and an expected contribution to research.

In the presentation, we will give examples of teaching and pedagogical methods including lived experience from children such as children sharing their experience and giving advices to students for good practice, joint teaching including educators and children, and children participating as sparring partners in communication training with students.

Evaluation and experience from educators participating in these new teaching forms will analyzed as well as students describing the competences resulting from the meeting with these children.

Topic Areas Participation of children and families in child welfare interventions
Submission ID 503
Observing and Evaluating in Residential Care: A Case Study on a Mother-Child Residential Program

Thursday, 4th October @ 16:00: Caregivers in Residential Care (Venue: S. João)

Dr. Laura Palareti (Department of Education Studies, University of Bologna), Prof. Paola Bastianoni (Department of Humanistic Studies, University of Ferrara), Prof. Francesca Emiliani (Department of Education Studies, University of Bologna), Dr. Monia Ciriello (Master on children’s rights and protection, University of Ferrara), Ms. Lucia Ravazzi (Cooperativa sociale Dai Crocicchi), Ms. Giorgia Olezzi (Cooperativa sociale Open Group)

Introduction
The problem of observing and evaluating the developmental changes and behavioural performances of people in residential care has acquired increasing importance in recent years due to scientific issues as well as practical issues connected with the organization of welfare Services. This interest is shared by applied educational and clinical psychologists, mainly concerned with the importance of increasing the participation of all subjects in designing and giving meaning to a therapeutic intervention. The relationship between scientific results and social policies has been claimed for so long and recently a trend of scientific research has been addressed to studying how knowledge and scientific results can affect and shape practices and behaviours of the staff in social Services (Nunno, Sellers e Holden, 2014; Thompson et al. 2017). This recent literature confirms that a good relationship is based on improving the capacity of the whole team, the researchers and the staff, to collect useful and relevant data and developing reasoning and understanding on it. In this perspective, models of “translational research” underline the importance of an active engagement of the staff members as partners of researchers, evaluators and policy makers in order to keep alive the dynamic between practices and research (Hamilton, 2015).

Aims
According to this perspective, the aim of this study is twofold: to collect longitudinal data to evaluate behaviours and changes of guests of residential programs, and, at the same time, training up the staff to a method based on the shared construction of the observation tools.

Subjects
This pilot study involves six mothers who live with their children in the same residential program, eight educators and one psychologist (all females). The mothers are in residential care with their children in order to protect them from violence and social and psychopathological risk of their family environment, and to prevent the out-of-home placement of children.

Method
The staff of the residential program discussed, during six specific focus groups, the problematic aspects and expected improvements for each family unit, and construct shared observation tools used to collect data and orient the intervention (Le Poulitier, 1989). Each observation tool is composed by three elements: a list of educational goals, a list of behavioural indicators for every educational goal regarding each unit in care (mother and child/ren) and a list of educational acts aimed at achieving the previously established goals. Each unit has been regularly observed by staff members individually (indicatively twice a month) for a period of six-eight months on all behaviours. After each observation, the staff discussed in a meeting the different rates given, and defined the educational acts.

Results
The method of shared construction will be detailed illustrated, with concrete examples of the individualized tools produced and organized in educational goals, behavioural indicators and educational acts. Furthermore, how the staff has managed to integrated the method into its working routines, eight months after the training, will be described. Finally, the changes observed in guests will be presented.
Professionalizing Care Workers: A Study on the Outcomes of a ‘Motivational Interviewing’ Training in Residential Youth Care

Thursday, 4th October @ 16:15: Caregivers in Residential Care (Venue: S. João)

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

Objectives
Achieving behaviour change among adolescents is one of the goals of residential youth care (Geenen, 2014). However, these adolescents often lack motivation for behaviour change (Eenshuistra et al., 2016; Harder, 2011). Residential care workers can play an important role in promoting motivation for behaviour change among adolescents (cf. Miller, 1999). Crucial for promoting adolescents’ motivation for change is a good therapeutic working relationship, i.e. alliance, with care workers (Geenen, 2014). Due to the often serious and complex problems among adolescents in residential youth care, it can be challenging for care workers to build good alliances with them (Harder, 2011).

An effective treatment method for achieving behaviour change among people that particularly aims to build good alliances is Motivational Interviewing (MI). MI is a “collaborative conversation style for strengthening a person’s own motivation and commitment to change” (Miller & Rollnick, 2013, p.12). A professional who works according to the MI-principles is empathic, uses reflections, and applies MI-adherent behaviour such as seeking collaboration with and emphasizing the autonomy of adolescents. MI non-adherent behaviour, i.e. confronting adolescents or giving them information and advice without permission, is avoided as much as possible. By training residential care workers in MI, the quality and effectiveness of residential youth care can be increased. So the aim of our research is to investigate whether there is a difference in residential care workers’ behaviour towards adolescents before and after an MI-training.

Method
The sample consists of 13 residential care workers, working at one of four participating residential treatment groups of a youth care institution in the Netherlands. The participants audiotaped two one-on-one conversations with an adolescent. The first recording was a baseline measurement (pre-test), before receiving training in MI. The second recording was made after receiving an MI-training (post-test). Transcripts of the recordings were made and, hereafter, coded according to the Motivational Interviewing Treatment Integrity (MITI) 4.2.1 protocol. To determine statistically significant (p≤.05) differences in MI-adherent and MI non-adherent behaviours between the pre-test and post-test, we performed paired t-tests. To determine to what extent the participants meet the MI standards for basic competences, we calculated two indices: the percentage of complex reflections (the number of complex reflections divided by the total number of reflections), and the ratio between the number of reflections and the number of questions.

Results
Analyses of the conversations show that compared to before the training, the residential care workers use less MI non-adhered behaviours after the MI-training. However, this difference is not statistically significant. After the MI training, MI-adherent behaviours are used significantly more often by the residential care workers. Both before and after the training, the majority of the residential care workers do not meet the standards for the percentage of complex reflections and the ratio between the number of reflections and the number of questions.

Conclusions
We conclude that by providing training, the residential care workers in this study are enabled to have a conversation which is more in line with the MI spirit. However, these are not ‘real’ MI conversations yet. We recommend to provide the residential care workers with additional training and to repeat the study with a
larger sample, whereby individual coaching becomes an integral part of the training.
Values, Expectations and Practices in Residential Care: An Exploratory Study

Thursday, 4th October @ 16:30: Caregivers in Residential Care (Venue: S. João)

*Mrs. Adriana Morao* (CIS, ISCTE-Instituto Universitário de Lisboa), *Prof. Maria Calheiros* (CICPSI, Faculdade de Psicologia, Universidade de Lisboa), *Prof. João Graça* (ICS, Universidade de Lisboa)

It has been acknowledged that Child Protection System professionals may face ethical and moral dilemmas regarding their work with the children/youth and families. Within this field of work, Residential care staff often cope with complex and stressful events in challenging professional and organizational contexts, while providing care to children and youth with demanding needs. However, to our knowledge, no studies have specifically focused on the ethical tensions faced by residential care staff in their roles both as professionals within a specific social and organizational context, and as “surrogate parents” to the children and youth in care. The present qualitative study used semi-structured interviews with 20 residential care professionals to explore the challenging events and tensions they face at work, and their educational values and expectations towards the children and youth in care. Preliminary results of the ongoing exploratory study will be presented. Thematic analysis will allow for identifying major themes on this issue and generate inputs for further research, aiming to improve staff training and inform policy and practice on residential care services.
Complaints and Complaints Procedures in Residential Care.
Findings from Germany

Thursday, 4th October @ 16:45: Caregivers in Residential Care (Venue: S. João)

Dr. Liane Pluto (German Youth Institute), Dr. Eric Van Santen (German Youth Institute)

Objectives
Participation of children and adolescents in residential care is still a key issue (Brummelaar et al. 2017, Equit et al. 2017). An enlargement has been discussed, emphasizing that opportunities for complaints have to be self-evident for children and young people in institutions (Urban-Stahl/ Jann 2014). An important element in promoting the participation of children and adolescents and securing their rights is to give them the opportunity to make themselves heard. By reviewing residential care in the 1950s and 1960s and being confronted with sexual abuse in institutions, it once again became apparent, how vulnerable residential care institutions are in terms of abuse of power and how risky they can be for children (Andresen/ Heitmeyer 2012, Keupp et al 2013, Schröer/ Wolff 2015). Since 2012 complaints procedures are obligatory in residential care units according to the law. The research question is, whether debate and legal change are actually reflected in the residential care system and whether there are correlations with the participation culture of institutions.

Method
The data basis is a survey of residential care units in Germany. The study was done as a standardized postal survey among 908 residential care institutions as a part of a monitoring of child and youth welfare institutions in Germany. The response rate was 45 % (N=409).

The topics participation and complaints procedures are part of a wider range of topics in the survey, such as e.g.: characteristics of the young people, financing, staff and strategies of recruitment, care planning and cooperation. The survey is the fifth to be carried out over a period of 20 years. Some of the questions dealing with the participation of children and adolescents have been asked in previous surveys. So developments over time can also be pointed out for some aspects.

Results
Despite legal requirements and a longstanding debate, complaints procedures are still not yet available in all residential care units, although there is an increase over time. Particularly in small units, there are concerns about such procedures. The number of complaints in residential care shows that the fears that there would be a complaint flood did not materialize. A participation-friendly environment in the residential care institutions promotes the existence of complaint procedures.

Conclusions
In practice, further efforts are needed to understand complaints procedures as a natural element of quality management and to overcome the barriers for complaints procedures.
A House Burden Score: Measuring the Workload in Therapeutic Residential Care for Children and Young People Score

Thursday, 4th October @ 17:00: Caregivers in Residential Care (Venue: S. João)

Dr. Frank Ainsworth (James Cook University), Ms. Samantha Dennis (Dunlea Centre (Australia’s Original Boys’ Town))

This presentation is about using data from the Strengths and Difficulties questionnaire (SDQ) to develop a house burden score (HBS) as a way of measuring the workload of a therapeutic residential care program. The setting is a Monday-Friday 32 place residential school for both female and male young people aged 12-16 years. The development of the score ensures that placement selection is based on empirical data rather than the often used criteria of ‘where is there a vacancy’? It may also curb juvenile staff comments such as ‘our house has the most difficult young people where as yours are the easy ones’. The aim of the score is to ensure that the residential program is not overburdened with too many young people with complex emotional and behavioural difficulties that make only a substandard service possible.
In foster care families, children enter and leave as placements start and end. Here relationships are shaped and dissolved and families are constructed fluidly over time. Drawing on in-depth interviews with eight foster care couples, this paper builds on David Morgan's (2011) concept of ‘family practices’ and explores how foster carers construct care practices in their everyday family lives. It explores the meaning of ‘embodied knowledge’, which is the detailed history that family members have of each other, derived from sharing time, space and experiences (Morgan, 2011), and which, as may be expected, is minimal when family relationships are new. The study finds that foster carers’ care practices can be categorized into three different enactments: 1) as intuitive and unreflective—enacted as *backbone practices*, 2) as (highly) reflective—enacted as *mind-guided practices*, and sometimes challenging for the carers to construct and perform and 3) as something that feels wrong—enacted as *estranged practices*, for instance, when private boundaries are at risk of being trespassed upon. The article finds that, in the absence of guidance on embodied care in fostering standards, foster carers are assigned as ‘care entrepreneurs’. They navigate their way through appropriate bodily conduct despite the omnipresent sense of risk of trespassing on each other's boundaries. The article stresses the significance of the bodily aspects of relative strangers living together in foster care homes, and emphasize that sociological research need to address this underexposed subject further.
Grandparent Care in Chile: Care Experiences of Two Parenting Grandparents

Thursday, 4th October @ 16:15: Family Dynamics and Relationships in Foster Care (Venue: Arrábida)

Ms. Carolina Gutierrez (University College London)

There is a severe crisis in the childcare system in Chile, which is based mainly on residential care. According to investigations carried out by UNICEF and the Chilean parliament, these institutions have become places where children's rights have been systematically violated. International guidelines suggest deinstitutionalisation of care and the promotion of foster care in Chile. Official data from 2014 show that in Chile kinship families represent the highest percentage of foster homes, with grandparents being the most common caregivers within this group. However very little is known about kinship care in Chile. Research on kinship care has been mainly developed in Western countries, and only a few studies are researching less wealthy nations despite the importance of considering sociocultural differences between countries to develop policies aiming to achieve better care for vulnerable children. Moreover, specific research focusing on the feelings and meanings grandparents give to their parenting role is still insufficient; and the literature researching children perspectives on kinship care is scarce. Given these points, this research explores the care experience of parenting grandparents and their live-in grandchildren, in formal and informal arrangements, in two Chilean cities. The aims are to explore the conditions under which the grandparents take on the care of grandchildren, what does it mean to care or be cared for in the context of grandparent care, what are the family practices of grandparent-headed families, and what skills or competences do grandparents and grandchildren draw upon for caring in their daily lives.

To do this, I am carrying out a qualitative study, currently in the phase of data collection. I am conducting narrative interviews with grandparents and their grandchildren in two Chilean cities: Santiago and Los Alamos (in the Bio Bio region in the south of Chile). The sample included 18 families and 41 interviews. The criteria for inclusion in the sample are that children should be in their grandparents’ care for at least six months. Additionally, parents should not be residing in the child's home. Children included in the sample were from 7 to 15 years of age. To facilitate the interviews with children, visual methods and interactive approaches are being used because children may feel more comfortable with this type of methods and, in consequence, participate more actively in the research. In this way, the research may become more responsive to the participants, giving them some control over the research agenda.

For data analysis I propose to use a combination of two approaches: thematic analysis and narrative analysis. These two approaches, one category-centred and the other in-depth analysis of individual cases, provide different ways of knowing the phenomena. Using both allows a complementary way of exploring the data. As this research is in an early stage, for this conference purposes, I will be presenting the results and preliminary analysis of two cases, one from each city where I conducted fieldwork. For this presentation I will focus on the specific conditions under which grandparents took on the care of their grandchildren and what it means to them to care in the context of grandparent care.

These two cases represent the heterogeneity of the kin carers, such as class, age of the children at the beginning of the fostering, place where they live; so they allow to explore the variability of the characteristics of the phenomenon I intend to study. The findings of this research will contribute to fill a knowledge gap about kinship care in Chile and they may help to inform the practice of professionals working in the child welfare system with the consequent improvement of the services for these families.
Introduction: When a child's safety and development are at risk, an out-of-home-placement in, for example, family foster care comes into view. Although there is a lot of research available about foster care, less is known about the experiences of biological children within foster families. These children however, play an important role as they are part of the family the foster child lives in. Furthermore, parents are often concerned about the effects that fostering might have on their own children and this concern might lead to early placement breakdown or even not beginning to foster at all.

Method: The purpose of this study was to investigate the experiences of biological children in foster families. The research questions were: (1) “How do biological children experience the presence of a foster child in the family?” and (2) “What is the impact of behavioral problems of the foster child on the acceptance and experiences of the biological child?”. To map these experiences, 139 biological children were asked to fill in a questionnaire with questions on family adaptation and cohesion (FACES/GDS), the acceptance of the foster child (FAM/OKIV), the relation with the foster child and the behavior (CBCL) of the foster child. The mean age of the participating biological children (64 boys, 75 girls) was 14.19 years (SD=3.05, min=8 and max=22).

Results: The biological children reported that about 20% of the foster children have behavioral problems, 15% emotional problems and 25% show symptoms of hyperactivity. Furthermore, the biological children indicated that they themselves also have emotional problems (18%) or hyperactivity problems (19%), conduct problems were rarely reported (1%). A Wilcoxon Signed Ranks Test showed that behavioral problems (Z=-7.47, p<.01) and problems with hyperactivity (Z=-3.78, p<.01) occur more often in foster children. The occurrence of emotional problems however is not significantly different for foster children than for biological children (Z=-1.45, p=.13). Furthermore, conduct problems in the foster child correlated significantly with hyperactivity of the foster child (r=-.49, p<.01) and problems with hyperactivity (r=-.378, p<.01) occur more often in foster children. The occurrence of emotional problems however is not significantly different for foster children than for biological children (Z=-1.45, p=.13). Concerning the acceptance of the foster child, almost 60% of the biological children indicated a low acceptance of the foster child. This low acceptance was correlated with behavior problems (r=-.40, p<.01), hyperactivity (r=-.25, p<.01) and emotional problems (r=-.20, p<.01) of the foster child. Furthermore, a low acceptance score was most often found in families with a high level of cohesion (r=-.28, p<.01). Concerning the family structure, it was found that families with a strong cohesion often showed a low adaptability (r=-.33, p<.01).

Conclusion: This study indicates that fostering has a high impact on the biological children in foster families, with almost one in five of the biological children reporting that they themselves have emotional problems, a number that is almost as high as the number in foster children. Furthermore, behavioral problems in foster children are once again found to be an important factor in the foster care process. Biological children with emotional problems most often lived in a foster family with a foster child with behavioral problems. The acceptance of the foster child is in almost 60% of the families low. More behavioral problems, hyperactivity or emotional problems in the foster child or a strong cohesion and low adaptability of the foster family are associated with a lower acceptance of the foster child by the biological child.
Growing Up as a Birth Child of a Foster Carer: Adult Birth Children's Perspectives

Thursday, 4th October @ 16:45: Family Dynamics and Relationships in Foster Care (Venue: Arrábida)

Mrs. Allison Tatton (Newman University and University of Bristol)

Abstract

Objectives: In England there were approximately 72,670 children and young people in the care system as at 31st March 2017. This figure has increased year on year for the past decade. Similar increases have been seen in other counties such as USA, Canada and Australia. In recent years a great deal has become known about children in the care system but despite these advances, much less is known about the families who care for them, and in particular how living in a fostering family might impact on the birth children of foster carers. Studies that have been undertaken have all highlighted that while there may be benefits of living in a fostering family, there are also many challenges. This study aimed to gain the views of the adult sons and daughters of foster carers into how they feel being brought up in a fostering family has impacted on their lives on both when they were children and as adults.

Method: This PhD study adopted a qualitative approach and used in depth, unstructured, narrative interviews to explore the views of the adult birth children of foster carers. Participants were encouraged to reflect upon their childhood experiences to consider the impact of fostering both while they were growing up, and now as adults. They were also asked to consider any critical incidents as they were growing up. The study sought to understand the meaning birth children attached to these experiences and events to understand the what it was like for them to be brought up within a foster family environment. Interviews were audio recorded and transcribed verbatim. Participants were offered the opportunity to view the transcripts and add in any additional information.

Results: Participants identified a number of positive aspects of being brought up in a fostering family similar to those in previous studies. However, they also identified challenges. Some participants felt they had been not only denied a voice but ‘silenced’ by parents, social workers, foster children and sometimes their own birth siblings. Many of the participants revealed that, as children, they had been exposed to information with which they felt unable to cope such as knowledge of sexual, physical and emotional abuse; babies who were born addicted to drugs as their mother had been an addict during pregnancy; knowledge of prostitution and alcoholism; the way they felt their parents had been treated by social workers and foster children and fear of allegations of abuse. Some of the participants had also been threatened and abused by their foster siblings. They also identified significant losses they had experienced such as, losses within their own family; loss of parental attention; the loss of their foster siblings when they moved on. Boss's (1978) theory of family boundary ambiguity and ambiguous loss was used to explore some of these issues.

The sons and daughters of foster carers also revealed how some of the experiences they had as children continue to trouble them as adults. For example, most of the participants revealed how they still consider the children their family fostered as siblings and have made attempts to re-establish contact with them.

Conclusions: The research found that fostering had had a lifelong impact on many of the sons/daughters interviewed and that more thought needs to be given to the impact that fostering has on this group of children and young people. This is particularly necessary when their families are fostering children and young people who have themselves have had very negative experiences.
**Understanding Sibling Estrangement when Children Enter Public Care: A Longitudinal Approach**

Thursday, 4th October @ 17:00: Family Dynamics and Relationships in Foster Care (Venue: Arrábida)

*Dr. Christine Jones (University of Strathclyde), Dr. Gillian Henderson (Scottish Children's Reporters Administration)*

**Background**

Sibling relationship disruption is a common experience across jurisdictions when children enter public care. This is the case despite statutory guidance that emphasizes the need to place children together when in their best interests and empirical research that has demonstrated that sibling warmth acts as a protective factor when children face adversity. Previous research focusing on the experiences and outcomes of sibling relationship disruption has focused predominantly on placement and contact patterns, particularly of siblings in out-of-home care concurrently and at a single point in time. This study aimed to extend this research by focusing on siblings within and outwith public care and across time.

**Objectives**

The objectives of the study were to:

- develop a methodology to map sibling constellations, residence and relationships over time;
- identify points across the lifecourse when disruptions to sibling relationships of looked-after children occur;
- assess the scale of sibling relationship disruptions and the circumstances of these disruptions.

**Methods**

The study was undertaken in Scotland where statutory intervention to protect children at risk is organised through the Children's Hearings System and administered by the Scottish Children's Reporters Administration (SCRA). The study sample was selected from a previously identified cohort of children who had Permanence or Adoption Orders made by Sheriff Courts between 1st April 2013 and 31st March 2014. From this cohort, 50 unrelated children ('index children'), all of whom had at least one biological sibling, were randomly selected for this study. Index children's siblings were identified using the Case Management System and case files held by SCRA. A total of 154 siblings of the 50 index children were identified. Data were gathered regarding children's age, gender and other demographics, care pathways, types of sibling placement and contact patterns. These were analysed using SPSS.

**Results**

The analysis developed uncovers the scale of sibling relationship disruption experienced by looked-after children and the cumulative nature of these disruptions over time. Just over two thirds of children in out-of-home care were living apart from at least one of their biological siblings and around two fifths were living apart from all of their biological siblings while in care. Siblings were growing up in multiple households and in a range of care settings including kinship, foster, residential care and adoption creating challenges in terms of supporting relationships. When entering care most children had some direct contact with looked-after siblings but this reduced over time and as children moved towards permanence. A longitudinal analysis uncovered a high number of biological siblings born before or after the index child from whom children were either estranged or with whom they had not had an opportunity to develop a relationship. A total of 78 ‘stranger’ siblings were uncovered, more than half of the 154 siblings identified. These stranger siblings were Permanence and parental estrangement were the two main circumstances that led to sibling estrangement.

**Conclusions**
We conclude that accurate recording and measurement of sibling relationships of looked-after children should be prioritised by child welfare agencies to enable effective decision-making. We also argue that greater research effort needs to be directed towards accurate measurement of aspects of sibling relationships of looked-after children in order to assess the longer-term outcomes of state interventions in children's lives. Fundamental to both is a commitment to listening to children.
What Is Behind the Intervention Label? Common and Specific Elements of Interventions for Families with Multiple Problems

Thursday, 4th October @ 16:00: Intervention with Multiproblem Families (Venue: D. Maria)

Ms. Loraine Visscher (University Medical Center Groningen), Dr. Danielle Jansen (University Medical Center Groningen), Dr. Els Evenboer (University Medical Center Groningen), Prof. Tom Van Yperen (University of Groningen), Prof. Menno Reijneveld (University Medical Center Groningen), Prof. Ron Scholte (Radboud University)

Introduction: Evidence on the effect of some of the interventions for families with multiple problems (FMP) like systemic family therapies (e.g. Multidimensional Family Therapy [MDFT] and Multisystemic Therapy [MST]) has increases, but detailed information on their constituting elements is still lacking. This hinders the interpretation and comparison of outcomes of interventions and leads to questions regarding the overlap between the content of interventions for FMP. A way to gain insight into the content of interventions is to identify their practice elements (i.e. distinct techniques delivered by the practitioner) and their program elements (i.e. aspects of the intervention design and service delivery system). With knowledge on the practice and program elements of interventions for FMP, common and specific elements of these interventions could be identified. Identification of these common and specific elements may help to identify similarities and differences between interventions for FMP. Therefore, the aim of this study is to identify practice and program elements of interventions targeting MPF in order to define common and specific elements of these interventions.

Method: We identified eight interventions targeting FMP that are commonly used in the Netherlands and have been shown to yield at least moderate effect sizes: Multisystemic Therapy (MST), Multidimensional Family Therapy (MDFT), Intensive Family Treatment (IFT), Families First (FF), Family Central (FC), Parent Management Training Oregon (PMTO), Triple P 4-5 and 10 for the Future (10FF). Two researchers independently assessed the manuals of these eight interventions, using an FMP taxonomy specifically developed for this purpose. This taxonomy consisted of eight main categories comprising 53 practice elements (e.g. working on communication) and one category comprising six program elements (e.g. duration and intensity of the intervention). We defined an element as common if it was found in at least five of the eight interventions and as intervention-specific if in less than five.

Results: Our study showed that 79% of the identified practice elements were common across the interventions, while 21% of the practice elements were unique for some interventions (intervention-specific). Common practice elements were mainly found in the categories “collecting and organizing information”, “planning and evaluation”, “working on change” and “learning parenting skills”. Intervention-specific practice elements were mainly part of the three categories: “relieving tasks”, “activating the social network” and “activating the professional network”. Interventions with more than five intervention-specific practice elements derived from the taxonomy were 10FF, FC, IFT and MST. This means that besides common practice elements, these four interventions in addition focus on specific issues like helping with tasks (e.g. financial tasks or contact with school) and activation of the social and professional network around FMP. The remaining four interventions had fewer intervention-specific practice elements, with Triple P 4-5 and PMTO having the fewest (one and none, respectively). Program elements mostly seemed to be intervention-specific. For example, the duration and intensity varied between interventions. Furthermore, we found that consultation was only part of one intervention (MST) and that interventions varied regarding the degree to which intervention and supervision were compulsory.

Conclusion: Our findings show that most of the interventions for FMP with different labels have rather similar contents (i.e., practice elements) but have greatly differing formats (i.e., program elements). This adds to our understanding of the use of these interventions in daily practice and may contribute to improving care. An evident next step is to collect evidence on the practice and program elements that are part of the inter-
ventions in daily practice. This subsequent step may further enrich our understanding of the content of these interventions in daily practice, which may be different indeed.
Providing More Insight into Care Offered to Multiproblem Families: A Mixed Method Design

Thursday, 4th October @ 16:15: Intervention with Multiproblem Families (Venue: D. Maria)

Dr. Els Evenboer (University Medical Center Groningen), Prof. Menno Reijneveld (University Medical Center Groningen), Dr. Danielle Jansen (University Medical Center Groningen)

Introduction: The difficulties that multiproblem families (MPF) experience within various domains of life interact with each other. MPF often lack the ability to solve their problems, such as social or financial problems, domestic violence, inadequate parenting skills and living in a poor neighborhood, in a persistent way. These problems, therefore, cause children growing up in a MPF to have a higher risk of developmental problems. Consensus is lacking as to which type of care is most effective for MPF. In this study we aimed to (1) provide more detailed information on the care offered to MPF and the association with outcomes for parents/caretakers and adolescents and (2) provide information on how parent/caretakers evaluated the care they received.

Methods: A mixed method design was used to collect data between 2015 and 2017 on the care offered to MPF and outcomes of these care on the short and on the longer term. Information was gathered among other things on the type of care offered (professionals), self-reliance, well-being, social support (parent/caretaker), behavioral or emotional problems, social support and relationship with parent/caretaker (adolescent). Questionnaires were filled in by the professional, the parent/caretaker and the adolescent (12-18 years) at baseline (T0), six months (T1), one year (T2) and after 18 months (T3). Semi-structured interviews with professionals and parents/caretakers were conducted between T2 and T3.

Results: The results concerning the first aim showed that the greater part of the activities of professionals was targeting the parent/caretaker and less often the child. Furthermore, the professionals paid a lot of attention to building up and maintaining a working relationship and providing cues for behavioral change. Professionals paid less attention to involving the social network of MPF in the care. The difficulties the parents/caretakers experienced did not significantly decrease or increase over time, but stayed rather stable across the various outcome measures. They experienced somewhat less social support over time, were constantly relatively positive about the future of their children and were positive about the communication with their professional as well on the shorter as on the longer term. The adolescents were also consistently confident about their future, were less positive about the communication with their professional, had a relatively constant positive relationship with their parents/caretakers and were rather happy with their lives.

Concerning the second aim, the interviews with professionals provided insight into the obstructive (i.e. bureaucracy, collaboration with external professionals and organizations) and supporting (i.e. longer-term support, being supported by your own organization) factors when providing care to MPF. The interviews with the parents/caretakers showed that they appreciated the fact that professionals provided care in a home-based situation for a longer period. They found it hard to make plans for their own future concerning (voluntary) work, dreams and hopes because of the situation they were in for already a longer period.

Discussion: This study showed that difficulties of MPF did not increase or decrease significantly over time. This holds for parents/caretakers as well as for the adolescents. In addition, professionals experienced some barriers in providing care to MPF, but also supporting factors. Parents/caretakers reported that given the fact that they were already for a longer period in this situation, it is hard to make plans for the future and achieve changes in their lives. Providing care over longer periods of time and keeping a positive relationship with MPF seem therefore very important to stabilize these families and their setting.
Intervention with Maltreating Parents: What Works?

Thursday, 4th October @ 16:30: Intervention with Multiproblem Families (Venue: D. Maria)

Ms. Sarah Whitcombe-Dobbs (University of Canterbury), Prof. Michael Tarren-sweeney (University of Canterbury)

Interventions specifically designed for parents who maltreat their children are hard to come by, despite the widely acknowledged need for effective treatments. Many government-funded parenting programmes used for this population have originated as skills-based interventions targeting behaviour management rather than relationally-based factors. For those that are designed for maltreating parents, the research supporting their effectiveness is limited. One key problem with the research in this field is the lack of objective maltreatment measures both pre- and post-intervention. While proxy indicators for parenting improvement may be appropriate for other types of parent and child difficulties, they are much less appropriate or useful in families where ongoing harm to children is occurring. Improvements in parenting skills and child behaviours are only relevant if they are accompanied by a cessation of child maltreatment. Many field practitioners working one-to-one with parents provide an individualised treatment based on best practice principles, but these treatments vary widely and can be idiosyncratic. This presentation will provide an overview of the international literature, looking only at those studies that have used objective maltreatment measures – such as notification to child protection services – both pre- and post-intervention. It will also discuss the relevance of programmes rooted in social learning theory versus attachment theory, and whether the tension between these is necessary. Practice implications for those working with complex, multi-risk families to improve outcomes are discussed.
Evaluation of HerWay Home: Promising Approaches and Outcomes of a Prevention Program for Substance-Using Women

Thursday, 4th October @ 16:45: Intervention with Multiproblem Families (Venue: D. Maria)

Dr. Deborah Rutman (School of Social Work, University of Victoria and Nota Bene Consulting Group)

Objectives: This presentation will share highlights of the two-year (2015-2017) comprehensive evaluation of HerWay Home (HWH), a holistic, multi-service drop-in and outreach program located in Victoria, Canada, for women who use or have used substances and who may also be affected by mental illness, trauma and/or violence. Key philosophical underpinnings of HWH include: harm reduction; being relationship-based and trauma-informed. Evaluation highlights will focus on the program's outcomes for women and their infants and children, including improved mother-child connection and prevention of infants/children going into foster care, and will present promising approaches in working with women with complex, social determinants of health issues.

Methods: Phase 1 of HerWay Home's evaluation focused on the program's development and implementation, identifying promising practices and early outcomes for clients and their families. Phase 2 assessed longer-term outcomes for women and their children, service partners, and health and social care systems. The evaluation employed a mixed-method design, involving: interviews with 60 people (28 women who were HWH program participants; 26 service partners; 6 staff); review of program data; document review; and a Social Return on Investment (SROI) analysis that included variables such as having a healthy birth, infants not being substance-affected at birth / Fetal Alcohol Spectrum Disorder prevention, and avoidance of children coming into foster care.

Findings: HerWay Home is achieving key outcomes and is being implemented in ways that are highly consistent with its guiding principles. Significant outcomes for pregnant and parent women (clients) included improved mental well-being; retaining/regaining custody of their infant/child(ren); quitting or substantially reducing substance use; feeling supported; and feeling hopeful and confident in terms of caring for their child(ren). More than 80% of the women's child(ren) now live with them or their family; 75% of the infants were healthy at birth, and 83% were not substance-affected at birth. Outcomes for service partners included improved collaborations and partnerships that resulted in better access to safe housing for families as well as service partners gaining a clearer understanding of how a harm reduction approach helps prevent infants and children coming into care. The Social Return on Investment analysis showed strong cost savings and social value created in relation to the outcomes examined. Promising approaches included the importance of: a harm reduction approach in helping women to achieve their goals; a non-judgemental, relational approach; and relationship-building between HerWay Home staff and community partners, including and in particular child welfare workers.

Conclusion: This session provides an opportunity to learn about holistic programs reaching pregnant women and new mothers with substance use and related health and social care challenges and about how these programs achieve positive outcomes for infants/children, women, and for the mother-child connection. This session will also discuss approaches to evaluation that capture the complexity of such multi-service programs for women and their children/families.
Babies are extremely vulnerable to poor care and placing them away from their parents can be essential for their immediate safety. In Australia, the rate of removal of babies <1 year is much higher than for children overall, and the placement rate for Aboriginal babies is on the rise. Yet, placement in care carries serious consequences. Notwithstanding the significant impact on infants, parents are known to experience profound grief and loss when their babies are taken into care. The fact that an alarmingly high proportion of mothers who have a baby removed by a statutory child protection service and placed in care are pregnant and facing another child protection intervention within a short space of time is gaining the attention of researchers and policymakers internationally. Subsequent births contribute to generally poor outcomes for these families. Subsequent children may be exposed to the atypical parenting that brought older siblings in contact with the child protection system, placing them at risk of significant harm and placement in care. Subsequent births have also been related to a reduced likelihood of achieving reunification with older siblings.

The aim of this study was to test associations between unresolved maternal loss and fertility intentions and outcomes among women who have a baby or young child in care. Attachment disorganisation (or unresolved state of mind) following a significant loss has been documented in several studies. This study theorised that a desire for pregnancy and parenting another child is a means of coping with, or suppressing, episodes of distress and mitigating intrusive thoughts associated with an unresolved state of mind. Childhood trauma was thought to increase the likelihood of unresolved state of mind and subsequent childbearing.

Women with children aged <4 years in care were recruited through agencies providing family reunification services, community health services and alcohol and drug services in the Australian states of New South Wales and Victoria. Researchers contacted consenting women to undertake a 20-minute quantitative survey conducted via telephone about their; personal circumstances and socio-demographic background, state of mind regarding the removal of their baby/young child and past and future childbearing. Maternal state of mind regarding the removal of a baby/young child was measured using a modified version of the Impact of Events Scale-Revised. Recruitment of mothers through community-based health and human services has proved extremely challenging, and it has been necessary to extend the fieldwork until December 2018 to achieve a reduced target sample of \( N = 20 \). However, data collected on a small number of mothers show scores on the Impact of Events Scale-Revised well above the clinical cutoff, suggesting an extreme stress response to having a baby or young child taken into care. Women with the highest stress scores did not have any children in their custody and their children had been on a protection order for less time than the children of the other mothers. These women also had a moderate and strong desire for pregnancy, were not using contraception, had not received family planning, and had extensive personal out-of-home care histories. Unlike the other mothers, these women had also experienced family violence within the past 12 months. The woman with the highest stress score and the strongest desire for pregnancy had had 12 pregnancies in her lifetime, resulting in 5 live births. All 5 of these children were in out-of-home care. Findings are discussed in the context of existing supports to parents with children in out-of-home care. Recruitment challenges are also discussed in terms of the implications for future research.
Video-Feedback Intervention to Promote Positive Parenting for At-Risk Mothers: A Meta-Analysis

Thursday, 4th October @ 17:15: Intervention with Multiproblem Families (Venue: D. Maria)

Mrs. Delphine West (Vrije Universiteit Brussel), Prof. Johan Vanderfaeillie (Vrije Universiteit Brussel), Mrs. Laura Gypen (Vrije Universiteit Brussel), Dr. Frank Van Holen (Pleegzorg Vlaams Brabant)

Introduction:
The motherly interaction style has an important impact on young children and their general development. Mother-child interactions are preferably sensitive. Given the importance of these mother-child interactions and in order to promote a more sensitive interaction style, video-feedback programs were developed. During these video-feedback interventions, parent-child interactions are filmed and reviewed together with the parent. One of these programs is Video-feedback Intervention to Promote Positive Parenting (VIPP). In this meta-analysis, the effectiveness of VIPP for mothers at risk is studied.

Methods:
The electronic databases PubMed, Web of Science, ProQuest and EBSCO were systematically searched. Six studies that met the selection criteria were included in this meta-analysis. The calculation of the overall effect was conducted using the random effects model.

Results:
Random effects analyses across 6 studies and n=353 mothers indicated an overall medium effect for sensitivity of $d = 0.65$. The overall effect size for attachment, across 4 studies and n = 234 mothers, was small with $d = 0.41$.

Conclusion:
VIPP is an effective intervention with a medium effect size for at-risk mothers when it comes to increasing the maternal sensitivity. Only two of the four studies that reported results regarding attachment found a significant effect and the overall effect size was small. This latter result can be explained by the fact that attachment is a rather indirect measure of the effect of the intervention, that is mediated by motherly sensitivity.
Children's trajectories through the welfare system are diverse even though they all have been in out-of-home care. Instead of grouping children in out-of-home care as one homogenous group this paper shows that different pathways through the child care system throughout childhood lead to different outcomes.

The share of 0-17-year-olds being in out-of-home care in Denmark is permanently at 1 percent, whereas about 5 percent of a cohort born in the 1990's has experienced being in out-of-home care at some point during their childhood and adolescence. Combining monthly information on placement status and type of placement of all children born in 1995 who at least once have been in out-of-home care we can create a complete care history of each child from birth to age 18. These lines of trajectory are used to cluster children with similar trajectories and thus, identify typical pathways.

Exploiting both administrative data and longitudinal survey-data, we first examine whether cumulated adverse pre-placement parental characteristics and child characteristics affect the entry and the trajectory. Second, we analyze if and how the different pathways affect outcome as age 21 such as level of education/enrolment in education, delinquency, mental health, and dependence on social assistance.

Preliminary results show a staggering diversity of life events histories hidden behind the common story of out-of-home care children. We identify 8 distinct clusters of typical trajectories through the child welfare system. We find that pre-placement characteristics do matter and the results show that the different pathways through the child welfare system are correlated with later outcomes. In perspective this study highlights the diversity in out-of-home placement and that different pathway have consequences for the child in the long run suggesting a need for a more targeted line of action and a more coherent view on children’s life trajectories to ensure that that their transition into adulthood is a transition into independent adulthood.
Care Leavers and Their Constructions of Youth “And That’s Why I Miss a Lot of Youthfulness Somehow”

Thursday, 4th October @ 16:15: Life Pathways from Care to Adulthood (Venue: Ribeira II)

Dr. Katharina Mangold (Hildes), Prof. Wolfgang Schroer (University of Hildesheim)

In most industrialized societies, the transition of young adults from adolescence to adulthood has changed in many aspects. The individualization of life courses leads to a substantial uncertainty among young adults about the pace and directions of their life course trajectories (Walther and Stauber, 2002). As a result, young people take their time to explore and consider their future and to assume full adult responsibilities (Arnett, 2000). The transition to adulthood of young people “at risk” tends to be even more complex. Young people who grow up in a residential care system without their birth family and leave care mostly at the age of 17 or 18 years are especially at risk and cannot enjoy the privilege of a gradual and prolonged transition to adulthood (Arnett, 2007). Their transition is much faster, and, most likely, they have experienced very limited or no support from their families of origin (Hiles et al., 2013).

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).

In this perspective, we want to ask how care leavers construct youth in the interdependency with institutions and which self-positioning processes are involved. Therefore, youth is discussed in the context of independence, self-positioning and qualification (BMFSFJ 2017). This paper focuses on care leavers’ experiences of their transition from care to adulthood and the question of their idea and construction of youth. The interaction and interweaving of these process of construction can be traced through biographical interviews with Care Leavers.

We use biographical narratives of 17 young people with different paths of transition out of public care to answer following questions: What does youth mean in the biographical situation of leaving care? What do care leavers associat with youth? And how meaningful is independence, self-positioning and qualification for their own youth?

In a perspective of social work our paper will contribute possibilities of support young care leavers in the transition to adulthood.
Transitions to Adulthood from Care: Care Leavers Views and Experiences

Thursday, 4th October @ 16:30: Life Pathways from Care to Adulthood (Venue: Ribeira II)

Mrs. Federica Gullo (University of Oviedo), Mrs. Laura García-Alba (University of Oviedo), Mr. André Tavares Rodrigues (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo)

Previous literature shows how young people in care usually are at a disadvantage when making the transition to adulthood and the importance of the work that is done during intervention in residential care and the end results. Therefore, in order to have a positive impact on young peoples future, it's important to have a deeper understanding of their transitional process, to detect their needs and to evaluate the outcomes that current benefits and supports achieve.

The aim of this research is to assess the needs of young people leaving residential care after 18 years old, with a method based on gathering information about their perceptions: how they experience this delicate transition according to their peculiar circumstances and vicissitudes, the kind of help and support they are receiving, and their satisfaction with any previous preparation and current support and services.

Participants were 35 young people aged from 16 to 21 receiving support from the “Support Area for Youth in care and leaving care” (ASJTET, a unit of the General Directorate of Child and Adolescent Care of the Catalan Government in Spain), which offers support in different areas to young people aged 16 to 21 with no resources, with the aim of facilitating their transition process to adult and independent life in terms of social and labour insertion.

Methods of data collection included a semi-structured interview, gathering information about different aspects of their current and past situation. The areas explored were: family and child care background, education and training, work situation, income, housing, social relations and social support, community integration, health and well-being and feelings and expectations about their transition to adult life. The following questionnaires were also used: the personal wellbeing index of Cummins, a satisfaction questionnaire with the ASJTET service and a questionnaire about problems in the care centers.

Results will be shown about the young people’s profiles and descriptive data, their own views about their current situation, the experience of the transition process and the evaluation of previous preparation and current support as care leavers.
The transition to adulthood for young people leaving care has become a major concern for academics and practitioners. It is known that family and residential dimensions interact in many different ways in youngsters’ life courses (Stein, 2015; Goyette & Frechon, 2013). For all young adults, different research has demonstrated a connection between marital status and access to independent housing, especially in precarious situations (Dietrich-Ragon, 2015), and for monoparental families leaving care (Ganne & Bergonnier-Dupuy, 2012).

The proposed communication is based upon the ELAP study (Longitudinal Study on access to autonomy for young people in care), conducted in France since 2013 and supervised by Isabelle Frechon. During the first phase, 1622 young people in care, aged 17 to 20, were interviewed about their life conditions in care and about their preparation for independent living. Eighteen months later, 756 of them answered a second questionnaire. We selected the population who completed these two waves of the survey and reported independent living, which meant that they were no longer supported by child protection services for housing or financial resources (397 young people). The survey is still ongoing with qualitative interviews with about one hundred of these young adults.

Through the combination of quantitative and qualitative data different types of residential and family pathways were identified. Some young adults postpone entering a stable relationship and prioritise professional integration and getting independent housing, whereas for others, especially young women, cohabitation with a partner comes before professional integration and supports access to independent housing. A minority of young women experience a transition to parenthood in precarity, meaning without housing and marital stability; these women and their babies are supported by institutions.

An important result shows that entering in a stable relationship leads young people to leave care, especially for young women. Processes leading to these earlier releases are very diverse. They have been analysed by means of qualitative material collected through interviews: wish to cohabit with a partner, non-acceptance of the relationship by the social workers, easier access to independent housing... We noticed mostly a weakening of institutional protection, as a result of both the youngster’s distancing and the disengagement of child protection services, because of the principle of subsidiarity of welfare, complementing the protection of the primary network. Living with a partner leads to lower institutional support and this situation is an accelerator of the transition from the “youth” to “adult” category as implied by social policies. These processes lead some women to a strong dependency on partners. This situation is particularly true for women who became mothers during care, or shortly after leaving care.
Surrounded by People Yet Alone? Findings from a Qualitative Longitudinal Study of Aging Out of State Care in Ireland

Thursday, 4th October @ 17:00: Life Pathways from Care to Adulthood (Venue: Ribeira II)

Ms. Natalie Glynn (Trinity College Dublin, School of Social Work and Social Policy)

While outcome studies dominate existing research on care leavers, a growing number of studies have aimed to investigate the experiences of care leavers. However, a majority of these (qualitative or quantitative) have examined specific aspects of life experience – including education and training, social support and/or housing – that are of policy interest. While this research has contributed to a more robust understanding of important dimensions of care leavers’ lives, there is a paucity of research on the lived experience of the transition out of care itself. The point of leaving care is recognised in the literature as a critical juncture, with implications for later life outcomes; yet, very little is known about how young people negotiate this transition. Qualitative longitudinal research has the potential to elucidate previously neglected aspects of the care leaving experience and to contribute to the effort to destigmatize this transition for young people whose lives are scrutinized far more than those of their non-care peers.

This paper presents emergent findings from a qualitative longitudinal study of young people leaving the Irish care system at the age of 18 years. The research is timely considering the Child Care Amendment Act, 2015 strengthened existing legislation, placing a statutory obligation on the Child and Family Agency (Tusla) to plan for the transition out of care for each child with at least 12 months of State care experience. Viewing aging out of care as a process rather than a discrete event, a study was designed to explore the experiences of young people during this key transitional period and included three data collection points to be carried out at 6-month intervals over a period of one year. At baseline, 16 young people were recruited from both urban and rural localities nationally. The sample included young people from all four Tusla Area Offices. To be eligible for participation in the research, young people had to be:

- 18 years old at the time of interview;
- Identify with any gender;
- Be in the care of the State for at least 6 months prior to turning 18 years old; and
- Had previously lived for at least 12 months in any type of State care provision (e.g. residential, foster, and/or kinship care).

At each interview phase, open-ended, in-depth interviewing techniques were used to encourage young people to talk about their:

- life before and in care;
- life since aging out of care and current circumstances, including social support and relationships;
- experiences of aftercare planning and transitions, including role in decision-making;
- and thoughts and perspectives on the future.

This exploratory approach to examining the lived experience of aging out of care yielded rich data about young people's everyday lives and relationships and enabled a detailed analysis of transition, continuity and change. Based on data generated from all three phases of the study, this paper examines young people's experiences of aging out of care, with specific attention to their experiences of increased responsibility and their sense of (in)security.

During this critical transition period, young people made numerous influential decisions, and the process of leaving care was characterized by significant increases in social and fiscal responsibilities. Yet, these decisions
and responsibilities are situated in a context of uncertainty regarding their current material circumstances and possible futures. While the preliminary findings indicate that young people navigate many barriers and challenges, they also contribute to the current debate on resilience in the lives of care leavers by problematising the ‘othering’ of their transition to adulthood.
Social Work with Children and Young People in Care: Can We Define and Measure Core Communication Skills?

Thursday, 4th October @ 16:00: Strengthening Relationships & Promoting Autonomy in Care (Venue: Ribeira I)

Ms. Fiona Newlands (University of Bedfordshire), Ms. Amy Lynch (University of Bedfordshire), Ms. Munira Khan (University of Bedfordshire), Mr. David Westlake (Cardiff University)

Introduction

The need for improved communication skills to enable social workers to engage in more effective direct work with children and young people (CYP) is a long-standing issue (Ward et al, 2005) which has been voiced by young people themselves (Morgan, 2011). There has been a recent shift towards increasing the focus on exploring what happens in direct work with CYP (Winters et al, 2016) and research has informed the development of a capabilities framework (Lefevre, 2015). Further work needs to be done to define and measure communication skills.

This paper aims to develop our understanding of what constitutes good practice in direct work with CYP. We report on a study that explored the communication skills social workers use in direct work with CYP. The research was funded as part of the Department of Education Innovation programme in England, and forms part of a wider programme of research on social worker communication skills. It builds on an existing framework which draws upon Motivational Interviewing (MI) and describes and measures skills in child protection social work (Whittaker et al, 2016).

Our research questions were:

1. Which communication skills do social workers use in direct work with CYP?
2. How might these skills be conceptualised in a framework?
3. Can we reliably measure these skills?

Method

We worked alongside social workers in the looked after children’s service in an inner London local authority as part of a practice improvement project. The project aimed to develop and implement a model of practice with CYP and our role was to observe and record practice and to provide feedback. Thirty-seven recordings of direct practice between social workers and CYPs were analysed by 6 members of the research team listening to recordings in pairs and groups.

Analysis of the recordings was informed by the MI skills framework and concepts from Trauma Informed Practice to develop a bespoke framework to measure social work practice skill with CYP. Inter-rater reliability of researchers’ measurement of social worker skill was calculated using Krippendorff’s alpha (α) (Hayes & Krippendroff, 2007).

Results

Five core skills were identified including empathy and collaboration. We developed a coding framework to incorporate these five skills and accompanying behaviours. It enabled coding on a five point scale for each of the skills, from low (1) to high (5).

Inter-rater reliability of researchers was good to excellent for four of the five skills. However, the inter-rater reliability score for one of the skills was lower, perhaps indicating its relative complexity.

Conclusion

This study is a first step towards clearly describing and defining some of the core verbal communication skills that social workers use in direct work with CYP. The results suggest it is possible to develop a framework to include and reliably measure core verbal communication skills in practice, though there is still conceptual work...
to be done in some areas. The framework has the potential to help social workers and their managers consider how to demonstrate skills such as empathy and collaboration in their work with CYP. The next steps would be to validate the framework and explore the link between communication skills, effectiveness of direct work and outcomes for CYP.
Children’s and Staff’s Interpretations of “Loving Home”: Research Findings from SOS Children’s Village Estonia

Thursday, 4th October @ 16:15: Strengthening Relationships & Promoting Autonomy in Care (Venue: Ribeira I)

Objectives: In Estonia, during more than twenty years of existence, SOS CV has become more similar to a foster family, however, some institutional characteristics and practices that have positive impact in terms of quality care (e.g., material security, professional cooperation of family parents, (inter)national support of the organisation) remain. The main idea of SOS CV is to provide children a ‘loving home and relationships’. Related to this, UN Committee on the Rights of the Child refers to high quality care in raising children, and emphasise that opportunities for long-term attachment and supporting relationships with parental figures are fundamental to child’s development, also continuing and security.

In this presentation we focus on two research questions: What does the ‘loving home’ and ‘loving relations’ mean for SOS CV children and staff members?; How notions of ‘loving home’ and ‘loving relations’ relate to the concept of quality care?

Method: Ethnographic field research was carried out in an Estonian SOS CV in 2014-2015. Data includes document analysis, participant observation notes, interviews, and informal conversation transcripts with staff members (n=15), and repeated individual and group conversations with children (n=8), including notes related to joint activities with them (e.g., cooking, hiking trips). Through narrative data analysis of daily life in SOS CV, we aimed to gain an in-depth understanding of ‘loving home’ and ‘loving relationships’ and to explain these terms and their meanings related to the concept of quality care.

Results: Findings indicate differences in how notions ‘loving home’ and ‘loving relations’ are used in communication and what meanings these notions have to participants. The word ‘love’ was not prevalent in everyday communication and was rarely used during the observations of everyday activity in SOS CV. However, in staff members’ narratives it was a central notion. Staff emphasized the importance of love as the basis of care. They discussed that loving relations with children are difficult or even impossible to achieve. While, at same time, it was indicated that one of the crucial lessons for SOS parents was experiencing and learning that it is possible to truly love someone else's children. Love and loving relationships mean first of all caring here and now or as long as the child is a child. In addition, staff-members might feel they are “obliged” to love children. Therefore, “love” has ambivalent meaning.

In children’s narratives love as notion was never used. Children spoke about “home”, “family” and “mother”. For children, these terms relate to permanency, as a continuum in time. Children appreciate SOS parents for their caring. However, children pointed to formality and contradictions in relationships, which is mostly related to temporary life in SOS family. The temporality of these permanent relationships produce frustration and misunderstandings. Ordinarily, family relationships do not end when the child becomes an adult, which is the case of the substitute home. This is a difficult situation, related to dependence with SOS home while living there vs the pressure to weaken the relationships while leaving to independent adult life.

Conclusions: For children, ‘loving home’ and ‘loving relationships’ mean continuity and safety, which does not end with childhood. For staff members, ‘loving home and relationships’ can be associated with caring activities and protection of children here and now. Our particular interest is the dominant narrative embedded in the practice of substitute care and interactions between professionals and children. Removing a child from his/her family to a substitute care setting and providing quality care is a critical issue that should be further addressed in a context of continuity and safety. Today, the child is still mainly an object of (loving) care that s/he can enjoy until reaching adulthood.
The Development of Pedagogical Praxis in Residential Youth Care: Meanings and Perspectives

Thursday, 4th October @ 16:30: Strengthening Relationships & Promoting Autonomy in Care (Venue: Ribeira I)

Mrs. Delphine Levrouw (Department of Special Needs Education, Ghent University), Prof. Stijn Vandevenelde (Department of Special Needs Education, Ghent University), Prof. Rudi Roose (Department of Social Work and Social pedagogy, Ghent University)

In the past, the importance of the daily living situation in residential youth care has been acknowledged in scientific literature (Triesschman, 1969; Ter Horst, 1977; Kok, 1984, Van der Ploeg, 2005). Recent studies have again acknowledged the importance of this basic pedagogy, identifying the importance of an open, supportive, responsive and safe living climate in residential youth services (Anglin, 2004; Van Der Helm, 2011, Van Der Helm et al., 2012; 2013; Knorth, Harder & Anglin, 2014; Whittaker et. al, 2016).

In the current residential youth care, this basic pedagogy seems to be under pressure, due to certain evolutions, like the de-institutionalisation and using residential youth care as “a last resort” (Frensch & Cameron, 2002; Knorth et al., 2007; James et al. 2008; Boendermaker et al, 2013; Thoburn, J., 2016; Whittaker et al., 2016), a strong focus on “what works” (Boendermaker, Van Rooijen & Berg, 2013; Biesta, 2007) and a managerial thinking (Clark and Newman, 1997; Mc. Lean, 2013); leading to high rates of administration, and registration tasks as perceived by youth care and educators.

The current project relates to how organisations define “this basic pedagogy” and how educators in residential youth services perceive and construct their pedagogical work with young people in line with current research underscoring the importance of the living climate or the “orthopedagogical milieu”.

This research originated in and is linked to a learning trajectory in Flanders, led by a youth care organization in Flanders (Vereniging Ons Tehuis (VOT), Ypres). This project focuses on the meaning and the implications of an approach involving the improvement of the living climate in residential youth care.

We investigate (1) what could be learned from this project in improving the living climate in residential youth care (2) which motives/perspectives (human rights versus more instrumental perspective) do organisations in residential youth services enact in relation to the development of a basic pedagogy; (3) what could be learned from the quantitative data, gathered during this learning trajectory; and finally (4) how group workers give meaning to and shape the living group climate in relation to the development of a basic pedagogy.

Research question 1 focused on a single case study. The results indicate that group workers perceive the monitoring process as a constructive tool for discussing outcomes in establishing a positive living climate. Furthermore, the findings show that the living group climate is perceived as a “black box” (Knorth, Harder & Anglin, 2014); complex, with a diversity of interactions that are difficult to measure or capture – therefore, discussion about the outcomes is an essential part of improvement processes. This study provides further insight into the key factors and tensions in the development of a positive living group climate.
Nowadays, a major challenge is the greater conscience of the need to promote autonomy more effectively in children and youth in care, which has been a big issue in research and in therapeutic intervention worldwide. Aligned with collaborative and ecological approaches and with integrated interventions, SOS Children Villages Portugal developed and implemented a Framework for Autonomy Promotion that reinforces the importance of this concept, during care and on leaving care.

This Framework is a very practical tool, with a simplicity that allows the caregiver to have a guidance for action pro-autonomy and authorship of the children and young people, integrated in everyday interventions and in the base frameworks. It is a opportunity to reinforce the growing importance of the alignment of principles and approaches with the concrete practice in young people of self-authorship about their own story and future autonomy.

This Framework also explores the concept of autonomy as growing throughout the child's development, in close alignment with the dimensions of the Framework for Assessment of Children in Need. This feature has also created the possibility of adapting and to draw an integration plan for other SOS Children Villages in Europe.

This presentation intends to unveil the process of developing and implementing the Framework for Autonomy Promotion, the perspectives of growth of this tool, both in itself and for the context of strengthening and supporting families at risk, as well as some results already accomplished in SOS Children Villages.
"Therapeutic Falafel": An Innovative Guardianship Model for Children Deprived of Parental Care

Thursday, 4th October @ 17:00: Strengthening Relationships & Promoting Autonomy in Care (Venue: Ribeira I)

Dr. Talia Schwartz-Tayri (Tel Aviv University School of Social Work), Mr. Avner Barkai (The council for the child in care), Ms. Edna Glebocki (The council for the child in care)

Most of the children who have been taken into care remain in touch with their parents. Even parents, who have not been functioning too well, maintain contact with their child while in placement, and are concerned about the child's welfare, and intervene whenever they feel that the interests of their child are jeopardized. However, among the children who grow up in residential group homes there is a minority who lack any family backing whatsoever. Some of them are orphans, others have been abandoned and/or have parents who suffer from mental illness or addictions to the extent that they are unable to show any interest in their child. For these children the state appoints legal guardians in order to protect their interests. Most guardians, whether individuals or associations, limit themselves to management of property, major decisions such as hospitalization, and occasional visits to the residential setting to make sure that the child is properly cared for.

The Israeli council for the child in care, a NGO established to ensure the welfare of children in care, acts as a legal guardian for about 100 children who live in residential care settings throughout Israel. The council has developed a unique model for child guardianship, based on the understanding that every child needs and deserves a stable relationship with a sympathetic adult who not only looks after the child's material and physical interests, but provides ongoing emotional support and advice. To this end the association employs a team of social workers, each of them acting as guardian to about twenty children who have been placed in residential settings. The guardian creates a close relationship with the child through frequent visits, often taking him or her out for a meal, for shopping, or for some other leisure activity. In addition to taking care of the child's instrumental and emotional needs the guardian endeavors to integrate all systems that provide the child with therapy, education and medical care, gradually encouraging the child's independence and ability to exercise life-skills. One of the tasks of the guardian is to identify any potential source of support among members of the child's extended family and encourage relationships with siblings or other family members. The guardian advocates for the child's rights vis-à-vis the residential home, the school, and any other relevant organization or authority. In this the guardian complements but does not duplicate the care provided to the child by the staff of the residential group home.

The evaluation of this program is based on an analysis of detailed monthly reports submitted, during one year, by two guardians on their activities with 42 children, as well as in-depths interviews with 15 young men and women who had been wards of the council's guardianship, and with eight social workers of residential care settings who had referred children to this program. Findings include a conceptualization of this innovative guardianship model, an analysis of the actual activities undertaken by the guardians, and an assessment of the effects of the guardianship on the well being of the children.

An understanding of this model may advance practice concerning the protection of children who are deprived of parental care. This may be of special interest to colleagues in countries coping with problems posed by unaccompanied minor asylum seekers.
In social sciences, the most common statistical software is SPSS. However, in the last 10 years an increasing use of the R software can be observed. R is a software environment for data manipulation, simulation, calculation, and graphical display. R analyzes data effectively, is more flexible, especially with respect to data manipulation, and has the graphical capabilities for very sophisticated graphs and displays. Many statisticians all over the world are working with it, develop new tools and applications, and store them in libraries. R software can be downloaded for free, and it is made available through internet.

In this course, a short introduction will be given about some basic statistical techniques and tests, such as descriptive statistics, graphs, t-tests, $\chi^2$-tests, and regression models. Datasets and R codes will be provided. After the course, participants will have learnt to apply some simple statistical techniques on data with R, enough to learn more later in their own time.
Principled Practice: Navigating the Competing Ideals That Animate Child Protection

Friday, 5th October @ 08:45: Positive Child Protection Practices (Venue: Arquivo)

*Prof. Jill Berrick (University of California)*

Protecting children from maltreatment may be an impossible task. Press coverage often suggests the over- or under-involvement of social workers; instances when parents or children experienced tragic injustice at the hands of the child welfare system. Accounts from the media often characterize caseworkers as either biased baby snatchers, or error-prone bureaucrats who miss signals of risk. And admonitions from public officials, who claim that the standard for the profession is perfection, or who claim a zero-tolerance policy for error, do little to help the public understand the complexity of the work.

Impossible? Maybe, if we insist on a fault/blame paradigm. But the measure of child welfare as right or wrong is misguided; “perfect” is irresponsible. Efforts to protect children from harm are imperative, but caseworkers can’t do their job following simplistic prescriptions. Social workers should instead be judged by their efforts to conduct principled practice.

This presentation will lay out eight fundamental principles as a suggested guide to practice. Each principle appears simple and straightforward at first blush. Upon closer examination, however, we discover that these foundational principles collide with one another – not in the rare, exceptional cases, but in the average cases that serve to typify child welfare practice. Participants will consider how these tensions live at the heart of child welfare, how to wrestle with prioritizing one value over another, and how to address the moral ambiguities at stake when privileging one principle over another.

The presentation has relevance to instructors engaged in training the child welfare workforce and to social workers currently engaged in practice.
Harnessing the Informal Networks for Strengthened Child Protection Services

Friday, 5th October @ 09:15: Positive Child Protection Practices (Venue: Arquivo)

Dr. Mildred Mushunje (Justice For Children East and Southern Africa)

Objectives

- To discuss the role of informal networks for child protection
- To discuss the advantages and shortcomings of informal child protection systems
- To proffer ways in which informal systems can be strengthened for child protection

Introduction

This presentation discusses child protection in the context of changing environments as influenced by factors such as HIV/AIDS and poverty.

Method

The presentation draws on a systematic review of literature from various sources of literature from various sources. It also draws on my personal experiences of having worked with government and no-governamental organisations in the provision of child welfare services.

Discussion

Zimbabwe has a strong commitment to and takes seriously child protection as shown by the number of progressive national laws, regional and international conventions to which it is party. The national legal provisions include The Children's Act; Guardianship of Minors Act both of which are key to child protection. Under the Children's Act, children who are identified as being in need of care and/or vulnerable include: orphaned children, those with disabilities, abused children (sexually, emotionally and physically), destitute, abandoned, children on the streets and child parents.

In addition to these national provisions, the government has also ratified a number of international and regional instruments. The United Nations Convention on the Rights of the Child is the first International Instrument which is committed to protecting the rights of a child and Zimbabwe is party to this. The government is also a party to the African Charter on the Rights and Welfare of the Child (UNCRWC). The African Charter deals with the civil, political, social, economic and cultural rights of children just like the Convention on the Rights of the Child. It focuses on the plight of children in Africa. Some of the child rights principles that are set out in the African Charter are the best interests of the child, the principle of non-discrimination, survival and development, as well as child participation.

A number of factors, both endogenous and exogenous have contributed to the increased vulnerability of children, with the worst being HIV and AIDS, which has left an unprecedented number of children orphaned and vulnerable. The debilitating nature of the disease has contributed to families being very poor. Before the roll out of ARVs, families were robbed of bread winners leaving children orphaned. Poverty is also a factor that has caused a change in the landscape of child protection support systems. There is increased individualism as households strive to cater for their basic needs whereas in the past, households cared for each other during times of hardships.
Conclusion
The government, as the primary duty is charged with overall child protection and ensuring that children’s human rights are protected and their best interests are upheld. This responsibility is also carried by the primary carers who are the nuclear family. However, with the harsh economic environment, the government has often been unable to fulfil its obligations under the Children’s Act. Other duty bearers have to be on board to ensure that children are protected. Bearing this in mind, in this presentation, I discuss the importance of harnessing the extended family networks for the protection of children. I highlight the pros and cons of this with the conclusion that if the extended family networks are appropriately supported they could unlock the potential to be key players in the child protection arena.
The Role of Agency in Finding Pathways from Care to Work of Former Care Leavers: A Cross-National Study Including Five Countries

Thursday, 4th October @ 12:30: Young Adult Care Leavers in the World of Work (Venue: Arrábida)

Prof. Ingrid Höjer (Department of Social Work, University of Gothenburg), Prof. Yvonne Sjöblom (University College of Gävle), Dr. Helena Johansson (Department of Social Work, University of Gothenburg)

The overall aim of this study is to explore the concept of agency in relation to work in understanding the experience of young people who previously have been in care and their inclusion into the work life.

The research-project “Pathways from care to work” is part of an international research project including five countries; Ireland, Spain Belgium, Sweden and Czechoslovakia. It seeks to explore the work related experiences for young people who previously have been in care and who now are in their mid-twenties. The starting point of the study is that work and employment is a key element for care leavers regarding their social integration as adults in society.

The project is based on national case studies with comparative reviews. Interviews have been performed with former care leavers that have left placements in care at least five years ago. Cases have been collected from the five countries participating in the study. During the interviews, themes like work trajectories since first job and what has affected these work trajectories since leaving care, are explored from the young adult's perspective. The sample is based on the young people's successful experiences and good outcomes in relation to work.

The objective that will be studied in relation to this proposed abstract is the pathways to work for former care leavers and how these interconnect with the notion of agency. How do work experiences of former care leavers contribute to their agency and how does agency contribute to work for former care leavers? What promotes and inhibits agency for former care leavers in the world of work?

Focusing on former care leavers that are now currently working can help us to better understand what has helped these young people to find and stay in jobs and integrate themselves in the work life. The result will reveal different trajectories to work and how they are connected to the possibility of gaining and using agency related to the work experiences for this group of former care leavers. It will also give us knowledge on the processes that promotes and inhibits agency. These results will give important messages to policy and practice in current work with care leavers. It is important for practice and policy to learn from the young people's own narratives of their trajectories and of their experiences of entering and staying in the work life.
In the 1980s the “new sociology of childhood” – a genuinely sociological approach toward children and child-
hood – was rising. It stimulated research on childhood as a social phenomenon and thereby drew researchers' 
attention to the minority position of children, which was found in all countries where such research was imple-
mented. This approach toward children and childhood insisted on the fundamental difference between chil-
dren and adults, and it coined the concept of “generational order” to call attention to the fact that the categories 
of “children” and “adults” are societally defined relative to each other; therefore “childhood” and “adulthood” 
have to be considered as structural elements of a society. This concept is an essential instrument for study-
ing the relative shares of important resources, social rights, and entitlements among different age groups and 
the fundamental asymmetry disadvantaging children. It is a given that in any known society this generational 
order exists analogous to the gender order...

While “generational order” is a structural term that grasps children’s minority position, it was not intended to 
include variations in the category of children. On the contrary, this approach to childhood aimed at creating 
a (cognitive) “home for all children and only for children” – like Qvortrup (2007: 396), one of childhood sociol-
ogy’s founding fathers, points out emphatically – as no sociological conceptualization of childhood had been at-
temted before. Consequently, childhood sociologists were reluctant to adopt the notion of “intersectionality”–
that individuals are simultaneously positioned in many social categories and that it is this intersection of var-
ious axes which causes advantages and disadvantages – while it was already becoming a central concept in 
feminist theory. They were afraid that their discovery of the structural relevance of generational order might 
be dissolved when attention was paid to a multitude of unequal childhoods – that childhood might just become 
one structural category among others losing its outstanding meaning.

If we consider the problems that the social category of children constitute vis-à-vis the programs and practices 
of child protection, there are good reasons to intertwine both approaches mentioned above: On the one hand 
to give crucial importance to the fundamental asymmetry between age groups and the marginalization of chil-
dren, and on the other to consider and (theoretically and empirically) search for the intersection of dimensions 
resulting in specific disadvantages for some groups of children. This is based on what we learn when we take a 
closer look at professions and institutions of child protection on a national level. The intersectionality approach 
makes us aware of how the attention given to some groups of children differs from that given to others – which 
may be to the advantage or disadvantage of these groups of children, even in astonishing ways. Whereas the 
generational perspective is needed to explain the fact that programs and practices are strongly family-centred 
and only give sparse attention to children at all – we may even speak of the “invisibility” of children in child 
protection. Unlike adults, children are neither the protagonists of such programs, nor are they really consid-
ered to be the clients. In this way, both approaches are also essential when we analyze programs which are 
meant to improve children’s conditions of living on a global level. Local childhoods are manifold, composed of 
tremendous variations and rarely taken into account; simultaneously, local children’s experiences, hopes and 
sorrows are neither known nor considered by international organizations and their programs. 

I draw on results from a recent research project on professional practices in cases of child maltreatment in 
Germany and studies on children’s wellbeing, educational aspirations, and family obligations in Central Asia as 
empirical sources fo
Intersectionality has currently seen a rise in popularity across a range of social science disciplines, both as a theory and a praxis. As intersectionality travels and is applied across various fields and disciplines it is important to consider the politics of intersectionality, as its application is neither a straightforward nor an unproblematic process (Konstantoni and Emejulu 2017). Therefore, in this presentation I will discuss the politics of intersectionality when applied in the field of childhood studies and practice. In particular I will discuss how intersectionality is not just a synonym for diversity (Emejulu 2017); it is not just about recognising diverse childhood experiences. Intersectionality is a powerful way to discuss multidimensional inequalities and disadvantages and seeks the transformation of institutions. Intersectionality is thus a radical framework; however, in practice intersectionality has often been used in ways that dilute its radicalism. In this presentation, I will critically discuss what all of this means for our work with children and young people and how it might be possible to achieve social justice for children and families.
Prof. Karen Wells (Department of Geography, University of London)

This paper explores how immigration status intersects with age and relationship with parents to shape children's experiences of care. Its empirical focus is on children migrating to the UK through private networks who are taken into the families of distant kin and 'strangers' who share national and religious networks and/or identities. Although there is a body of academic research on unaccompanied minors it almost entirely focuses on young refugees and asylum seekers. There has been limited attention to the experiences of children moving overseas for reasons of care and education in private arrangements and often to new families with limited material resources (housing, wages). Private fostering regulations are intended to safeguard children who are living away from the family home but whose parents retain active parental responsibility for them and are resident in the UK. This legislation has a long history beginning in the late 19th century. Although in the post-colonial period increasing numbers of privately fostered children do not have UK citizenship, until the start of the 21st century it was generally assumed that their parents were also resident in the UK. Given the territorial co-location of parent and child, the existing private fostering regulations were considered appropriate for managing the safeguarding of this group. The basic presumption continued to be applied that the state should not usurp the prerogative of parents to determine what is in the best interests of their child. The death of Victoria Climbié, and the subsequent inquiry into her murder bought attention to the situation of children who were in Private Fostering arrangements but whose parents were not resident in the UK.

Despite the issues raised by the geographical distance between parents and privately fostered children in these cases, social workers with caseloads of children who are privately fostered but whose parents are not resident in the UK, and who the social workers do not have contact with, generally continue to apply the regulations as if it is meaningful to consider the child privately fostered (that is, as if the child is still being cared for by their parents, albeit at a distance). When children tell social workers that they are not in contact with their parents, social workers generally think that the child is lying in order to protect themselves from deportation. The general assumption of social workers is that parents send their children to the UK for a better life, especially through getting an English-language education to A level (at age 18 years) and continue to be somehow actively involved in their care. Consequently, resolving the often insecure immigration status of privately fostered children is itself treated as the responsibility of the parents or carers and not the responsibility of social workers. Social workers generally make a clear distinction between their responsibility to ensure there are no safeguarding issues raised by the child's placement and the wider issue of the child's safety as a person without regular immigration status. However, our research suggests that the connections between privately fostered children and their parents are not simply stretched but often broken and that children are frequently sent to the UK because of familial breakdown, often involving the death of a parent or parental abandonment. An intersectional lens helps to disentangle the complex circumstances of internationally privately fostered children.
While there is now a substantial body of research that highlights ways in which childhood is differentiated by, for example, gender, racialisation, social class, (dis)ability and sexuality, there are still many people who would like to think that young children are sufficiently innocent not to notice difference. Of course, they do not mean that children are literally unable to see differences, but that they do not systematically discriminate based on social categories. Yet, there is ample evidence that children act on social differences in ways that reproduce social inequalities. Relatively few pieces of research, however, consider the ways in which children are positioned in multiple social categories and how they make sense of these categories and this simultaneity. This paper explores the ways in which young children make meanings about difference and inequalities. It first considers the multiple ways in which children are positioned in contemporary European societies before discussing children and young people’s views on their own positioning and the ways in which intersectionality is central to their understanding. The paper presents examples from studies of masculinities and ethnicities with 11-15-year-old Finnish young people and of childhood language brokering to consider the complex ways in which young people are able to discuss intersectional inequalities and to take them for granted as well as ways in which adults rework and build upon their childhood understandings over time. The final part of the paper considers the implications of these findings for policy and practice.
“That Someone Understands My View of What That’s Like for Me” The View of the Foster Children on Their Foster Care Breakdown Processes

Friday, 5th October @ 10:15: Narrative Research on the Foster Care Experience (Venue: Infante)

Mrs. Clara Bombach (School of Social Work, Institute for Children, Youth and Family, Zurich University of Applied Sciences)

A large part of the available, predominantly quantitative studies in the area of foster care breakdown/disruption/discontinuity aims to attribute the problem constellations that led to the discontinuation to isolated factors (e.g. age, placement duration, etc.) with a rather negative view. In the vast majority of cases, the studies are based on files in which experts record their assessments of care conditions and the reasons for their termination. A large part of the studies argues against the background of theoretical considerations on attachment, which focus on problem situations and strains of the children. Smith, Cameron & Reimer (2017) show in their critical reflections on the questionable popularity of attachment theory as a supposed “master theory” in child and youth welfare that children tend to become “victims of their past”, “[...] rather than considering what might be a more optimistic and strengths-based socio-educational paradigm.” (S. 1613).

Studies in the field of foster care breakdown that take the perspective of the children and young people concerned into account are rare. In research literature there are therefore only few indications of complex ambivalent effects of terminations of care relationships, which, depending on the perspective, can also be experienced positively; terminations have “[...] the potential be both helpful and harmful to children in their journey through care.” (Unrau, 2007, p. 132) Looking at the state of research on the topic, the rare exceptions are the perspective of the foster children themselves and let them speak about their experiences (cf. Unrau, 2007, 2010). The majority of the studies argue on the basis of a large sample of file studies without critically reflecting that only one perspective is recorded in them. However, breakdowns are experienced and evaluated highly individually (cf. Bombach, Gabriel & Stohler, in publication). In the research landscape there are only in exceptional cases studies that try to explain the breakdown processes with the help of the perspective of the foster children. Correspondingly little is known about the fact that foster children independently and from their perspective also for good reasons break off care conditions themselves and bring about the end, look for independent connection solutions and move out. Little or almost nothing is known about their motives and how they describe their experiences. Unrau, Seita and Putney (2008) showed in their study in the US that the children and young people themselves did not describe their experiences as “breakdown” or “disruption”, but rather placed them in a larger context and described that they did not feel belonging and desired (“unwanted”) in the foster families in which they later experienced a breakdown (p. 1260).

The only recently concluded study of foster care breakdown processes in Switzerland (case files and interviews, n=93) shows the complexity of intertwined and interacting factors. In her presentation, Clara Bombach will outline the children's voices (n=13), their experiences and their explanations for certain behaviours in challenging times and situations, such as retreat, isolation, aggression and taking the changes in one’s own hand. She shows how this opens up rooms for manoeuvre/scopes of action and how they may close again - sometimes at the same time. The presentation ends with an outlook on possible life-long effects and a discussion about the narratives of children in care today and in the past.
Assessing the Relationship between the Foster Children and Their Families: Narratives from the Double Moon Test

Friday, 5th October @ 10:30: Narrative Research on the Foster Care Experience (Venue: Infante)

Dr. Teresa Díaz (Institute for Family Research, University CEU San Pablo of Madrid), Dr. Nuria Fuentes-Peláez (University of Barcelona)

Family relationship is a key issue and there is still a gap about how to assess it. The communication aims to:
1. To explore the narratives that children and their foster carers have regarding their family relationships and their relationship with their biological family.
2. To identify factors that favour the well-being of children and those that make it difficult, in terms of analysing which families are facilitating, which are ambivalent and which are hostile to the relationship of their foster children with their biological families.
3. To apply the knowledge by offering proposals that can help to improve the experience of the family relationships.

Method
The instruments used to collect information are a sociodemographic questionnaire, two semi-structured interviews (one to foster carers and another to the child) and a graphic-projective test named by its author, Professor Ondina Greco (1999), the Double Moon Test. The main areas analysed were concerning the motivations for fostering, the personal experience of family relationships, the relationship of the child with the biological family, the foster family’s expectations regarding the fostering and the deficits that all they (fosters and child) perceive. A triangulation and an analysis by thematic areas have been done. An exploration has been carried out about the experiences that the foster parents and the children have regarding their relationships with the biological family.

Results
The results show the narratives of children and families on very sensitive issues regarding foster careers.

Through analysis of our data it is possible to detect key aspects of fostering that can limit its performance, increase the risk of discomfort, even their continuity or, on the other hand, it can enhance and support fostering increasing the wellbeing of all involved. Thereby, we have reflected the most relevant results in these 2 blocks: a) communication barriers regarding the biological family or their relationship; b) facilitators of the communication regard the biological family or their relationship.

Between the most outstanding factors that we considered as facilitators of good family relationships and open communication we found: a) the absence of adoptive longings and the presence of solidarity motivations, b) the relationship with foster care associations c) the ability of fosters to recognize positive aspects in the existence of contacts. We also identify examples of a healthy way of dealing with foster children biological family relationships and examples of deficits in the way of living family relationships, as clear exponent of hostile attitudes that must be attended to prevent maladjustments.

A mismatch between the children's experience of their relationship with the biological family and what their foster careers believe of this experience is observed.

Conclusions
This research provides knowledge about this dynamics and could help professionals and fosters to detect aspects that usually go unnoticed and that can give rise to later problems if they are not addressed.
The results found and the tools used may help professionals to detect and help foster carers tackling issues before they become a risk to the continuity of fostering. The tools used allows children to express themselves and this contributes to reduce the distance to achieve one of the key challenges in child protection identify by Balsells, Fuentes-Peláez & Pastor (2017).

References
Data were collected for all 0 to 4-year-old children entering the one children’s home in a city in Sweden during a two-year period at the beginning of the 1980s. The 26 children staying more than four weeks were studied during their stay in the children’s home and were followed up 3 and 9 months after leaving residential care as well as 5, 10, 15, 20, 25 and 35 years later. My presentation is about the 20 who sooner or later got experiences from foster care as well. According to placement history they can be divided into three subgroups: a) 7 stayed in foster care after the few months in residential care; b) 7 returned home but were later replaced in foster care; c) 6 left the children’s home for a foster home but later returned home.

In the primary study and in the following five rounds of follow-up during childhood information was collected from different sources. The children, parent(s) and foster parents were interviewed and answered questionnaires and information from social workers and journals were collected. In the latest three rounds of follow-up only the now adult children were interviewed and answered questionnaires. The drop-outs were few or none in childhood. The two or three drop-outs in one of the three rounds of follow-up in adulthood were not the same persons and all of them have been interviewed as adults.

I will start with the interviews when the interviewees were 25-30 and 35-40 years old. Around half of them were doing well, had a good job, a good financial position and no debts to the Swedish enforcement service. As 35-40-year-olds all but one lived with a partner who they had known for many years and talked very positively about and had children together with. The other half of the research group had an uncertain or problematic social situation. None of them had a regular employment and most of them had debts to the Swedish enforcement service. Some of them had disability pension for psychiatric reasons and some of them had experiences from prison because of involvement with drugs and criminal behavior. Most of them did not live in a permanent relationship. Some of them had no children and those who had children did not live with them on a daily basis. When social adjustment and wellbeing after 25 years of age is compared with school performance and behavior in childhood there are continuities as well as discontinuities. Adult adjustment and maladjustment were spread over the three subgroups. More women than men are well-adjusted adults but this was not necessarily in accordance with adjustment when they were children. A few men as well as a few women had psychiatric diagnoses. Mostly men had experiences from drug abuse, criminal behavior and imprisonment. Gender matters. However, when analyzing the results on an individual basis, connections between adult outcome and childhood data vary.

When analyzing relationships in earlier rounds of follow-up I have shown that adjustment is influenced by relationships to parent(s) and/or foster parents. However, for the well-adjusted and well-being adult interviewees the relationship to husband/wife/cohabitant and his or her parents were more decisive. Keeping their own parents at a distance was helpful for adjustment and well-being. Whether well-adjusted or not, the interviewees also point out their own agency and individual responsibility. Life course theory has been helpful in the analysis, but more analysis is needed to find out if it would be possible to predict adult outcome from childhood data in such a disadvantage group of children. Later risk and protective factors may interact in a not predictive way.
Family relationships for young people from long-term foster care are complex. Nevertheless, the ties with the biological family as well as those with the foster family matter during the child's and young person's stay in foster care as well as afterwards. Relationships with the two families can be a ressource or a burden, for many young people from foster care they are ressource and burden at the same time.

How young adults from foster care deal with family relationships and how their relationships with both their families change over time was analyzed in a qualitative longitudinal study at the University of Siegen, Germany. The first interview wave took place between 2007 – 2010. We conducted 100 narrative biographical interviews with young adults from foster care. Most of them aged 18-25. The second interview wave took place from 2014 – 2016. 15 interviewees were re-interviewed. At the second interview, the interview partners were between 24 and 35 years old. Narrative interviews were conducted with them about what happened inbetween interview 1 and 2.

All interviews have in common that the relationships with both families – foster family and biological family – play an important role in the young people's lifes. Family relationships with both families are lived in different ways and they differ in their importance. They have always a meaning for transitions in young adult life – especially as regards romantic relationships, parenthood and school-to-job-transition. Different patterns of relationships with the two families and their meaning over time will be presented. At the same time, the relationships change over time and the subjective importance and meanings young people give to the relationships change – sometimes even in extreme ways. Interpretation of what leads to transformations of meanings and how they influence other life topics and areas will be discussed.
“I Want to Say Thank-You”: Looked after Children’s Views on Their Well-Being

Friday, 5th October @ 10:15: The Subjective Well-Being of Children in Care: Evidence from Five Countries (Venue: D. Maria)

Prof. Julie Selwyn (University of Bristol)

Objectives: In England about 70,000 children are in care (looked after). National data predominantly measures negative outcomes such as teenage pregnancies and numbers involved with the criminal justice system. Children's views are not systematically collected. Although £2.5 billion is spent on the care system each year little is known about whether the intervention improves children's lives and how children feel and think. This ongoing study set out to develop surveys that could measure looked after children's well-being and that local authorities could use to improve policy and practice.

Method: Surveys for children 4-18yrs were co-produced with 140 looked after children who attended focus groups. Four key domains were identified: relationships, rights, recovery, and resilience. Indicators to measure each of those domains were created and questions developed. The surveys included some questions that are used with children in the general population enabling comparisons to be made between looked after children and their peers in the community. During 2017-18, over 4,000 children completed the surveys from 20 local authorities. Survey results have been followed up by visits to each LA to understand their impact on practice and policy.

Results: Most children (83%) thought that being in care had improved their lives, wanted to thank their foster carers and social workers, and the majority had moderate to high well-being. Looked after children felt safer in their placements and thought their carers were more interested in their education than did children living with their parents. The longer children had been in care the more likely they were to have higher well-being. Eighteen percent of young people (11-18yrs) had low well-being – a higher proportion that the general population but surprisingly there was also a higher proportion of looked after children with very highwell-being. Low well-being was associated with not liking appearance, not feeling trusted, not having a trusted adult in one's life, not feeling safe and not liking bedrooms. Gender differences were found.

Conclusions: The systematic collection of subjective well-being has enabled children's views on the care system to be heard. The overall positive message from children has countered the negative image of care that is often presented. Local authorities have been able to identify polices (e.g. integrating the concept of every child having a trusted adult into policy documents) and practices (e.g. working harder to ensure young children understand why they are in care) to address children's concerns. Benchmarking between LAs has also enabled them to identify where they are doing better or worse than the average.
Effects of School Violence on Subjective Well-Being in Peruvian Children and Adolescence from Residential Care Centres

Friday, 5th October @ 10:30: The Subjective Well-Being of Children in Care: Evidence from Five Countries (Venue: D. Maria)

Prof. Rafael Miranda (Universidad Continental del Perú), Dr. Xavier Oriol (Universidad Andrés Bello), Prof. Harry Ortúzar (INACAP), Dr. Ferran Casas (University of Girona)

OBJECTIVES
At an international level, few studies assess the school experience of children and adolescents in residential care centers (Sullivan, Jones & Mathiesen, 2010; Canning, 1974; O'Malley, Voight, Renshaw & Eklund, 2015). This study aims to provide information about the prevalence of violence at school in children and adolescents from residential care and how these experiences affect the different domains of their subjective well-being.

METHODS
Participants
The participants of this study come from 47 residential care centers (RCCs) spread across Peru. In total, 608 children and adolescents (54.5% men) between 7 and 18 years of age (M$_\text{age}$=12.9, SD$_\text{age}$=2.70) were surveyed.

Measurements
- **Personal Well-Being Index.** Scale developed by Cummins, Eckersley, van Pallant, Vugt and Misajon (2003) measures the satisfaction reported in different life aspects through seven items. Cronbach's alpha is 0.82.
- **Overall Life Satisfaction (OLS).** Single item that assesses life satisfaction in general.
- **Overall Happiness Scale (OHS).** Emotional well-being measure with a single item that assesses the level of happiness experienced during the last two weeks.
- **Teacher violence.** This scale measures the prevalence of violence inflicted by teachers. The Cronbach's alpha reported for this scale is .91.
- **Bullying.** This scale measures the prevalence of violence inflicted by other students. The Cronbach's alpha reported for this scale is .91.

Data Analysis
A chi-squared analysis was performed to compare the prevalence of violence by demographic variables. Finally, a correlation and regression analysis were conducted to assess the effect of different types of violence on subjective well-being.

Results
Regarding aggressions from teachers, insults were the most reported category (26%), followed by teasing (25%). By sex, significant differences were found in the case of insults (29% girl, 22% boy), while by school level, there are significant differences in physical damage (23% primary students, 14% secondary students).

As for bullying, the greatest prevalence is for insults (35%), followed by teasing (34%). Compared by sex, significant differences were reported in the case of rejection (19% women, 27% mean). By school level, significant differences were observed for teasing (39% primary students, 29% secondary students).

Six linear regressions were conducted taking the three well-being indicators (OHS, OLS, PWI) as dependent variables and sex, age and RCC management, years in the center, whether the student has changed schools or center as control variables.

For the effect of PWI over bullying, the model explains 12% of total variance, with bullying as a significant variable (Beta = -.13, se = .11, t = -3.16, p <.05). For teacher violence (Beta = -.17, se = .12, t = -4.11, p <.05), the model explains 13% of variance,
Regarding OLS, teacher violence explains 11% of variance and has a significant effect (Beta = -0.14, se = .16, t = -3.13, p <0.05). As for bullying, the model explains the same variance percentage and the regression coefficient is significant (Beta = -.14, se = .15, t = -3.12, p <0.05).

Finally, the effect of bullying over OHS is significant (Beta = -0.09, se = .15, t = -2.05, p <0.05). The model explains 16% of OHS variance. Taking teacher violence as a dependent variable, the model explains 16% of variance. OHS is also significant (Beta = -0.10, se = .16, t = -2.46, p <0.05).

Conclusions
The prevalence of violence from both teachers and classmates present scores higher than previous studies focusing on regular students in Peru (Oriol, Miranda, Amutio, Acosta & Mendoza, 2017)
Regarding differences by sex, we observe that women report a higher prevalence of violence in general. Finally, all regression models are significant, and teacher violence is the most robust variable in all analyses.
Subjective well-being (SWB) is an important dimension in the study of children’s quality of life (Ben-Arieh, Casas, Frønes, & Korbin, 2014; Bradshaw, 2015, Casas, 2016). In recent years, regular studies have been conducted to examine the subjective well-being of children in the general population within the Children’s Worlds Project (http://www.isciweb.org). However, little is known about children in danger, who are looked after in residential care or in foster care, perceive satisfaction with their lives.

At a research level, studies have been carried out in Portugal that showed positive results for children and young people in foster families (Delgado et al., 2013) and reduced and limited results for children in residential care (Martins et al. 2013, Oliveira et al., 2014). For these reasons a comparative study is being undertaken on the SWB of children in three contexts: residential care, foster care, and the general population. This research may contribute to the revision of the Portuguese child care system, namely deinstitutionalization of children in care.

**Objectives**

In Portugal, in 2017, there were 8,175 children looked after in residential and foster care (Institute of Social Security, 2017), of which 7,914 were in residential homes of various types, and only 261 in foster families. Most of the children were distributed in the districts of Porto and Braga, in the north of the country. The overall aim of this study was to explore and compare the SWB of children living in residential and foster care, comparing it with children integrated in the general population. The study adapted to the Portuguese context the research developed by Joan Llosada in Catalonia (Llosada-Gistau, Montserrat & Casas, 2015; Llosada-Gistau, Casas & Montserrat, 2016). The specific objectives of the study were as follows: (i) to determine the SWB in children in residential care, in foster care and in the general population; (ii) compare SWB in the three groups analysed; (iii) compare the characteristics of children integrated in residential and foster care; (iv) identify the parameters associated with a high level and a low level of SWB; (v) in residential care, relate the SWB to the location, number of children resident, and the number of hours and quality of the company or support of colleagues, technicians, outside friends and family.

**Method**

The sample was composed of 100 children in a family home, 150 children in residential care and 150 children in the general population of the Porto district, aged between 12 and 14 years.

The study used the same questionnaire as that used in the International Survey of Children’s Well-Being (IS-CWeB), with the necessary adaptations to respond to the specificities of childcare.

The dimensions covered by the ISCWeB are as follows: house; health; material objects; use of time; relationships; school; area in which you live; personal data. It also includes 3 SWB psychometric scales:

- PWI (Personal well-being Index)
- SLSS (Student’s Life Satisfaction Scale)
- OLS (Overall life satisfaction)

Multiple regressions will be used to explore which factors are related to the SWB of the children according to the type of care.
Results and conclusions
This oral paper will present the first results from the study. Questionnaires are in the final phase of collection which is due to end in April. Analysis will have been completed and interpreted during the summer which will allow us to present the results and conclusions in the SWB Symposium.
The Subjective Well-Being of Adolescents in Kinship and Residential Care

Friday, 5th October @ 11:00: The Subjective Well-Being of Children in Care: Evidence from Five Countries (Venue: D. Maria)

Dr. Joan Llosada-Gistau (University of Girona), Dr. Ferran Casas (University of Girona), Dr. Carme Montserrat (University of Girona)

Objectives
The aim of this study was to analyse the subjective well-being (SWB) of adolescents in kinship care and in residential care and compare their SWB to the general population of the same age, taking into account gender differences.

Method
Using two psychometric scales, we explored their overall life satisfaction (OLS) and satisfaction with the life domains of: health, safety, opportunities in life, things they have, relationships in general, school, and use of time (PWI-SC items). The same questionnaire was administered to the three groups and is one used in the International Survey of Children's Well-Being (ISCWeB).

A Multi-Group Confirmatory Factor Analysis (MCFA) using Structural Equations Modeling (SEM) was designed in order to test both the validity of the factorial structure of the Personal Well-Being Index – School Children (PWI-SC) and the comparability of three different samples of adolescents between 12 and 14 years: in kinship care, in residential care and the general population in Catalonia (Spain).

Results
The PWI-SC displayed good fit statistics with the pooled sample and good comparability with the Multi-group SEM with constrained loadings and intercepts, suggesting it is acceptable to compare the correlation, the regressions and the mean scores of the items when related to the latent variable. When the general population sample was excluded from the MCFA, scores of boys and girls were not comparable between those in residential care and those in foster care, suggesting that the answering styles of boys and girls in care are very different to children in the general population. Gender differences were not observed in the general population.

Differences in the factorial loadings of the domain satisfaction items on the latent variable PWI-SC for the three groups were observed. Particularly, satisfaction with school displayed higher loadings on the PWI-SC for those who lived in residential care compared to the other two groups. Likewise, a high correlation between OLS and PWI-SC in the three populations was observed. Gender appears to have statistically significant effects on the OLS among adolescents in residential care, showing lower scores for girls.

Conclusions
The results of the study show differences in the SWB overall scores (using PWI-SC as SWB indicator) and its components among the three groups. These findings challenge public policy concerning children by increasing efforts to promote equal opportunities for the in-care community, and particularly among those who live in residential care. It is of utmost importance to improve young people's satisfaction within the particular life domains and gender differences should be taken seriously in any attempt to improve the SWB of adolescents in care.
Subjective Well-Being of Children within the Chilean and Peruvian Residential Center Systems: Delving into Differences by Gender

Friday, 5th October @ 11:15: The Subjective Well-Being of Children in Care: Evidence from Five Countries (Venue: D. Maria)

Prof. Harry Ortúzar (Universidad Tecnológica de Chile INACAP), Dr. Carme Montserrat (Universitat de Girona), Dr. Xavier Oriol (Universidad Andrés Bello), Prof. Rafael Miranda (Universidad Continental del Perú)

In several Latin American countries such as Chile and Peru, children and adolescents in the welfare system usually live in residential centers. In 2013, UNICEF (2014) estimated that there was 19,000 and 10,342 children and adolescents within this system in Peru and Chile, respectively. Studies on subjective wellbeing during childhood and adolescence have increased over the last years; however, few have focused on the subjective wellbeing of children and adolescents within these centers.

Objectives
This work aims to delve into the differences by gender in subjective wellbeing scores by using different unidimensional scales, namely the Well-Being Index School Children (PWI-SC), Overall Life Satisfaction (OLS) and Students` Life Satisfaction Scale (SLSS).

Method
The study is descriptive with a non-experimental cross-sectional design. Three hundred and ninety children and adolescents were surveyed; all of them were between 8 and 18 years of age and had been in the residential welfare system during at least six months. The sample was composed of twenty seven percent Chilean, and 73% Peruvian children and adolescents; 41.3% were men and 58.7% women; and 36.5% were children, while 63.5% were adolescents. Data was gathered via a modified version of the international project International Survey of Children's Well-being (ISCWeB), which was adapted to the residential welfare context (Llosada, Montserrat & Casas, 2015). The questionnaire concepts were changed to language used in both Chile and Peru. The adapted instrument had two versions, for children from 8 to 11 years 11 months of age, and for adolescents from 12 to 17 to 11 years 11 months of age. Both versions of the questionnaire were self-administered, although the interviewer read the questionnaire aloud so children could answer items following this order.

Results
Regarding preliminary results of differences by gender, the PWI-SC scale points to significant differences (p=0.000), with a mean score of 82.2 for men and 68 for women. In the OLS scale, men scored 85.8 and women 67. Finally, in the SLSS4 scale differences were also significant (p=0.001) with a mean score of 3.85 points for men and 3.25 for women.

In terms of satisfaction with life, significant differences by gender were observed in children and adolescents of both countries, but these are more pronounced in Chile.

Conclusions
The results indicate that differences by gender in the subjective wellbeing of children and adolescents living in residential centers need to be dealt with in order to design more effective public policies.
Abandoned looked after children and young people in care, unless they are fostered, are placed in residential institutions. Owing to their social circumstances, born of unknown parents, they stay in institutions for a long time. Yet, many females in residential care refuse to get married and form a family. As a matter of fact, there are various reasons behind the refusal and hesitance among adult females at institutions. Some are related to social and financial issues, other elements are hindered by their fears of not being treated well after getting married, having a lower level and standards of living compared to the one they already have in care. A Mixed Methods Approach was conducted to explore and identify the causes behind the fear of getting married among many females in this study. Both questionnaire and semi-structured interviews were utilized. Mainly, female orphans in residential care, their care providers and a sample of married and divorced female care leavers were targeted in this study. The main findings show that it is not the fear of getting married per se that is the reason behind their refusal. Yet, the fear of separation, the feeling of belonging (feeling attached) to the place and the bond of sisterhood they have towards each other, lack of trust in the team or committee in charge of arranging their marriage, negative image of marriage and the belief that they will be forgotten after leaving care and getting married and not being followed up by former staff and carers, all of which make many of them feel not comfortable and safe to get married. Meanwhile, different solutions are proposed to address this problem.
The statement “I never had the privilege of a family” from a young woman called Corinna, grew up in a foster family, shows, that family (here, openly whether social or biological) is something valuable and positive that was withheld from her in her life. Hereby 1) a normative ideological understanding of family is used and 2) the challenge for young people who did not grow up with their families of origin. This challenge can be described as ‘struggling for familiarity’. This is a structural problem of leaving care. The young people out of home are challenged to work on their own biography and life history against the backdrop of a hegemonic family image of the petty-bourgeois family idyll. Other dimensions of this norm family is that the members are white, hetero and healthy.

In our paper we ask for the meaning of family in the transition out of care and the family constructions which can be found in the empirical data, which are biographical interviews with care leavers. With the ‘doing family’ approach (Morgan 1996), families can be understood as a ‘special kind of network centered around reliable personal caring relationships’ (Schier / Jurczyk 2007: 11). Thus, living in residential care can become a family life without having to compete with other forms of family life (Eßer 2013: 171). Nevertheless, family is such a powerful social institution in the context of childhood and growing up (Mierendorff 2010), “that residential care facilities and their services in any way have to be compared to family” (Eßer / Köngeter 2015: 113). Finch (2007) extends the approach of ‘doing family’ and focuses on the ‘displaying family’, which are family practices that show other actors that family works.

With the theoretical perspective of doing and displaying family (Finch 2007) we ask for family constructions and self-positioning within this family constructions of care leavers in the transition out of care. Therefore we differ two empirical dimensions: (1) the family constructions with peers and social networks and (2) the importance of family of origin in the transition out of care. As Eßer and Köngeter (2015) shows living in residential care shows practises of families, also the transition out for care are characterised by support of social networks and peer relations which are connected with family constructions. Additional the residential care facility themselves are part of the family constructions – or at least could be. In the transition out of care the positioning to the family of origin could change. Collins et al. (2010) ask about support networks of care leavers. The results show that 90% are in contact with their family of origin in the process of transition. Wade (2008) illustrate the aspect of gender, in particular to the fact that contact is made with mothers, female relatives and siblings. In addition, he shows that relationships with the family of origin change in the process of transition, and the quality of relationships often improves over time. The narrations of the care leavers shows, that they are forced – or they feel forced – to find a position to the issue family. Therefore family work in residential care is an important task, although the transition out of care leads to an independent living. Here other forms of family work may have to take place, which are less about biographical confrontation, and more about balancing out further relational possibilities. Secondly social work on the transition out of care has to support young people to create reliable network relationships, which could be family constructions.
Young people transitioning from out of home care are a particularly vulnerable group. An example of their vulnerability is the high manifestation of early pregnancy and parenting, with many of these young people tragically experiencing child protection interventions with their own children. The limited existing empirical literature details a complex arrangement of individual, familial and social structures contributing to early parenting and the ongoing involvement of child protection. Some of the research undertaken with young people identifies their feelings that early parenting is in fact a positive outcome for many young people leaving care who were otherwise on ‘the wrong track’. There is evidence that young parents who have records of child protection themselves are more likely to have reports made against them for failing to protect their own children. However, there are also concerns that there is a conscious or unconscious ‘surveillance bias’ by child protection with young parents known to child protection feeling that they are over-supervised and under supported in their parenting. Leaving care literature has highlighted the vulnerability of care leavers and thus many care leaver parents are tasked with coping with the physical, mental and financial demands of parenting typically without the educational attainment, financial stability and family and community supports available to other young people in the community. At the same time, care leaver parents’ concerns that they may be unfairly targeted by child protection authorities has implications for their help seeking behaviours and as such may impact their willingness to participate in services and programs set up to assist them and their children. There is a need to investigate young care leavers’ own perspectives on pathways to early parenting and other outcomes to better understand why high numbers of care leavers feel compelled to start their own families at a young age, often without the support and resources that others in the community can enjoy.
Making Ends Meet: Barriers and Supports to Employment for Youth in and from Government Care in Vancouver

Friday, 5th October @ 11:00: Care Leavers: Family & Work (Venue: S. João)

Ms. Annie Smith (McCreary Centre Society), Ms. Stephanie Martin (McCreary Centre Society), Ms. Maya Peled (McCreary Centre Society)

Through a journey mapping exercise, youth transitioning out of government care in Vancouver, Western Canada, identified a number of challenges accessing employment opportunities. This was surprising to a number of local statutory and non-statutory service providers who offered employment support programs, which were under utilised.

To better understand this disconnect, the TRRUST Collective Impact initiative (a collaboration of 44 agencies seeking to improve outcomes for youth transitioning out of care in the city) partnered with McCreary Centre Society's Youth Research Academy (YRA) to develop a youth employment survey. The YRA are a group of youth aged 16–24 with government care experience who, with the support of McCreary staff, develop, analyse, and disseminate research projects of interest to youth with government care experience and service providers.

The employment survey was available on-line for six weeks in the Fall of 2017, and paper copies of the survey were made available at various events and locations where youth in and from government care were in attendance. The YRA produced and disseminated a report of the findings in February 2018.

In total, 92 young people completed the survey (64% identified as female, 34% as male, and 2% as other gender identities). Thirty-seven percent were under 19 years of age, and around half (49%) of survey participants had a health condition or disability.

The survey findings showed that young people with experience of the government care system faced multiple barriers to finding and keeping a job. The most commonly reported barriers to getting a job were not having the required education or skills and being worried a job would get in the way of school or other commitments. The majority of respondents (86%) indicated they had experienced barriers to maintaining employment, and 18% had not stayed in the same job for more than three months. Most youth had experienced losing a job and 63% had quit. Substance use, mental health challenges, other health issues, and a hostile work environment were commonly reported reasons for leaving a job.

Youth reported needing many types of support to achieve their employment goals, including support from their employer, the need for a peer or near-peer mentor within the workplace, opportunities to develop conflict resolutions skills, access to mental health and substance use support services, and improved employment preparation classes at school and through specialist employment services. The findings of the report are now being used by members of TRRUST to improve school curriculum, instigate changes in employment service provision and to develop an employer training curriculum for employers hiring youth in and from government care.
A Comparative Study on Key Aspects of Life for Aftercare Receivers and Non-Receivers – A Case Scenario of New Delhi, India

Friday, 5th October @ 11:15: Care Leavers: Family & Work (Venue: S. João)

Dr. Kiran Modi (Udayan Care), Dr. Shivani Bharadwaj (Udayan Care), Ms. Rini Bhargava (Udayan Care), Dr. Kakul Hai (Udayan Care), Ms. Riti Chandrashekhar (Udayan Care), Ms. Shubhangi Kansal (Udayan Care)

Introduction

Young people are a vulnerable population group as they often face challenges in the form of unemployment, limited access to livelihood opportunities, illiteracy, lack of healthcare, social exclusion and violence. One such vulnerable youth are those who spend their childhood in alternative care settings like child care institutions (CCI) and foster care due to factors like parental abuse, abandonment, death of parents, disasters, poverty and other disabling circumstances. When asked to leave the CCI on attaining adulthood at 18 years, they face transitional challenges in order to become socially and financially independent. Aftercare support is meant to address these challenges and provide a continuum of care.

Objectives

Udayan Care, an NGO in New Delhi, India, working on alternative care of children, undertook an exploratory study in New Delhi, India, to understand the nature of challenges faced by youth transitioning out of the care of the CCI. Presented here is baseline data on the condition of care leavers, both aftercare receivers and non-receivers, on some key aspects of life to assess their successful transition from living in CCIs into independent living as adults.

Method

A non-parametric indigenous tool was constructed to do a comparative analysis between 47 care leavers from Delhi, who received aftercare (n=29), those who did not (n=13), and those who were unsure (5). The key aspects of life assessed included: education, career development, financial independence, physical and mental health, interpersonal relationships and self-reported feelings of empowerment. Baseline cross-tabulations, Chi-square Test of Independence and Fisher’s Exact Test were utilized to determine whether a statistically significant relationship exists between key variables and the provision of aftercare and gender.

Results

On comparisons between aftercare receivers and non-receivers, Fisher’s Exact Test results show that there is no statistically significant relationship between aftercare provision and the education level of care leavers. (p-value=0.718), having a career plan (p-value=.191), having own income (p-value=0.733) or reporting income sufficiency (p-value=0.433), physical illnesses (p-value=0.298), mental stress (p-value=0.599), or the presence of reliable persons in care leavers’ lives (p-value=0.364). However, a statistically significant relationship was found between aftercare provision and self-perceived feelings of empowerment in care leavers, where those who received aftercare reported feeling more empowered at the time of leaving their institution. (Fisher’s value=8.762; p-value=0.051).

Some significant gender differences were found. Statistically significant relationships were found between gender and care leavers’ education level (Fisher’s value=9.058; p-value=0.076), where males were found to com-
plete their education more than females; prevalence of physical illness, where more females reported such ailments ($\chi^2=4.372; p\text{-value}=0.037$); mental stress where more females reported struggling with mental or emotional stress ($\chi^2=2.706; p\text{-value}=0.088$), and presence of reliable persons (Fisher’s value=12.815; $p\text{-value}=0.003$), where more females reported their institutional staff/caregivers to be reliable (n=12 out 20) while more males reported their friends and peers to be reliable (n=12 out of 19). No other significant associations were found between gender and career development plan ($p\text{-value}=0.77$), financial independence variables ($p\text{-value}>0.1$), or empowerment.

* all tests conducted at alpha level = 0.1

**Conclusions**

The non-significant results indicate that aftercare provision for care leavers, in its current state, is unable to bring positive changes in key aspects of life. Further research is required to study these phenomena in detail in order to develop intervention strategies to improve the conditions of care leavers. The results also highlight the differential impact on male and female care leavers, regardless of aftercare provision, highlighting the need for gender-specific strategies and services. In-depth studies of theoretical underpinnings and a thorough needs-assessment are recommended as a way forward emerging from this study in New Delhi, India.
This paper will present, discuss and elaborate the findings concerning children's involvement in social work research and development on different levels based on the results of the three-year study and research project on using Signs of Safety / Safety Plans in Child Welfare in a municipality in Denmark in 2011 – 2014 and Project CYRAC – Children and Youth as Researchers and Agents of Change in a Local Community (2016-2017).

The qualitative research topic was to investigate the children’s participation in decision making concerning their safety. The theoretical framework is developed on the concept of Participation (Hart 1992, Shier 2001), the concept of Intersectionality (Crenshaw 1989, 1991) and Theory of Recognition (Honneth 1995).

The empirical basis includes in total 95 children, boys and girls, from 3 to 17 years of age, distributed in 4 groups: 19 children recruited from the students family and network, 4 children with a safety plan, 63 Children from fifth grade from whom 50% had been in contact with social services concerning their own safety and well-being and 9 youth in project CYRAC. Different research methods were used: observations, interviews, participation in meetings, dialogue meeting with children and case-material developed together with the children and students. Students from social work education in Copenhagen, children, social workers form child welfare, schoolteachers and community workers have been involved in the process of collecting data, analyzing, etc.

The paper explores openings, opportunities, obligations, considerations focusing on challenges and perspectives in involving children and youth, in social work research and development.

Since the UN Convention of the Rights of the Child (1989), the consideration of children as active citizens regarding rights, equality and participation has been a growing challenge in many fields in our society. The concept of childhood has been linked to the protection of children. Despite many initiatives, reforms, changes in legislation in Denmark during the last decade children still seem to be treated as objects of these rights rather than active citizens in their own rights.

The paper argues for the need for rethinking the concept of children’s participation in order to rise and reflect on some questions such as:

How can social workers/researchers shape the participation of children, so that reinforces the child's opportunities to be an active actor and thereby improve its well-being?

Is Participation a burden for the child or a protection?
Objectives
In recent years, there has been an increasing focus on hearing the child and children’s participation in child welfare. Despite this fact, research shows that children are not always given the chance to raise their voice. Another issue is lacking documentation of children’s voice when child welfare services make assessments and final decisions. Caseworkers tell us that they do speak to children and they are trained to do so, but reports tell us that satisfactory documentation is still lacking. The newest Norwegian child welfare act puts effort on children’s participation and points towards the need of systematic documentation.
In this presentation, we will focus on the process of developing a new template in cooperation with child welfare practitioners and students as part of their placement.

Method
To gain knowledge of how children’s voice are documented, students doing placement at their third year of study were involved by asking case-workers to find documentation of conversations where the case-workers meant they had succeeded and conversations they meant they had not succeeded. A total of 18 “succeeded” conversations and 12 “not succeeded” conversations were analyzed. From what the students found, it was hard to understand the categorization of conversations made by the caseworkers. Hypothesis were made and discussed in 3 focus group interviews with experienced caseworkers and 1 focus group interview with youths based on their experiences. The idea of developing a template emerged after a systematic analysis of the documentation of conversations and transcribed focus group interviews. The template has been developed together with caseworkers. The template will be evaluated through a survey, and followed by research.

Results
A template has been developed with the purpose to gain clear written documentation after conversations with children. The documentation template has been running in all eight child welfare services in the municipality of Bergen, Norway from November 2017. Several other municipalities will join the project from May 2018.

Conclusion
Preliminary feedback from caseworkers indicates that the template helps them to both structure and keep focus when conducting conversations with children. It also help them to make systematic assessments, and it seems easier for team leaders who have not attended the conversations to do follow ups. The template also forces the caseworkers to write down further intentions of children’s participation.
In Brazil, the Child and Adolescent’s Statute (ECA - Estatuto da Criança e do Adolescente, 1990) radically reformed the legal status of children and redefined responsibilities of the state and civil society. According to this legislation, children and young people in the child protection and welfare system must be heard and their opinion must be taken into account with regards to their legal situation.

Children and young people have the right to be involved in issues that affect them, which means giving them voice and participation in the decision making process, in accordance with age and maturity. This is especially relevant when working with children in care, as decisions regarding their lives are usually made by adults who may be unrelated to them, such as social workers, psychologists, lawyers, and judges.

As we know, the elaboration of a Right does not mean that it is guaranteed, and therefore, it is still difficult to involve children and young people in processes of participation. It is still difficult to change adults representations about childhood and youth, as for many, participation means only informing children about their rights and what is happening to them, keeping them in a passive position, as if they have nothing relevant to say. Sometimes, while intending to protect children in foster care, professionals tend to spare them from situations they find stressful. But by doing so, they unprotect them even more.

This presentation will focus on the project “making my history” and how its methodology allows children and young people in care to have more voice in the decision making process, within the child welfare system.

The project aims to ensure a means of expression so that every child and adolescent in foster care knows, and owns, their past and present story. The project was born from the need to facilitate expression so that children and adolescents in foster care could understand their history, thereby giving them a voice and empowering them as the protagonists of their own life.

Upon starting the project, each child and adolescent receives a blank album (life story book) to be filled with texts, pictures, and drawings. With the guidance of volunteers, it becomes a place of registry and preservation of their trajectory, with important information about their family, their time in foster care, their friends, their school, their perspectives, and their dreams for the future. It belongs to the boy or the girl and accompanies them when leaving foster care.

The bond between the volunteer and the child is one of the main strategies and the main source of results of the project. The constant presence of these adults, along with respect and trust, help children to understand the conditions that led them to foster care, and to speak about it freely.

Another strategy of the project is the focus on building a quality library in each foster care center. The books are great allies, because reading fiction stories have turned out to be a great way to stimulate the child and adolescents to talk about themselves, making it easier for them to understand and register what they have experienced.

The process of manufacturing the album helps the child to prepare for moments in which they need to present and talk in audiences with judges and social workers. With the album in hands, its easier to create a channel of communication between children and the professionals involved in their case; a subtle and careful way to approach difficult subjects, and to listen to the children's and teenager's desires, thoughts, and dreams for the future.
Service Providers’ Perspectives on Digital Media Participation among Youth in Residential Treatment

Friday, 5th October @ 11:00: Children’s Participation (Venue: Ribeira I)

Ms. Bethany Good (University of Toronto)

Background
Emerging scholarship highlights the importance of Digital Media Participation (DMP) for youth within social, educational, and recreational environments. DMP refers to internet-based interaction and exchange of media (e.g., text, audio, video). Youth (13 to 18) use digital media for an average of nine hours daily. Adult intervention regarding youth DMP is on a continuum; many youth need minimal support, whereas others require significant guidance to ameliorate potential risk. Youth in residential treatment (YRT) are at significant risk online and offline, as evident in the behavioural and mental health difficulties resulting in their admission to residential treatment programs (RTPs). While DMP can compound existing psychosocial difficulties, when used productively there are substantial benefits for youth, such as relief from social isolation and identity exploration. Prohibiting DMP is not possible, however, given its ubiquity outside RTPs.

There has been a shift in RTPs from fostering isolated, self-contained settings, towards promoting family and community integration. The extant literature on DMP use by youth in RTPs suggests that the shift toward integration has not incorporated the rapid growth of youth DMP, inhibiting opportunities for youth to 1) learn to remain safe while engaging in DMP, and 2) access the benefits of DMP while in treatment. This study provides information on how RTPs are contending with DMP among youth and helps inform the development of policies that attend to the needs of clients in a digital age.

Methods/Sample
This qualitative multi-method study involved key stakeholders from four programs in two agencies offering youth RTPs. Agency One is in an urban location and has two RTPs (split by gender). Agency Two includes two co-ed RTPs, one rural and one urban. Individual interviews were conducted with service providers (n=25) and youth (n=14), to examine 1) how the digital media participation of YRT aligns with contemporary treatment models; and 2) the opportunities and obstacles associated with DMP among youth in RTPs. Guided by a Social Constructionist theoretical framework—analysis of interview transcripts applied McCracken’s (1988) Long Interview Method. NVivo software was used to execute the data analysis process involving movement from particular to general applying specific and categorical observations, and comparison of themes.

Results
Youth workers, social workers, and managers were conscious of the tension between risk and benefit associated with youth DMP. All service providers, regardless of discipline, highlighted positive DMP by youth including examples such as a mental health teen support Instagram account, expressive arts online, and psychoeducational resource promoting treatment engagement. DMP risks were identified due to negative DMP use, for example, overuse and cyberbullying. Differences emerged among service providers according to discipline and age regarding the importance of DMP and the amount and types of DMP access that should be available. Service providers from the rural program were most resistant to incorporating technology. This was related to its “back to basics” treatment philosophy and geographic isolation, whereas the programs within the urban settings were more inclined to embrace more DMP access and integration within RTPs. Emerging results from youth interviews, indicate those not “in care”, value some degree of DMP disconnect.

Conclusions
Despite concerns about DMP safety and privacy, there was an acceptance that some DMP access and use by youth within the RTP was reasonable and potentially complementary to program and treatment goals. Differences between rural and urban treatment settings were linked to treatment philosophy and geographic location. These
findings are consistent with the contemporary move toward greater fluidity between RTPs and home community care within RTPs. The need for some settings to provide a digital disconnect may remain important for youth who require a separation from their community both physically and virtually.
Participation and Youth Agency – Narratives of Out-of-Home Placement

Friday, 5th October @ 11:15: Children’s Participation (Venue: Ribeira I)

Mrs. Marte Knag Fylkesnes (University of Bergen)

Objectives: Several studies have identified factors that may hinder children’s participation in child welfare services (CWS). How children go about maneuvering such barriers and position themselves as actors in such contexts is, however, scarcely explored. The aim of this study was to increase our knowledge of how youth with ethnic minority backgrounds talk about their agency. We were particularly interested in how the agency was linked to participatory outcomes in out-of-home placement decision-making.

Method: The empirical material consisted of interviews with six ethnic minority youngsters who had experienced out-of-home placement in Norway. Thematic and narrative analysis were conducted.

Results: We identified a pattern along three narrative themes: a) narrating participation, b) narrating ambiguous participation and c) narrating non-participation. The analysis unpacked how informants negotiated both normative and economic structures encountering CWS. Successful negotiation entailed constructing a credible story through striking a balance between maturity and vulnerability and thus performing as “a competent child”. Informants who did not succeed in articulating their experiences and wishes in a credible way risked being marginalized as participants. Participation in decision-making during placement was constructed as particularly precarious. Embedded cultural ideas of how “a competent child” should perform could be at odds with informants’ identities. Youth participation also hinged on adults’ ability and willingness to listen, and to take into account as well as act upon youths’ concerns. However, case trajectories, bureaucratic characterizations and limited resources could hamper both the continuity and quality of such relationships.

Conclusions: Value patterns might make it hard for ethnic minority youth to make themselves accountable within CWS. A key implication is an urgent need for theory and practice models that include perspectives on agency and how social categories such as ethnicity influence youth’s participatory opportunities.

Friday, 5th October @ 10:15: Education in Out-of-Home Care (Venue: Arrábida)

Dr. Helena Johansson (Department of Social Work, University of Gothenburg), Prof. Ingrid Höjer (Department of Social Work, University of Gothenburg)

Over the last decades there has been increased focus on the educational achievements of children and young people placed in out-of-home care. Evidence from research shows that children and young people with experiences from out-of-home care do not perform well in school, compared to their peers. The aim of the project Educational careers and school achievement of children and young people placed in public care was to improve knowledge about what factors cause the low level of educational achievement for children and young people placed in public care, and to find factors which can lead to positive educational achievements for this group. In this presentation we will focus on one part of the project – a study of 158 case-files for children and young people placed in out-of-home care (OHC) in the city of Gothenburg, Sweden. The aim of this part of the study was to look at how schooling and education had been recognized in the documented social work at the social services in Gothenburg. All cases were read on site at the Central Municipality Archive in Gothenburg. Four cohorts were included in the study: children born 1967, 1977, 1987 and 1992. Forty case files were selected from each cohort (38 from the 1977 cohort), in total 158 cases. The selection included only children aged 6 to 16 at the time of a placement for at least one year. We used three criteria to select the 40 files from each cohort: 1) Type of placement: 25 per cent placed in residential care, and 75 per cent in foster care – as this has roughly been the distribution of OHC in Sweden over the last decades. 2) Gender: an equal distribution between girls and boys. 3) Age: An equal distribution between children in grades 1-3, 4-6, 7-9. The documents studied in the cases were the following:The assessment of the child before placements in foster/residential care, the regular follow-ups of the placements performed every six months and the case-notes, such as minutes from visits in foster/residential homes. In the study we counted the number of rows related to schooling and education in the documents. Analyses were then made using the statistical program SPSS. Our analyses show that the documented level of recognition generally was low. Little attention was paid to educational attainments of the children placed in foster/residential care in all three kinds of documents. Changes of school, which would need attention from social services, were not planned adequately. The level of recognition was higher when children/young people had severe behaviour problems, and/or were placed in residential care. However, there was an increased attention to education and schooling for the two latter cohorts (1987,1992), and the involvement of children, young people and parents was more visible. There was also a significantly higher degree of documented exchange of information between schools and foster carers/residential care for children who were placed in OHC 2001 – 2008. The message for practice is that although there have been improvements over the last years, this issue needs more attention on several levels: better documented planning for the transition between old and new school, a developed cooperation between social services, foster/residential care and schools and a pro-active approach from social services concerning education and schooling.
Abstract

The basic theoretical notion in this paper is that human beings develop and learn through their participation in social practises (Dreier, 2008; Holzkamp, 2016; Lave 1997). Giving all children equal opportunities in life has been paid special attention to, and been a political goal by different Danish Governments, over the last 15 years in Denmark.

What happens, when planning children´s social participation, time after time fails? When professionals meet: “I don´t want to go” and further dialogue is not possible? And the professionals still want to support children´s participation, but “listening to their voices” becomes difficult?

The situation for Danish children offers a huge variety and not all children are supported by their parents in ways that enable the children to participate in the many different social areas. Equal opportunities, for children in vulnerable situations, require professional interactions and cooperation between professionals, in many different ways throughout their childhood, as their situation is both more unique and more complex (Schwartz, I., 2014). Schools, internships and leisure time activities are all important areas within children´s and adolescent´s development, and they contribute to gain access to future job possibilities in adult life (Dyson, A.1999).

This paper is based on part of a Danish practice-research project - BUNEFA, financed by the Ministry of Children and Social Affairs. The last half year, two researchers, as participant observers, have arranged joint meetings with the same group of professionals; two social workers and two social educators, who all played an important role in Antony’s (an 18-year-old) life.

Antony lives in out-of-home care and the professionals are working in different places and organizations. A central focus, in the research project, has been how interdisciplinary professional cooperation support children and adolescents find their way in participating in various social interactions and areas.

Through the research project, we have experienced that understanding children´s communication sometimes may be very challenging. Especially when the professionals meet; “It’s boring” or “I don’t want to go” – with no further explanation. Not being able to explain what is going on, when meeting obstacles in life, is also a very well known and common problem (Elholm, B., Haack, M. & Rask, L. 2016).

In those situations, we have sometimes seen professionals experience discouragement and helplessness, which has been easy to understand. And we have seen professionals try to get rid of the uncomfortable feelings, by paying attention to individual negative attributes like; “he is aggressive” or “he is lazy”. This is also a common way of handling such situations (Birkmose, D., 2018), but at the same time, it stops further dialogue and exploration – because it is then the child or young person, who alone must change.

Professional mentalization skills (Allen, Bateman and Fonagy, 2008) are important, but not enough, to understand children´s communication. The task of care is distributed between several professionals, working in different and separate institutional contexts Therefore we must also try to understand the child´s situation in wider contexts(Schwartz, I. 2017).

Through this part of the project, we have learned, that changing perspective from individual attributes to exploration of the child´s and adolescent´s situation - to continue still trying to “listen to the child´s voice”, may open up to new understandings.
Future professional interventions are highly influenced by how professionals cooperate and how the professionals are able to understand the child’s communication and situation in wider contexts.
Examining Postsecondary Enrollment of Youth in Foster Care Using the National Youth in Transition Database

Friday, 5th October @ 10:45: Education in Out-of Home Care (Venue: Arrábida)

Dr. Amy Salazar (Washington State University)

Objectives: Earning a postsecondary education is becoming increasingly important for securing stable, long-term, living-wage employment in the United States. However, for youth in foster care, earning a postsecondary degree can be especially daunting given the large number of challenges these youth experience before, during, and after foster care. In order to better understand the experiences of foster youth related to postsecondary educational attainment and, in turn, better support them, high-quality data sources are needed. The National Youth in Transition Database (NYTD) is a new nationwide longitudinal database overseen by the United States’ Administration for Children and Families that was developed to improve the knowledge base regarding the outcomes of youth transitioning from foster care to adulthood and the services that support them. NYTD is the first database of its kind in the United States that tracks young people in every state as they transition from foster care to adulthood. This paper uses NYTD data to explore factors related to postsecondary educational engagement for foster youth.

Method: Analyses included data from the NYTD youth outcomes database, NYTD services database (the services youth received to prepare them for transition to adulthood), and Adoption and Foster Care Analysis System’s (AFCARS) foster care database (tracks youth throughout their time in foster care). States’ data were included in this analysis if they achieved at least a 60% response rate for both NYTD youth outcome data collection time points (i.e., age 17 and 19). Youth were included if they completed both their age 17 and age 19 NYTD youth outcome survey, they had completed high school or a GED program, and they did not have missing data regarding whether or not they were enrolled in or had completed a postsecondary program. The final sample for this paper included 1,874 youth. 55% identified as female. 46.5% identified as White non-Hispanic, 24.6% as Black non-Hispanic, 19.3% as Hispanic (any race), and 9.6% as another race/ethnicity. Logistic regressions were used to test whether 22 separate factors related to youth history (e.g., ever homeless), demographics (e.g., gender, race), status at age 17 (e.g., whether employed, whether have a caring adult), and receipt of various types of transition services (e.g., postsecondary support services, mentoring services) were statistically significantly (or trend-level) associated with postsecondary enrollment/completion. These factors were examined together in a multiple logistic regression to see which emerged as significant predictors, controlling for the others. The final regression model resulted in six statistically significant or trend-level factors predicting postsecondary enrollment/completion: sex (female), race/ethnicity (Black, Hispanic), no history of substance abuse or incarceration, no diagnosed disability, and no receipt of special education services.

Conclusions: A variety of factors impact the postsecondary enrollment of youth in foster care; however, receipt of independent living services were not very impactful on postsecondary enrollment. The ongoing challenges faced by youth with past incarceration, substance abuse histories, and diagnosed disabilities is apparent, and suggests the importance of intentional outreach to these youth, who may feel that postsecondary programs may not be an option for them. Additional implications of the findings will be discussed.
Predictors of College Entry and Academic Preparedness among Young People in California Foster Care

Friday, 5th October @ 11:00: Education in Out-of Home Care (Venue: Arrábida)

Prof. Mark Courtney (University of Chicago), Prof. Nathanael Okpych (University of Connecticut), Ms. Adrianna Torres García (University of Chicago)

Background and Purpose: Research over the past 20 years has shown poor college outcomes for youth in foster care (Gypen et al., 2017). Studies show that foster youth typically attend two-year colleges (Frerer et al., 2013) and enter college academically underprepared for college-level work (California College Pathways, 2015). However, little research has examined factors that influence college enrollment among foster youth, which are key to informing practice and policy. This study examined rates of college entry, academic preparedness among college students, and predictors of college entry for a representative sample of foster youth in California.

Methods: Study data come from the California Youth Transitions to Adulthood Study (CalYOUTH). The CalYOUTH study design calls for interviews at approximately 17, 19, and 21 years of age with youth making the transition to adulthood from care and analysis of government administrative records. Baseline interviews were conducted in 2013 with a stratified (by county size) statewide random sample of youth between 16.75 and 17.75 years old who had been in care for at least six months (n = 727; 95% response rate) and follow-up interviews were conducted in 2015 with 84% of the baseline sample (n=611). For analyses reported here, the sample included 711 CalYOUTH participants who consented to linking their survey data to administrative data on college enrollment (98.7% of the baseline sample). College enrollment data were obtained from the National Student Clearinghouse when the average age of participants was 20 years. Logistic regression analyses evaluated a wide range of predictors of college entry including demographic characteristics, measures of academic history and performance, foster care history, behavioral health problems, participation in extended foster care, and other risk and protective factors. Survey weights were applied to account for the sampling design and non-response.

Results: In terms of age-normed reading proficiency, most participants fell below the 50th percentile (47.4% in the bottom quartile and 34.2% in the bottom middle quartile), with just one-in-five youths reading above the 50th percentile (16.2% in the top middle quartile and 2.2% in the top quartile). More than half of participants had enrolled in college (54.8%), with most college students attending two-year colleges (84.7%). Nearly four-fifths of youths in two-year colleges (78.8%) and more than half of youths in four-year colleges (53.7%) had been reading above age level. Conversely, one-fifth of youth in two-year colleges (21.2%) and less than half of youths in four-year colleges (46.3%) were reading below age level. Logistic regression models indicated that higher reading scores and educational aspirations increased the estimated odds of entering college, whereas repeating a grade, a higher rate of foster care placement changes, and early parenthood decreased the odds (all p<.05). Additionally, each month youth remained in care past age 18 increased the estimated odds of entering college (OR=1.06, p<.001).

Conclusions: Study findings suggest that being behind academically decreases the expected odds of entering college. Moreover, nontrivial proportions of youth who entered college, particularly those in two-year colleges, appear academically underprepared for college level work. Thus, addressing academic under-preparedness is important both in promoting college entry and college persistence. However, some youth who entered two year colleges (e.g., the 25% reading at or above age level) may have been able to enter four year colleges that offer more support and resources to promote college persistence. Removing barriers faced by young parents and decreasing mobility in foster care may also increase college entry. Extended foster care appears to promote college enrollment, but more rigorous research is needed to control for possible selection effects of remaining
in care past age 18.
How are Foster Care Alumni in the United States Financing Postsecondary Education?

Friday, 5th October @ 11:15: Education in Out-of Home Care (Venue: Arrábida)

Dr. Jacob Gross (University of Louisville), Dr. Jennifer Geiger (University of Illinois at Chicago)

Background
Foster care alumni (FCA) lag well behind peers in attaining a postsecondary credential (Dworsky & Courtney, 2010). Although studies have found that over 70% of youth in care aspire to attend college (Wolanin, 2005), postsecondary graduation rates range from 1% to 11% (Courtney et al., 2010). Colleges and universities are beginning to provide support services needed for FCA to succeed by providing scholarships, year-round housing, counseling, health care, and more (Geiger et al., 2016). Various financial supports are available to youth who have experienced foster care, such as the Education and Training Voucher (ETV) and Federal Pell Grants, however, very little is known about how FCA are financing their education and how these types of financial support impact educational persistence. Our two research questions are: “How do FCA compare to non-FCA with respect to financing postsecondary education?” Second, “To what extent does financial aid—specifically loans and grants—impact persistence from the first to second semester for FCA compared to non-FCA?”

Methods & Data
We utilized data from multiple years of the National Postsecondary Student Aid Study (NPSAS), which provides nationally representative data on postsecondary students and institutions, with a special focus on finances and financial aid (https://nces.ed.gov/surveys/npsas/about.asp). We focused on all undergraduates enrolled in postsecondary education and compared students who identified themselves on the Free Application for Federal Student Aid (FAFSA) as having deceased parents, being wards of the court, or being in foster care at a time since they turned 13 to students who did not identify this way. To answer our research questions, we first employed bivariate analyses, comparing FCA to non-FCA on a number of characteristics and aspects of financial aid. Next, we used logistic regression to look at the effects of different forms of financial aid on persisting from the first to second semester.

Results
We examined various college enrollment characteristics, including attendance patterns, types of institutions attended, and fields of study to better understand differences in the initial college choice process. FCA were more likely to delay their enrollment in postsecondary education following high school graduation, to attend part-time, and to take developmental education courses. In addition, their cumulative undergraduate GPA was, on average, lower than non-FCA. FCA were more likely to enroll in public institutions and were more likely to attend a two-year institution. FCA received more in need-based aid each year than non-FCA, and they borrowed more in Stafford Subsidized and Unsubsidized Loans. The overall persistence rate from fall to spring semester (within year persistence), was 85.5%, a lower rate than their non-FCA peers. Among FCA, those who applied for aid were less likely to persist than those who did not apply for aid. All forms of financial aid were associated with an increased likelihood of persisting from fall to spring, except institutional and state need-based aid.

Conclusions
This exploratory analysis points to a variety of college enrollment experiences that may present barriers for former foster youth in persisting and graduating from college and warrants further research. The finding that foster youth enroll in higher rates at community colleges and in associate’s degree programs points to the need to better understand the availability of support programs for FCA in those settings as well as enrollment patterns, and financial aid options at different types of institutions.

The results from persistence modeling helps us understand the relationship between different forms of financial aid and within-year persistence. This study helps researchers and practitioners alike to understand ways
foster care alumni are financing their postsecondary education, which has important implications for policy and program improvements.
In Nordic countries a Contact Family program is provided to benefit both children and their parents. The intervention can be defined as one model of respite care. The Contact Family program provides flexible and regular social support for families. In a Contact Family intervention, the child receives an extra family with whom she regularly spends 1-2 weekends every month. Contact family intervention research remains minimal, nationally and internationally. In this presentation we explore the question: What kind of environment does the Contact Family provide as part of the care process and how does the environment become part of the intervention? The aim is to establish a new perspective on the Contact Family program, where changing the environment is understood to be part of the intervention. (Probst 2013, 700.) For the child it means, in practice, that she is moving between two homes.

In our presentation, we examine how social workers (Svenlin) and children (Lehto-Lundén) perceive the Contact Family home and environment as part of the care provided to the child and a key element in the intervention. The presentation is a synthesis of two different doctoral thesis projects. In both research projects, qualitative interviews constitute the core research method. The social work practitioner (N=8) data is based on a focus group interview process. Children’s experiences of the Contact Family intervention were collected using a phenomenological approach where the actual data was collected together with children (N=11) in diverse ways. To maximize the children’s voice and ability to express their views and experiences, digital and video camera recordings and interviews were used. The researcher also made a journey to the Contact Family home with each child.

Findings suggest that the home of the Contact Family and the environment have a central meaning in the social workers’ views as well in children’s experiences. In both the children’s and the social workers’ views, the Contact Family home is constituted as a social and physical environment. The physical environment activates the child to play and explore new things. The homes of the Contact Families are described as stimulating and close to nature, often situated in rural areas. In children’s telling, place attachment (Jack 2010) is part of the relationship to the Contact Family. The social environment is represented as a family environment consisting of the interaction between children and adults, common activities, care giving routines and pets. The family environment is stable and balanced; it is an environment where responding to the children’s needs is of primary importance.

From our studies, we conclude that change of environment relates to positive expectations and notions; in Contact Family interventions the environment also affects and strengthens the child. The surroundings merge with and become part of the intervention in different ways. From both adult and child perspectives, the social and physical environments provide compensative and stable surroundings for the child. Therefore, it is important to pay attention to what kind of environment is provided for children as part of the intervention. The results indicate a need to broaden discussion of the person and environment relationship in social work to also include the role of environment in intervention. (Probst 2013, 701.)

Friday, 5th October @ 10:30: Family Support Interventions (Venue: D. Luís)

Background: Out-of-home care may negatively impact children’s lives and their development. At worst, out-of-home care may actually increase children’s problem behavior (Stone, 2007; Strijbosch et al., 2015) and deteriorate relationship quality with family members (Fernandes & Ramaciotti de Oliveira-Monteiro, 2016). At best, out-of-home care is as effective as outpatient care (Knorth, Harder, Zandberg, & Kendrick, 2008; Strijbosch et al., 2015), despite its much higher costs. Thus, out-of-home care warrants reconsideration. An innovative approach in outpatient youth care, is the Youth Initiated Mentoring (YIM) approach, in which youth nominate a mentor from among the non-parental adults within the existing social network (e.g., neighbors, family friends, extended family members) (Schwartz, Rhodes, Spencer, & Grossman, 2013; Van Dam et al., 2017). These natural mentors provide the youth with support and advise formal youth care professionals, thus combining informal and formal care. Existing youth-care intervention programs are embedded within the YIM approach. Thus, the YIM approach is an addition to care as usual, and aims to strengthen the effects of intervention programs by means of the natural mentor.

Objective: This study protocol describes our research program, which has three main objectives:

• First, we aim to examine which families are able to position a YIM and why.
• Second, we aim to examine the effectiveness of the YIM approach by comparing the YIM approach (i.e., intervention group) with other systemic family interventions in youth care (i.e., control group with care as usual). Our goal is to gain knowledge on whether the YIM approach is associated with changes in a) family’s resilience (+), b) family relationship quality (+), c) parenting skills (+), d) youth’s overall wellbeing (+), e) youth’s emotional and behavioral problems (-), f) youth safety (+), and g) number, duration and type of out-of-home placements (-).
• Third, we aim to generate knowledge about the working mechanisms of the YIM approach. Specifically, we examine whether the YIM approach is associated with increases in a) youth-YIM relationship quality, b) family’s social resourcefulness, c) shared decision making, d) treatment motivation, and whether these factors potentially mediate the effect of the YIM approach on the outcome variables.

Method/Design: Families with youth aged 12-23 years with an indication of out-of-home care are recruited through four youth care facilities in the Netherlands. To meet all objectives, three sub studies are conducted:

• Quasi-experimental study: Families receiving care according to the YIM approach (n=225) are compared families receiving care as usual (n=75), i.e., other systemic intervention programs for multi-problem families with an indication for out-of-home care. Families complete five questionnaire assessments: pre-test, intermediate test, post-test, follow-up after six months and follow-up after 12 months.
• Interview study: To understand why some families appointed a YIM and others have not, two subsamples are invited to participate in interviews through purposive sampling: (1) 5-10 families who positioned a YIM within six weeks after the start of the intervention program, and (2) 5-10 families who did not position a YIM within this time frame. Youth, parent(s), YIMs, and caseworkers are interviewed individually.
• Daily-diary study: To examine daily processes in wellbeing, resilience and youth-YIM relationship quality, 40 youth-YIM dyads are invited to participate in this study using smartphone application G-Moji. Dyads participate individually in five to eight assessment weeks (Monday through Sunday). Active (i.e., short questionnaires concerning wellbeing, resilience and relationship quality) and passive (i.e., activity level, call logs, and youth-YIM proximity) data are collected.

Discussion: This is the first study to examine the effectiveness of the YIM approach as an alternative for out-of-home care. Study results will contribute to improvement of care for at-risk youth.
Overview and methods
The presentation draws on a follow-up study of a full cohort of 2,208 children who entered the care of a large English local authority between 2009 and 2015. 239 of the children left and returned to care at least once resulting in 2,543 periods of care for the 2,208 cohort children. The children were follow-up to 2017, resulting in a minimum follow-up of 2 years and a maximum of 8 years. The study uses administrative data (Department for Education SSDA 903 annual returns) to explore the care careers of the children. Information is available on age at entry, gender, ethnicity, main reason for care, legal status and placement at entry, but also, importantly, any changes of carer/placement type and legal status whilst in care. The analysis therefore provides information on the policies and practice of the local authority with respect to the use of coercive or negotiated entry, placement choices, stability whilst in care and routes out of care for children in the different age and needs groups. The use of administrative data allows for comparison with England as a whole as well as with other jurisdictions (still only a minority) that provide administrative data on all entrants to care followed up through their care careers.

A particular focus is the different routes through care and out of care taken by the children in four distinct entry age groups (0-2 (30% of entrants); 3-6 (14%), 7-11 (17%), 12-17 (38%). The authors note that much research and policy decision making tends to focus on those in care on a particular date (including more of the longer-stayers), thus missing the opportunity to focus on the early months and learn about early-leavers. The research focuses especially on the characteristics and placement experience of the 464 entrants (less than 1 in 5) who were still in care 2 years later. However, this presentation will focus more on the 966 (32% of the 0-2 entrants; 38% of the 3-6 entrants; 37% of the 7-11 entrants and 43% of the 12+ entrants) who returned to a parent, and amongst these the 243 who returned to care at least once. Research findings from other qualitative and quantitative studies are referred to when suggesting lessons from this research study on how best to improve family support services for children who enter care at different ages and who return to parents from care.

Conclusions
This analysis of all care entrants demonstrates that drawing a distinction between policy for supporting families in the home and providing services for children in care is unhelpful. If we include those who left care to live with kinship carers and who in the main will retain birth family links, almost half between 2 and 8 years after entry were back with their family. Some of the 15% who ‘aged out’ of care at 18 will have gravitated back to their family environment. We would not wish to downplay the importance of a high-quality service for the 18% who remained in care after 2 years (most in long term foster care needing assistance in maintaining meaningful links with birth family members) or the 14% (41% of those in the youngest age group) who left care by adoption, but for some of whom facilitated links with the birth family will be needed. But our conclusion is that this analysis points to the necessity of child welfare services considering the out-of-home care service as an essential part of integrated services to vulnerable children and families.
Objective: Substance abuse is estimated to be a problem for 40% to 80% of families involved with the child protection system (Hines, Lemon, Wyatt, & Merdinger, 2004; Young, Boles, & Otero, 2007). Parents who have histories of substance abuse are more likely to have their children placed in out-of-home care. Their children are more likely to experience multiple placements while in foster care, remain in care longer, are less likely to be reunified, and more likely to reenter foster care once they are reunified (Marsh, Ryan, Choi, & Testa, 2006; O'Connor, Morgenstern, Gibson, & Nakashian, 2005).

The lack of collaboration among child protection and substance abuse treatment systems, agencies, and professionals has been identified as a contributing factor related to poor outcomes among parents with histories of addiction (Breshears, Yeh, & Young, 2009; Green, Rockhill, & Burrus, 2008; Marsh, Smith, & Bruni, 2011). There is a need to move beyond collaboration toward interdisciplinary practice in which collaboration is embedded.

Using a case study approach, the purposes of this study were to: (1) identify key components and conflicts of interdisciplinary practice between child protection and substance abuse treatment professionals in a large, urban Midwestern city; and (2) explore the next steps involved in moving toward an interdisciplinary model of practice.

Methods: Using an Embedded Case Study design, 21 in-depth, semi-structured interviews were conducted with 21 child protection and substance abuse treatment professionals (six child protection caseworkers, 11 substance abuse treatment counselors, and four substance-abuse parenting workers). Embedded case study designs involve multiple layers of analysis embedded within one another. Embedded Case Studies are considered more robust and reliable because they use multiple units of analysis (e.g., participants and methods) to investigate a problem (Yin, 2003). The larger case study consisted of the women-only, comprehensive substance abuse treatment program. Embedded within this larger case were 26 women who were involved with child protection resulting from their substance use. Embedded within each women’s child protection case were child protection and substance abuse treatment professionals. This study focuses on the ways in which child protection and substance abuse treatment professionals did and did not work together to help women regain/retain custody of their children.

All of the interviews were audiotaped and professionally transcribed verbatim. The interviews were read through multiple times, which led to the generation of a list of descriptive and in vivo codes. These codes were used to develop themes. Pattern matching was used as a way of dissecting the data to generate themes and understand the patterns (Fereday & Muir-Cochrane, 2006; Yin 2009). Finally, thematic analysis was conducted by looking within and between cases, repeatedly checking for disconfirming and corroborating evidence, as well as alternative explanations (Yin, 2009).

Results: The interdisciplinary components consisted of having a shared vision and presenting as a unified team. The interdisciplinary conflicts were having different, often conflicting goals, taking sides, and limited information sharing and involvement.

Conclusions: Child maltreatment cases involving substance abuse are among the most complex and difficult child protection cases (McAlpine et al., 2001; O’Connor et al., 2005). Poor outcomes among parents with histories of substance use necessitate child welfare systems move towards interdisciplinary models of practice. Interdisciplinary practice is intended to create a team-based culture in which there is no longer “us” versus “them” but, instead, a model in which systems and professionals are invested in and responsible for addressing the needs
of children and families who are simultaneously involved with the child protection and substance abuse treat-
ment systems. Moving toward an interdisciplinary model of practice is vital to providing families with histories of addiction with the optimal chance for success.
How Much Do We Know about Parental Satisfaction in Parenting Training Interventions? An Scoping Review

Friday, 5th October @ 10:15: Improving Parenting Competences (Venue: Auditório)

Dr. Gaby Ortiz-Barreda (University of Bergen), Dr. Ragnhild Bjørknes (University of Bergen)

**Background:** Conduct disorder is a serious problem in children and adolescents with an estimated prevalence of between 1.5% and 3.4%, respectively. Problematic parenting has been recognized as a powerful predictor that can cause severe behavioral problems in adolescence and dysfunction in adulthood. Evidence suggests that parenting programmes are one of the most effective interventions for reducing child mental health problems. A recent study has shown that parental engagement and satisfaction are factors very much linked with the effectiveness of parenting interventions. For this reason, the aim of this study is to know to what extent the outcome of parental satisfaction has been considered in parenting training interventions.

**Methods:** A Scoping review was conducted to retrieved peer review original articles published since 2000 to 2018. Searches were performed on the following databases: Medline, Embase, PsycINFO and Web of Science. Three thematic filters were developed by using keywords: a) Filter related to Parental satisfaction: Parental satisfaction, Parental Engagement, Parent's perceptions, Parent's experiences, consumer satisfaction, maternal satisfaction, Client satisfaction, Personal satisfaction, parenting satisfaction; b) Filter about Parenting interventions: Parent* training, Parental training Intervention, parental training programme, Parent-training program, Parent management training, Training parents, Parental program, Parenting programs, Evidence-based parenting programs, parent programme, Parenting Plus Programme, Child-Focused Intervention, Parenting intervention. behavioral family intervention, Parent–child interaction therapy, Parent behavioral training, parent-child intervention, behavioral parent training; c) Filter related to behavioral problems: child behavioral problem, Child Behavior Disorder*, Attention Deficit Disorder with Hyperactivity, Aggression, Impulsive Behavior, Stress, disruptive behaviour disorders, Attention Deficit and Disruptive Behavior Disorders, Attention Deficit Disorder with Hyperactivity, Disruptive behaviour problems, Oppositional Defiant Disorder*, Externalizing behavior, Behavior problem*, conduct problem*. Only the studies that include parental satisfaction variable were selected. Boolean operators such as “OR” and “AND” were used to retrieve all the literature available.

**Results:** A total of 414 studies were identified across all databases. After applying the inclusion criteria, only 58 studies were included in the analyses. Most of studies were published between 2014 to 2018. In the majority of the articles, parental satisfaction was found to be a factor associated with outcomes related to parent’ quality of life such as parenting stress, emotional distress and caregivers’ sense of satisfaction associated with parenting.

**Conclusion:** To understand parenting satisfaction can help us intervene so that families actually accept and would utilize the treatment. Additional research should focus on the importance of parental satisfaction as a mechanism of change within behavioral parent training programs needs to be considered.
Characterization and Main Determinants of Parental Sense of Competence in Non-Kin Foster Carers from Spain

Friday, 5th October @ 10:30: Improving Parenting Competences (Venue: Auditório)

Dr. Jesús M. Jiménez-Morago (University of Seville), Dr. Esperanza León (University of Seville), Ms. Irene Viedma (University of Seville)

In recent years, the study of parental competences has become increasingly relevant in the field of family intervention. These competences have been conceptualized as a set of skills, strategies and behaviors of parents that promote a healthy and positive development in their children. A key element when exercising such competences is the parent's perception of their abilities and effectiveness in the exercise of their tasks. This perception is a cognitive construct related to the beliefs and judgments that parents make about their ability to organize and execute their tasks successfully. Some of the existing studies have related this perception to individual characteristics of parents, family functioning, and children's adjustment. However, despite the importance of the protective task carried out by foster carers with children who usually have a past of adversity and separation from their birth families, research on parental sense of competence remains scarce in foster families.

The main purpose of this paper is to explore the parental sense of competence in foster carers and analyze its main determinants and predictors. Thus, the Parental Sense of Competence Scale (Johnston & Mash, 1989) and others instruments were applied to a sample of 48 non-kin foster families and their children in care (M = 6 years, SD = 3.5) from Seville and Cádiz provinces in southern Spain.

The results indicate that foster parents perceive themselves as highly competent and moderately efficient, and feel very satisfied with their parental role with children they care for. Variables related to parental competence were found among the characteristics of the foster carers, the children in care and the way the non-kin foster care was constituted. Additionally, regression analysis allowed us to identify the predictors of parental sense of competence, role satisfaction and perceived effectiveness among foster carers. These results seem to emphasize the influence of foster carer’s responsiveness, children’s behavioral problems, and the evolution of children during foster placement as main determinants of sense of competence in these families. This study not only opens up new research perspectives related to how foster carers cope with their protective task, but also, in terms of intervention, results suggest taking into account new elements to improve and adjust professional support given to these families and their foster children.
Video Interaction Guidance: Emerging Findings from a UK Study into the Use of VIG to Reduce the Numbers of Children in Care and to Support Relationship Building in Foster Care and Adoption

Friday, 5th October @ 10:45: Improving Parenting Competences (Venue: Auditório)

Dr. Nina Maxwell (Cardiff University), Dr. Alyson Rees (Cardiff University)

Children and young people who are looked after by the local authority, either in foster or residential care, have often experienced frequent moves and inconsistent relationships which is associated with difficulties in developing trust, empathy and attachment (Schofield et al. 2000; Schofield and Beek, 2005). Many have difficulties expressing emotion, and developing trusting relationships (Jones et al, 2011). Video Interaction Guidance (VIG) promotes sensitive, attuned parenting to strengthen the relationship between the child and primary carer; whether this is a biological parent, a foster carer or adopter. Yet, whilst VIG is used in more than 15 countries in health, education and business, its use in social work to prevent foster care or adoption breakdown and as an early intervention to prevent children becoming looked after, is less well explored.

Video Interaction Guidance was developed by Biemel's based upon Trevarthen's (1979) intersubjectivity theory which demonstrated that babies are born with an innate ability to communicate and respond to the social cues of others and Bandura's (1986) work which hypothesised that watching yourself perform a behaviour well increases held feelings of self-efficacy. Using video feedback, VIG aims to improve the primary carer and child's relationship by building on effective communication where it occurs naturally. Video feedback enables the capturing and replaying of micro moments of attuned interaction where the VIG guider supports the caregiver to consider the child's thoughts and feelings and what contributed to the positive attunement. Cornwall Council established a VIG Service in 2014 to accept referral's where attachment difficulties or parental sensitivity had been identified; whether as an early intervention, part of a care plan or for children in residential care or foster placements. This paper presents the findings of two studies. First, an evaluation of the service undertaken in 2016 which examined the impact of VIG upon families. Second, emerging findings from a current study looking at the impact of VIG upon professional development and practice with children and caregivers.

METHOD
Both studies adopted a mixed method qualitative approach. Study one included analysis of service data including the Tool for Parenting Self-efficacy Scale (TOPSE), and semi-structured interviews conducted with clients at two time points; immediately on completion of VIG and six months later. Study two includes focus groups with children, interviews with professionals, recordings of practice and family diary analysis.

FINDINGS
Findings from study one found an overall improvement on caregiver self-efficacy with the greatest improvement noted for Empathy and Understanding, Play and Enjoyment and Control. There was wide variability in the caregivers undertaking VIG, including children in residential care, adopted children, families with long service involvement and those with no prior service involvement. The presenting difficulties were also varied including the mental health of the parent, learning difficulties of the parent and/or child, domestic violence to parenting a challenging child as well as the prevention of adoption breakdown. The vast majority of the parents wanted to build confidence and punctuate the negative spiral that they had sometimes become involved in. Six months after the intervention, caregivers reported they had a more reflective approach and an awareness of how their parenting behaviours affected the child, and having improved relationships with the child.

Emerging interview findings from study two found that VIG enabled professionals from a range of backgrounds to conduct direct work with families. Furthermore, VIG expanded the skills of professionals enabling them to develop more attuned relationships with families.
CONCLUSION

VIG is an evidence-based inclusive intervention which builds upon caregivers strengths to promote secure attachments between a range of children and their caregivers.
Effects of the Training for Foster Parents “Caring for Children who Have Experienced Trauma” on PTSS and Behavior Problems of Foster Children

Friday, 5th October @ 11:00: Improving Parenting Competences (Venue: Auditório)

Ms. Carolien Konijn (Spirit Youth Care Amsterdam), Mrs. Ellen Schulze (Spirit Youth Care Amsterdam)

Introduction. Foster children often have a history of traumatic experiences (Strijker et al, 2008). Once placed in foster care, stability of the placement is crucial for a positive social emotional development. Children who experience positive relationships and stay stable in foster care have fewer behavioral, delinquent and mental health problems, and have better school achievements (Carnochan et al, 2013; Helton, 2011; Strijker e.a, 2005). A history of abuse and neglect causes post-traumatic stress symptoms (PTSS) (Gigengack et al, 2017) and predicts significantly higher externalizing and internalizing problems (Nadeem et al, 2017). These problems increase foster parenting stress and in turn this stress increases behavior problems in children (Neece et al, 2012). In this context placement stability is challenging.

The National Child Traumatic Stress Network's trauma-informed parenting training (Caring for Children who Have Experienced Trauma) provides foster parents knowledge on the impact of trauma on the development and behavior of children, skills and appropriate responses to the challenging behaviors of the children. Understanding how trauma affects children helps to make sense of the child's sometimes baffling behavior, feelings, and attitudes. With this trauma-informed parenting training foster carers are better prepared to help the child cope with the effects of trauma (Sullivan et al, 2016), to stabilize their conduct, to decrease stress levels, and to motivate them for treatment.

The present study examined whether the training Caring for Children who Have Experienced Trauma (Coppens & Van Kregten, 2012) decreases parenting stress in foster carers, PTSS and behavior problems in foster children, moderated by the level of parental mind-mindedness and knowledge on trauma-informed parenting. Mind-mindedness is the parental predisposition to treat children as individuals with minds of their own, own feelings, emotions, wishes and longings, and have appropriate responses (Meins, 1997; Zeegers et al, 2017). Mind-minded speech can refer to desires and preferences, cognitions, emotions, and the content can be positive, neutral or negative. Parents’ mind-mindedness has a positive effect on the child’s attachment security (Meins et al., 2003). (Foster) parents with strong attachments to their children make them sensitive to their needs (Van IJzendoorn, 1995; Verhage et al, 2016).

Method. A 103 foster parents received the training ‘Caring for Children who Have Experienced Trauma’ and filled in questionnaires on PTSS in the foster children (Children’s Revised Impact of Event Scale /CRIES, parental version; Verlinden et al, 2005), knowledge of trauma-informed parenting (Coppens & Van Kregten, 2012), Strengths and Difficulties Questionnaire, parental version (SDQ; Widenfelt et al, 2003), Parenting Stress Questionnaire (Vermulst et al, 2015). Mind-mindedness was assessed with the Mind-mindedness interview (Meins et al., 1998). Verbatim responses have been coded conform a manual (Meins & Fernyhough, 2015; Dutch translation by Zeegers & Colonnesi, 2016). Data were gathered at five times: (T0) two months before the training, (T1) at the beginning of the first and (T2) the last training session, (T3) three and (T4) six months follow up after the last session.

Results. The training ‘Caring for Children who Have Experienced Trauma’ increases the foster parents’ knowledge on the impact of trauma in children. In contrast to Gigengack et al (2017), we found no positive effect on the parenting stress level of foster parents. Also PTSS in children and their problem behavior did not decrease. The general level of mind-mindedness did not increase but the content of the mind-minded speech was significantly more positive instead of neutral. The negative comments, which often refer to the problems and the difficulties that the children are coping with, stayed stable. Furthermore, the amount of children that receive
trauma treatment significantly increased during the measuring period.
Strengths-Based Approaches: A Constructive-Critical Appraisal

Friday, 5th October @ 10:15: Living in Secure Units (Venue: Ribeira II)

Prof. Stijn Vandevelde (Department of Special Needs Education, Ghent University), Dr. Lore Van Damme (Ghent University - department of special needs education), Ms. Nele Van Hecke (Department of Special Needs, Ghent University)

Strengths-based approaches have gradually gained ground in treatment and support of persons, including adolescents, in vulnerable situations. A particular group of adolescents are those who have committed criminal offences and who reside in youth detention centers (in Dutch: “Gemeenschapsinstellingen”). The Good Lives Model of Offender Rehabilitation (GLM) is increasingly recognized as an applicable theoretical strengths-based framework in guidance on how to deal with and support these juvenile offenders.

Although considerable work has been carried out in regard to defining and operationalizing strengths-based approaches, different concepts (e.g., resilience, strengths, protective factors, promotive factors, …) are still used interchangeably. This contributes to problems in relation to the theoretical underpinning and conceptualization of the strength-related concepts mentioned above. Recently, Ward (2017) has warned for the danger that “people may wrongfully assume that these concepts, exactly because of the positive associations they evoke, are intrinsically valuable and therefore should not be critically examined”.

Rapp and colleagues have identified the “core factors” of the strengths-based approach (Rapp et al., 2005; Rapp & Sullivan, 2014, p. 132): (1) stimulating capacity to grow; (2) emphasizing strengths; (3) focusing on context and resources; (4) the client ‘in control’ of his/her treatment or support process; (5) the relationship between professional and client is primordial; and (6) focusing on the natural surroundings/the community. These factors make clear that strengths-based approaches comprise individual/interpersonal competencies and community resources. Yet, although strength-based approaches are more often used, questions remain about their evidence base.

In a recent article, we have discussed the available knowledge with regard to strengths-based approaches for (primarily adult) offenders with mental illness, in relation to different disciplines, including law (e.g. human rights), criminology (e.g. desistance), mental health care (e.g. recovery), forensic psychology (e.g. the Good Lives Model), special needs education (e.g. Quality of Life) and family studies (e.g. family recovery). Several dilemmas were observed:

(1) “Living apart together”: the integration of different disciplines;
(2) “Beyond Babylonian confusion and towards more theoretical research”: conceptualization of strengths-based practices in different fields;
(3) “No agency without autonomy”: the individual in context; and
(4) “Risks, strengths and capabilities”: the search for an integrated paradigm.

We concluded that “these different disciplines share a shift in how humankind is viewed, respecting agency in the interaction with people who have offended. Yet, differences apply to the objectives that the disciplines strive for, which warrants not to eclectically consider strengths-based working in each of the disciplines as ‘being small variations of the same theme’”.

In the current presentation, we aim at reviewing if and to what degree these findings also apply to adolescents who have offended, as the disciplines mentioned above are also involved in supporting and treating this particular population. A specific emphasis will be placed on the Good Lives Model and its current application in juvenile justice populations.
Immediate Placement of Children in Secure Residential Youth Care

Friday, 5th October @ 10:30: Living in Secure Units (Venue: Ribeira II)

Ms. Inge Busschers (Amsterdam University of Applied Sciences), Ms. Carolien Konijn (Spirit Youth Care Amsterdam), Mr. Marc Dinkgreve (Youth Protection Amsterdam)

Objectives: Adolescents who are placed in secure residential care in the Netherlands are often under the supervision of a child protection case manager. Case managers of Youth Protection Amsterdam Area (YPA) apply an integrative case management model Intensive Family Case Management for engaging, motivating, assessing and working with high-risk families in child protection and youth parole services (Busschers, Boendermaker, & Dinkgreve, 2016).

The process of a regular placement in secure residential takes a few weeks. To be able to act immediately when there is urgent need, there is an option of demanding an immediate placement. Immediate placement is deployed when the safety of the adolescent is at stake, and a regular authorization cannot be awaited. This means an adolescent can be placed in secure residential care on the same day. Analysis of placements of adolescents in Amsterdam shows that it does not concern families that have just been registered with child protection services. On the contrary, on average, these families were already up to two years under supervision of a case manager before immediate placement was discussed. Apparently, in those two years it has not been possible to achieve sufficient safety of the young person (12 to 18 years of age) in his family situation and also the emergency could not be prevented.

Placing a young person in secure residential care can be traumatizing and when this happens on such a short notice and with the matching restraining procedure, the trauma will be even greater. Therefore, this study addressed the question What factors (when a case manager is involved) require that an immediate placement in secure residential care of a young person is requested and (how) can the number of immediate placements be decreased?

Method: The research design contained 14 case studies of adolescents who were placed in secure residential care by immediate placement in 2017. In depth-interviews were held with case managers of YPA (N=12), treatment coordinator of the secure residential care organization De Koppeling (N=12), young people (N=4), and their parents (N=3).

Results: At the time, the need for immediate placement in secure residential care was clear in 10 of the 14 cases for the involved professionals due to the unsafety, in combination with withdrawal of needed care, run away, and a lack of trust in the family or network of the adolescent.

Although the immediate placement for most young people was deemed necessary at the time that it was used, the case managers also indicated that things could have changed in the supervision. In 10 cases, case managers were involved more than a year. The ambulatory care did not reach the intended goals, due to different reasons. When looking back, both case managers and treatment coordinators wondered in some cases whether alternative, non-residential care would have been a better approach.

Conclusions: This study provides insight into the how, what and why of applying for an immediate placement of a child in secure residential care. Recommendations to improve the prevention of, the demand for, and process of immediate placement in residential care will be discussed.
Quality of Life and Treatment Engagement of Adolescents in Youth Detention Centers

Friday, 5th October @ 10:45: Living in Secure Units (Venue: Ribeira II)

Mrs. Nele Van Hecke (Department of Special Needs, Ghent University), Prof. Stijn Vandeveldt (Department of Special Needs Education, Ghent University), Prof. Wouter Vanderplasschen (Ghent University - department of special needs education), Dr. Lore Van Damme (Ghent University - department of special needs education)

Background: In Flanders, adolescents can be referred to a youth detention center for youth court-mandated residential support (YDC) when they are charged with a criminal offense or when they find themselves in a problematic educational or living situation (e.g. in case of truancy, running away, aggression or prostitution). These YDC’s have both a restrictive and an educational function. Placement in a YDC can be seen as a severe and far-reaching measure, heavily impacting on different levels of the adolescents’ personal life.

In recent years, strengths-based rehabilitation theories, such as the Good Lives Model of offender rehabilitation (GLM) have gained increased attention. The GLM aims to support offenders in pursuing personally valued life goals in socially acceptable and non-criminal ways, and by that, reducing the risk of recidivism. The GLM can be seen as a positive approach in which individuals are motivated to live personally meaningful and fulfilling lives, without harming others. As such, a GLM-based approach could be able to enhance both offenders’ treatment engagement and their Quality of Life (QoL), while simultaneously reducing their risk of reoffending. Up until now, only few studies – mostly focusing on either boys or girls - have been conducted on treatment engagement and QoL of adolescents in YDC’s (Colins; Barendregt; Van Damme).

Previous research indicated that ‘detained’ adolescents report high levels of stress and psychological burden, connected with lower levels of experienced QoL. Furthermore, the willingness to engage in treatment may be limited due to the coercive nature of a court-mandated stay in a YDC. Recent studies indicate that detained girls show low levels of treatment engagement, which do not significantly change over time. Moreover, there seems to be a relation between satisfaction with certain life domains and treatment engagement: satisfaction with physical and psychological health is related to higher levels of treatment engagement, while satisfaction with social relationships is related to lower levels of treatment engagement.

Objectives: (1) To shed light on (the evolution in) experienced QoL of adolescents during their stay in a YDC (2) To scrutinize the adolescents’ treatment engagement over time; and (3) To study the relation between QoL and treatment engagement. Differences between boys and girls will be analyzed.

Method: A prospective cohort study (n=182; 92 girls, 90 boys) was carried out in a Flemish YDC between May 2016 and December 2017. Adolescents were seen 3 times; (T0) shortly after intake; and (T1 and T2) 1 and 2 months after T0 respectively. At T0, a socio-demographic questionnaire was filled out, as well as two instruments to measure QoL: the Dutch Youth version of the Lancashire QoL profile (LQoLP), and the MANSA-VN12. At T1 and T2, QoL was assessed using the MANSA-VN12 and treatment engagement was measured by means of a self-report questionnaire (“Behandelbetrokkenheidsvragenlijst”) with four scales: readiness to change, bond with staff, collaboration on goals and tasks, and therapeutic engagement.

Results & conclusions: Preliminary results show that QoL changes during treatment, but only for the social domains; and boys seem to be significantly more satisfied with all life domains than girls. Concerning treatment engagement; the only scale with a significant increase is ‘readiness to change’, and this is only the case for girls. Treatment engagement is significantly higher for boys than for girls. This may be informative for the relation between QoL and treatment engagement. Based on our findings we will discuss implications for treatment and further research.
Within secure units for adolescents, research has primarily focused on youth's perspective, different treatment models and on the relationship between youth and staff. However, the staff’s perspective seems difficult to reach in this context, thus being a neglected voice. In addition, during the last few years, the Swedish National Board of Institutional Care, managing all compulsory care, has reported on a growing number of violent incidents between staff and youth placed in secure units. This presentation will provide information concerning how staff in secure units narratively position themselves and young people when speaking about violence. It also explores how the staff describe the emotional impact to them in speaking about violence. Violence is a slippery concept, loaded with emotions, which can be difficult to define where fear is believed to play a particularly important role in the damage caused by violence.

Furthermore, two theoretical starting points will be presented. The first is the concept of emotional labour, which highlights the fact that staff work with other people's emotions whilst also being expected to control their own. Secure units are emotional places, because they require the staff to induce or suppress emotions in order to sustain the outward attitudes that produce the proper state of mind. Thus, the staff’s emotional labour involves managing emotions to accord with organizational rules. The second is the interaction among staff that shapes various social representations and positionings. Social representation recognizes the importance for individuals orienting themselves within a context. Hence, social representation is about examining the way in which individuals within groups make sense of the environment around them and how these understandings change, evoke new understandings, develop and interact.

Five focus groups were conducted with staff (n=27) who worked with both boys and girls at three different secure units in Sweden. It is worth noting that violence per se is a sensitive topic to discuss, but research indicates that the focus group format facilitates such discussions. The empirical data was first processed through narrative categorization and then analysed by interaction analysis. The bridge between these two steps – narrative categorization and interaction analysis – is reinforced by the shared view that meaning is created through experiences that are expressed within groups of other people.

The results illustrate the fusion of violence and emotion in the positions adopted by staff, emphasizing the reciprocal nature of violence. Furthermore, the results focus on four archetypical excerpts showing how violence and emotion are fused in positions taken by staff. This can be understood as processes of narrative helping, which steered group members to find emotional positions in talking about experienced violence. Furthermore, despite counter-narratives expressed by participants in the focus group, a stable representation of violent youth persists. Finally, emotional labour seems to involve working with one's own feelings and controlling the emotions of young people, not the opposite. The results underline the importance of raising questions about the nature of violence and how staff handle it. In addition, the results show the power of institutional culture mirrored in narrative helping, in maintaining a coherent representation of the youth in secure units, and in the understanding of emotional labour. This suggests, following, that violence between staff and youth is not only about individuals. What needs to be highlighted is institutionalized power, i.e., that violence can be the product of an institutional culture.

Keywords: Secure units, violence, focus group, emotional work, staff perspective
The Theatre Comes into the Child Welfare Unit – The Metaphoric Shelter of Arts

Friday, 5th October @ 11:15: Living in Secure Units (Venue: Ribeira II)

Dr. Päivi Känkänen (National Institute for Health and Welfare), Dr. Marko Manninen (National Institute for Health and Welfare)

The effects of utilizing arts in social and health care sector activities have been a subject of considerable debate in the recent decade, both in Finland and also internationally. In our study, we aimed to assess the benefits of arts – namely drama-based exercises – as a method for enriching communication, self-expression and overall emotion processing among adolescents placed in residential child care.

Reform school (RS) system in Finland works with adolescents with severe behavioral problems, like difficulties in schooling, conduct problems and substance use. Placement in the RS typically takes place at 15-16 years of age. RS is integrated in the social welfare system, and it stresses the rehabilitation aspect.

Traditional discussion-based psychotherapy appear to have a limited effect for many adolescents residing in the RS: deficits in verbal performance are common, many adolescents have difficulties processing emotions and overall motivation for participation might be low. New intervention methods by utilizing new approaches are needed.

Arts-based methods and namely drama-based exercises have provided positive effects in working with special groups. Touring Stage (TS), a part of Finnish National Theatre, takes productions from theatre stage to people, who live in locations or facilities which have little or no access to live art. The ideological aim is to raise awareness of issues affecting marginalized sectors of society.

Our study is connected the TS theatre play project, Fyodor Dostoevsky's book “Crime and Punishment”, which has been created specifically to reform schools. The project includes arts-based workshops (13 weekly sessions) that deepen the theme of the play together with adolescents. We set out to assess the effects of participation in drama workshops in RS environment. Our special focus is emotion processing abilities.

The adolescents will participate low-threshold drama exercises accordance with their motivation. Our hypothesis is that participation will reinforce self-expression, self-understanding and courage to face other people. The drama exercises with different kinds of roles and costumes will provide a metaphoric shelter of arts - symbolic distance and protection - which in turn allow adolescents to express themselves more freely.

Eight adolescents (F/M 6/2) volunteered to participate to the study. The data is collected with a half-structured interviews and Toronto Alexithymia Scale (TAS-20) questionnaire. TAS-20 addresses difficulties recognizing and processing emotions. In addition, after the workshop period, the artists who are leading the workshops and participants' personal key-workers were interviewed for additional information on the possible changes in adolescents' overall well-being.

The workshops took place between January and April 2018. Our presentation will show major findings and possible changes over time. The implications for future studies will also be discussed. Based on our results, theatre workshops have numerous positive effects to participants. At large, arts-based activities should be used much more in child welfare services.
Protective and Risk Factors for Runaway Behaviors in Residential Care

Friday, 5th October @ 10:15: What about Runaways? Empowering Caregivers in Residential Care (Venue: Miragaia)

Ms. Joana Cerdeira (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Ms. Sónia Rodrigues (University of Porto), Ms. Joana Campos (University of Porto), Ms. Joana Soares (University of Porto)

**Background:** Runaway behaviors in Residential Care (RC) are key indicators of the extent of the child’s danger and in Portugal have not been prioritized in national policies, practices or research. Internationally, focus has been given to socio-demographic variables at the expense of context variables. Children’s perspectives on the issue have been mainly ignored. **Objective:** The current research aims to identify protective and risk factors, predicting runaway behaviors of children in RC, considering both individual and contextual variables. **Method:** 354 children placed in 33 RC centres participated in this study. Data were collected using two instruments belonging to the Portuguese Comprehensive Evaluation System for RC (ARQUA-P), (the Previous Information Request and the Interview for Children/Youth). YSR was used to assess children’s psychological adjustment. **Results:** Children with runaway behaviors were older, had more psychological mal-adjustment, more substance abuse and less time in RC. These children had a more negative perception of their relationship with peers and caregivers, as well as of their leisure activities. Gender, delinquent behaviors and segregation in RC centres were identified as risk factors whereas the existence of siblings in the same centre as well as positive relationships with caregivers were considered protective factors. **Conclusions:** These findings help to understand the phenomenon and highlight the need to redesign a set of features of Portuguese RC centres, caregivers’ practices and the functioning of the protection system when dealing with these runaway children.
Creation of Evidence-Based Strategies for Prevention of Runaways from Residential Treatment Institutions

Friday, 5th October @ 10:30: What about Runaways? Empowering Caregivers in Residential Care (Venue: Miragaia)

Mrs. Gabrijela Ratkajec Gašević (Faculty of Education and Rehabilitation Sciences, University of Zagreb), Mrs. Ivana Maurović (University of Zagreb, Faculty of Education and Rehabilitation Sciences), Prof. Valentina Kranželić (University of Zagreb, Faculty of Education and Rehabilitation Sciences)

Public expert debates directed toward residential care for children and youth with behaviour problems usually highlight the problem of runaways as a current and blazing topic. This has prompted the research teams from Centre for Missing and Exploited Children and University of Zagreb, Faculty of Education and Rehabilitation Sciences to conduct two studies on youth runaways from residential care treatment. Through these studies we have tried to understand the phenomenon – prevalence of runaways, process of running away, circumstances during decision making about running away, as well as circumstances during running away from residential care. Also, aims of researches was related to youth perception of running away as well as to which reasons they attribute the decision making for this behaviour. First research, conducted in 2015, 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. Second research was conducted during 2017, where qualitative methodology was implemented. Semi-structured interviews were conducted with 15 young people aged from 14 to 18, living in residential care treatment who had at least one episode of running away from residential care.

Very concerning results from quantitative study show that 45.8% of young people included in the research ran away from institution at least once, while long-term escapes (over a month) are present in 13.3% of participants. The most common reasons for running away were poor conditions in institutions and the desire to spend time with their family (stated by 30% of participants). Hedonistic and anti-social tendencies were present to a lesser extent. The most dominant profile of youth who runaway (tested through regression analysis) includes following characteristics: lack of problem solving skills, lack of attachment to the institution and presence of family belonging and meaningful activities with family members.

Analysing the qualitative data, we got an insight into reasons why youth decided to run away. Namely, youth were verbalising that their psychosocial needs in residential care were not satisfied (need for family and home, need for society, freedom, entertainment, etc.) and they perceived residential care conditions as unacceptable. They outlined very small extent of protective factors to prevent them from running away. Some youth emphasized that this experience of escaping from residential care even helped them because they experienced meaningful and interesting life events, re-established their social relations and became aware of their strengths.

Based on these results, we created several strategies for the prevention of runaways from residential treatment institutions: (1) protocol on the procedures in case of runaways from social care institutions, which includes responsibilities of every party in the case of runaways because there is no uniformed procedure in children and youth protection system; (2) guidelines for the professional conversation with youth after they come back in the institution because these conversations are either always the same or are not carried through; (3) preventive workshops primary directed to strengthening of problem solving skills. These three strategies will be presented in detail since they are directed to the development of better practice, which can meet therapeutic goals and support needs of youth.
Residential Care Professionals: Evaluation of Attitudes and Needs for Trauma-Sensitive Systems

Friday, 5th October @ 10:45: What about Runaways? Empowering Caregivers in Residential Care (Venue: Miragaia)

Prof. Elisa Veiga (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. José Carlos Rocha (CPTL - Centro Psicologia do Trauma e Luto), Ms. Helena Barbosa (CESPU), Dr. Emanuel Santos (CPTL - Centro Psicologia do Trauma e Luto), Prof. Mariana Negrão (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa)

Despite the global pressure for the deinstitutionalization of children in care across Europe, and recent changes in national legislation, Portugal continues to be a country with a very high prevalence of residential care amongst at-risk children (87.4% - ISS, 2016). These children have been exposed to multiple traumatic events that can disrupt their emotional, relational and psychological development. In this context, front-line residential care workers play a critical role to effectively respond to these children and youth needs, which frequently has severe impact on professionals' role and wellbeing. Trauma-sensitive or trauma-informed practices aim to increase awareness of the effects of traumatic events in children, enabling the best care for these children, providing a safe and healthy environment. Simultaneously, building skills among residential care workers will contribute to the development of assessment and timely referral for treatment. However, there is a lack of evidence of the differential effect that trauma-sensitive attitudes may have on desired outcomes, like preventing vicarious traumatic stress or reducing known health impairment in such relevant and at-risk group of professionals.

This study aims 1) to evaluate relevant attitudes towards Trauma-informed care in residential care workers, 2) to evaluate correlations with secondary traumatic stress symptoms; and 3) to correlate trauma-sensitive attitudes with productivity impairment.

After informed consent, residential care workers are asked to complete a socio-demographical inquiry, ARTIC (Attitudes Related of Trauma-Informed Care) Portuguese version, Secondary Traumatic Stress Scale and WPAI (scale of productivity impairment). The sample is composed by 101 care workers, 75.2% women, 74.3% with university degree, mostly Psychology and Social Work.

The results clarify the reliability of ARTIC scale and show negative correlations with Secondary Traumatic Stress symptoms ($r=-.41$) and Productivity Impairment ($r=-.27$). The most relevant effect was found on the Self-efficacy at work with Traumatized populations.

Discussion focuses the elements required to address residential care worker's needs in training and supervision regarding the implementation of a trauma-sensitive system.
Relationship Based Residential Child Care Practice in a Context of Fear

Friday, 5th October @ 11:00: What about Runaways? Empowering Caregivers in Residential Care (Venue: Miragaia)

Dr. Karen Winter (Queen’s University Belfast), Dr. Teresa Brown (Athlone Institute Technology), Dr. Nicola Carr (University of Nottingham)

Objectives
The objectives are: first, to inform the audience about the context of residential child care in Ireland; second, using concepts associated with the sociology of fear, to present the results from a small scale exploratory study regarding the experiences of residential child care workers and relationship based practice.

Method
There were four stages to the research, and this paper largely reports on stages 2 and 3:

- **Stage 1**: Literature review regarding legal, policy and practice developments in residential child care;
- **Stage 2**: A qualitative methodology involving in-depth interviews with 27 residential child care workers using appreciative inquiry as an informing framework;
- **Stage 3**: Analysing findings using a framework informed by concepts associated with the sociology of fear;
- **Stage 4**: Assessing implications for practice.

Methodology
Qualitative interviews underpinned by an approach known as Appreciative Inquiry (AI). This is based on what is referred to as the 4-D cycle (Carter, 2006). The first phase is known as discovery (the best of what is or has been); the second as dreaming (what might be); the third as designing (what should be); and the fourth phase as destiny what will be (Carter, 2006). In the interview process the first two phases of 4-D cycle (discovery-dreaming) were focused on to help research participants open-up and engage in the interview process. A semi-structured interview schedule was used to guide thinking regarding relationship-based practice.

Data analysis
Data analysis involved a thematic approach involving four stages: immersion; coding; categorising and generation of themes (Braun and Clarke, 2006). Repeated reading and re-reading of interview transcripts and field notes drew attention to key themes. In the final stage of the process, the construction of a thematic map underpinned by the broad conceptual framework of Furedi (2005, 2006) and Furedi and Bristow (2008) and further operationalised by the Tudor model (2003) allowed for reflection on the themes and any common links between them.

Results
It is surprising to discover how far the culture of fear has shaped and informed the daily practice of the residential childcare workers interviewed in this study. From the findings are discussed three main themes, reflective of the work of Furedi (2005; 2006) are discussed: construction of adults as ‘predatory monsters’; individualisation of risk; and safe practice.

Implications
The findings in this paper challenge policy developers to think again about the sector. Rather than consign residential child care to the ‘backwaters’, a more productive policy response involves investing in models of residential child care practice that do have a positive impact. A reconfigured policy response, combined with a focus on assessing service provision in collaboration with children and young people could lead to change. These two structural responses must co-exist with investment in and commitment to the residential child care workforce. The lack of recognition of the elements that make up relationship-based practice at the micro level and that include the use of personality; the body; and use of self as a social subject, needs to be challenged.
and changed. This can only be achieved through creating space for dialogue with residential child care staff as their accounts of their experiences are central to any reform of their training, their approach in professional practice and their status. It is hoped that the findings from this small-scale study help contribute to efforts in this direction.
Sheltering Policy for Children and Adolescents: The Absence of Family Foster Care Services in the City of São Paulo

Mr. Raimundo G. Figueiredo Neto (Public Ministry of the State of São Paulo)

Objective
The purpose of this study was to contextualize family care in Brazil and to evaluate the absence of Family Foster Care Services in the city of São Paulo, in a conjunctural analysis of the public policy of children and adolescents care.

Method
The study used the bibliographic research both to characterize the object and to combine theoretical elements about the theme for the subsequent analysis of the results. In this sense, a brief historical and international description of Family Foster Care was outlined; the course of the construction of child and adolescent care policies; and presented the panorama of family sheltering at federal (Brazil), state (Sao Paulo) and municipal levels (Sao Paulo).

The paper uses Valente’s understanding about the importance of family foster care as public policy; the Winnicottian theories about the family environment as a privileged space for the affective development of children; and Bowlby’s theory of attachment to indicate constancy as fundamental to the construction of the relations of individuals. These related aspects bring important contributions to the encouragement of family foster care.

We also used the documentary analysis related to the activities of the Psychosocial Technical Assistance Unit of the Public Ministry of the State of São Paulo, regarding the follow-up of the public policy for the reception of children and adolescents, which includes reporting of technical visits and participation in meetings with the agents involved in this policy.

Results
The study provided a description of a family shelter program in Campinas as a model of successful Family Shelter Service in a large city, which from 1998 to 2013 housed 131 children and / or adolescents and 70% returned to family life. This service works until the present day and is a reference in the country, however the panorama of the reception of children and adolescents presented evidenced that in Brazil and in the state of São Paulo, the numbers of the family host (4%) are much lower than those of the institutional host (96%), indicating a significant culture of institutionalization in the country.

In the city of São Paulo, the legislation presented, which organizes the implementation of child and adolescent care, includes foster family care as one of the services available, however, it has been verified that, effectively, it is not offered; the recent promulgation of the Municipal Law 16,691 / 2017, can contribute to the feasibility of such a service in the municipality. As a possibility of transforming this panorama, a pilot project of family foster service presented in this study, is an experience that began in 2016 and has shown its potential for the public policy of receiving children and adolescents.

As a difficulty to strengthen and expand the policy discussed in this research, the budget freeze for social policies, approved by the Brazilian National Congress at the end of 2016, was highlighted, and already has impacts at the municipal level, pointing to possible setbacks in the policy currently in place.

Conclusion
The evaluation of the results enabled to identify that there is an adequate legislative structure for the Foster Care Services, but there are still limitations in its execution, such as low financial resources available in social protection, institutionalizing host culture, the existence of doubts about family foster care services. Despite this,
this kind of service is an important modality in the policy of care for children and adolescents, mainly due to the close attention and the implication that foster care families can make available to the children. Therefore, it reinforces the need for its consolidation in the country, including its implementation in the city of São Paulo.
How People Become a Foster Family in Portugal


Prof. Elisete Diogo (Catholic University of Portugal), Prof. Francisco Branco (Catholic University of Portugal)

The Portuguese Act on the Protection of Children and Young People in Danger (number 142/2015, 8th September) underlines the importance of the child's integration in family-based care, namely in foster care. However, foster care (FC) remains currently poorly represented in the Portuguese child protection system. As the CASA Report (2017), elaborated by Instituto da Segurança Social, shows, in 2016, there were 8,174 children in out-of-home care. Despite that, in legal terms, the family-based care to be considered the preferred mode of responsive child placement, official data reveal that only 3.2%, corresponding to 261 children, were in foster care, and 7,149 (87.4%) children were in residential care. The invisibility of foster care in Portugal is a reality even in Portuguese scientific research, in which it is poorly represented (Diogo and Branco, 2017).

This research aims to contribute to a deeper visibility of the care phenomena, giving specific attention to the foster families themselves, in order to understand their reasons and processes to become carers. It is therefore intended to make some suggestions for practice and for policy making, and to contribute to a greater visibility of the foster care in Portugal.

The prominent research questions included: (i) How and why do families become foster families? (ii) How can foster families contribute to improve both the policy and foster care implementation?

Based on a qualitative approach, the empirical design of this study consisted of conducting narrative interviews, as suggested by Delgado (2013), with a selection of foster families, as well as focused interviews with the professional teams responsible for recruiting, training, and accompanying the interviewed families. Analysis of the relevant case-files complemented the empirical design. The theoretical sampling covered a total of 11 families governed by two different supervision organizations (one public, and the other a NGO). The selection criteria for the foster families chosen to participate in this study included: (i) Foster families with biological children in the household; (ii) Foster families with independent biological children; (iii) Families engaged with their first foster experience; (iv) Families engaged with their second (or more) foster child; (v) Families that were drawing towards the end of their child placement; (vi) Families that foster children with disabilities; (vii) Ex-foster families (FF who stopped to foster). In terms of our access to the field, collaborating professional teams of accompaniment provided the physical space for the interviews. The remaining interviews were conducted at the carers’ homes, or at other locations. The fieldwork was developed between December 2015 and April 2016. The qualitative data analysis follows the Grounded Theory orientation, in order to elaborate upon an empirically based theory, as recommended by Charmaz (2006 e 2014).

The results of this research allow us to argue that the motivation driving families to foster a child is rooted in the values of altruism and is supported by the families’ affection for children, as well as their sensitivity to the maltreatment that affects many children in Portugal. The valorisation of the family unit as a suitable context for the socialisation of children and the desire to provide children with the right to grow up in a family were also part of the motivation to become a foster family. It was perceived that the altruism exhibited by these families was not unconditional, an important consideration being the importance attributed to the wellbeing of the foster family itself. It is possible to conclude that the quality of support services and the performance of care professionals are key elements for the success of fostering.
The involvement of parents in the decision-making process and their participation in the routine of their child during an out-of-home placement seem to be essential elements to achieve family reunification in the French system of child protection. However, studies on parental experience in France show that families still have difficulties in being involved as parents in the interventions they are subjected to. We therefore questioned the exercise of parenting in a context of judicial placement outside the family, and the effects of a “partial parenting” on the relationship between children and parents.

A qualitative and inductive approach through semi-structured interviews with 17 families living in a district of the northern France was carried out in this study. The aim of these interviews lay on the need of a better understanding of parental experience in scenarios where children under three years old are in care. The testimonies collected during this study highlighted the burden that these families face regarding the “partial parenting” imposed by the child protection services.

Indeed, out-of-home care entails a redistribution of the prerogatives between professional carers and parents. The exercise of parental authority by birth parents is therefore severely limited. Most parents complain on their poor integration into the decision-making process that organizes the life of their child. They highlight the lack of guidelines from the social services on how to exercise their role in such a situation. In their view, they feel excluded and “dispossessed” of their child.

All parents interviewed got access rights and more rarely, they were allowed to host at home their child for a limited period. Theoretically, these rights should maintain relationships despite the separation. In our study, child protection service seems to ensure that the carer lives as close as possible to the birth parents’ home. However, parents are still mostly dissatisfied with the frequency and duration of visits. In their opinion, they are no sufficient to compensate the time apart and to overcome the negative effects of the separation. When the visits take place in a non-familiar location in the presence of third person, the negative effects of the separation are strengthened. In these cases, the family universe disappears completely and the opportunities for interaction between children and parents are reduced.

This brings up questions about the quality of the relationship between birth parents and very young children in care, and about the effectiveness of the placement measure to improve this relationship and reunite the family in a favorable climate. We also question the impact of early placement and the conditions of its implementation on the child’s individual and family life course. Indeed, the probability of long placement increases as a consequence of family difficulties, which would be stronger for this population. In addition, the responses provided by social services according to age and institutional provisions concerning the care of the child thwart the exercise of parental functions, and have a deleterious effect on relationships between birth parents and children.
Currently, in Portugal, there are 8,175 children and young people in care, 2,672 of these having birth family reunification as a life project. This return to the birth family involves a complex process that begins even before the child’s entry into Residential Care and endures after the moment of family reunification. During this time, professionals have the opportunity to empower children, preparing them to return to the family’s context and dynamics. However, in Portugal, the lack of informed guidelines for interventions aimed to prepare children for this transition is real. The deficit of information leads to a great heterogeneity regarding intervention plans within the residential care system. Thus, the effectiveness of the children’s preparation and its evolution is uncertain. The systematization of existing practices and their dissemination, together with existing theoretical knowledge is crucial to provide greater uniformity to the work of professionals in this area of work.

The aim of the present qualitative study is to explore, by means of a focus group methodology, the experience of professionals on intervention with families within reunification process. The study involves a focus group, after which a thematic analysis was carried out. The results contribute to identify and analyze strengths and fragilities in intervention, decision criteria on children reunification, family system’s needs and difficulties.
Adaptation Processes of Child Welfare Workers to the Job: Scoping Review


Mrs. Leonor Vilhena da Cunha (Faculty of Psychology – University of Lisboa), Dr. Maria Teresa Ribeiro (Faculdade de Psicologia, Universidade de Lisboa)

The scoping review will follow the method of literature review proposed by Arksey and O’Malley (2005) to contribute to a comprehensive examination of the extent and nature of the research activity in the field of the adaptation process of child welfare workers to their job as well as the identification of research gaps and future directions for research activity.

Through a quantitative thematic analysis of 75 selected articles using EbscoHost over the past 10 years and key themes and concepts such as stress, resilience, job satisfaction, coping, trauma, burnout and the adaptation process of child welfare workers, first in the abstract and then in the full text of the article, it was possible to map and contextualize the research activity in this area and identify potentialities for future investigation.

Most of the analyzed articles report on empirical research (85%) and derive from quantitative methods (61%). The most frequent main themes include turnover (29%), emotional distress (19%) and, more specifically, secondary traumatic stress (11%). Through a thematic analysis, 10 main categories emerged: coping mechanisms (75 articles – 75a) with 16 sub-categories; stress factors (48a) with 8 sub-categories; organizational factors (37a) with 8 sub-categories; turnover (22a) with 2 sub-categories; burnout (21a) with 1 sub-category; job satisfaction (21a) with 2 sub-categories; secondary traumatic stress (15a); impact on well-being (10a); involvement and commitment in worker/family relationships (7a); and resilience (5a).

The main conclusions of this scoping review suggest that the past 10 years of research in this field demonstrate the complexities of child welfare workers’ adaptation processes to their job, including a complex configuration of factors, contexts and systemic levels. The research review focused primarily on negative aspects of worker adaptation, thus leaving unexplained the high levels of job satisfaction (despite high levels of emotional distress) and the reasons why some workers remain working in this area over time. However, some recent research has started to include positive concepts such as coping mechanisms, resilience factors and models that could help to understand these divergent findings.

Finally, the analysis of these findings highlight the necessity of more qualitative research in this area and of the construction of a theory that helps to integrate the complex and seemingly divergent accumulated knowledge in this field.
In Brazil, young people who leave the foster care system are at risk. In addition to the daily challenges faced by all young people in the outskirts, these adolescents, in general, have not developed emotional resilience or a supportive social network. It is common to see them living in homeless-shelters, becoming involved in drug trafficking, getting pregnant before the age of 20, being murdered, having low levels of formal education, few social and leadership skills, little sense of identity, and having difficulty entering the job market.

This presentation will focus on the history of the Brazilian child protection system and the specific situation of care-leavers in the country, highlighting the lack of social policies to support them.

The origins of child and adolescent care in residential services in Brazil dates back to the colonial period, around 1500s. At that time, the Institutional Care focused on spreading Christian values and culture from Europe. By the time slavery ended in Brazil, in 1888, social policies hardly existed. The number of impoverished children and teenagers living on the streets increased; the majority of them, Afro-Brazilians and mixed races. In 1927, a code that stipulated the State's responsibility over children and adolescents in irregular situations was created. The aim was to exercise control over abandoned and delinquent children, isolating them in order to protect society.

Following the UN Convention on the Rights of the Child and strong societal pressure, in 1990 the Child and Adolescent Statute was enacted; legislation that considers children and adolescents as citizens with rights, in specific conditions of development. This Statute created a differentiation between children whose rights were violated and those in conflict with the law. Fostering was then understood as a provisional protection measure for children and adolescents at risk, which ensured that their freedom was not threatened.

In the decades that followed the enactment of the Statute, ancillary official documents giving guidance to foster-care services were published. They indicate the need of gradual and continuous preparation for the process of leaving foster-care, and the development of independence. Despite that, it is clear that the isolation and institutionalisation have left their marks on fostering in Brazil, and offering a personal approach that in fact promotes independence, is still a great challenge for care services team. The impact of long-term institutionalisation, combined with the social-economic situation in Brazil, usually makes the transition from foster-care to adulthood a very critical moment.

According to a report by the National Council of Justice, there are yearly more than 3,000 fostered teenagers who turn 18, after which they have no other option than to leave the foster-care system.

However, there is one only public policy that serves them - called Republic for Youth. Even though this may be an interesting service for some, it is scarce and, also, it doesn't meet the various needs and profiles for care-leavers, who often become extremely emotionally distraught and lacking social support.

Brazil still needs to perceive care-leavers as a particular public, that requires public policies designed specifically to meet their needs because they are in such a critical and pivotal moment in their lives; public policies that take into consideration their diversity and need for emotional, financial, housing, educational and professional support. And not policies that homogenize them.
In Perú there are currently 2,095 children and adolescents in presumed state of abandonment who are in a vulnerable situation sheltered in Residential Care Centers (CAR) of the State. Those who reach eighteen in a CAR must leave the protection system with a huge affective lack, limited opportunities and limited personal skills to achieve independence and autonomy, with a tendency to repeat situations of violence, exploitation, abuse, poverty and mistreatment, which is accentuated in the case of women.

In 2008, Buckner Peru started its Transitional Homes Program in the cities of Lima and Cusco, targeting sixteen of these young women from a CAR of the State, with similar characteristics: low self-esteem, poor social skills, prevalence of many diseases with experience of exploitation, begging, and others. The main objective of the program is the integral development of young girls, with technical and professional support of the team consisting of a social worker, a mentor, a psychologist and the director of the program, that emphasizes the development of skills and abilities for life that allows them to progressively exercise their autonomy and an independent adult life. Specific objectives are: facilitate incorporation and consolidation of rules of coexistence, ensure the opportunity to complete a career, support in the development of their physical and mental health and support in the process of finding employment opportunities.

In 2012 an evaluation of the program yielded positive results in the components for the promotion of autonomy: health, education, work, emotional issues and responsibilities such as: all the young women were studying a career that would benefit them in the future; none of the girls worked focusing exclusively on finishing a career with calm to learn, feeling safe, oriented and welcomed by the program, which would allow them to achieve greater levels of autonomy. As for health, they needed guidance for some time to take care of themselves; and in emotional matters they knew that they had a team that gave them a place as a subject, who observed them and recognized them and to whom they could turn in case of need. In their individual responsibilities, they assumed them as an investment of energy for their own development and also had support to solve conflicts and be oriented to the development of coexistence skills and sense of belonging.

To date, Buckner Peru has served fifty young people: 27 (54%) have successfully completed the program (they are working in the areas they chose and live independently); 14 (28%) currently participate in the program; 2 (4%) live with their families but receive comprehensive support to complete their careers and 7 (14%) decided to leave the program without finishing.

Graduated girls are working in their careers and living independently:
1 Systems Engineer
8 Business Administrators
3 Accountants
4 Fashion designers
3 Communicators
2 Administrators in Tourism
1 Cosmetologist
4 Nurses
1 Teacher
Over time, the program has evolved and now the participants are gradually incorporated into work environments in order to promote autonomy in them, based on working contact and taking on responsibility in the generation of income to contribute with some home expenses. Likewise, with team orientation, they constantly elaborate and review their own “life project” and participate actively in the elaboration of the rules of coexistence, which implies taking responsibility for their own actions.

In conclusion, the environment that the program offers to the young participants is repairing, guidance and offers dynamics of care and security that allows them to follow their individual projects, exercise their autonomy and integrate themselves into society as empowered and independent women, which implies a great benefit for the country.
Starting Early: Relational Capital Networks for Street Children in Emerging Knowledge-Based Public Service Models in Mexico

Friday, 5th October @ 12:45: Leaving Care in Latin America: Research, Policy and Practice (Venue: Infante)

Dr. Leticia Ivonne López Villarreal (Universidad de Monterrey), Dr. Blanca García (Colegio de la Frontera Norte)

This paper aims to contribute to the literature with a case study on institutionalisation of public-service knowledge-networks. It stems from a four-year doctoral research dealing with institutionalisation processes (IPs) of institutionalised nursing homes in Latin American cities. The paper will first bring a theoretical background on profound social change through network formation for community building purposes. It will draw from Giddens' structuration model from the Barley and Tolbert (1997) perspectives. This will allow observing social capital construction and its role in building networks, organisations and institutions in emerging knowledge-oriented public service contexts. The paper will depict action-learning as the main methodological approach, using a practitioner-based qualitative analysis of institutional processes. Networks that include families, nursery shelters, funding and childcare entities amongst others, would be identified and expected to link with policy-makers and authorities, in order to consistently prevent the perverse effects of homelessness: violence, abuse and social exclusion in our cities. Keywords: new public management; NPM; knowledge-based networks; relational capital; homeless children; Monterrey in México.
The New Law of Supported Independent Living for Adolescents and Young People after Care in Argentina and the Latin American Network of Care Leavers: Learnings of a Growing Region

According to RELAF there are more than 350,000 children and adolescents in care and most of them leave the system without proper support and preparation. However the strength of youth participation and the need to advocate for their rights became key factors to influence public policies and change the legal framework of a country. The Latin American Network founded, in 2014 is the first attempt to develop a model of contribution between young people and field work organizations that has proved to give visibility and influence States in the improvement of care leavers lives.

This paper will focus on both: The “early win” of the Law in Argentina together with the experience of a group of 9 countries in the Latin American Region and the Caribbean as founders the Latin American network of care leavers. This initiative gives relevance to the reality of thousand care leavers of that specific region of the world.

In Argentina National Law 27.364, adopted unanimously in both Chambers on May 31, 2017 becomes the first law in Latin America that specifically supports care leavers. It creates a program that has two key components: a personal support system and a monthly allowance. Personal support is supposed to be both comprehensive and individualized. Comprehensive support means that it is not limited to education or housing, but covers a wide range of areas that translate to independence, such as health and leisure; sexual health, responsible procreation and family planning; education, training and employment; housing; human rights and citizenship education; family and social networks; skills for independent living; identity; and financial planning and money management. Individualized support means that individual strengths and weaknesses must be taken into account and different areas emphasized according to each young person’s needs.

However many challenges are still on board: developing meaningful research to better understand transition process of this group, encouraging care leavers participation in a relevant role among other youths matters and putting the region as a key actor in the global perspective.
A growing body of research finds that young people who leave foster care as adults are uniquely disenfranchised and suffer from a lack of support as a result of their involvement with the child welfare system. This is of significant concern, as studies indicate having access to supportive networks is critical for achieving independence in adulthood among transitioning youth. Although all former foster youth are at risk of support-related challenges, these issues may be exacerbated for lesbian, gay, bisexual, transgender, queer and questioning (LGBTQ) transitioning youth who also experience rejection and mistreatment associated with their sexual and gender minority statuses.

Despite these concerns, research focused on this vulnerable population is extremely limited. Moreover, existing studies have not yet explored support provisions for LGBTQ-identified foster youth or their relationships with the individuals in their support networks. Such lack of knowledge poses limits to our understanding about the needs and challenges these youth face during this critical time and prevents us from identifying and developing more appropriate protections/services.

To begin to address this gap, this study combined conceptual and methodological features of social constructivism and community-based research to explore LGBTQ-identified young peoples’ perspectives and experiences with the support they received, as they transitioned from foster care to adulthood in Wisconsin. Three aims were addressed 1) identify and describe LGBTQ-identified young peoples’ support networks and the kinds of support provided to them, 2) distinguish any barriers or facilitators to establishing/maintaining supportive relationships and the role this played in youths’ receipt of care/services, 3) identify whether there are any specific support-related needs/challenges for LGBTQ-identified transitioning young people, including recommendations for addressing these issues.

Participants were recruited statewide from foster care and independent living programs in Wisconsin using an iterative sampling and analysis process. In-depth interviews and construction of a graphic visualization strategy called an ecomap were conducted with 21 LGBTQ-identified young people, aged 17-21, that were currently in foster care, and likely to exit the child welfare system as adults. Using NVivo software, a directed content analysis approach was used to identify themes and patterns in the data.

Participants were an average of 17.95 years-old, 81% (n=17) identified as racial/ethnic minorities, 76% (n=16) were living in urban settings, and over half (n=12) identified as gender minorities (57%). Analysis of interview and ecomap data revealed that many participants lacked access to safe and affirming supports/services, and faced challenges navigating their relationships with the providers in their networks (e.g., social workers, foster parents). Additionally, youth expressed unmet needs around safety, socioemotional wellbeing, and identity development (e.g., suicide prevention, health care) and offered recommendations for improvement (e.g., safe spaces, LGBTQ-identified mentors).

Results from this study suggest LGBTQ-identified transitioning youth have distinct needs and challenges that are not being addressed in Wisconsin, and provides suggestions for promoting more supportive resources and relationships for this population. Findings also help to build a framework of knowledge from which to develop further hypotheses and explore other important issues related to how LGBTQ-identified youth are faring in our nation’s child welfare system.
Trans Young People Growing Up in Care in England: An Intersectional Analysis

Friday, 5th October @ 12:30: LGBTQ Youth in Residential Programs (Venue: Arquivo)

Dr. Jeanette Cossar (Centre for Research on Children and Families, University of East Anglia), Dr. Christine Cocker (Centre for Research on Children and Families, School of Social Work, University of East Anglia), Dr. Gillian Schofield (Centre for Research on Children and Families, School of Social Work, University of East Anglia), Dr. Julia Keenan (Centre for Research on Children and Families, School of Social Work, University of East Anglia, Norwich), Dr. Birgit Larsson (Centre for Research on Children and Families, University of East Anglia), Dr. Pippa Belderson (Centre for Research on Children and Families, School of Social Work, University of East Anglia, Norwich)

Introduction

This paper will draw on findings from a research project titled ‘An investigation of the experiences and identity development of lesbian, gay, bisexual and/or trans (LGBT) young people in care - and the services to support them’ which was funded by the UK Economic and Social Research Council from 2014-2017, with follow up funding from the National Institute of Health Research, CLAHRC 2017-18.

Research design and methods

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 15 trans young people provided life stories of their pathways from birth families through the care system, and will be the focus of the presentation.

The analysis was underpinned by a focus on intersectionality between gender and care identities, but also taking account of other aspects of identity such as sexual orientation. The interviews were analysed using narrative analysis, with a focus on intersectionality between LGBTQ and care identities. This approach attempted 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 could also incorporate other aspects of identity that young people made relevant in the interview, such as ethnicity and religious affiliation. The research team included young researchers who identified as LGBTQ and had experience of living in care. They were involved at all stages of the research process including the analysis, to encourage a more sensitive and diverse reading of the data.

Findings

Some trans young people had experienced gender dysphoria from early childhood. It was hard for them to make sense of their identities growing up and 9 out of 15 had come out as LGB prior to coming out as trans. Other young people felt there was pressure to fit into a certain narrative about being trans, and that they would not be viewed as authentic if their experiences differed from that narrative.

The presentation will explore the responses of foster carers and residential carers. Notably, the young people in the study were often exploring their gender identity at the point of leaving care. There was a widespread view that leaving care services focused on independent living skills rather than providing a level of nurturance that could help them to explore gender.

Implications for policy and practice will be discussed.
LGBTQIA+ Youth in Out-of-Home Care: Needs, Wishes and Experiences

Dr. Mijntje Ten Brummelaar (University of Groningen), Dr. Mónica López López (University of Groningen), Dr. Elianne Zijlstra (University of Groningen), Prof. Hans Grietens (University of Groningen)

Objectives
LGBTQIA+ (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and other) youth staying in out-of-home care may experience several disadvantages during their childhood. Stressors such as discrimination, stigma and harassment may add up to the experiences of being placed in out-of-home care. Unfortunately, there is very limited knowledge on the experiences of LGBTQIA+ young people growing up in out-of-home care in the Netherlands. Despite the various challenges a person identified as LGBTQIA+ may face, both prior to their time in care and while staying in care, relatively few organisations offer tailored services. It is crucial to focus on how to create a supportive and non-discriminatory context, where there is room for the young person's sexual orientation and gender identity and which takes into account their social context and own strategies of resilience.

Research question
This study focused on the experiences of LGBTQIA+ young people during their time in residential care facilities, family group homes, or family foster care. It aimed to answer the following key question: how do/did LGBTQIA+ youth and young adults experience an out-of-home care placement during their childhood?

Methods
Using a qualitative research design, we studied the experiences of LGBTQIA+ young people and young adults who have been, or who are currently staying in out-of-home care facilities. Semi-structured autobiographical life-story interviews with young people and young adults were conducted to explore their experiences in care.

Implications
The results of this project have the potential to enhance the quality of life of LGBTQIA+ youth in out-of-home care by advancing research and theory and through recommendations to increase the effectiveness of policy and services devoted to them. Moreover, the findings of this project will be useful in planning future research.
Mental Health Disparities for LGBTQ Youth in Foster Care: Findings from US Adolescents

Friday, 5th October @ 13:00: LGBTQ Youth in Residential Programs (Venue: Arquivo)

Dr. Laura Baams (University of Groningen), Ms. Jessica Fish (University of Maryland)

Introduction. Lesbian, gay, bisexual, transgender, questioning (LGBTQ) and same-sex attracted youth are found to experience parental abuse and rejection at higher rates than their heterosexual and cisgender peers (Baams, 2018; Friedman et al., 2011). In response to an abusive home environment or other forms of maltreatment, LGBTQ youth are placed or pushed out of their homes more often, resulting in an overrepresentation of LGBTQ youth in foster care (Pearson et al., 2017; Van Leeuwen et al., 2006; Wilson & Kastanis, 2015). Qualitative and anecdotal research suggests that when LGBTQ youth are placed in care, they experience rejection and victimization by their foster parents, siblings, and case workers (Mallon, 1998; Mitchell et al., 2015; Wilson & Kastanis, 2015). With the current study, we examine disparities in mental health for LGBTQ and same-sex attracted youth in foster care in a large Minnesota-based sample (Study 1) and a US nationally representative sample (Study 2).

Method and results study 1. Data for this study come from the 2016 Minnesota Student Survey, including 75,708 students from grades 9 and 11 (13-20 years old). A total of 89.7% identified as heterosexual and 0.4% reported living with a foster parent. Depressive symptoms, experience with non-suicidal self-harm, suicidal ideation, and previous suicide attempts were assessed in an anonymous survey. Using survey-adjusted logistic regression models, we assessed main effects of LGBTQ status, as well as foster care involvement. Next, we assessed interaction effects between LGBTQ status and foster care involvement.

The findings showed that LGBTQ reported more mental health problems compared to heterosexual and cisgender youth. Youth who lived with foster parents reported more non-suicidal self-harm and were more likely to have attempted suicide. Interaction effects showed that rates of suicidal ideation were exacerbated for LGBTQ youth living in foster care.

Method and results study 2. Data are from Wave 3 of the National Longitudinal Study of Adolescent to Adult Health (Add Health), including 14,322 participants (ages 18-24). Of these youth, 6.27% were same-sex attracted and 2.14% indicated foster care involvement. We conducted sociodemographic adjusted linear and logistic regression to test sexual minority status and foster care differences in suicidal ideation and past week depressive symptoms.

The findings showed that same-sex attracted youth with foster care experiences reported more depressive symptoms and had higher odds of suicidal ideation, compared to non-same-sex attracted youth with no foster care experience. Compared to same-sex attracted youth not in foster care, same-sex attracted youth in foster care also reported higher odds of suicidal ideation.

Conclusion and discussion. Overall, the findings from both studies identify mental health disparities for LGBTQ and same-sex attracted youth who are, or have been, involved in foster care. Considering that child protection services are in place to provide a safe and caring environment for youth, the findings suggest that LGBTQ youth are particularly vulnerable and do not receive adequate care. Future research should focus on the inclusiveness of care providers and the quality of care that is available for these youth.
In Denmark, secure institutions accommodate young people with a wide range of psychiatric and social troubles. Every year approximately 550 youths are placed in confinement for an average of 65 days. The large majority of young people are placed in secure institutions in surrogate custody, and a minority, mostly girls, are placed here in protective care. Since 2010 placement in surrogate custody has decreased by 40 percent, and placement in protective care has more than tripled. While placement in secure institutions can be viewed as lenient compared to imprisonment or pre-trial remand in an adult prison, confinement on grounds of social concern is a punitive form of care and protection. This presentation engages critically with this recent development of 'penal welfarism' (Garland 2001) in the Danish context of child protection. How can we understand care, protection and punishment in Danish secure institutions and how does the Danish development compare to similar and variant responses to troubling and troubled youth in the Nordic countries?

The presentation draws on a multi-sited ethnographic study in Danish secure institutions conducted in 2015-16. The study includes 20 interviews with staff and management in all the secure institutions and fieldwork in four institutions staying 2-3 days in a unit participating in everyday activities and interviewing 25 young people placed in care or custody. The aim of the study was to explore the gendered practices and logics in secure care and the gendered experiences of confinement.

The confinement of children and young people is contested and imbued with dilemmas of balancing protection and care against doing harm. Confinement implies the loss of autonomy, broken social relations, and limited access to education, health care and specialized treatment, and thus potentially constitutes an intervention with harmful effects. Furthermore, young people experience confinement as punishment, irrespective of the grounds of placement. By applying a concept of 'protective-punitive practices', inspired by a Foucauldian theorization of discipline, a range of ambiguities and contradictions are analysed and discussed. Drawing on this framework, I demonstrate how protection and care is ambiguous and potentially turns harmful, with the risk of further marginalizing young people in vulnerable positions. Placed in the nexus between child protection and criminal justice, secure institutions occupy a marginal space where 'penal welfarism' (Garland 2001) jeopardizes the intentions of providing care and protection for troubled and troubling youths.
Doing Gender in Secure Care: Restraining, Producing and Regulating Femininity

Friday, 5th October @ 12:30: Confinement of Children and Youths: Comparing Welfare Penologies in the Nordic Countries (Venue: Arrábida)

Dr. Maria Andersson Vogel (Department of social work, Stockholm university)

In Sweden, state-run secure accommodation has the task of handling, controlling, treating and educating young people with extensive behavioural problems. This kind of residential care is a heavily institutionalized way of dealing with problematic youth. These institutions have the mandate both to treat youth with behavioural problems referred by the Social Services and to carry out the legal sanction of youth custody to which young people committing serious offences are sentenced. In this way, secure care can be understood as organized in the borderland between the welfare and the legal systems. Like the prison, secure care historically is structured around the idea of the persons confined therein being criminal, dangerous men. This is manifested in today's secure care through far-reaching disciplinary powers, such as locked units and the means to temporarily isolate residents, conduct body searches, control in- and outgoing phone calls and mail, and take urine and blood samples. At the same time, a fully third of youth being referred to Swedish secure care are girls; though almost none sentenced to youth custody. Girls are far more rarely than boys referred because of criminal behaviour, and if so, their criminality is usually of a less severe kind. Instead, the reasons for referral of girls to secure care are often a mixture of misuse problems, poor mental health, and absconding, along with extensive concern for how they fare in an often exploitative social environment. Consequently, these girls are being handled in a disciplinary policing system when their main problems rarely are of a criminal nature.

The overall theme for this presentation is the meaning of gender in Swedish secure care of girls, drawing from an ethnographic study carried out at two different institutions. During a period of four months I spent fully 500 hours together with the girls living in these institutions. The overall aim of the study was to, with a gender perspective, scrutinize and analyse the conditions of everyday life for girls living in secure care, particularly focusing the girls' own perspectives and understandings.

In this presentation, I intend to discuss some of the results from my study, particularly focusing on how femininity is restrained, produced and ultimately regulated in everyday life of secure care. I also intend to relate these results to historical understandings of disciplining girls in order to discuss changes and continuities.
Confinement of Children and Youths: Comparing Welfare Penologies in the Nordic Countries - In the Name of Care: Locking up Young People in Sweden

Friday, 5th October @ 12:45: Confinement of Children and Youths: Comparing Welfare Penologies in the Nordic Countries (Venue: Arrábida)

Dr. Sofia Enell (Linneaus University), Dr. Monika Wilinska (Jönköping University)

Every year, there are approximately 1 200 young persons locked up within the child protection institutions in Sweden. This way of handling troubled and troubling youth is guided by the perception of children and youth as in need of care and protection, but not punishment. However, the disciplinary powers of such institutions are far-reaching. While in care, staff has the authority to make extensive restrictions of the young people’s rights and freedom. With this, previous research has demonstrated that arguments of child protection, first and foremost, are rhetorical and that the actual reason for locking up children is protection of the society from ‘troubled youth’. Furthermore, the Swedish child protection system is not built on the legal justice system with courts and legal process, it is instead based on the ideas of social services administration and upbringing. Consequently, the practice of locking up young people for treatment is for an indefinite period of time.

The aim of the presentation is to nuance and problematize the practice of locking up young people in the name of care. We critically examine the Swedish system of locking up young people, touching upon the themes of organization, reasons for placement and working conditions for the staff. With this as a backdrop, we analyse the experiences of young persons from their time of placement and up to two years after the placement.

The empirical material consists of interviews with nine young persons between the ages of 14 and 18. Each young person was interviewed three times: the first interview took place at the institution; the second, one year later; and the third one, approximately two years after the first interview. In this presentation, we explore the ways in which young people position themselves when they talk about their experiences of secure care.

The analysis focuses on how the young people’s positions are related to the concepts of “children at risk” and “children as risk”.

The analysis uncovers strong emotional and enduring experiences of being taken into care. However, the young people’s understandings of their time at the institution changes over time and may contain seemingly opposing experiences. For example, the same person could talk about their experience as both harsh but educative or as meaningless and as a punishment. Interestingly, the young people seldom talk about themselves as being “at risk” or “as risk” before their placement in secure care. However, after being in care, their talk changes and they describe themselves as being “as risk” (boys and girls) or “at risk” (mainly girls). Above all else, they consistently present themselves as active agents, either by assuming a learning/adaptive position or a resistant/self-governing position. The young people’s positioning seems to differ also between girls and boys – while the girls appear to dissociate themselves from their own actions and find themselves reliant on others, the boys construct themselves as independent and self-standing. Irrespective of their subject positions, the young persons’ experiences of secure care contain deeply-rooted emotions of violation. Their overall understanding of secure care is: "not in this way", showing that they could not merge the experience of secure care placement with a feeling of being cared for. To them, their time in secure care was not in the name of care.
Disagreement about Restrictive Practices: An Analysis of Appeals in Finnish Child Protection

Friday, 5th October @ 13:00: Confinement of Children and Youths: Comparing Welfare Penologies in the Nordic Countries (Venue: Arrábida)

Prof. Tarja Pösö (University of Tampere)

Unlike other Nordic countries, the Finnish child protection system does not include any secure institutions. All institutions – and foster homes – should be ‘open’ (unlocked). Legislation, however, allows practitioners to introduce restrictive measures such as restrictions of contact and movement of children and young people as well as ‘special care’ in tightly supervised conditions. Such restrictions are based on the assessment of the behaviour of a child or young person and they are decided by individual practitioners or multiprofessional teams and are time-limited. Several criteria exist in the Child Welfare Act to validate the decision. The measures should only be for taking caring of the child for her/his best interest and not for punishing him/her.

As the restrictive measures include use of public power and as the decisions are made in a case-based manner as part of everyday practice of alternative care (mainly residential care), it would be important to know how children, young people and their parents can express their disagreement about those measures if they feel that their rights have been violated. In literature, more or less informal practices of residents to resist unfair decisions have been highlighted (e.g. escapes). There are, after all, also some formal mechanisms made available to express discontent: making appeals to the court is one form of such a mechanism. We approach the appeals here with the term ‘corrective moves’ which refers to parents’ and children’s actions to change those child protection decisions seen as unfair or unjustified by using the formal ways available (appeals).

The empirical data of the corrective moves consists of appeals made about restrictive measures in out-of-home care, mainly residential care, to three administrative courts during a period of six months in 2016. The analysis highlights that the system is very much used only by adults providing children and young people very few opportunities to express their disagreement in this formal way. It also highlights that the appeal system ignores the actual (embodied) experiences of being restricted as the decisions are made only a long time after the restrictive measures have already expired. In other words, children and young people are very much left to express their disagreement in other ways. Consequently, children may experience some loss of trust in the child protection system and its formal socio-legal mechanisms.
The Political Discourse on Establishing Youth Prisons in Norway: Evaluation of Present Practices in a Norwegian Youth Prison

Friday, 5th October @ 13:15: Confinement of Children and Youths: Comparing Welfare Penologies in the Nordic Countries (Venue: Arrábida)

Mr. Bård Mellin-Olsen (BUFETAT - Regional Office for Children, Youth and Family Affairs)

Norway got its own constitution in 1814 after a union with Denmark for four hundred years. In the process of becoming an independent nation the new legislations became progressive and inspired by the revolutions in France and US. This resulted e.g in Norwegian legislators launching a new law on child welfare as early as 1896, called the act on guardianship. They also established a special panel to work as a juvenile court; “the guardian council”. This panel should decide in cases involving children under the age of 16, and should make decisions on care orders, foster care as well as detention on children. This act became a part of the penal code in 1902, but was managed by the Ministry of church affairs and not, as the rest of the Penal code, by the Ministry of justice.

The development in reactions on juvenile delinquents from 1896 until today can be described as a political and professional “journey” from detention in schools to treatment in reform schools, then to prisons. Then back to treatment in residential care and finally back to prisons again. The legislation and responsibility for coping with juvenile delinquents have also been a “journey” from the penal code, via Guardianship to childprotection, transformed into childwelfare and over to the correctional service (The Norwegian term is criminal care).

In the mid 1960ies came a criminal act that on juvenile delinquency. Up to this diferent schools had been the main reaction, and was now replaced with juvenile prisons. This act gave judges the opportunity to sentence juveniles to a “fixed” sentence of two years, regardless the crime. These prisons was no success, since most of the incarcerated juveniles still served in ordinary prisons with adults. The juvenile prisons was terminated in 1975. Norway ratified the UN convention on children’s rights in 1991. Since this and into the 2000’s, Norwegian authorities received international criticism for their practice of incarcerating children under the age of 18 in prisons with adults. This led to a debate on what to do with the juveniles that commit serious crime.

The preparatory works for the decision on establishing special units for juveniles in prison consisted of three governmental reports and two governmental propositions from 2006-2010 which all were admitted to public hearings.

The recommendation from most of the committees and public hearings was that the responsibility for imposing punishment should be in the criminal justice system and not in the child welfare service.

In the spring 2009 the first youth prison unit was established as a pilot project outside Bergen. Since then there have been changes in the execution of sentences act, the penal code and the child welfare act to adapt to the incarceration of minors in Norway.

Two of the main fundaments concerning the staff at the youth prison unit is that there should be at least 50 % with three year college education in social work and 50% prison officers employed. There should also be an interdisciplinary team from child welfare, health services and the education sector represented, lead by the prison director.

In 2014 the youth prison west was formally opened, and in 2017 a prison near Oslo also. Both units have a capacity of four juveniles.

This oral presentation will discuss why Norway chose to give the criminal justice system and correctional services the responsibility for the incarcerated minors, and if this decision is contributing in keeping the numbers of minors in prisons low. It will also discuss the two tracked system, and which implications this gives for
deciding reactions on Juvenile delinquency, and treatment of conduct disorders
The Prevalence of Adverse Childhood Experiences and the Relationship with Children’s Mental Health Post-Adoption

Friday, 5th October @ 12:15: Adoption: Developmental Outcomes (Venue: D. Luís)

Ms. Rebecca Anthony (Cardiff University), Dr. Katherine Shelton (Cardiff University)

Objectives: A large body of research has documented associations between ACEs and several negative adult outcomes. Our objectives were to (1) Establish the prevalence of adversity experienced by children adopted from care, (2) Investigate the mental health symptom scores of children adopted from care, (3) Investigate associations between adversity and children’s later mental health, and (4) Investigate if adoptive parental warmth moderated the relationship between ACE and later mental health.

Methods: The Wales Adoption Study is a prospective longitudinal study that used case file records (n=374) and parent report questionnaires (n=96) to examine the characteristics and experiences of children placed for adoption. Children were aged between 0 and 9 years at placement (M=2, 51% male). First, descriptive statistics were generated for child adversity and mental health. Second, correlations investigated relationships between adversity and mental health. Lastly, hierarchical regression was used in order to take into account the possible effects of adversity and adoptive parental warmth in predicting children’s later mental health symptom scores.

Results: Mental health symptom scores were significantly higher than the UK general population across most time points. Nearly half of the children in the study had experienced four or more types of adversity. Against expectations ‘ACE score’ was only associated with internalising symptom scores three years post placement. ‘ACE score’ did not improve the prediction of mental health symptom scores over and above age the child was placed for adoption. In addition, parental warmth moderated the relationship between the child's previous adversity and later internalising symptoms.

Conclusion: This timely study provides important evidence about the characteristics and experiences of a national sample of children recently placed for adoption in the UK. Children placed for adoption experienced many adverse experiences prior to placement. This adversity was associated with children’s mental health up to three years post placement. Other factors, such as age placed for adoption, may provide a better index of risk for poor mental health than ‘ACE’ score alone. Furthermore, adoptive parent warmth appears to be a key factor for children's adjustment.
The Attachment System in Adopted Children: A Longitudinal Study of Attachment Behaviours, Mental Representations and Disturbances

Friday, 5th October @ 12:30: Adoption: Developmental Outcomes (Venue: D. Luís)

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

Situations of deprivation, abuse and institutionalization end with adoption when the child reaches a suitable family context in which he or she can find the opportunity to establish new relationships based on totally different assumptions (those of protection, affection, security, stability and sensitivity). Fortunately, the attachment system is not set irreversibly during early adverse experiences of relationships and it can be restructured when circumstances change (Bowlby, 1969). The main goal of the study was to examine the continuity and discontinuity over time of the attachment system from a representational, behavioural and psychopathological perspective in internationally adopted children. The sample consisted of 40 children from the Russian Federation adopted by families in Spain and 58 non-maltreated children. In the first assessment, all children were between four and eight years of age, when the adopted children had spent an average of three years with their adoptive families. The second assessment was conducted when they were in the transition to adolescence, 8-13 years old and seven years after adoption. The Interview Measure of Attachment Security (Chisholm, 1998; Chisholm et al., 1995), applied in interview format with parents or caregivers, was used to evaluate the security in the attachment behaviours within the adoptive parent-child relationship. The Story Stem Assessment Profile (Hodges, Steele, Hillman & Henderson, 2003) was administered to explore children’s global representations of attachment. Finally, symptoms of attachment disorders were assessed using the Relationship Problems Questionnaire (Minnis et al., 2002, 2007) with parents or caregivers. The results of this study showed that security in behaviours and mental representations of attachment improved after certain time with the adoptive families, at the same time that the attachment disturbance symptoms decreased. Moreover, the results showed differential plasticity in the attachment system, with more satisfactory and faster progress in attachment behaviours and disturbances than in attachment global representations. Empirical contributions in the domains of attachment and adoption increase our understanding of the processes involved and are informative of their developmental pathways.
Internationally Adopted Children in Educational Settings: Social Competencies and Sociometric Status in Their Peer Groups

Friday, 5th October @ 12:45: Adoption: Developmental Outcomes (Venue: D. Luís)

Ms. Isabel Cáceres (University of Seville), Dr. Maite Román (University of Seville), Prof. Carmen Moreno (University of Seville), Prof. Jesús Palacios (University of Seville)

Social relations and interactions with peers are critical aspects of children's life and they acquire a fundamental role in middle childhood and adolescence. Some studies have found that early deprivation might be linked to difficulties in social relationships in adopted children and youths. The purpose of this study is to understand the social experience of adopted children in their educational settings, compared to a community group of non-adopted children and a group of children in residential care. The first objective is to analyze the sociometric status of the children in their peer groups and study the differences between groups. The second objective is to analyze the choices of friendships and enmities that children emit and receive from their peers. Finally, the influence of the early history over the social development of adoptees and children in residential care is studied.

The sample was formed by 76 children between eight and fourteen years of age and their classmates at school. Children were divided into three groups: international adoptees from the Russian Federation into Spanish families (n = 24), children living in residential care in Spanish institutions (n = 19) and a comparison sample of Spanish children living with their birth families without experiences of early adversity (n = 33). All the adoptees had lived in institutions in their birth place before their adoption and they had arrived to their adoptive families at an average age of 36 months. Children in foster care had arrived to the residential home at an average of 6 years old.

The assessment took place in the educational context of each child. In the classroom of each participant, a nominations activity was carried out. Each student in the classroom was asked to answer four questions: the classmates they liked to be with, the classmates they didn't like to be with, classmates who liked to be with him/her and classmates who didn't like to be with him/her. The responses were analyzed using the software SOCIOMET (González & García-Bacete, 2010), which offers the sociometric status of each child in the class, as well as individual indexes for social preference and positive and negative relations with others. The analyses revealed similarities as well as differences between adopted and non-adopted children in their social development in the school context. Adopted and institutionalized children selected the same number of peers with whom they liked and didn't like to be than children from the community. On opposite, adopted and institutionalized children received significantly less positive nominations and more negative nominations by their peers than the community group. When friendships and enmities were studied, it was found that adopted and institutionalized children had less reciprocated friends than the community group.

Adoption research has consistently proved that children who were initially exposed to important adversity experiment a huge recovery after their arrival to adoptive families. Nevertheless, research on this topic has also found that internationally adopted children tend to present some difficulties in their relations with peers when they are compared to non-adopted children in their community. Data obtained in this study will provide a better understanding of the changes taking place in the social development of children and youths whose initial life trajectories were marked by adversity. School is a fundamental context for development and it should be a target for research and intervention on adoption issues.
Outcomes of Face-to-Face Contact for Adoptees from Out-of-Home Care in New South Wales

Introduction
As the importance of openness in adoption practice has become more widely recognised, questions concerning post-adoption contact between children and birth family members and its implications have become more pressing. This paper discusses the outcomes of a programme in New South Wales, in which there is an expectation of regular face-to-face contact with birth parents for children who have been placed for adoption from out-of-home care. The nature of such contact is specified as part of the Adoption Plan, a legally binding document required under adoption legislation and agreed by all parties including birth parents, adoptive parents and children.

Objective
The purpose of the paper is to explore how face-to-face post-adoption contact was experienced by a cohort of adoptees and their adoptive parents, and to identify its impact on the long-term wellbeing of adoptees.

Methods
This study is one element in a more extensive programme designed to explore the life trajectories of a cohort of 210 children adopted from out-of-home care in New South Wales between 1987-2013. This paper draws specifically on data collected from responses to an on-line follow-up survey in 2016 (54 adoptees and 86 adoptive parents) and through face to face interviews conducted with 20 adult adoptees and 20 adoptive parents.

Results
Seventy-six (87%) of the adoptees had had contact with at least one birth parent since the adoption. The expectation of face-to-face contact had led to different perceptions of the role of adoptive parents, many of whom included birth parents, grandparents and siblings as part of their extended family. Nevertheless, by the time of the follow-up survey over half (60%) of those adoptees who had initially had contact were no longer seeing their birth mothers, and 66% had stopped seeing their birth fathers.

Almost all the adoptees had experienced significant abuse and neglect before being placed for adoption and the majority of birth parents had not succeeded in overcoming the difficulties that had led to their child’s removal. Contact had often been problematic, and about half of those adoptees who had stopped seeing a birth parent claimed to have done so on their own initiative.

Nevertheless, the qualitative data reveal the part continuing contact had played in helping adoptees to come to terms with their past history and current situation. The paper explores how contact could help adoptees to navigate a number of complex tasks that appeared necessary to their establishing a sense of wellbeing in adulthood: developing a secure sense of attachment to their adoptive parents while maintaining a link with their birth family; understanding the limitations of their birth parents while accepting their relationship; establishing a robust sense of identity while refusing to be defined by their past experiences. It concludes by exploring the relationship between contact and adult outcomes.

Conclusion: implications for policy and practice
The findings demonstrate the implications of continuing face-to-face contact not only for adoptees, but also for their birth parents, their adoptive parents and other members of both adoptive and birth families. Changes in perceptions of optimal relationships between the various parties involved have significant implications for practice and policy concerning the recruitment and training of adoptive parents and decisions about post-adoption
support for adoptive parents and children. They also have implications for policy and practice concerning continuing post-adoption support for birth family members.
Institutional Determinants of Social Climate in Therapeutic Residential Care: A Systematic Review and Empirical Follow-up Study

Wednesday, 3rd October @ 10:30: Specialized and Therapeutic Care (Venue: Miragaia)

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

Introduction
Therapeutic Residential Youth Care (TRC) concerns the treatment and care of young people outside their family environment and aims to provide services to protect, care, and prepare young people for returning to life outside the institution. However, there is limited evidence on how TRC achieves its treatment goals: TRC remains too much of a “black box”. To gain more durable treatment results, we need to know more about how results are achieved, rather than investigating the achieved results. By examining more closely the process of change during TRC treatment, we could be able to more accurately identify factors associated with facilitation or obstruction of a positive outcome. The interpersonal environment (hereafter social climate), where adolescents and staff members are continuously part of, is one of the most basic elements that are necessary for treatment success. Up until now, no review studies have been available summarizing the current state of knowledge about and evidence of the effects of the qualities of social climate. Such a review could be a first step in understanding and improving processes and outcomes of TRC.

Objectives
The main aim of the study is to formulate “what works for whom” principles regarding good quality of TRC for adolescents with psychosocial problem. The first objective of this study is to systematically identify which institutional factors contribute to a positive social climate. The second objective is to verify these identified variables in a more detailed empirical study and to investigate potential other institutional variables that contribute to a positive social climate.

Methods
We carried out a systematic review search and included peer-reviewed studies from 1990 until 2016. Studies had to include a measure of social climate and focused on youth between the ages of 12 to 23 in TRC. Three researchers searched ten databases with a selection of keywords to identify the person, institution type, social climate, determinants, and outcomes. Exclusion criteria were studies that focused on foster care, school settings, medical care, outpatient care, or a combination of outpatient care and TRC. In order to test and extend the variables in the systematic review we conducted an empirical study and analyzed data from a large study with 400 adolescents (12-20 years old) admitted to Norwegian TRC. To measure social climate, we used the Community Oriented Programs Environment Scale (COPES), which consists of ten subscales measuring a broad array of social climate factors. To measure institutional factors, we used a self-constructed questionnaire measuring leadership background, institutional characteristics, routines, and free time division. In addition, we measured adolescents’ psychiatric characteristics and treatment history. We performed a multilevel structural equation modeling (SEM) analysis and regressed determinant variables on social climate subscales.

Results
Preliminary results from the review indicated moderate to high effect sizes for associations between a strength based treatment program and support, expressiveness, clarity, and autonomy. Furthermore, qualitative studies in the review indicated that a small size, less emotionally charged, and supervised program contributes to a safe environment. Preliminary results from the empirical study indicate that financing method, staff-patient ratio, use of coercive measures, and level of education and experience years of staff show significant association with
social climate scales of the COPES. More detailed results of these associations will be presented at the conference.

**Conclusions**

The systematic review findings highlight the importance in shaping environments that match the need for the heterogeneous groups of adolescents living in different types of TRC. Policy makers and leaders of TRC institutions can implement the coming results regarding flexibility, staff training and supervision, the use of non-coercive methods, and group size in constructing a more positive experienced social climate.
**On the Licensing and Inspection of Residential Homes for Children in Sweden**

Friday, 5th October @ 12:15: Core Issues in Residential Care Quality (Venue: Auditório)

*Dr. David Pålsson (Department of social work, Stockholm university)*

**Introduction:** The presentation will focus on the state licensing and inspection system of residential homes for children and adolescents in Sweden, which has been reinforced in recent years. Residential care is a complex intervention provided to children in vulnerable life situations and it is extensively delivered by private providers. Although there has been an upsurge in research on care aspects of considerable importance for service users, the knowledge base of residential care is contested and current research indicates that the service has found it difficult to demonstrate positive treatment effects clearly. Licensing and inspections are policy instruments that are increasingly used to assure quality in decentralised and marketised welfare services. However, in prior research there are mixed opinions on the ability of audits to generate improved service quality.

**Objectives:** The questions posed in the presentation are: What type of license control do private residential homes undergo prior to their entry into the market? How is care quality defined in inspections and do the standards used capture and affect central care aspects? What are the reflections of residential staff regarding the impact of inspections on their work and what importance do they assign to inspections? How and to what extent can care aspects, which are important to children in care, be addressed by inspections?

**Methods and data:** The presented findings are based on empirical material derived from interviews (n=50) with inspectors and residential staff, documentation (n=286) in terms of guidelines and license/inspection decisions and observations (n=12) at inspection-related events.

**Results:** Most applicants of residential care are granted a license and controls do not reduce the need for ex post control. There is limited control of care content and research evidence is weakly incorporated in the controls. Overall, the state exerts limited influence over the composition and professional development of the care market.

Inspection standards display a marked variation and there is no differentiation between different residential homes. In general, the standards focus on reducing malpractice and not maximising care quality. In practice, inspections are often discussion-based and standards relating to work with children are often indistinct. Inspections induce reflection among residential staff and to some extent shape the administrative parts of care, but that it is also difficult to discern the actual impact of the inspections on the work. Inspections appear to bring a degree of stability and legitimacy to the work, but there are sometimes tensions between standards and professional judgment.

Different inspectorial rationales may influence the agency children exert in inspections and it appears difficult to allow children’s views to have a substantial impact on the process. Overall, there tends to be a gap between what children find important and what the inspections can address in concrete terms.

**Overall conclusions:** 1) making certain core care aspects auditable and ensuring their impact is difficult (e.g., children-staff relationships, children’s views of important care aspects and use of research knowledge), 2) the Swedish audit system has a restrained character and is in many senses associated with inconclusive effects, 3) the use of uniform goals for a complex service does not necessarily equal a more suitable or professional care provision and 4) the audits signify strong symbolic values which is not always matched with its actual impact on practice. Despite the limitations of the system, the audits may help to discipline care providers, secure a minimum level relative to the audited care aspects and induce reflection among residential staff.
Predictors of Residential Care Quality in Portugal: What Really Matters?

Friday, 5th October @ 12:30: Core Issues in Residential Care Quality (Venue: Auditório)

Ms. Sónia Rodrigues (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Prof. Jorge F. Del Valle (University of Oviedo), Ms. Joana Campos (University of Porto), Ms. Ana Martins (University of Porto), Ms. Mariana Leal (University of Porto)

Background: Currently in Portugal, around one in 250 children and youngsters are growing up in Residential Care (RC) centres, representing 96.8% children in out-of-home care. Most children (57.5%) stay in RC for 2 years or more. Over 60% all children in RC grow up in large sized centres (with more than 24 children) and more than 50% are raised in gender-segregated institutions. RC quality is considered as the timely fit between the available services in each centre and the actual characteristics and needs of children in care at that specific centre. A nationwide research on RC quality is currently being conducted for the first time in Portugal. The present study is part of this national research.

Objectives: The main goal of this study is to identify RC quality predictors among variables related to the structure and functioning of RC centres. Other specific goals are to (1) identify the characteristics and needs of the children in care in the participating centres; (2) characterize RC centres and (3) assess RC centres’ quality.

Method: Seventy-four RC centres, from all over the country and depending on different tutelary entities, participated in this study. Half of these RC centres were gender-segregated and 32.4% were small (less than 12 children), 41.9% were medium-sized and 17.6% were large (more than 24 children). Data were collected using the Portuguese Comprehensive Assessment System of Residential Care Quality (ARQUA-P). A team of five researchers visited each of these RC centres and interviewed the Director, the children, the caregivers, and the professional of the tutelary entity who supervises the RC centre. Participation in the study was strictly voluntary for all participants and special care was given regarding the specific ethical procedures required for research involving children.

Results: Data analysis is still in progress but preliminary results showed that the quality in the participating RC centres is slightly positive. Significant correlations were found between RC quality and variables related to the group of children in care (e.g. average time in care; average age and age range). In addition, significant differences in quality were found among RC centres, according to gender segregation or size. Several predictors of RC quality are thus being considered in further analyses.

Conclusions: Conclusions of this study will be drawn underlying the importance of considering both individual variables of the group of children in RC and the variables of the RC centre. Guidelines aiming at improving RC quality will be designed and recommendations for national policy decisions in Portugal will be suggested.
Children, Youth and Staff Assessments on Quality of Residential Child Care Services: How Different Are Their Points of View?

Friday, 5th October @ 12:45: Core Issues in Residential Care Quality (Venue: Auditório)

Mrs. Silvia Pérez (University of Oviedo), Prof. Iriana Santos (University of Cantabria), Prof. Jorge F. Del Valle (University of Oviedo)

BACKGROUND
Nowadays, residential child care is still an important resource in Spain as there are more than 13,000 children placed in residential care. As a consequence, quality evaluation of residential facilities is a major issue in our country and our research group has a long tradition of evaluation practices in this field.

One of our main research trends is the development of a system to assess the quality of residential child care programs. This system consists of interviews for workers, children and youth, documental analysis and environmental assessment, among others. Criteria to obtain a certain level of quality are connected to the national standards for residential child care services.

OBJECTIVE
The main aim of this presentation is to compare children and residential workers views about the quality of the children’s home services.

METHOD
Our system to evaluate quality of residential child care services is called ARQUA and it is based on the national childcare standards of quality EQUAR (Del Valle, Bravo, Martínez & Santos, 2012). We have applied ARQUA system in 15 children’s homes from 4 different regions of Spain. The sample consisted of 103 members of staff (social educators but also some psychologists and social workers) and 117 children and youth aged between 6 to 20 years old. They were interviewed using the ARQUA method, applying the appropriate version for each condition and age. The structure of the interviews is both quantitative and qualitative. On the one hand, there are items on a five-point Likert scale format. On the other hand, the interview collects qualitative explanations about reasons for very high or very low scores in each item, as well as open questions. The length of interviews is between 30 minutes and one hour and a half, depending on the profile.

RESULTS AND CONCLUSIONS
Results are organized in three categories related to the content of the evaluation. With respect to physical, material and human resources staff evaluated the location of the resources in a more positive way than the youngsters, perhaps because they took into account the availability of social resources (school, medical attention, etc.) in the proximity and the youngsters included other criteria such as the distance to their family and friends. The assessment of basic processes, included topics like the referral and reception process; staff and children had a very good opinion on both questions. However, children think that they should be prepared to welcome new peers, be noticed in advance, etc. The last dimension is about basic needs and well-being, assessing issues such as participation of children and youth in decision making about their own case plan, where the biggest discrepancies were found. As a result, we find that staff and children are closer in their views that they usually think. As a practical implication, staff should encourage children participation in evaluation processes and decision making, as a way to share opinions, suggestions and values.
Theoretical Perspectives on Social Pedagogical Actions in Adolescent’s Everyday Life

Friday, 5th October @ 13:00: Core Issues in Residential Care Quality (Venue: Auditório)

Ms. Signe Thorhauge (Continuing Professional Development and Centre for Applied Welfare Research, University College Lillebaelt, Denmark)

This paper builds on a practice research and development project financed by the Danish Ministry for Children and Social Affairs project Børn og unges netværk- et fælles ansvar [Children and Young People’s Network – a shared responsibility]. The project has been aiming to explore how professionals support children and adolescents in residential care in their participation with peers in school and leisure time in everyday life. In this particular district of Denmark there has been a political focus on how to expand the task in residential child care in ways that are flexible to the needs of the families – among other through a close interaction between different professionals. We have observed professionals’ conversations about their cooperation across various professional contexts.

The professionals support the adolescent in his/her development and participation with other adolescents in educational and leisure time, hence the professionals referred to in this paper are persons who support adolescents in this regard. The paper explores how professionals comprehend and articulate their professional practice in regards of the task of support.

The paper draws on a Critical Psychological conceptualisation of development through social participation in everyday life (Charlotte Højholt, Klaus Holzkamp). The comprehension of adolescents’ development is therefore seen as connected to their possibilities to learn how to handle complexity and challenges and develop personal conduct by taking part in communities and social practices together with others.

In Denmark, social pedagogy has a long tradition for representing the essence of the task as revolving around the emotional relationship between a child and his/her caretakers. Meanwhile the social pedagogical work in practice often takes place in the adolescents’ everyday life, which is a complex changeable context and the challenges there are connected to taking part in various communities of practice. It requires the professionals to get drawn into the participant trajectories in which the close and emotional relation is one factor out of several with importance for the developmental conditions. This raises an interest in investigating how professionals connect with each other across professions and places.

This work, which revolves around concrete issues in the adolescent’s everyday life, poses a great part of the work in practice and the paper sheds light on the meaning of these professional actions. The individual professional’s participation in the adolescents’ trajectory confers knowledge from one perspective. Often there are several professional perspectives represented when working with adolescents in vulnerable situations and the way professionals add meaning to actions and interventions differ depending on their relation to the adolescents and on the context in which they work. It being school, leisure activities or different kinds of support or therapy. In this project we have observed that the different theoretical concepts of this work can lead to discussions and comprehensions that tend to polarize positions in which particular psychological discourses dominates. The practice that revolves around the concrete participation in everyday life remains partly un-articulated in an academic theoretical manor and the little unsuspected elements of the social educational practice are often not represented in professionals’ technical terminology.

The paper explores how professionals through professional networks and conversation across adolescents’ development contexts can address dilemmas and problems connected to adolescents’ everyday life.
How Can We Guide Decision-Making in Foster Care? Results from Applied Research

Introduction

The deployment of the new legislative advances (Catalan Law 14/2010 and Spanish Law 26/2015) is an opportunity to reflect on the trajectory developed in foster care, in order to improve the understanding of the impact of the processes of Fostering, guiding the design of social care in child protection, and making the intervention more effective.

Objectives

The research aims to evaluate how foster care families in Catalonia are functioning and to draw up proposals for their improvement based on an applied research. More specifically, to analyse the decision making in the changes of placements as well as the outcomes of foster cares.

Method

This is a mixed-method approach that is developed in different phases. The results presented in this communication refer to the data collected from the first phase. Two ad hoc questionnaires have been developed, one for active cases and another for completed cases (with 22 items and 24 items respectively). Both questionnaires have been completed on-line by the professionals of the corresponding foster care professionals’ teams.

Sample

A total of 2036 cases are analysed, of which 810 are active cases and 1226 are completed cases, of a population study of the cases of foster care in families of Catalonia. These cases are and have been overseen by the 13 teams of foster care organizations distributed across the 4 provinces. These organizations are legally constituted to provide a service in agreement with the Catalan Institute of Foster Care and Adoption (ICAA) and work in all the stages of the intervention process of the foster care in order to support the integration of the child into a family.

Results

It presents data from the first nationwide study in Catalonia regarding foster care. The results show the trajectory of the cases form the entrance to the child protection system to leaving care, focusing on profiles of the children and foster families, the type of maltreatment, as well as some basic data on processes and outcomes keeping in mind the ongoing and completed cases.

The results also explore the future plan expected: family reunification, adoption, long-term foster care or placement breakdown, as well as the variables that affect them like: the age of the child, the number of siblings in the protection system, the presence of special needs in children, the structure of the foster family, the relationship with biological family and issues regarding stability.

Discussion and conclusions

The results obtained from this research are highly valuable given that almost all the ongoing cases of fostering carried out in Catalonia have been examined, as well as the completed cases from 2008. The data presented allow us to study in depth the practical implications for professionals, for childhood policies and for future research with a strong scientific evidence base.
Decision-making related issues in child protection have received more attention over the past few years. Studies have focused mainly on risk assessment decisions as well as those related to the child's removal and placement. However, very few of them have specifically addressed the decision-making process surrounding the choice of a foster family, despite the fact that this choice has significant consequences on the child's development and trajectory. In Quebec (Canada), when a child is to be placed in foster care, three options are possible: placement in a regular foster care, placement in kinship care, that is, with a family member or close relative, or placement in a foster-to-adopt family.

The purpose of this communication is to outline the factors considered and the resources employed by social workers to choose a type of foster family when a young child between the ages of 0 and 5 must be placed in foster care. As part of this study, 40 qualitative individual interviews were conducted with child welfare workers who work mainly with children in this age group, and who are involved in the decision-making process related to the choice of foster care environment. Results show that child protection workers consider various factors in choosing the foster care environment. While some considerations are of a clinical nature (child's profile, parents' issues, placement history), others are more of an administrative nature (availability of resources, current legislative framework, etc.). It is also interesting to note that the choice of foster family is rarely a process done by a single individual and for which the child welfare worker would be the sole bearer, but is rather part of a process that includes collaboration and consultation with other professionals or decision-making bodies in the workplace.
Decision-Making Process about Long-Term Placement and Adoption for Young Children: The Individual and Collective Actor

Friday, 5th October @ 12:45: Decision-Making and Professional Practices in Foster Care (Venue: D. Maria)

Mrs. Rosita Vargas Diaz (Université de Montréal), Dr. Chantal Lavergne (CIUSSS Centre-Sud-de-l’île-de-Montréal, Institut universitaire Jeunes en difficulté), Prof. Marie-Andree Poirier (University of Montreal)

This paper aims to present the preliminary results of a doctoral research that focuses on the decision-making process about choosing a permanent living environment when family reunification is not possible. Child protection professionals make several difficult decisions that will define the future of a child and his family. One of the most critical decisions is to remove the child from his family. However, we must distinguish two different moments in this process: 1) emergency placement, which seeks to protect children from imminent risk, and 2) placement as a permanent measure. Most studies focus on emergency placements. These emergency decisions are short notice, with very little information, and in situations where there is imminent danger to the child. Unlike decision-making in situations of risk, making decisions about permanence are the result of a long process of intervention in which child protection professionals already know the family and have already deployed a multiplicity of services, which makes it possible to better evaluate the possibility of reunification. The decision seems more reflective and negotiated among the different actors than the one related to risk situations. However, the literature focus on the individual decision-making process rather than the interaction among the actors, this is to say the collective and negotiated nature of this process.

The objective of this research is to study the decision-making process in the selection of a permanency option in the case of young children (0-5 years old) focusing on the influence of the collective and interactive dimension, as well as on the influence of the institutional context.

This research is centered in young children because in their case a wider range of permanence options can be observed. Another reason for the interest in this group lies in the fact that this age group is in one of the most critical stages in terms of child development. Finally, studies show that in Quebec province this age group has less possibilities of reunification (Esposito & al., 2014).

In this qualitative exploratory study we observed the permanency planning discussions of two different child-welfare teams in Quebec during a period of six months. In addition to the observation we did 22 interviews with different actors involved in the decision-making process. Although the final analysis and implications of the study are underway, the broad findings show the participation and the influence of several actors in decision-making process about long-term placement and adoption for young children. We observed the influence of different frames in this process. The social, cultural, legal, deontological, and institutional, as well as the influence of power relations and the absence/presence of specific institutional or social resources. Our findings show the importance of professional interactions, resources, as well as contextual factors in the decision-making process regarding long-term placement for young children.
Social Workers’ Practices in Kinship Care

Friday, 5th October @ 13:00: Decision-Making and Professional Practices in Foster Care (Venue: D. Maria)

Prof. Bernadette Tillard (University of Lille)

Context.
Cross-national comparisons of the main trends in child protection noted that in France there are fewer children who are fostered by family or friends than in most other European countries. In France, most kinship carers are members of the extended family. It is mainly the relatives closest to the biological parents who are designated by the judge as “tiers digne de confiance” (trusted third party), putting them in charge of child custody. Drawing on findings of a recent study funded by the National Observatory of Child Protection, this paper examines key aspects of social workers’ practices in cases of kinship care in the North area (Département du Nord 59).

Aim.
As the judges explained, their decisions are mainly based on the file prepared by social workers: these social work files inform the judge of the case narrative and provide an assessment of the child needs. So the social workers introduce the family. Social workers also attend the hearing with parent(s), potential kinship carers and the child. In this presentation, we explore how social workers’ practices may influence the low level of kinship care in France.

Method.
The fieldwork was undertaken in a non-profit association that provides home-based ‘up-bringing assistance’ at the request of the judge (Assistance éducative en milieu ouvert: AEMO). With the help of the agency leaders, we considered all the cases supported by the association between June 2014 and June 2015. We found 30 cases of kinship care. These included both those which were formal (carer named by the judge) and informal (voluntary agreement between parent(s) and carer(s)) kinship care. In each situation, we conducted an in-depth interview with the social worker. 23 social workers following the 30 families described the case in detail, including the kinship care decision process itself and the social worker’s practices with the family. Following initial data analysis, we shared results with the social workers at a workshop.

Results and outcomes.
Kinship carers’ characteristics inform us about what kind of family life social workers are seeking to secure for children who cannot live with their birth parents. The findings confirm that social workers prefer to foster the child in a family that had previously no history with social services.

The family resources assessment illustrates social workers practices: economic resources are not systematically reported, neither carers social supports. Moreover, the conditions to access to financial support are not well known by social workers.

Social workers and their managers share ambiguous feelings about carers. The carer(s) must stay in control: playing a parental role with a great involvement in the day-to-day life, but without taking the parents’ place. In France, there is still a main trend of family reunification, and it seems difficult for the social workers to attach importance to the significant adults around the child. So social workers consider that kinship care presents a greater risk (than a professional foster family) of generating competition and conflict with parents, especially with the child’s mother.

Conclusion.
Our study highlighted that social workers’ knowledge on kinship care is less up-to-date than those on out-of-home care. We also notice the unexplored resources of the wider families and the fear of a “too important” carer’s involvement. Even if kinship care is registered for a long time in French law, as the first possibility that must be explored, ambiguous expectations of practitioners about kinship care may explain its still limited use in France.
Development of Survey Tool with and for Care Leavers

Friday, 5th October @ 12:15: Development of Assessment Tools in Social Welfare Practice and Research (Venue: S. João)

Dr. Claudia Mollidor (Ipsos MORI), Ms. Raynette Bierman (Ipsos MORI)

This presentation outlines the process of developing a longitudinal survey approach that will collect key outcomes from intervention and comparison group care leavers at three time points over approximately 16-18 months. The project, being delivered in a London borough, and this evaluation are funded by the UK Department for Education’s Innovation Programme in Children’s Social Care.

The survey development process involved three key elements. Firstly, we will discuss a scoping exercise carried out to identify:

i) secondary data sources (e.g. statutory data returns), and

ii) standardised measures for relevant outcomes.

In addition, given that programmes to support care leavers focus on different aspects of life (compared with children in care), such as support networks, financial confidence and independent living, survey questions used by past or ongoing research of care leavers were also reviewed. This exercise resulted in the collation of a variety of research tools that often look at similar outcomes but few are specifically tailored to care leavers.

The second key activity was a review of best practice in survey development and the presentation will discuss our decision-making process in situations where the literature conflicted with maintaining the validity of standardised measures, particularly in the context of working with a hard-to-reach population and the need to develop an engaging and accessible output.

Finally, the third activity focused on designing a survey delivery approach appropriate for the target audience. This involved running a workshop with care leavers to discuss survey formats and communication channels. The presentation will summarise lessons learned from the process to inform the development of future survey data collection with care leavers.
Formulating common dimensions for Child and Youth Care (CYC) units is complex, resulting from a range of activities such as residential institutions for children and youth who can not live in their homes, frameworks for completing education and youth clubs operating in the community, including emotional and social support. In addition, the desire of leaders in CYC units to be relevant and effective for their customers, leading to frequent changes and to flexibility that have not yet been studied.

Non-formal education (NFE) is an educational-pedagogical approach that was developed in out-of-school educational and community organizations. These organizations usually operated during their audiences' leisure time, and are aimed at individuals who willingly join the activities. NFE is considered lifelong learning, and is based on changing situations and on a wide range of subject matter.

Kahane (2007) developed the Non-formal Code as a theoretical-social and educational concept enveloping the field. The eight-dimension of Kahane's Code are: volunteerism, pragmatic symbolism, symmetry, modularity, expressive instrumentalism, multidimensionality, moratorium, and dualism. These dimensions formed the theoretical framework for the present study.

The study had four stages: (1) Qualitative data collection, aimed at developing variables and a scale for a quantitative research tool; (2) Validation. Turning to judges to validate the first version of the questionnaire. (3) Quantitative. Constructing the questionnaire. Reliability analysis and factor analysis. (4) The second (and final) version was examined, and factor analysis and reliability test conducted. In addition, three models were constructed (CYC units, community centers, and youth movements). The participants were instructors in the three settings. This abstract will focus on the results of the CYC units.

Findings: The final questionnaire included 8 dimensions and 34 statements. Six out of Kahane's (2007) eight dimensions, and two were added from other studies: time and place, gender roles (Silberman-Keller, 2007; Rapoport, 2012). A comparison of the educational settings revealed that all dimensions, with the exception of volunteerism, were placed differently. All models were found to have significant differences (p < .05), except community-center model and the CYC unit model (p > .05). The variables that were found to contribute to the differences between models were educational setting, gender, age, and education.

The findings indicated the uniqueness of the CYC model: The model includes five of the eight dimensions of the questionnaire, with no significant relationship between them, and 21 of the 34 statements. Three dimensions (multidimensionality, moratorium, time and place) were dropped from the model. The expressive instrumentalism dimension included eight statements and is the richest of all the dimensions. In addition, the statistical alignment of this model to the participants' responses was found to be the highest of all the models.

The uniqueness of the CYC model can be explained by the fact that an independent model whose observed variables are independent indicates stability. In other words, it is possible that CYC instructors understand the meaning of the variables better than others. The partial expression of the code's dimensions can be explained by the inclusion of formal activities in CYC units. For example, study for vocational diploma or matriculation. With regard to the richness of the expressive instrumentalism dimension, it may be that the instructors emphasized the activities' immediate and future gain to the participants and recognizes the importance of their work at the community and social levels (e.g. crime rate reduction).

In summary, each of the settings that were examined is unique in the manner that the dimensions are con-
structured and in their interrelationships. The results showed a unique structure of the code’s dimensions in CYC units. These dimensions can promote the development of effective and relevant programs for CYC units.
The Social Worker Self-Efficacy in Client-Centeredness Questionnaire (SWSECCQ) - A Psychometric Validation Study among Students

Friday, 5th October @ 12:45: Development of Assessment Tools in Social Welfare Practice and Research
(Venue: S. João)

Dr. Martin Hammershøj Olesen (VIA University College), Dr. Sabine Jørgensen (Copenhagen University College)

Within the field of social work with children, adolescents and families, it has been widely accepted, that the social worker-client relationship determines both quality and outcome of care. In this study, two theoretical traditions within psychology inform the notion above; experienced social worker self-efficacy (i.e., social cognitive theory; Bandura, 1977), and competencies within client-centered communication (i.e., humanistic psychology; Rogers, 1959). However, adopting psychological theory and research into social work with children and families is only a first step. Thus, the purpose of this study is to develop a general quantitative measure, which in large-scale studies, could document that in fact, social worker self-efficacy and client-centeredness play such a significant role. In terms of method, Danish 5th semester students at VIA University College, School of social work in Aarhus (N=234, mean age=29.6 years, 86.8% women), who had recently returned from their internship-semester, filled out the current questionnaire (i.e., adapted from the SEPCQ; Zachariae et al., 2015). They also filled out a range of other questionnaires. Measures of social worker autonomy support, as well as intrinsic- and extrinsic reasons for choosing to become a social worker (adapted from the questionnaires HCCQ and TSRQ, which originate in Self-determination theory). Further, a measure of well-being (who-5), and personality traits (brief version of IPIP-NEO). SWSECCQ measures social worker self-efficacy and client-centeredness by self-reporting 27 sentence statements, starting with “I am confident that I am able to...”. Each statement is scored on a Likert scale ranging from “0 – To a very low degree” to “4 – To a very high degree”. Three subscales or dimensions characterize SWSECCQ, in which items are grouped and summarized: 1 – Exploring the client perspective (10 items, mean=33.8, SD=4.35, alfa reliability=.85), sample item “Make the client feel, that he/she can talk with me about confidential, personal issues”; 2 – Sharing information and power (10 items, mean=30.0, SD=5.3, alfa reliability=.86), sample item “Reach agreement with the client about which plan for social care should be implemented”; 3 – Dealing with communicative challenges (7 items, mean=19.1, SD=4.0, alfa reliability=.75), sample item “To maintain the relationship with the client when he/she is angry”. Results of analyzing inter-correlations between subscales show expected, large and positive relationships (r’s range=.51 – .66). Correlation analyses of construct validity show expected positive, small to moderate relationships with social worker autonomy support (r’s range=.23 – .43) and intrinsic motivation for studying social work (r’s range=.13 – .30), likewise with trait conscientiousness (r’s range=.0 – .20), agreeableness (r’s range=.0 – .23) and openness to experience (r’s range=.1 – .23). Further, analysis showed expected small, negative relationships with extrinsic motivation (r’s range=-.0 – -.14) and trait neuroticism (r’s range=.14 – .22), whereas relationships with well-being were insignificant. In conclusion, these results show that SWSECCQ is a psychometrically reliable and valid questionnaire, at least when examining students, and thus the current study should replicate in a sample of practitioners. In addition, these initial steps of measurement development could generate future studies documenting the importance of social worker-client relationships and their influence upon client outcomes. Specific characteristics of client-centered skills, when working with children, adolescents and families, still need further clarification.
**The Reactive Attachment and Disinhibited Social Engagement Disorder Assessment (RADA) Interview - Development and Validation**

Friday, 5th October @ 13:00: Development of Assessment Tools in Social Welfare Practice and Research (Venue: S. João)

*Dr. Stine Lehmann* (Regional Centre for Child and Youth Mental Health and Child Welfare -West, Uni Research Health), *Dr. Sebastien Monette* (Department of Psychology, Université du Québec à Montréal (UQAM)), *Prof. Helen Egger* (Department of Child and Adolescent Psychiatry, New York University School of Medicine, New York), *Dr. Kyrre Breivik* (Regional Centre for Child and Youth Mental Health and Child Welfare -West, Uni Research Health, Bergen, Norway), *Dr. David Young* (Department of Mathematics and Statistics, University of Strathclyde, NHS, Greater Glasgow and Clyde), *Ms. Claire Davidson* (Adverse Childhood Experiences Clinical and Research Centre, Institute of Health and Wellbeing, University of Glasgow, Glasgow, Scotland), *Prof. Helen Minnis* (Adverse Childhood Experiences Clinical and Research Centre, Institute of Health and Wellbeing, University of Glasgow, Glasgow, Scotland)

**Objectives**

Recent studies have strengthened the evidence for dimensions of Reactive Attachment disorder (RAD) and Disinhibited Social Engagement Disorder (DSED) as relevant descriptions of trauma- and stressor-related symptoms for maltreated, noninstitutionalized school-aged children and adolescents. To the best of our knowledge, none of the existing structured observations, interviews or questionnaires are updated to comply with the DSM-5 criteria. The first aim of the present study was to update and modify the Child and Adolescent Psychiatric Assessment (CAPA)-RAD instrument to a) correspond to the DSM-5 criteria for RAD and DSED, and b) enable the assessment of RAD and DSED symptoms through adolescence. The second aim was to examine the factor structure of this updated interview.

**Methods**

An international team of researchers with clinical expertise in child and adolescent psychiatry/psychology conducted an extensive modification of the CAPA-RAD instrument to comply with the DSM-5 criteria. The new interview was named the Reactive attachment- and Disinhibited social engagement disorder Assessment (RADA). RADA is a 32 item assessment-tool complying with the DSM-5 criteria. The DSED subscale comprises 9 items, the RAD subscale comprises 11 items, and 12 additional items were kept to contribute to a clinical formulation. Each item is coded on a three point scale as No (= 0); A little (= 1); A lot (= 2), yielding a scale range of 0-22 for the RAD scale and 0-18 for the DSED scale. RADA is currently available in French, Norwegian and English.

The study sample is part of the ongoing longitudinal research project “Young in Foster Care”, within the larger project Children at Risk Evaluation (CARE) models. Data were collected between 1st of October 2016 and 31st of March 2017. Eligible foster youth were born between 1999 and 2005, had lived in their current foster home for at least six months following legally mandated placement. Foster parents of 320 foster youth completed RADA online.

**Results**

The study sample were aged 11-17 years (M 14.5, SD 2.0); had lived in foster care for a mean of 6.6 years (SD 4.3), and 56.9 % were boys. Confirmatory factor analysis of RADA items identified good fit for a three factor model, identifying one factor comprising DSED items and two factors comprising RAD items (RAD1, failure to seek/accept comfort and RAD2, withdrawal/hypervigilance).

**Conclusions**

Overall, our data supported a clear distinction between the two constructs of DESD and RAD. According to our findings, the construct of RAD may be categorized into two sub-constructs. One might speculate that items comprising RAD 2 are more closely related to relational trauma caused by maltreatment. As the empirical
foundation for the construct of RAD and DSED behavior in older school-aged children is minimal, future studies on different age groups and risk profiles are needed to examine the discriminant ability and relevance of the formulation items for the RAD and DSED dimensions.
In 2004, an apology was made on behalf of the people of Scotland for the historic abuse suffered by adults who had experienced care as children. The Scottish Government took forward a number of initiatives to address the needs of these survivors of historic abuse. However, there was concern that these initiatives did not fully address the human rights injustices of these survivors. In order to address these concerns and to provide a comprehensive approach to these issues, the Scottish Human Rights Commission (SHRC) proposed an InterAction, a facilitated dialogue involving key stakeholders: survivors of historic abuse, service providers, Scottish Government, professional associations and academics and researchers. The purpose of the InterAction was to agree an Action Plan to implement a human rights framework for justice for survivors of historic abuse in care.

The Centre for Excellence for Looked After Children in Scotland (CELCIS) facilitated the two year programme of events for the InterAction and the participants of the InterAction agreed a detailed Action Plan. In December 2014, the Scottish Government made clear commitments to take forward the Action Plan, including a National Inquiry, a Survivor Support Fund, work on memorial and commemoration, an Apology Law, and work on civil and criminal justice.

This presentation will address the conference themes of social work practice in changing times and transitional practice in the context of historic abuse. It will detail the findings of an evaluation of the InterAction on Historic Abuse of Children in Care. It will also outline the developments in the implementation of the InterAction Action plan since December 2014.

The aim of the research was to detail the stages in the InterAction process and the role of the various participants; to capture the experiences of the different participants; and to identify those features which facilitated the process of the InterAction, and those which hindered it. The research methods involved:

- documentary analysis of a range of InterAction documents;
- semi-structured interviews with key individuals in the InterAction process; and
- an online questionnaire for a wider group of InterAction participants.

Participants were largely positive about the process and outcomes of the InterAction and identified a range of achievements:

- bringing key stakeholders together,
- creating a ‘safe space’ to take forward discussions of very sensitive issues,
- a distinctive contribution to progressing remedies for the survivors of historic abuse in care,
- successful completion of the Action Plan,

However, there were clear tensions throughout the process, and these impacted on the engagement of some participants. An issue which hindered the process was the significant amount of preparation needed to introduce the InterAction and to enable stakeholders to engage fully in participation.

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 of social work policy.
Evaluation of the New Dutch Youth Act: Perspectives of Youth, Parents, Professionals and Policy Makers

Friday, 5th October @ 12:30: Human Rights Approach to Social Welfare Policy and Practice (Venue: Miragaia)

Dr. Inge Bastiaanssen (Netherlands Youth Institute)

In 2015 a new law was introduced in the Netherlands concerning a new system for youth care. The aim of the new Youth Act law was to gain a more efficient and effective youth care system. The youth care system in the Netherlands concerns prevention, support, help and care for young people and parents with regard to developmental issues and child rearing, psychological problems and disorders. The biggest change brought about by the Youth Act was the decentralization of the organization and financing of youth care to municipalities. Now that municipalities are responsible for youth care, the opportunity has risen to develop a more local youth care system based. This local youth care system focuses on prevention, early intervention and help close to the home of youth in need of support and care.

Three years after the introduction of the Youth Act it has been extensively evaluated by a consortium of Dutch researchers. The evaluation was commissioned by the Dutch Ministry of Health, Welfare and Sport. The research questions of the evaluation relates to both the Youth Act (does the law offer a good legal framework?) as to the actual improvement of the Dutch youth care system which was intended by the law.

To answer these research questions, perspectives of all stakeholders in youth care were included in the study. By means of literature research, document analysis of municipal policy documents in combination with interviews and extensive surveys those perspectives were investigated. For the EUSARF conference the researchers focus their contribution on the perspectives of clients (youth and parents), youth care institutions and municipalities.

The main conclusion of the evaluation study was that there were no objections concerning the goals of the Youth Act. However, the biggest concern of stakeholders lies in the fact that the implementation process – also called the transformation of youth care – contains several bottlenecks. The pressure on specialised youth care has not yet been reduced by more prevention and local youth care initiatives. A positive fact concerns the increase of collaboration between youth care institutions, but also with the broader social domain and with municipalities. However, market forces and administrative burdens, such as tendering rules and regulatory burden, often prevent the development of more efficient and effective youth care. Professionals are bothered by the diversity in rules, quality requirements and procedures form all the different municipalities. Last but not least, also clients experience problems within the new youth care system. For almost one in three parents it took a lot of effort to get help. Young people want more say, for example when determining the kind of youth care they want to receive. Families in a vulnerable position have less positive experiences with the implementation of the Youth Act than others. For example, it concerns single-parent families and families with a low income. The impression is therefore that the families who need help most need the greatest effort to get it.

The transformation of the Dutch youth care system is still in full development. During the EUSARF conference researchers share the recommendations that emerged from the evaluation with the participants in the session. The transformation needs to get a boost so that the opportunities created by the Youth Act can indeed lead to a more efficient and effective youth care system for vulnerable youth in the Netherlands.
Assessing Outcomes for Children who Have Been Subject to Child Protection Court Proceedings

Friday, 5th October @ 12:45: Human Rights Approach to Social Welfare Policy and Practice (Venue: Miragaia)

Prof. Jonathan Dickens (Centre for Research on Children and Families, University of East Anglia)

Objective
This paper considers the dilemmas of assessing outcomes for children who have been subject to child protection court proceedings. The professed aim of any social welfare or legal intervention in family life is often to bring about ‘better outcomes for the children’, but there is considerable ambiguity about ‘outcomes’, what this means and how they are measured. For example, the ‘outcome of care proceedings’ could refer to the final order for the child, or to some state of affairs further in the future – where the child is living in (say) five years’ time, or when they are 18; or to their physical or emotional well-being during their childhood and adolescence, and even into adulthood. Stability of placement is often taken as an important outcome, but does not in itself guarantee emotional or physical well-being. Above the individual factors, there are the social, legal and policy contexts that shape the options and the likely outcomes for the children.

Method
This paper draws on empirical research into the outcomes of care proceedings for a randomly selected sample of 616 children in England and Wales, from six local authority areas. About half the sample started proceedings in 2009-10, and the others in 2014-15, after notable reforms to the care proceedings system intended to ensure that court cases usually end within 26 weeks. The researchers studied court records, local authority case files, and administrative data on children in need and children in care. This enabled them to compare proceedings and orders under the two regimes, and what happened to the children subsequently, after one year for both samples and after five years for sample 1. There were also interviews with 56 local authority staff to get a picture of the policy and practice issues, and two focus groups with judges.

Results
In terms of court orders, there are striking differences between the outcomes for the two samples. Overall, the proportion of cases ending with adoption plans about halved, whilst those ending with plans for kinship care about doubled. The proportion of cases ending with the child remaining with, or returning to, one or both parents also increased. It is not possible to attribute these changes simply to the 26 week limit; there were significant court judgments at the time that had a major impact on social work and judicial practice. There are different patterns between the different areas, showing that local practice has an impact too. But are these ‘better’ outcomes for the children? That depends on the longer-term outcomes. Here, the complexities become apparent. Most children did experience stable placements over the relatively short follow-up periods of the study, but many showed significant emotional or behavioural difficulties. Good progress in some aspects of their lives was often counter-balanced by difficulties in others.

Conclusions
Understanding outcomes in context is all important. At an individual level, in the context of ‘normal’ child development, where one might expect uneven progress; and in light of the particular needs of each child, including special needs and the impact of any harm they may have suffered. At the societal level, the core paradox is that the most uncertain outcomes are for children who remain with or return to their parents; yet law and policy require that first consideration is given to this option. And at the court level, another paradox – greater transparency about the uncertainty of outcomes is necessary for understanding the risks and potential benefits of care proceedings, but it is uncertain that it could, or even should, make any difference to decisions in individual cases.
When the Child Welfare Service (CWS) decides to apply to the court for a care order proceeding, the assessment is based on jurisdiction, knowledge, theories, norms and values. This PhD-project studies how Norwegian child welfare workers inform parents about their decision of applying for a care order. The child welfare worker's agenda is to inform about a serious resolution, and for most parents this information can be a demanding message to receive (Falch – Eriksen, 2016). The aim is to examine how both child welfare workers and parents experience this specific meeting and how the discourse affects the child welfare workers practice.

The research questions for the study is:
1. What influence the practice when child welfare workers inform parents about the decision of applying for a care order?
2. How does the child welfare workers experience being messenger of bad news in these meetings?
3. How does parents experience receiving the information about a care order proceeding?

The project study how the child welfare workers describe their practice in the meeting and how different discourses might affects their practice. The project will also study both child welfare workers and parents' experiences of the meeting. There are several studies concerning the Child Welfare Service decision making (Benbenishy et al. 2015; Heggdalsvik, Rød & Heggen, 2018; Munro, 2008; Skivenes & Tonheim, 2016), but fewer about how the decisions are actually presented for parents. Child welfare workers have been criticized for their communication processes with parents (Christiansen & Andressen, 2011; Forrester, Kershaw, Moss & Hughes 2008; Kapp & Propp 2002; Stedsrød, Willumsen & Ellingsen, 2014; Vagli 2014). Within the field of medicine there have been related research on how both doctor's experience giving bad news, and how patients experience to receive a difficult message about a diagnosis (Baile et al., 2000; Buckmann, 2002).

The methodological approach for the project is qualitative individual interviews. Hermeneutics is the theoretical framework to study the child welfare workers and parent's experiences of the meeting. Discourse analysis will be applied to study the underlying discourses of the child welfare workers practice. Preliminary findings from interviews with 12 child welfare workers will be presented at the conference.

Friday, 5th October @ 12:15: Participation in Child Protection (Venue: Ribeira I)

Ms. Anna Pekkarinen (Faculty of Social Sciences, Social Work, University of Tampere), Ms. Elina Pekkarinen (University of Tampere)

In our presentation we analyse the spheres of participation in the Convention on the Rights of the Child (the Convention) and the general comments of the Committee on the Rights of the Child (the Committee) in the context of child welfare interventions. Our objective is to establish a shared language between the two disciplines. Participation is a fundamental human right, but it has also been viewed as a desirable practice (Thomas 2007). It has been contested whether participation can truly be protected in child welfare interventions (Healy & Darlington 2009; Seim and Slettebo 2011). Consequently, we focus on the guiding documents of children’s rights and ask what kind of meanings, explanations and arguments the participation of the child holds. We also draw propositions for integrated respect for participation of the child especially in contested contexts where different interests collide.

We understand the interpretation of an international treaty as a moral exercise, and thus we do not limit our analysis on the interpretational principles provided in the Vienna Convention on the Law of Treaties, but approach interpretation from a multidisciplinary perspective. We do not seek to sketch a theory of participation, but instead construct a framework of participation in the spirit of the Convention.

The method used is qualitative content analysis. This is utilised in a fairly liberal sense; the analysis itself is guided by the data, but we do not dissociate fully from theoretical conversations. The theoretical basis of our presentation conceptualises participation as an idea of social relations instead of political ones, though these spheres cannot be exhaustively separated from each other (Thomas 2007, 206). The Convention and the general comments were carefully analysed. The included comments were 4, 5, 7, 8, 9, 10, 11, 12, 13, 14, 17, 18 and 20. Articles and general comments that are not explicitly associated with the intervention situations are excluded.

We have constructed three main categories. Firstly, we identified belonging as the human condition. This category represents the interdependent connection between participation and humanity; children are entitled to participate because they are humans, not because they are children. The second category located is tolerance and the quest for equality as a precondition for participation. Tolerance and equality foster the contextual nature of participation and the need for a child-centred approach. The participation of children holds particular dimensions that are closely connected to various social locations and power relations. The third category constructed is nurturing children as social actors. Participation is nourished in accordance with the developing abilities of the child.

We uncover participation as a fundamental structural principle that cross-sections the rights of the child in the documents; participation is a fundamental requirement to the realisation of children’s rights. Participation of the child does not only symbolise actual and concrete methods of participation. Instead it signifies belonging, inclusion and being acknowledged as a human being who is a holder of one’s own rights. In this respect, participation is a place based on experience.
Protection Concepts in Child and Youth Care: An Organizational Perspective on the Prevention of Child Abuse and Neglect

Friday, 5th October @ 12:30: Participation in Child Protection (Venue: Ribeira I)

Mrs. Tanja Rusack (Institute for Social Work and Organization Studies, University of Hildesheim)

Children and adolescents spend a considerable amount of their life time in a variety of different child and youth care facilities (such as kindergarten, youth centers, sports clubs or residential care). Regarding a comfortable feeling in such institutions for young people it is important that these institutions are “safe places” (Allroggen et al. 2016, 10). This refers to places where children, adolescents and young adults should be protected from any form of violence. However, safe places for children and adolescents are not automatically given. In Germany, this has shown the disclosure of numerous cases of (sexualized) violence in institutions in 2010 (Burgsmüller/Tillmann 2011; Runder Tisch Heimerziehung 2010). Since then, much public discussion has taken place in Germany, a “Commission on sexual violence” was founded and the Roundtable “Sexual Child Abuse in private and public institutions, as well as in the family” has been established (Fegert/Wolff 2015, 15; RTSKM 2011).

As a result, the discussion about child protection (in public institutions) has been widened in terms of content: The emergence and processing of abuse and neglect is no longer restricted to a perpetrator-victim dynamic but is more understood as perpetrator-victim-institution dynamics (Wolff 2014). In the course of that, protection concepts are understood as long-term, participatory organizational development processes consisting of three components: prevention, intervention and long-term-processing (Schröer/Wolff 2018). In Germany, these concepts and organisational development processes are called „Schutzkonzepte“. Participation is an important aspect which is a core element within these protection concepts in child and youth care: It is assumed that all members of an organization have different perspectives on their organization as well as different needs, wishes and concerns regarding a protective climate in the organization. Only if all perspectives and positions are combined organizations can be made more transparent regarding their routines, potentials, work processes, strengths and weaknesses – and all weak points and border constellations dilemmas can be identified and improved (Wolff 2015; Wolff 2014; Kampert /Wolff/Schröer 2017).

At the conference, the lecture will introduce the topic “protection concepts in child and youth care” and provide an overview of various discourses in this field in Germany. For this purpose, empirical examples and quotes from various research projects will be used to illustrate how protective concepts in child and youth care have been developed so far. The projects were funded by the German Federal Ministry of Education and Research (Bundesministerium für Bildung und Forschung, BMBF) and had a combined quantitative and qualitative approach through the use of an online questionnaire and group discussions respectively narrative interviews (The analysis are based on the Documentary Method; Bohnsack 1997 and Bohnsack/Przyborski/Schäffer 2010). They especially focussed on the perspective of the addressees (especially of the young people). This can be seen as a part of a pioneer work because in Germany only few empirical studies address the perspectives of the young people in residential child and youth care – particularly concerning the topic “protection concepts”.

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Participation and Protection in Organizational Cultures of Residential Care in Germany

Friday, 5th October @ 12:45: Participation in Child Protection (Venue: Ribeira I)

Dr. Claudia Equit (Technical University of Dortmund)

Against the backdrop of international professional discourse, the planned presentation will introduce the results of a qualitative study on organizational cultures of residential institutions with regard to participation and complaints. The typology that will be presented is based on ten highly diverse institutions. Group discussions with adolescents as well as with staff and interviews with the administration were conducted within each institution, and evaluated by means of Documentary Method (Bohnsack, 2010). The resulting typology is “built on the components of the framework of orientation common to the cases” (Bohnsack, 2010: 111). Three distinctive frameworks of orientation for facilities were analyzed, each of which relates to the basic assumptions of staff, adolescents, and administration. The frameworks of orientation correspond to the organizational culture of a facility. Organizational cultures can be defined, according to Schein, as the “pattern of shared basic assumptions that group learned” (Schein, 1992: 12). In line with this understanding of organizational cultures, the results were interpreted on the basis of sociological findings from the neo-institutionalistic and organizational processes and hierarchies. Below, the resulting typology is first outlined according to the Documentary Method’s reconstructions, followed by a discussion of the results.

The three types analyzed can be described as follows, and will be further elaborated:

1. the type of “appropriation” is oriented towards a positive and lively “atmosphere” within the facility for adolescents
2. the type of “custody” is oriented towards the implementation of moral ideals, to be achieved through conformity and obedience on the adolescents’ part,
3. the type “compliance” is oriented towards the cooperation and concerted effort of adolescents and staff with regards to therapeutically defined goals.

The aim of the planned presentation is to introduce and discuss an interpretation of the material. The results of the study follow the paradox that, particularly in cases of institutional repression, participation and complaint procedures are not used by those affected, although in Germany, for example, this is put into context by the legislator (Federal Child Protection Act) and the connection between protection and participation is also spotted and (critically) discussed in other countries. It will be presented, that especially in institutions where repressive practices are applied, the logic of juvenile complaints are diametrically opposed to the guidelines of internal complaint procedures. Rather, internal and/or external complaints from young people in the institutions, which primarily work with repression and coercion, carry the risk of increased sanctions for the affected.

The objective of the presentation is to explore whether partnership between social workers, parents and children exist in the decisions which are called as ‘voluntary care orders’ in Finland. The focus is on the relations between parents, children and social workers and the implications of these relations on the decision-making process and the eventual decision.

Social workers are obliged to start preparing a child’s care order, if they see that the legal requirements for it fulfill. When custodians and a child 12 years or older, agree to the care proposal and the proposed substitute place, the decision will be made by social work authorities at the local level and the care order is called a voluntary care order. The legal implications for the child and the parents are the same as if the court would have made the decision.

The data consists of social workers’ interviews (15) of working processes from three different municipalities. Social workers have selected one recent care order case to the interview. The interview begins from the formal hearing occasion in which the different parties express their view of the proposal for a care order. In the interview social workers told their professional narrative of the case and of the relations between them, a parent and a child in the care order decision-making process. Data is analyzed using both thematic and structural narrative analysis.

Through the analysis four main narratives were found. The preliminary findings suggest that partnership between social workers, parents and children is indeed narrated in these interviews and it is storied as human activity, including critical events, unpredictable twists and surprises. Narratives are partly overlapping stories about working with the family. Narratives describe social workers as independent professionals who exercise discretion. There is a strong tendency to a relationship based-practice, which is also a jointly shared goal of the work community, not only social workers’ individual emphasis and way of working.
Signs-of-Safety in Practice – A Study of Usage, Application and Experiences in a Swedish Metropolitan Region

Friday, 5th October @ 13:15: Participation in Child Protection (Venue: Ribeira I)

Dr. Francesca Östberg (Department of social work, Stockholm university), Dr. Stefan Wiklund (Department of social work, Stockholm university), Dr. Åsa Backlund (Department of social work, Stockholm university)

Signs-of-Safety was developed in Australia and can basically be seen as a model for assessment, investigation and follow-up in Child Welfare in order to ensure child safety and protection. This study reports the practical adoption and application of the model in the city district of Stockholm and other municipalities in Stockholm County. The study consists of three sub-studies. The overall aim of the study is to investigate to what extent and in what way Signs-of-Safety is used in Stockholm County as well as to describe and analyze advantages and limitations associated with using the model.

The first study is based on a survey and principally addresses to what extent the model is applied in the county. All municipalities/boroughs/social emergency services (n = 44) in the county are investigated concerning the use of Signs-of-Safety in all municipal child welfare activities (intake, investigation, service providers, etc. (n=189). The model is applied to some extent in almost 90 percent of the municipalities and boroughs, but only a small proportion of the tools are used. Most commonly, so-called Mapping is used mainly in investigations targeting younger children (0-12).

The second study is partly based of focus group interviews with practitioners from a reference group partly on case-studies in four municipalities/boroughs that use the model and its components to a relatively high degree. The focus of the case studies has largely been influenced by the reference group and the findings of the initial study. Overall, the case studies focus on how the model is applied in practice in different contexts of child welfare and the ideas linked to the usage of the model. A particular focus has been devoted to the work of so-called safety plans (often used in high-risk cases). Data in the case studies consists of analyzes of case record (n = 16), observations of team meetings (n = 9) and interviews (n = 18) with social workers and counsellors. The results suggest, among other things, to substantial variations in how different techniques are used in practice as well as difficulties in assessing risk and implementing safety.

The third study explores experiences of clients who have been exposed to Signs-of-Safety in general as well as having experienced safety planning. The study is based on interviews with parents (n = 4) and children (n = 2). Although it is difficult to isolate users’ experiences of Signs-of-Safety from the experience of interacting with the social services in general, the study shows client’s experiences ranging from positive, indifferent to critical.

The report discusses these results in relation to some key concepts from so called New Institutional organization theory. Social welfare agencies are examples of a type of organization that gains its legitimacy by abiding laws and following guidelines. However, while the organization is highly formalized, it is also sensitive to ideas and central values present in the context it operates. Using external legitimized models such as Signs of Safety may be an important factor for the organization to prevail and prosper. However, such general models are often transformed in the local context. Findings suggest that the parts of the model used and the adjustments made are those that have the potential to strengthen the profession in the task of administrating cases. The curtailed and adaptive application of Signs-of-Safety can also be understood from the fact that Signs-of-Safety - developed in Australia - a country where child protection principles dominate - is applied in Sweden whereas child welfare work is traditionally based on family support principles.
Exploring Foster Children’s Educational Trajectories over the Life Course

Mrs. Hilma Forsman (Department of social work, Stockholm university)

Objectives: It is well-established that children in out-of-home care perform poorly in the educational system. Yet, we know little about the mechanisms behind their poor educational outcomes. This ongoing study is a part of a larger research project whose overall aim is to further our understanding of this issue. In this study, foster children’s movement in the educational system over the life course will be mapped out. The objective is to explore to what extent educational outcomes and trajectories differ between children in out-of-home care and their same-aged peers. To improve causal inference, a group consisting of individuals, investigated by the child welfare committee but never placed in out-of-home care, is utilized. This contrast may to some extent account for the selective processes that lead to placement.

Method: The study is based on a 60-year follow-up of a 1953 Stockholm cohort (n=14,294), of which around 7% were placed in out-of-home care before the age of 13. This unique cohort material combines survey and longitudinal register data, and include a wide range of variables apart from those reflecting placement in out-of-home care and educational outcomes. This encompasses socioeconomic conditions reflected in the family of origin in a broad sense, as well as measures of the individual’s cognitive ability, educational ambitions, academic interest, peer relationships, expectations for the future, and internalizing and externalizing behavior. The main type of analysis will be structural equation modeling.

Results: Preliminary descriptive analysis of educational outcomes indicate that compared to same-aged peers who have not come to the attention of the child welfare system, foster children have lower school marks in the 6th grade, the 9th grade, and in upper secondary school. Furthermore, they have less chance of making the transition from elementary school to upper secondary school as well as from upper secondary school to the university. Additionally, children with experience of out-of-home care have lower levels of educational attainment in young adulthood and midlife compared to their same-aged peers. However, the differences between children in out-of-home care and children who have come to the attention of the child welfare committee without being placed, seems to be small or non-existent. Later analysis will provide a detailed description of typical and atypical educational trajectories across these three groups of children.

Implications: In many ways, the lives of the 1953 cohort studied here differ from recent cohorts. Yet, to a large extent, these preliminary results mimic findings from more contemporary cohorts. The focus on why child welfare children tend to underperform in the educational system has thus potentially important implications for policy and practice. A better understanding of the mechanisms underpinning out-of-home care alumni’s lack of educational success across the life course may help policymakers and practitioners in the child welfare system and educational settings of today in their efforts to effectively assign interventions to individuals in order to balance competing objectives, such as maximizing outcomes, and reducing variability in outcomes.
The Importance of Prioritizing Education of Children in Care

Friday, 5th October @ 12:30: Prioritising Education in Out-of-Home Care (Venue: Ribeira II)

Dr. Yifat Mor-Salwo (The Hebrew University of Jerusalem)

Children in care are one of the most vulnerable groups in society. Key to their development and their present and future well-being is their pathway through the education system, though it is generally unsatisfactory, exposing them to the risk of social exclusion. Many children and youth in care demonstrate low educational achievements. In fact, compared to children growing up in their natural homes, young people terminating their stay in public care are likely to suffer from significant educational gaps. Many are leaving the care system without a high school diploma, and even those who do attain one, typically perform below the general population. In addition, the aspirations their caregivers have for them are generally low and they lack educational guidance. Therefore, their starting point is well behind that of the general population and for many of them integration into higher education remains an elusive dream.

In spite of the barriers encountered, however, some care leavers do succeed academically and make the transition to higher education. This study examined the factors related to the educational success of alumni of care, specifically-educational residential setting in Israel. The study used a qualitative approach. Semi-structured in-depth interviews were conducted with 45 alumni of educational residential settings in Israel who were integrated into higher education institutions.

The findings revealed that prioritizing education played a major role in the educational success of the care leavers and in their integration into higher education. Three main narratives emerged from the interviews: 1) Those who stayed at a residential care facility which failed to emphasize education, but due to their families that prioritized education, they succeeded to integrate into higher education; 2) Those who came from families that prioritized education and their stay at a residential care facility provided them the resources to accomplish the educational aspirations derived from their families; and 3) Those who came from families that did not emphasize education, but staying at a residential care facility promoting education allowed them to progress in that field and to integrate higher education.

In addition, the interviews revealed a passive attitude of residential care facilities in prioritizing education of children and young people in care. While some care facilities had the necessary resources for educational progress, only the young people who had the initiative to ask for them, got the resources required to make their educational aspirations affordable.

The study results suggest that residential care facilities have the ability to help young people realize their education aspirations or revise them in order to promote educational success. The care system should make a great effort to prioritize education. This could be an important step in the efforts to improve programs and services in care facilities aimed at assisting children in care reach positive outcomes and enable them to successfully integrate into society.
Supporting Learning and School Success for Young People in Residential Care

Friday, 5th October @ 12:45: Prioritising Education in Out-of-Home Care (Venue: Ribeira II)

Dr. Kiaras Gharabaghi (Ryerson University), Prof. Wolfgang Schroer (University of Hildesheim)

This paper presents research findings from an international project involving academic institutions and residential care service providers in Canada and Germany. The focus is on a clearly defined concept of learning that includes three core elements: learning in the form of general knowledge acquisition; learning in the context of school success; and learning in the context of understanding one's relationship to Self and the world. The research methodology included ethnographic observation in four residential care sites, interviews with staff, management and young people, as well as surveys with young people. The theoretical framework is based on social learning theories but also draws on child and youth care practice, social pedagogy and child rights ideas and concepts. A fundamental goal of this research is to present the residential care milieu as a learning space rather than a place for young people who are labeled as ill. The paper considers the differences in residential care provision in Germany and Canada, but rather than presenting these in comparative format, it seeks to integrate the institutional and semi-institutional opportunities for learning and success. Controversially, the paper also considers the roles of schools in relation to learning, but places the emphasis on the residential care environment as the driving force for young people to experience learning success and opportunities for growth. Findings of this research furthermore provide some conceptual frameworks for thinking about different kinds of school forms, including schools that are connected to residential care facilities and schools that operate separately from them in the community. The paper concludes with an invitation to the international research community to participate in a follow-up research project focusing on the idea of shaping school environments to meet the needs of young people in out of home care settings.
A Scoping Review of the Relationship between Mental Health and School Achievement among Foster Children

Friday, 5th October @ 13:00: Prioritising Education in Out-of-Home Care (Venue: Ribeira II)

Mr. Oyeniyi Samuel Olaniyan (University of Bergen), Dr. Stine Lehmann (Regional Centre for Child and Youth Mental Health and Child Welfare - West, Uni Research Health), Dr. Gaby Ortiz-Barreda (University of Bergen), Prof. Hilde Hetland (University of Bergen), Dr. Ragnhild Bjørknes (University of Bergen), Dr. Valborg Baste (Uni Research Health)

Objectives: In recent past, there has been a marked increase in the number of studies reporting low academic achievement among foster children. According to some scholars, factors associated with low academic success could be categorized into four factors, namely, individual, family, care and school ones. Mental health would fall within the individual domain. Recent research also points to the significance of early school mastery for a well-functioning and independent adulthood, thus making exploration into the relationship between mental health and academic achievement a worthy venture. Additionally, today's society places far greater demands on academic skills such as reading, writing and mathematics than before. On this note, the aim of the present study is to shed light on the association between mental health and academic achievement among foster children.

Methods: We employed a scoping review methodology to provide an overview of the type, extent, and quantity of research available. The search strategy was developed to retrieved peer review original articles published between 1991 and 2018. Searches were conducted on six databases (Medline, Embase, Psychinfo, Eric, ProQuest, and Web of Science). We developed three thematic filters by using keywords: a) Filter related to Mental Health: mental health, wellbeing, emotional disorder, conduct disorder, antisocial behavior, behavioral disorder, psychiatric disorder, posttraumatic stress disorder, externalizing problem, attention deficit disorder with hyperactivity; b) Filter about Foster care: family foster care, Kinship care, home care, of-home care, respite care, foster care, foster care service, Out-of-home care, foster placements, foster children, Out-of-home placement, children in care; c) Filter related to School achievement: educational competence, school competence, educational performance, school performance, educational achievement, school achievement, academic resilience, school success, academic success. Boolean operators such as “OR” and “AND” were used to retrieve all the literature available. This study is part of a Ph.D. project on the impact of mental health on academic achievement among foster children.

Results: 191 studies were identified across all databases used. After applying the inclusion criteria, only 22 articles were included in the analysis. Most of the studies were published between 2012 and 2018 (n=15). Majority of the studies (n=17) were published in the USA and Canada. With a high sample base, most of the included studies were quantitative in nature. Out of the 22 included studies, 20 studies focused on child population over 5 years old. Employed mental health and academic success measures were similar in most of the studies. In some cases, delinquent behaviors among youths was associated with school dropouts. Some studies reported that the number of foster children that needed curriculum adaptation (30 %) was higher than the average (5 %). Other studies reported significant differences in the impact of mental health on school success between foster children in private homes and group homes. Internalizing and externalizing problems were most frequently reported among the included studies. In some studies, girls tended to fair better than boys do. Other covariates included placements type, the caregivers educational background, school involvement, aspirations and school expectation, school changes, time in placement and care plans.

Conclusions: To get a broader understanding of the association between mental health and academic success among foster children additional research should focus on quantifying this relationship, as well as the impact of other factors like school changes, placement types etc.
Ethnic Identity, Academic Self-Concept and Future Orientation as Predictors of School Engagement, Academic Achievement and Risk Behaviors among Druze Adolescents

Friday, 5th October @ 13:15: Prioritising Education in Out-of-Home Care (Venue: Ribeira II)

*Mrs. Sausan Abu-Rukun Hadeed (School of Education, Bar-Ilan University), Prof. Shlomo Romi (School of Education, Bar-Ilan University)*

The objective of the current research was to examine to what extent ethnic identity and personality-psychological variables derived from it contribute to the student engagement and to his or her academic success in school as well as to risk behaviors. The study consisted of 317 subjects; all of them were Druze adolescents studying in formal high school setting in Israel in a wide array of classes such as biology, economics, communication, sciences and humanities.

The hypothesis was that a strong ethnic identity will have a significant impact on the adolescent will strengthen his or her academic self-concept and contribute to the development of a positive future orientation; the student will adopt norms of school engagement, will have higher academic achievements, and will be less involved in high risk behaviors.

Based on the initial analysis, findings indicate that Druze teenagers studying in scientific or combined (Scientific and technology) classes compared to technological classes are more likely to have higher and relatively positive values of ethnic identity, academic self-concept and future orientation. Furthermore, their school engagement and academic achievement are greater and they tend to be less involved in risk behaviors such as smoking, alcohol drinking, substance abuse and bullying or other violent behaviors.

These findings not only support the main hypothesis. Moreover, they are found to be in line with other findings revealed from studies which have addressed different ethnic minorities around the world such as Afro-Americans or Asians in the U.S.A.

It can be said that strong and positive ethnic identity combined with bi-cultural integration acculturation of ethnic minorities constitute a defense factor from risk behaviors and academic failure as well as an accelerator of academic and general success.
The Foster Youth in Action’s (FYA) Leadership and Advocacy Trainings Project: A Multi-state Evaluation of Positive Youth Development

Friday, 5th October @ 12:15: Promoting Successful Exits from Care (Venue: Porto)

Dr. Toni Naccarato (California State University, East Bay), Ms. Liliana Hernandez (-), Dr. Angelique Day (University of Washington)

Objective: Studies have found that youth transitioning out of foster care have risk factors. Because these youth are vulnerable, innovative programs that build leadership and advocacy skills and enhance positive youth development should be created and empirically tested. Although foster youth have expertise and knowledge of the foster care system, many policy makers have never heard their experiences or sought their input.

The current study collected two waves of data from the FYA’s intensive, year round leadership and advocacy trainings to youth members in six states. Participants and trainers in the intervention were current and former foster youth between the ages of 14-25 years. The study evaluated the personal impact of participating in this intervention by individual youth. The intervention was delivered through retreats that varied in length and topics, but were typically offered over 2 to 3 days with an average of 8 hours of training per weekend. The hypothesis was that the intervention would increase the youth’s outcome scores on the following scales: 1) identity affiliation (IA); 2) identity search (IS); 3) civic activism (CA); 4) self-efficacy (SE); 5) community supports (CS); 6) supports and opportunities (SO); and, 7) socio-emotional well-being (SEWB; Wave 2 Only).

Method: A quasi-experimental pre-test post-test design was used. The youth completed a survey that focused on demographics, personal impact, and training efficacy prior to and at the end of the training. These data were analyzed using descriptive statistics and dependent sample t-tests to determine whether there was a difference in pre- and post-test scores. All measures were based on a 4-point Likert scale. All scales had Chronbach’s a > .86, which indicates strong internal consistency. The youth were involved in survey development and data collection.

Results: Wave 1 data were collected on 253 youth, 69.2% from California, 15.8% from Oregon, 2.8% from Washington, 8.5% from Nebraska, 2.8% from Indiana, and .8% from Massachusetts (n=247). Approximately, 48.2% were males and 51.1% were female (n=249). The majority of the youth identified as Caucasian (29.8%), African-American (23.4%), Latino, (22.2%), Bi-racial (16.1%), Asian (2.8%), and Other (5.6%) (n=248). The mean age was 19.47 years. The average number of months in care was 84.02 (n=242). The mean number of placements was 7.36 (n=243). The results were as follows: IA (t = -5.371, df 234, p = .000); IS (t = -9.111, df 233, p = .000); CA (t = -6.1114, df 231, p = .000); SE (t = -5.824, df 234, p = .000); and SO (t = -5.184, df 205, p = .000).

Wave 2 data were collected on 274 youth. Approximately, 60.2% were males and 31.4% were females (n=252). The youth identified as Latino (21.9%), Caucasian (21.2%), African-American (20.4%), Bi-racial (15.7%), Other (9.5%), and Asian (2.6%) (n=251). The mean age was 17.46 years (n=234). The average number of months in care was 81.04 (n=251). The mean number of placements was 5.86 (n=245). The results were as follows: IA (t = -3.552, df 223, p = .000); IS (t = -4.247, df 223, p = .000); CA (t = -5.488, df 220, p = .000); SE (t = -5.836, df 222, p = .000); SO (t = -2.810, df 208, p = .005); and SEWB (t = -2.552, df 204, p = .012).

Implications: This FYA training model is the only national program for transitioning foster youth that is youth led and based on youth organizing and development principles. The information analyzed strongly supports...
that youth are positively impacted through their participation in the intervention. This approach offers lessons to be learned for future studies engaging current and former foster youth in practice, policy, and research.
The Association of Solidarity and Social Action, Particular Institution of Social Solidarity, in their persecution of their mission to protect, support and enhance citizens fully recognized has founded a set of Social Responses in the childhood and youth area of social intervention in the residential fostering, family support and counselling and parental training scope.

It is from the Institution's strategic line of perspective that it is not enough that the children's houses of residential care provide just the family like foster. Their mission is to prepare, together with the children and youngsters, life projects that are capable of answering their own needs and the family, fully respecting their rights.

On youngsters' residential care there is the further need of building positive autonomization from a personal, familiar and communal point of view, capable of assuming the vital relevance when the exiting from the institution is a transition into adult life.

This reality gives the institutions the need to, together with the youngsters, rebuild life projects that may, on one side, assure that these do not get abandoned to their fortune by not having family rear, and on the other side, that they continue with their educational and/or training path. An intensive intervention that has the objective of preparing the youngsters to the transitioning from the foster system into the autonomous adult life may not be overlooked, enhancing and optimising the whole process of growth, individualization, youngsters' autonomy, their ability of making decisions, problem resolution, self-orientation and social responsibility.

The teams must consider the essentiality of an integrated intervention, interinstitucional and transdisciplinary, accentuating the centrality of the concern of the stimulus and help given to each young individual, considered on its particular context, as subject of his own fate, be the main agent of realization of an individual autonomy project, with the active participation of the Institution, the family, and often as possible, key people from institutions and other elements of the community in which the youngster wants to insert himself.

The autonomization and transition from foster care to autonomous adult life is a relatively recent sphere of concern in Portugal and in the absence of regulation or technical orientation, institutions have developed and individualized the work with children and youngsters, of diversified nature and configuration, in order to prepare them for a process of autonomization.

In face of this context, ASAS, in March of 2015, has created a space of rhetorical reflection, practical and ethical about some of these models, their difficulties and constraints, and the opportunities and challenges presented, which designed the Forum of Construction and Autonomy, in which several institutions with responsibility in the promotion of rights and protection of children and youngsters participated. The participation of youngsters in processes of autonomization or already exited from them has always been a requirement of the construction of theses forums, and their voice and experience assumed as an integral part of the discussion, particularly for the gathering of suggestions that allow the improvement of their life projects of autonomization. This way we are respecting one of the fundamental rights consecrated on the Children's Rights Convention (ONU, 1989), article 12th, and there are created the conditions for its realisation. The implementation of the rights of children and youngsters, in particular of the ones held in context of residential care is one of the main concerns of these forums, as they reflect on the course inside the institutions and on the perspective of their future, as of strategies of autonomization capable of helping the youngsters to develop the competencies necessary for their independence and the exiting from the Protection system.
**Training Young People Leaving Care on Independent Life Skills in Portugal**

Friday, 5th October @ 12:45: Promoting Successful Exits from Care (Venue: Porto)

*Mr. André Tavares Rodrigues (University of Oviedo), Mrs. Laura García-Alba (University of Oviedo), Mrs. Federica Gullo (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo)*

**Background:** Adolescents in residential care seem to be more vulnerable than the rest of their peers who have not had the experience of the protective services. They face different risk factors, as well as different consequences after the experience of maltreatment in their childhood (abandonment, physical abuse, neglect and/or sexual abuse). As consequence of these experiences, the process of transition to adult life for these young people has been described as shorter, more accelerated and compressed (Stein, 2006). The need to prioritize the situation of care leavers has been noted internationally.

In Portugal, there are currently 7914 children and young people in residential care (Instituto da Segurança Social, 2017). According to the last report, only 261 cases, with a family separation measure, were in foster care. In spite of the fact that residential care in Portugal plays a crucial role, within the protection system, there is little published research about these young people. This is, therefore, research field that is not much explored. In this way, our research is the first one that has been carried out in Portugal with a representative national sample.

**Objective:** This study focuses on the process of transition to adult life of young people in residential care in Portugal. The aim of this research is divided into two specific objectives: 1) to describe the profile and needs of young people in residential care in Portugal and 2) to analyze the application of an umbrella program in terms of achieving independence living skills in this population.

**Methods:** To achieve this aim, this research was carried out with 345 young people, aged 16 and 17 who were living in 60 residential care facilities in 6 districts of Portugal: Porto, Coimbra, Lisbon, Alentejo, Açores and Madeira. The methodological design of our research is characterized by the following stages: (1) Training of the Technical and Educational Teams in the Host Centers; (2) Administration of the socio-demographic questionnaire for young people; (3) Application of the Pre-Test (umbrella program for young people and adults); (4) Enrollment in the Umbrella Program (16 sessions and lasting 8 weeks); (5) First Post-Test (one month later finishing the umbrella program) and (6) Second Post-Test (6 months/one year later finishing umbrella program).

**Results:**
This presentation will focus on results of the Umbrella questionnaire, assessing the level of learning at the Pre-Test Time and analyzing results including variables such as age and gender.

**Conclusions:** Assessing independent life skills will provide with an interesting tool for residential workers and professionals to help young people in transition to adulthood from care.
OUTogether - Improving Ageing Out and Leaving Alternative Care for Children and Youth

Friday, 5th October @ 13:00: Promoting Successful Exits from Care (Venue: Porto)

Dr. Francisca Pimentel (APDES - Agência Piaget para o Desenvolvimento), Dr. Elvira Lopes (APDES), Dr. Joana Conde (APDES), Dr. Leonor Miranda (APDES), Dr. Joana Antão (APDES)

OUTogether is a two year international project (2018-2020) that has the general objective of improving ageing out/leaving alternative care, for children and youth in 3 European States (Portugal, Croatia and Bulgaria). Alternative care is defined differently from one country to another, based on Article 20 of the UNCRC, where it is stated that alternative care is responsible for providing care for children “deprived of his or her family environment, or in whose own best interest cannot be allowed to remain in that environment”.

In this context, the UN – reaffirming the Universal Declaration of Human Rights and the Convention on the Rights of the Child – states that all State entities in cooperation with civil society “should adopt policies and procedures which favor information-sharing and networking between agencies and individuals in order to ensure effective care, aftercare and protection for these children” (art.70). Besides, the UN demands special attention to the quality of alternative care provision, “in particular with regard to the professional skills, selection, training and supervision of carers” (art.71). Indeed, training professionals who work in alternative care, on the rights of the child is also underlined as a key priority by the Council of Europe Strategy for the Rights of the Child (2016-2021).

However, across the EU several gaps have been identified regarding the preparation for leaving care, deinstitutionalization efforts, the establishment of national standards and the dissemination of good practices (SOS Children's Villages,2010), and also related to support aftercare. A European study realized that this departure from care to self-sufficient adulthood is characterized by chronic, often debilitating shortcomings (SOS,2010). Not only is the preparation for leaving care insufficient, but also young people in care face additional challenges – comparatively to most young people in the general population – in transition to adulthood regarding, for example, accessing jobs and housing, but also in dealing with loneliness, emptiness, and abandonment.

In this context, and in line with international recommendations our project aims at:

• Increasing national and transnational cooperation on rights of the child policy in alternative care;
• Increasing all children’s life skills for independent living before children age out of/leave alternative care;
• Increasing integrated support for all children and youth after leaving alternative care.

Also, all activities benefit from a strong child participation component involving careleavers themselves in the project implementation, actively participating as experts and providing their unique perspective in the development of all activities. Furthermore, national working groups are being created, after a brief assessment of the national gaps in the different partner countries, starting discussions on ageing out of/leaving alternative care involving different relevant keyplayers (careleavers representatives, state institutions, university experts, residential care institutions, among others), in this way guaranteeing that the solutions reached have all interests taken into account. As well, this project will have capacity-building of professionals on rights of the child and child protection through trainings, specifically focused on leaving alternative care. The innovative aspects of this project will be the development of a one-place support center for careleavers, together with the creation of national networks of institutions/professionals that will be involved with the above mentioned center. This is a unique service that states do not provide and that is an urgent need for these young people, who usually feel unready to face life out of their alternative care institution.
In many senses, the world of work often seems like an unexplored (and forgotten) continent in policy and provision for young people leaving care. It seems regarded as a world packed with challenges and barriers whereas it may also be rich with many opportunities and resources.

The paper will argue that the world of work has many contours of value and meaning that are of great importance in the general progress and development of young people in care and in transitions from care and beyond. This means that work opportunities for young people in care and care leavers must be promoted at both the policy and the case levels. The emerging evidence suggests that these opportunities are to be tapped not just when young people leave care, but also at prior points in their care journey by seizing earlier possibilities that seem often linked to later progress.

Firstly, the paper will situate the issue of young people leaving care and work in a wider context of relevant policy conditions currently, for care leavers and for marginalised youth in labour markets generally. It will also recall that there was a time in some countries (and is still a time in others) where work opportunities were/are a central focus in the whole project of care provision.

It will then map some of the evidence on the opportunities and barriers that influence care leavers' engagement and progress in the world of work. It will highlight some of the theoretical lenses that illuminate the many layers of positive value and meaning to be tapped in the world of work. Good work provides structure, meaning and money in daily life, but it also can do many other things – it can change identities, build social connections and cultivate fresh aspirations for the future and more.

The paper will remind us that work takes many forms and that in this context of opportunities for care leavers, there needs to be a ‘spacious’ understanding that can accommodate the needs of the young people and the potential of different types of ‘work’ – paid and unpaid.

As we face into a world of increasing automation of lesser skilled jobs, the paper will consider what are to be the work futures of care leavers and other young adults at risk of marginalisation? What are promising lines of innovation and effort? How is the agency of young care leavers to be meshed with imaginative initiatives of policy makers to craft a fresh and positive narrative of possibilities for young care leavers in the world of work?
Navigating Precarious Moments? The Experience of Young Adults who Have Been in Care in Norway, Denmark and England

Friday, 5th October @ 15:15: After Leaving Care (Venue: Arquivo)

Prof. Janet Boddy (UNIVERSITY OF SUSSEX)

At a time of heightened international debate about youth precarity, how do we understand and support transitions to adulthood for people who have been in care, for whom the growing insecurities engendered by economic crisis are likely to be particularly acute? In this presentation, I will discuss findings from a study called Against All Odds?, funded by the Research Council of Norway (236718) and led by Elisabeth Backe-Hansen. The research was conducted in Norway, Denmark and England, and set out to understand what ‘doing well’ means for young adults who have experienced out of home placement, against the context of a substantial international literature on risk of disadvantage for young adult care leavers.

Cross-national research has particular value in bridging the gap between micro, meso and macro contexts in understanding individual biographies, illuminating the connections between agency and structure. In understanding biographical transitions through early adulthood for young adults who have been in public care, cross-national comparison not only illuminates the lived experience of child welfare systems in each country, it reveals the ways in which child welfare systems are situated within the wider social, economic and cultural contexts of individual lives.

The study combined secondary analysis of national administrative data; in-depth qualitative longitudinal research; and a cross-national documentary review of relevant legislation and policy frameworks. In this presentation, I focus on data from interviews in all three countries. Participants, all of whom were in education or employment when they started the study, were interviewed on (up to) three occasions over a 12 month period, using a multi-method qualitative longitudinal approach that addressed biographical time, as participants looked back and forwards through their lives, as well as thequotidian temporalities of everyday lives. Against the context of a substantial existing literature on transitions specific to ‘leaving care’, the analysis I present is focused on aspects of early adulthood which are not specific to being care experienced: some (such as romantic break-ups, or moving home) might be considered normative, whilst others (such as dropping out of university) are less common. The cross-national analysis shows how care and wider welfare systems intersect with informal networks in everyday lives, functioning to scaffold young people, or to exacerbate precarity, as they navigate biographical transitions in early adulthoods. The research demonstrates the importance of developing socially and culturally located biographical accounts of ‘transition’ that recognise the complex relationality of everyday lives and emerging adulthoods. For young adults who have been in care, precarious moments – with the potential to destabilise ‘doing well’ – are rooted in interdependence, shaped through the possibilities afforded by intergenerational relations and formal state (including child welfare) systems.
Effects of Child, Home Environment and Early Childhood Education Factors on the Development

Dr. Sarah Wise (The University of Melbourne)

A substantial body of research has found that the quality of home and early childhood education and care environments make a significant contribution to children's development. However, there is a great deal of evidence suggesting that the home environment has the most important influence, with family characteristics such as maternal education and the quality of the home learning environment consistently emerging as strong predictors of children's academic and cognitive outcomes. Significant cumulative and interaction effects have also been found between quality of the home environment and early childhood education and care quality. In contrast to the large body of research undertaken on children generally, very little research has focussed on the home environment and early childhood education and care factors that make a positive influence on the learning and development of babies and young children in out-of-home care. Bridging this gap in research is important; a large and growing number of very young children are placed in care, and early childhood adversities and unstable caregiving typically experienced by this cohort may lead to different outcomes. This paper investigates the relative contribution of child, home environment and early childhood education and care factors on the development of Australian babies and young children in out-of-home care. Participants were 149 children (54% boys, 29% Aboriginal) who had not started full-time schooling (mean age = 35.95 months). Results from multiple regression analysis further supports the primary importance of home learning activities and carer education on developmental wellbeing measured using the Parents' Evaluation of Developmental Status (PEDS) tool. However, there was an independent, positive relationship between early childhood education and care attendance and developmental concerns as reported by foster and kinship caregivers. This raises questions about how well the type of early childhood education and care environments that out-of-home care children use are adapted to their learning and development needs, and what actions can be taken to ensure all out-of-home care placements provide an enriched learning environment.
Despite firm legislative support, and policy apparatus, including extra payments to schools for children who are on roll and also in local authority care, there is, in England, a persistent gap in attainment between children who have never been in care and those that have. This lasts throughout childhood and into early adulthood. Many, but not all, children in care have multiple social and psycho-social disadvantages including mental health difficulties and learning disabilities. Characteristics of the care system may also inhibit steady educational progress, such as changes of placement or social worker. I will introduce an integrated education and wellbeing approach to addressing this attainment gap, called ‘learning placements and caring schools’ and provide examples from one local authority in England. Caring 2 Learn is an ongoing project seeking to make foster carers more attuned to learning at home and schools more deeply invested in nurturing every individual looked after child.
A Mentoring Project in Five European Countries: The Perspective of Children in Residential Care, Caregivers, Teachers and Mentors

Friday, 5th October @ 16:45: Achieving Equity in Education for Children and Young People in Care: International Perspectives (Venue: D. Maria)

Dr. Carme Montserrat (University of Girona), Ms. Marta Garcia Molsosa (University of Vic), Mr. David Ruiz (Plataforma Educativa Foundation)

Objectives: A mentoring project aimed at improving the school-based learning of children in residential care was conducted within the framework of a European Project including 5 NGOs working in Austria, Croatia, France, Germany and Spain (Erasmus+ 2016-1-ES01-KA201-025021, called Sapere Aude).

Method: Program assessment included pre-post design. In the preliminary phase three stakeholders (teachers, caregivers and children in residential care) were given a questionnaire with the same questions to determine the school experience of adolescents between 12 and 17 years of age in residential care in different domains, such as relationships at school, participation, type of learning activities in the classroom, academic results and satisfaction with school. In the post-test stage, mentors were included after a school year of performance with children. A total of 500 questionnaires were answered in both phases.

Results: Findings showed, on one hand, how evaluations regarding these school matters, expectations for further education and satisfaction with the school domain were significantly higher among adolescents than among teachers, but differences were even more significant when compared to caregivers, who revealed a largely pessimistic outlook, with implications for consequent practices and policy-making. On the other hand, there were relevant outcomes regarding the mentoring program with shadows and lights to be taken into account by practitioners, the child protection system and the educational system.

Conclusions: This assessment reveals how children in residential care experience school and the mentoring program, and it may also provide insight into the social construction of the education of children in care and whether it is seen as a problem or, by contrast, as an opportunity.
In Hong Kong, out-of-home care is established to provide a temporarily shelter for children who cannot be adequately cared for by their families. As of December 2014, there were 3,188 children aged 0-21 years living in three broad types of care facilities, namely foster care, small group homes and children's homes. Around 88% of them were school age children. Despite the fact that education is one of the significant pathways for children development and that Chinese people put high value on education, educational needs of out-of-home care children are overlooked by helping professionals and under-researched in Hong Kong. Currently, these children are either studying in mainstream school or special school under the integrated education policy, in which they have received identical educational support as in-home care students who have learning difficulties and / or behavioral and emotional problems. The author argued that the learning support for children in care should be distinguished from in-home care children as most of them were came from disadvantaged family backgrounds and had traumatic family experiences such as child abuse, parents suffered from mental illnesses etc., resulting in increasing the risk of poor educational attainment. This presentation will include an overview of children's individual and family profiles, a critical appraise of the current education policy and specifically the special schools and the whole school approach to integrated education for these children, and finally recommendations on strategies to serve their educational needs better.
Raising Expectations: A Cross-Sectoral Approach to Increase University Access for Care Leavers

Friday, 5th October @ 17:15: Achieving Equity in Education for Children and Young People in Care: International Perspectives (Venue: D. Maria)

Ms. Joanna Humphries (Centre for Excellence in Child and Family Welfare, Victoria), Dr. Andrew Harvey (La Trobe University), Prof. Jacqueline Wilson (Federation University Australia), Ms. Pearl Goodwin-Burns (Federation University Australia), Ms. Naomi Tootell (La Trobe University)

This paper will outline findings from an independent evaluation of Raising Expectations, a collaborative Australian project between the Centre for Excellence in Child and Family Welfare, Federation University Australia and La Trobe University.

Supported for three years by the Sidney Myer Fund, Raising Expectations is a cross-sectoral capacity-building project to raise university awareness, access and success for care-experienced people.

The project involves university outreach to schools, in-reach activities on campus, training of carers and related staff, data collection, political advocacy, and ongoing research. Results of the project include a dramatic increase in care leaver enrolments across the two partner universities, from 43 students in 2016 to over 200 students in 2018.

The paper will outline major findings from the independent evaluation, including how the project:

- Delivered education and training strategies for carers, practitioners and educators, and created new guides and resources
- Extended its stakeholder reach across multiple sectors
- Targeted outreach to low socio-economic and flexible learning schools
- Embedded evidence-based academic, financial and personal supports for students
- Established care leaver data collection processes
- Influenced institutional, government, policy and research agendas.

Lessons for improvement will also be discussed, including the challenges of cross-sectoral work, scalability, and sustainability.
Residential Care as a Gardener, a Sculptor or More? Comparing Experiences of Two Young Women Leaving Care in Switzerland in the 1970s and 2010s

Friday, 5th October @ 16:15: Agency & Doing Transitions within and beyond Institutional Landscapes (Venue: D. Luís)

Mr. Samuel Keller (School of Social Work, Zurich University of Applied Sciences)

This presentation will start with a short reflection on the gardener and the sculptor as two well-known theoretical metaphors of education and growing up. On this basis I will ask for their different professional understanding of accompanying young people leaving care and how their implementation into practice would look like – with a specific focus on young women in care. Then I'll point out which concepts of becoming and being a woman we can find in narrative data about experiences of transitions out of care in the 1970s compared to experiences in the 2010s. The hypothesis of the presentation will be: in the disciplining residential care landscape of the 1970s in Switzerland the Child Welfare System was structured as a sculptor of dutiful and obedient young women. If this idea didn't work a stronger sculptor in the form of a more punishing or more controlling institution was needed – in and after care. On the other hand I wonder if I can identify in the 2010s concepts of gardeners which enable young women in and beyond transitions to shape their presence, future as well as their concepts of self, independency and a good life – thanks to or instead of existing landscapes.

To discuss those hypotheses in a critical way, two cases from two studies on experiences within intra- and interinstitutional processes of leaving care will be presented. To underline their generic status, I will contextualize them shortly in the historical different landscapes and research projects. The first interview is one of 37 narrative-biographical interviews with former placed children between 1950 and 1990 (Bombach et al. 2018). This young woman left care in the early 1970s. The second interview is one of 30 narrative interviews with young women living and leaving residential care for mothers and their children (Keller et al. 2017). She left care 3 years ago. Both represent relevant and also surprising results concerning empirically elaborated characteristics of transitions, of dependency, independency and “interdependency” (Mendes & Moslehuddin 2006) in and between different landscapes. To make the findings visible and discussable the presentation will come back to the metaphors at the end again by adding one more metaphor which was defined by the women themselves.

The project “TransCare. Transitions out of Residential and Foster Care” of the University of Luxembourg focuses on researching the achievement of agency in constellations of transitions. One part of the project sheds a light on former care leaver’s perspectives on their transition processes out of institutional care settings. Therefore, it looks at the experiences of young people themselves. The retrospective and biographical interviews with people who had left the care system, three to seven years ago, give us the opportunity to reconstruct different forms and patterns of transition.

On closer inspection, the analysis of the interviews reveals many disruptions, discontinuities, turning points and overlays in the trajectories of the young people already within the care system. There are multiple breaks that influence transitions in other systems, e.g. in the system of education. This leads to various challenges and uncertainties that respondents face. Moreover, in phases of transition specific constructions and changes of affiliation/belongings appear to be handled by the young people.

The biographical approach shows in which dimensions young people positioning themselves towards their own person and the institutional setting. It also illustrates in which ways the former care leavers experience themselves in various ways as agentic subjects in their transitions and which conditions and resources play a role in this process of leaving an institutional organized setting.

By contrasting the interviews, the reconstructive analysis reveals the relevance of belongings and social relations in leaving care processes. It is asking “how, in a context of increasingly fluid, unstable and mobile lives, young people build meaning through their connections with people and places over time” (Cuervo & Wyn 2017, p. 220) and how different ways and forms of agency are achieved during transition processes.
Transitions in Out-of-Home Care and Educational Success

Friday, 5th October @ 16:45: Agency & Doing Transitions within and beyond Institutional Landscapes (Venue: D. Luís)

Mr. Benjamin Strahl (University of Hildesheim)

Research in the area of out-of-home care regularly shows that young people in out-of-home care obtain on average lower school-leaving qualifications than their same-age peers. Despite the increasing number of research projects and publications on education of children and youths in care, the influence of out-of-home care interventions on educational careers and school-leaving qualifications is not definitely known. On the one hand, being in care seems not to be detrimental to educational outcomes, but on the other hand children and youths do also not appear to benefit academically from being in care. What is known is that overall a correlation between being in care and educational outcomes can be found, but this relationship is mediated by a number of individual, family and environmental risk factors (O’Higgins et al. 2015).

To investigate the influence of out-of-home care interventions on the education of children and youths, 17 autobiographic-narratives of care leavers in higher education are analyzed. It can be assumed that young people in out of home care can be distinguished from their peers not just by their adverse family background and the out-of-home care experience but also by the additional caused institutional transitions. Next to similarities which may lead to educational success the presented findings focus on the institutional landscape (schools, placement, youth welfare office etc.) in its meaning for the analyzed educational pathways.

Findings are that transitions and other events within specific institutional settings – like school, family or out-of-home care – affect other life domains and have impact on the education. Educational developments and institutional transitions therefor have to be seen as interconnected and cannot be understood without considering the overall context of biographical processes and transitions. Looking specifically for the influence of out-of-home care settings it appears that higher educational aspirations often are obstructed by structures, rules and guiding principles within the out-of-home care interventions. To improve the educational outcomes the educational agency of the children and youths should be supported within out-of-home care.
Growing Up in Kinship Care: Outcomes in Young Adulthood

Friday, 5th October @ 17:00: Agency & Doing Transitions within and beyond Institutional Landscapes (Venue: D. Luís)

Prof. Elaine Farmer (University of Bristol)

Objectives
Whilst much is known about the difficulties faced by young people leaving care, far less is known about how children in kinship care get on as they reach late teenage and early adulthood.

This study examined the experiences and outcomes of young adults who had lived, or continued to live, in kinship care and compared these with the progress of care leavers and their peers in the general population.

The study also considered the young people's experience of transition to independence.

Methods
This is one of the few studies to address these issues. It was funded by the Paul Hamlyn Foundation and undertaken by the NGO Grandparents Plus. The sample of young people was drawn from three Children's Services departments in England (42%) and from Grandparents Plus, through their support network, support groups (52%) and a peer support project (6%). The 53 young people interviewed were aged 16-26 and had lived in kinship care for at least two years; 26 were male and 27 female. In addition, 43 kinship carers were interviewed, of whom 38 had brought up one or more of the young people interviewed. (In 10 families two siblings were interviewed). Some standardised measures were used, including the General Health Questionnaire to determine the young people's psychosocial functioning.

Findings
The young people in the study had experienced similar levels of adversities as have children in care. Two thirds had been abused or neglected by their parents and 68% had experienced parental drugs or alcohol misuse. The young people had similar levels of mental health disorders (22%) as care leavers (25%) and also of learning difficulties (60% vs. 68%).

Their placements had generally provided stability and close relationships with the kinship carers (grandparents, aunts and uncles, older siblings or friends) and wider family. However, more than half of the carers had serious concerns about the harmful effects on young people of parental contact.

At interview, 55% of the young people were still living with their kinship carer and felt confident that they could remain there as long as they wished. Kinship care therefore often provides for extended transitions from home, as experienced by the young people in the community.

By the time of interview, 45% (24) of the young people had moved out of kinship care, 12 of whom had been under 18 at the time, (which is 23% of the whole sample). The carers generally provided considerable support during the young people's transition to independence and afterwards, but nonetheless these early leavers were at very high risk of poor outcomes.

Overall, the young people's outcomes were better than for young people in non-kinship care but not as good as in the general population. For example, 37% achieved the schools' national target of GCSE exam results (vs 12% of those in care and 59% in population); 16% had gone to university (vs 6% of care leavers and a third of their peers in the population); 28% of the young people were not in education, employment or training (NEET) (vs 41% of care leavers and 15% of their peers).

Conclusions
Young people appear to benefit from the stability of kinship care and being able to stay in the family as long as they wish. However, their high levels of need are not always recognised. More help is needed for young people in kinship care who have poor outcomes in multiple areas of their lives (poor educational progress, mental health difficulties, offending, being NEET), including the early leavers. The risk factors associated with poor outcomes will be discussed.
The CARE Program Model: A Principle-Based Model Focusing on Appropriate Developmental Relationships and Trauma-Informed Care

Friday, 5th October @ 16:15: Implementing and Sustaining Evidence Informed Program Models in Residential Settings: The Journey of the CARE Program Model (Venue: Infante)

Mrs. Martha Holden (Residential Child Care Project, Cornell University)

This abstract will discuss the six research-informed principles and the theory of change of the Children and Residential Experiences: Creating Conditions for Change (CARE) program model. CARE is designed to transform the setting of residential care. This setting-level model structures social sciences research findings into six basic practice principles that inform interpersonal interactions among adults and children as well as among adults. The six principles are:

**Relationship-based** - Positive developmental relationship experiences with caregivers help children form healthy internal working models of adult-child relationships and facilitates their engagement in other activities and interventions.

**Trauma-informed** – Traumatic experiences and past adversities influence children's programming needs as well as their abilities to successfully meet expectations and participate in activities.

**Developmentally focused** – Children's life trajectories improve when caregivers provide opportunities for normative developmental experiences and adapt their expectations to meet each child's unique needs.

**Family-involved** - Children benefit when caregivers understand and adapt to families' cultural norms and beliefs and promote active family involvement in the child's life.

**Competence-centered** - Opportunities for children to practice emotional regulation, problem solving, coping strategies, and other life skills, help them to develop greater self-efficacy, social competence, and capacity to manage life circumstances.

**Ecologically oriented** - Children's opportunities for positive growth and development increase by adapting key features of the physical and social environment to support their successful engagement.

By incorporating these 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 (Anglin, 2002; Li & Julian, 2012).

The model articulates a theory of change which outlines the causal pathways through which CARE is expected to improve children's social and emotional development (Holden, 2009; Holden, Anglin, Nunno, & Izzo, 2014). The theory of change aids in planning, targeting training and staff development, and evaluation and externalizes an agency's theories in use in order to promote congruence. The initial results of a multi-site quasi-experimental study with eleven agencies have shown CARE's potential for reducing aggressive behavioral incidents (Izzo, Smith, Holden, Norton-Barker, Nunno, & Sellers, 2016). A single case study using 12 years of administrative data and a time-series analysis shows significant level, variability, and trend differences from pre to post CARE implementation (Nunno, Smith, Martin & Butcher, 2016).
Building Developmental Relationships on Collective Experiences of Simple and Positive Interactions

Friday, 5th October @ 16:30: Implementing and Sustaining Evidence Informed Program Models in Residential Settings: The Journey of the CARE Program Model (Venue: Infante)

Mr. Anton Smith (Oak Hill Boys Ranch)

This session illustrates how Oak Hill Boys Ranch uses videos of appropriate developmental relationships and interactions for professional development, reflective practice, and learning.

Oak Hill Boys Ranch has worked within the philosophy and principles of Cornell University’s Children And Residential Experiences (CARE) program model since 2010. The CARE model is oriented to deliver services that create conditions for change in the “Best Interests of the Child” through the implementation of research-informed principles and practice standards. These standards and principles are developmentally and competency focused, relationship based, family-involved, trauma-informed and ecologically-oriented. Oak Hill gives every child opportunities for contribution & participation, caring relationships with adults, and high-expectation messages for learning. The Ranch serves approximately 36 children in therapeutic residential care and has 70 employees.

Through its work with Cornell University’s CARE consultant, Oak Hill Ranch learned of the work of Junlei Li and his colleagues. They proposed a hypothesis that appropriate developmental relationships constitute the active ingredient for effective interventions that serve at-risk youth. According to Li & Julian, 2012 these developmental relationships are characterized by attachment, reciprocity, progressive complexity, and balance of power, and are distinguished through simple interactions between an adult and a child. Developmental psychology has associated these developmental experiences as between one stable, consistent caregiver and one child.

Recent collaborative work at Oak Hill Boys Ranch has focused seeing and understanding the temporal relationships typical of the lived experiences between children and professional caregivers in the residential care setting. Through this work, we suggest that consistent and congruent simple interactions between adults and children that include components such as connection, reciprocity, inclusion, and opportunities for growth have a positive impact on youth development without necessarily having to result in enduring adult-child attachment relationships (Li & Winters, 2017).

While at Oak Hill, Li & Winters found that “these developmental experiences “collect” over the course of time and are supported by at least three strands of interactions:

- Repeated spontaneous dyadic and small-group adult-child interactions;
- Successive encounters between a youth with multiple staff that follow similar consistent CARE principles;
- Consistent presence of individual staff that offer multiple youth predictable pattern of positive interactions, even as healthy and meaningful individual variation remains authentic.

The presentation will illustrate video examples of these three strands of routine and spontaneous developmental interactions and experiences that characterize connectivity, reciprocity, inclusion, and opportunities for growth. This presentation is important because it provides a practical explanatory framework to support developmental and relationship-based residential interventions. It is congruent with the lived realities of residential care staff and children at Oak Hill. The collaborative reflection by Oak Hill leadership, CARE program
leaders, and Simple Interactions, summarized in a think piece by Li & Winters, 2017 explain, simple and collective interaction theory offer residential care “possibilities for developmental relationships as well as collective developmental experiences, and both are enhanced with the authentic developmental presence of the staff, materialized in simple but consistent developmental interactions embodying connection, reciprocity, inclusion, and opportunity to grow. CARE and Simple Interactions make explicit the importance of caring for both children and adults. For the quality of the “interactions” to improve meaningfully over time, both children and adults must be “well”. One of the distinguishing marks of Oak Hill is that the adults are generally “well”, and not exhausted and burnt-out.

References

Assumptions for Implementing an Evidence-Informed, Principle-Based Program Model

Friday, 5th October @ 16:45: Implementing and Sustaining Evidence Informed Program Models in Residential Settings: The Journey of the CARE Program Model (Venue: Infante)

Dr. Lisa McCabe (Residential Child Care Project, Cornell University)

Organizations that choose to implement CARE: Creating Conditions for Change, (Holden, 2009) commit to a three-year partnership with Cornell University's Residential Child Care Project. An implementation team consisting of agency executives, clinicians, supervisors, and care givers works collaboratively with university-based implementers and evaluators to monitor progress and outcomes, identify and resolve barriers, and build commitment across all levels of the organization.

Principle-based, non-prescriptive models, such as CARE, are implemented successfully and with fidelity when staff of youth and family service organizations develop a mindset congruent with those principles and are supported to apply those principles at all levels of the organization. (Anglin, 2002) In the same way, consultants who facilitate and support implementation must apply the principles in their interactions with the organization.

Objectives:

- Describe five assumptions that support an effective mindset for implementers, and
- Identify significant issues and trends through a qualitative review of the implementation process.

Method:
Research staff collaborated with implementers to review implementation reports for approximately fifty sites that have implemented CARE. Pivotal issues and themes were identified.

Results and Discussion:
The five assumptions are:

- The relationship between the Cornell team and the organization provides the foundation for implementation, and is based on the CARE principles, e.g., high expectation messages, respectful interactions, open and reflective dialogue, collaborative decision-making, and flexibility based on each agency's zone of proximal development.
- The CARE implementers are facilitators assisting organizations to realign/reallocate resources and priorities and develop an organizational climate and culture to support the CARE principles. The implementation team's role is to assist in the organization's struggle for congruence in the best interests of the children and families. (Anglin, 2002)
- Our task is not to 'fix' the organization, but to assist them in implementing the CARE principles. We build on strengths, and we do not assume that the organization is “sick” or “dysfunctional.”
- We are building capacity within the organization to implement and sustain the CARE program model in a manner that helps them achieve their mission. Every agency will implement CARE in a slightly different manner based on their mission, clients, and primary tasks.
- The leadership of the organization is in charge of the implementation; it is an agency-driven intervention. We work through the leadership of the organization and they make the decisions of how and when to act with our input. We are not there to tell agencies what they should do or should not do.

The importance of mindset development from a more basic technical, prescriptive, concrete, rule-focused, authoritative “socialized” mindset to a more “self-authoring mindset” (Kegan and Lahey, 2009) is critical for successful implementation of a principle-based program model. A reflective self-authoring mindset encourages...
staff to be self-aware, self-directed, comfortable with abstract concepts, and able to adapt to new and complex situations by applying the principles of the model. Following these assumptions helps insure that implementers model essential mindset development.

The CARE implementation model will be briefly reviewed in relationship to its application across the 50 sites. Common barriers and facilitators of implementation along with strategies for capitalizing on the facilitators and addressing the barriers will be highlighted.
Observing and Monitoring Collective Practice Change Using CARE’s Principle-Based Approach: Changing Technical Mindsets

Friday, 5th October @ 17:00: Implementing and Sustaining Evidence Informed Program Models in Residential Settings: The Journey of the CARE Program Model (Venue: Infante)

Mr. William Martin (Waterford Country School)

The objective of this abstract is to illustrate the collective staff practice changes that resulted from the implementation of CARE’s principle-based system (Holden, 2009) within the Waterford Country School’s (WCS) residential, shelter, school and foster care programs.

WCS is located in the northeastern section of the United States, where it has served children and families for over 90 years. The agency offers an array of services including residential treatment, temporary shelter care, therapeutic foster care, permanency placement services, special education services, and outpatient child mental health clinic services. Agency personnel consist of over 200 professionals, paraprofessionals, and foster parents serving 5- to 18-year-old boys and girls from diverse racial and ethnic backgrounds. Most children are placed because of issues regarding their parental care and supervision or their mental health issues. In 2008, WCS learned about the CARE program model during an analysis of its restraint frequency and injury patterns with Cornell consultants. After reviewing and determining that the CARE principles were congruent with Waterford’s own mission and values, the agency board and executive team decided to implement CARE with what they called “total unwavering commitment” through both Cornell’s technical assistance and a five-day professional education program focused on both organizational and staff behavior change. It is critically important that the organizational change be geared to providing a safe, consistent, coherent environment for staff, as well as children, to undertake the risks necessary to change their mindsets and behavior. In effect CARE asks organizational cultures and climates to challenge and support transformational learning for both staff and the children that are in their care. Research on the implementation of the CARE program model has revealed that adapting to the complexity of a residential care setting and being able to interpret a series of principles and theoretical perspectives “in the moment” requires, in most cases, a change of mindset on the part of the staff members (Anglin, 2012).

The presentation will illustrate this parallel and reciprocal mindset change through comparing pre-implementation practice examples with post-implementation practice examples that cover hiring practices, day-to-day school and group living routines, and crisis incidents commonly found in residential care. One particular salient example is how staff view and discuss children’s motivations and behaviors pre-post CARE implementation.

In conclusion, to achieve any kind of organizational transformation that leads to innovation, leadership needs to provide encouragement, support and developmental opportunities for staff members to move beyond a socialized mindset characterized by technical thinking to a self-authoring mindset that is more adaptive and creative. The highest order, which is optimal for leaders of complex organizations like residential care, is a self-transforming mindset within which managers and directors can be highly creative and offer sensitive support and guidance to workers at other levels of the agency (Kegan & Laskow Lahey, 2009).
The research suggests that most evidence based programs reach only a small proportion of those who would benefit (Neuhoff, Loomis and Ahmed, 2017). In the context of out of home care in Australia, where there are now over 50,000 children in out of home care, this is a pressing issue as there are a litany of reports, many produced as a result of public inquiries in each state and territory over the past decade, that indicate the outcomes for children and young people in care are poor; these children are experiencing disrupted attachments, multiple placements and poorer educational and health outcomes than their peers (Australian Institute of Health and Welfare, 2017; Commission for Children and Young People, 2015; Crime and Misconduct Commission, 2004; Townsend, 2007).

In response, Life Without Barriers, a national community services provider in Australia, has stepped up to the challenge of narrowing the ‘know-do’ gap by establishing a partnership with the Bronfenbrenner Centre for Translational Research at Cornell University. The aim is to work together to implement both the Therapeutic Crisis Intervention (TCI) system and the overarching organisational framework of the CARE: Creating Conditions for Change model (CARE) to improve outcomes for the more than 2,000 children we support in out of home care. The implementation plan focuses on an initial four year period, which commenced in the state of New South Wales in October 2015, with staged roll out nationally which is now well progressed across the other states.

Life Without Barriers decided to adopt an evidence based model because CARE aligns with the organisation’s values, purpose and strategic directions. A key implication of upscaling to a national level has been the need to establish national, state and local implementation teams and to develop a comprehensive communication strategy. Data from our baseline surveys will be used to highlight the data driven implementation process and our early learnings in relation to effective strategies to support implementation at all levels of the organisation.

The presentation will highlight the challenges of the scale of this national endeavour which involves hundreds of staff located in urban, regional and rural communities across Australia. This discussion will include the challenges of maintaining program fidelity, issues of resourcing and staff turnover. The added complexity of implementation within the context of other major reforms both in our organisation and the service systems in which we are embedded will also be highlighted. We will conclude with key reflections about the critical role of leadership at all levels of the organisation, the strong and responsive partnership formed between Life Without Barriers and the team from the Bronfenbrenner Centre for Translational Research, built on a shared vision for creating meaningful and sustainable change.
Every year, thousands of children at risk are referred to social services in Denmark. The referrals contain a variety of information concerning child well-being and municipalities handle the referrals in various ways. According to Danish law, the assessment of all referrals must take place within 24 hours, and immediate action must be taken if the child is in immediate danger and at risk of maltreatment or abuse. More than 95 % of referrals are assessed and categorized as non-acute. Subsequently, most referrals are not acute and it is up to the discretion of the individual caseworker or team of social workers to assess when and how to react to the referral.

A qualitative study of how four municipalities in Denmark handle referrals is the foundation of this presentation. The study shows that despite acting under the same legislation, these four municipalities handle and assess referrals very differently and this influences the assessment of referrals.

The presentation will focus on the following main differences between the municipalities handling of referrals:

1. **Categorization of referrals and the meaning of particular categories**
   
The four municipalities in this study have four different systems of categorization using numbers or letters to indicate the severity of the referral, which indicate the timeframe for action.

2. **The use of information from existing cases**
   
   In cases where a child has been the center of previous referrals, some municipalities look into former referrals or existing case material about the child, while other municipalities only look at the referral at hand.

3. **Dilemmas when categorizing a non-acute referral**
   
   One dilemma concerns the timeframe in cases where it is difficult to assess the severity. Another dilemma concerns the wish for collaboration with the family.

This presentation explores the consequences of the variation in practice in child protection services concerning categorization and assessment of referrals. How do the differences in categorization affect the handling of the child and the case? Do variations in categorization make a different as to when and what kind of assistance a child at risk receives? The data in this study show that the categorization makes a difference to the services provided and that it is important to include considerations the implications of how categorizations and municipal organization affects the services provided to children at risk.
The World Health Organization recently estimated that in Europe alone 117 million children suffer from maltreatment or other adverse childhood experiences. Many of those children are, among other things, placed in (24-h) settings for out-of-home care. However, a considerable number of children do not seem to benefit from the services provided as suggested by the number of children who experienced a placement breakdown. In addition, the costs of youth care services recently soared to the limits. Both issues resulted in urgent calls for reform of the youth care system. One of the main goals is reducing the use of (specialized) out-of-home care services, and simultaneously improve the quality of the remaining specialized 24-h care services. One way to increase the effectivity and efficiency of out-of-home care services is linking the baseline child and family characteristics of out-of-home placed children to children's development in the various 24-h settings. Such knowledge can both provide building blocks for the development sound of decision-making strategies for referral to a certain type of out-of-home care and provide insight into which child and family factors need additional treatment during placement. Together, this increases the likelihood that children for whom (temporary) out-of-home placement is inevitable will receive the most effective service with regard to their developmental needs.

A quasi-experimental follow-up study with a pretest-posttest design is conducted to explore the association between baseline child, family, and care characteristics and the psychosocial development of 121 school-aged Dutch children (M age = 8.78 years; SD = 2.34 years; 47% female; 59% Caucasian) during their first year of placement in foster care (FC), family-style group care (FGC), and residential care (RC). Potential baseline characteristics were collected from both literature data and the cross-sectional part of the study, and measured with standardized questionnaires and case file information. The outcome measure (degree of psychosocial development) was based on pretest and posttest ASEBA measurements of substitute caregivers, by calculating the reliable change index (RCI). Based on this, 58% of the children had favorable psychosocial development, with no significant differences across the settings. Results indicated that sets of baseline characteristics were able to distinguish different groups of favorably developing children as well as unfavorably developing children both in and across the three types of care; this was particularly evident for unfavorably developing children.

In the oral presentation, the baseline factors identified to be both univariately and multivariately significantly related to favorable or unfavorable child psychosocial development, and their practical implications, will be presented. In addition, three fundamental steps to transform the current practice of out-of-home care services to the use of a more collaborative, effective, and matched-care model are discussed.
The balance between interventions in acute situations as opposed to supportive and preventive work with families, is a key topic in child welfare research and practice. In Sweden there is a current debate on the capacity of the family service-oriented system to protect maltreated children. Emergency out of home placements without parents’ consent (EP) is the measure that most forcefully intervenes in the family sphere and the intervention used when children live in acute situations of child abuse and neglect. Despite this, research on EP is scarce both internationally and in a Swedish context. Annually, about 1200 Swedish children are placed in care on basis of EP, due to abuse or neglect. These cases constitute a fraction of children in out of home care, but they represent the societal view on what constitute non-acceptable threats to children’s safety and wellbeing in acute situations. Decisions on EP are made by local child protection authorities but are followed by a juridical process in a regional court. EP can be described as the core of child protection in the Swedish child welfare system, which generally is built on a family service ideology with focus on supportive measures.

The aim of this study is to analyze what constitutes and motivates decisions when children are placed in emergency care without parents’ consent due to abuse and neglect. The following questions guide the study: (i) What kinds of problems in the families motivate coercive placements started as EPs? (ii) How are questions of risk and prognosis handled in the court’s judgements? (iii) To what degree and how do children’s views appear in the judgements?

Empirically the study is based on 207 judgements from three regional courts covering 293 children: Age: 0-6 (45%); 7-12 (32%); 13-20 (23%), Gender: Girls 57 %. The judgements build on written investigations by child protection authorities and oral accounts during the court hearings. Children and parents have different legal representatives at the hearings.

Analytically the study relates (i) to research on different child welfare models and their effect on social work with children and families, (ii) the conflict area of parental rights vs children’s needs of protection, (iii) the position of long term risk assessment vs short term protection of children and (iv) children’s agency in the child protection system.

The results point at high levels of violence in the families. In more than half of the cases children have been victims of violence or have witnessed violence, more than 40 % is subject to neglect, while sexual abuse amounts to around 4 %. Honor-related problems appear in about 15 % of the cases. As for the parents, around one quarter have mental health problems and close to one third have problems related to substance abuse.

The text analysis shows that long term risk assessments are rarely presented by the courts. Instead judgements build on descriptions and evaluations of current conditions, with a focus on circumstances that lead to EP. In about 40 % of the cases the views of the child are clearly described and taken into account, but obviously this depends on age. Some of the older children articulate a strong will to be taken into care, which seems to have impact on the judgements of the courts. The judgements analysed represent genuine social work dilemmas in child protection: Descriptions of every day conditions as such vs. research based analysis of (long-term) risk and the complexity in using children's accounts as basis for risk assessment. Children's accounts may change over time and sometimes include contradictory statements. Listening to the child is a strong - maybe oversimplified - normative imperative.
A Methodology for Understanding Foster Care Pathways in State Agencies

Friday, 5th October @ 17:00: Assessment and Care Placements (Venue: Miragaia)

Dr. Michael Tanana (University of Utah), Dr. Mindy Vanderloo (University of Utah), Ms. Vanessa Amburgey (State of Utah)

In 2015 approximately 3.4 million children in the United States (US) were involved in a child welfare investigation or received an alternative response for suspected child maltreatment [U.S. Department of Health and Human Services (USDHHS), 2017]. Of these youth, over 1.2 million received ongoing child welfare services, and over 200,000 children were placed into foster care. While in care, researchers have estimated up to 80% of child experience mental and physical health problems (Bellamy, Gopalan, & Traube, 2010). It is also well documented that children who are placed into foster care have more adverse experiences as adults than the general population. This includes involvement in criminal justice systems, high rates of substance abuse, poor educational and employment outcomes, and more mental health problems (Gypen, Vanderfaeillie, De Maeyer, Belenger, & Van Holen, 2017). Adults who were involved in the foster care system suffer physical health problems that interfere with daily functioning in much higher rates than the general population (Villegas, Rosenthal, O’Brien, & Pecora, 2011; Zlotnick, Tam, & Soman, 2012). Some have estimated that as many as 44% of youth formerly in the foster care system have serious health problems (Barth, 1999).

Given this overwhelming evidence that youth in the child welfare system incur long-term adverse impacts, it is incumbent upon state agencies to understand the systemic factors that lead to longer stays in foster care and non-permanent child outcomes. This presentation will demonstrate a novel methodology for analyzing how different profiles of child welfare cases move through a single state child welfare system. Using bayesian random effects models combined with data visualization, we present a method to help individual agencies answer the question of what types of youth have the longest stays in foster care and the lowest rates of permanent placements. In addition, this process analyzes which types of families and youth have the highest risk of entering foster care. The emphasis of this project is to develop a method for helping states reduce their use of foster care and improve outcomes for youth by taking a holistic look at their system. We will discuss how other states and agencies can replicate this methodology. This presentation will also discuss the agency implication for using this type of information in the development of policy.
Implementation Findings from a Housing and Child Welfare Cross-System Collaboration

Friday, 5th October @ 16:15: Building Collaborative Relationships in the Child Welfare System (Venue: Ribeira II)

Dr. Bridgette Lery (San Francisco Human Services Agency), Ms. Jennifer Haight (Chapin Hall at the University of Chicago)

Objectives: In 2012, the U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Children's Bureau funded five sites nationally to design, implement, and evaluate permanent housing models for homeless, child welfare involved families. This paper presents implementation findings after the five-year demonstration project in one site. A focus of San Francisco, California's (randomized controlled trial) design was to deliver housing and support services rapidly – no small task for bureaucratic systems not designed to work together.

Method: Imbedding continuous quality improvement habits into implementation was intended to assure quality data, data sharing, and the regular use of that data evidence to chart the progress of program goals, including the development of cross-system collaboration. This paper describes how these three dimensions of data allowed evaluators to assess the extent to which this complex intervention was implemented with enough fidelity to expect its ambitious outcomes to be realized.

Results: The first dimension addresses data quality by describing how case management data was developed and used. Measuring how time was spent relative to client needs as indicated by a repeated measures adult assessment revealed that families tend to use the most case management early, and by ten months families with children in foster care use much less case management compared to families whose children reside in-home. Differentiating families by important characteristics like case status has informed the program model and sustainability planning.

The second dimension addresses data sharing through the process of assessing children's mental health needs using a repeated measures child assessment, which are administered by a partner agency. Over half of children were not yet assessed two months after a child welfare case opening, and 18% were not assessed by nine months. However, children who enrolled in the program later in the experiment were assessed at a faster rate, suggesting system improvements over time.

The final dimension addresses data use by proposing a new framework that treats cross-systems collaboration as an outcome. Collaborating across systems can measurably increase service use and improve outcomes for families with complex needs. The framework recognizes the developmental sequelae implied in successful collaboration and investigates how the ingredients that characterize it are generated.

Conclusions: Together, the implementation evaluation findings demonstrate that this intervention required multiple systems to act cooperatively in order to effectively serve families with multiple needs. Their improved outcomes relied on successful cross-system collaboration. Neither of those goals could be accomplished without a structure that relied on the development and use of data evidence. Implications for these implementation results for the impact evaluation on child welfare and family well-being outcomes will be briefly discussed.
Between 75,000 and 116,000 families in the Netherlands suffer from problems in more than one area of life including housing, parenting, finances, personal development and relationships. In addition to these problems, families typically experience problems with social services (Bodden et al., 2016; Tausendfreund et al., 2016). Thus, the burden on these families is high, as is the public cost to support them.

Community-based social workers play an important role in helping these families to deal with these diverse, multiple, interrelated and often intergenerational problems. Providing effective services to these families is crucial but complex. Social workers indicate that effective collaboration –with clients, their family members and other professionals – is crucial. However, such collaboration is not easy to achieve. Both research as well as clinical experience has shown that defective collaboration can have major consequences for effective support. Reflecting on their daily practice, social workers suggest that specific professional behavior is needed to realize effective collaboration and services for multi-problem families.

In 2016, the Key Factors in Youth Care research group of HAN University of applied sciences, started a qualitative study to explore the behavioral indicators of this effective collaboration. The method that was used is Stimulated Recall Interviews. Six community-based social workers in three different municipalities in the Netherlands were followed intensively in their collaborative relationships with families, families’ social network and other professionals providing services to these families. In total, 20 sessions of these different collaborative relationships were recorded on video. These complete sessions were watched and so called critical fragments of these recordings were selected. Criteria for this selection were situations where the collaborative relationship shifted. These selected fragments were presented separately both to the social worker and the other partner(s) of the collaborative relationship in an interview, in order to reflect upon the collaboration of the social worker in the video fragments. In total 37 of these Stimulated Recall Interviews were conducted.

In this presentation we will present the results of this study and the theoretical model that was developed based on the data, which was then validated by means of focus groups with social workers and experts. The theoretical model describes the characteristics and behavioral indicators in daily practices of social workers in different settings. The model distinguishes different aspects of the collaborative relationships in support of families with multi-problems, including sharing experiences (telling), clarifying the issues together (analyzing) and setting goals and making plans together to deal with problems (organizing). A condition for consensus is that partners in the collaborative relationship experience alliance, alignment and accountability. This theoretical model contributes to knowledge both on scientific and practical level, by conceptualizing which characteristics in collaborative relationships of social workers advance support to families with multi-problems.
Supervisory Alliance: Key to Positive Alliances and Outcomes in Home-Based Parenting Support?

Friday, 5th October @ 16:45: Building Collaborative Relationships in the Child Welfare System (Venue: Ribeira II)

Ms. Marieke De Greef (HAN University of Applied Sciences, Radboud University), Dr. Marc J. M. H. Delsing (Praktikon), Dr. Bryce D. McLeod (Virginia Commonwealth University), Dr. Haub M. Pijnenburg (Praktikon, Radboud University, HAN University of Applied Sciences), Prof. Ron H. J. Scholte (Praktikon, Radboud University), Ms. Judith Van Vugt (Combinatie Jeugdzorg), Dr. Marion J. C. Van Hattum (HAN University of Applied Sciences)

In mental health care, the alliance between professionals and their supervisor (hereafter: supervisory alliance) is viewed as a key element of supervision that helps to optimize the client-professional alliance (hereafter: alliance) and client outcomes (e.g., Lewis, Scott, & Hendricks, 2014; Watkins, 2014). Defined as a collaborative relationship involving a positive emotional bond and agreement on supervision goals and tasks (Bordin, 1983; Pearce, Beinart, Clohessy, & Cooper, 2013; Watkins, 2014), a small number of theoretical (Watkins, 2014) and empirical (DePue, Lambie, Liu, & Gonzalez, 2016; Palomo, Beinart, & Cooper, 2010) studies suggest that the supervisory alliance may impact the alliance and outcomes in adult treatment. While it is possible that the supervisory alliance may play an important role in other service sectors such as youth care, empirical studies have not yet investigated these hypotheses.

A strong and supportive supervisory alliance might be particularly important for youth care professionals as they work in a challenging context. Youth care professionals provide services to families with difficulties related to parenting or child development, oftentimes including goals of family preservation or reunification (Anglin, 1999; Barth et al., 2005; White, 2007). Professionals typically encounter a heterogeneous client population in terms of motivation to participate in services (McWey, Holtrop, Stevenson Wojciak, & Claridge, 2015; Staudt, 2007) and clinical characteristics (McWey et al., 2015; Whittaker & Cowley, 2012). Often, the families treated by the professionals face multiple, complex, and interrelated problems (Bodden & Dekovic, 2016). Additionally, youth care professionals encounter productivity and paperwork demands (Horwath, 2016; Mor Barak et al., 2009). A strong supervisory alliance may thus be crucial for professionals to deal with these challenges and to realize strong alliances and positive care outcomes (Mor Barak et al., 2009; Williams & Glisson, 2014). Therefore, this study examined effects of the supervisory alliance on the parent-professional alliance and outcomes of home-based parenting support, the most common type of service provided in youth care. Multi-informant self-report supervisory alliance, alliance, and outcome data from 124 parents collected early and late in care were analyzed using structural equation modeling. Results demonstrated that a stronger supervisory alliance was related to a stronger alliance early in care when both were professional-reported. A stronger supervisory alliance reported by professionals predicted higher levels of parent- and professional-reported satisfaction with care. A stronger supervisory alliance reported by supervisors predicted parent-reported improvement in parent functioning, and higher levels of professional-reported satisfaction with care. Finally, effects of professional-reported supervisory alliance on professional-reported satisfaction with care were mediated through higher levels of professional-reported alliance. Together, our findings suggest that a strong supervisory alliance may relate to strong alliances and contribute to positive outcomes of home-based parenting support. Future research is needed to help identify factors that contribute to strong supervisory alliances and explain linkages between the supervisory alliance, the alliance, and outcomes.

In this presentation, following a brief introduction of the study design, we will present the results of this study. In conclusion, we invite 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 supervisory alliance in optimiz-
ing parent-professional alliances and client outcomes for families involved in youth care services.
A Golden Thread? The Relationship between Supervision, Practice and Parental Engagement in Child and Family Social Work

Friday, 5th October @ 17:00: Building Collaborative Relationships in the Child Welfare System (Venue: Ribeira II)

Ms. Amy Lynch (University of Bedfordshire), Dr. David Wilkins (Cardiff University)

Introduction

Within the social work profession, supervision is highly valued and there is a widespread belief that good supervision is linked to quality of service and better outcomes for service users (Kettle, 2015). Yet most of the research about supervision has focussed on the impact it has on workers, rather than how it helps children and families (Carpenter et al, 2013).

A recent Delphi study of international supervision experts called for a shift away from self-report methods, towards more empirical studies (Beddoe et al, 2016) and since then there has been a growing trend in this direction (Bostock et al, 2017). In this presentation, we report on an empirical research study involving paired observations of group supervision discussions and social work home visits, followed by interviews with family members.

Our three research questions were:

• What happens in group supervision?
• How does supervision relate to what happens in family home visits?
• How does supervision relate to families’ experience of the service?

Method

The study took place in the children’s services department of a local authority in the south of England in 2017. It was funded by the local authority as part of a project to explore and evaluate their newly introduced model of practice.

The mixed-methods design included:

• semi-structured interviews with the allocated worker (n=22)
• observations and audio-recordings of group supervision case discussions (n=22)
• observations and audio-recordings of a social work home visit with the family (n=21)
• semi-structured interviews with one or more family members (n=17)

The audio recordings of supervision and home visits were analysed by a team of researchers using two bespoke coding frameworks focussing on the demonstration of a number of key skills. These analyses were conducted independently by researchers who were not otherwise involved with the project. Coding and interview data were analysed descriptively, statistically and thematically using SPSS and NVivo databases.

Results

Considering each data set separately, we found a range of skill levels in supervision and in home visits and generally positive feedback from families. Quantitative analysis of the datasets revealed a link between certain elements of supervision, attributes of practice and aspects of parental experience. Qualitative analysis identified some key features of more helpful supervision and practice that may be important for creating positive experiences and better outcomes for families.

Conclusion
Understanding how good supervision supports practice and improves families’ experience of the service is a complicated task. In this study, we identified a golden-thread between supervision (organised around practice), improved practice skills and aspects of positive family experiences, including early engagement measures. By moving beyond its role in helping workers, and focussing on the impact good supervision has for families, we hope to contribute to the developing debate about the effectiveness of supervision in the context of child and family social work in England.
Interdisciplinary Cooperation in the Field of Measure, Means and Method: A Quick Fix in Professional Assignments

Friday, 5th October @ 17:15: Building Collaborative Relationships in the Child Welfare System (Venue: Ribeira II)

Mrs. Birgitte Theilmann (AAU Aalborg University)

In Denmark as in other European countries there is considerable political attention to key concepts like preventive work and early detection in relation to vulnerable children and young people. There is an implicit political assumption that preventive work and early detection reduce both the number of children being in vulnerable life circumstances and the level of their vulnerability. The professional frontline workers are key figures in this assignment as the interdisciplinary cooperation between different professional groups is highlighted as a confusion of measure, means and method in problem solving.

The objective of this paper is to discuss the implications of the interdisciplinary cooperation between four different groups of professionals (teachers, preschool teachers, social workers and nurses) in relation to both the nature of the cooperation and the consequences on the vulnerable children and young people as the confusion of measure, means and method and who is doing what under which circumstances seem to create competitive perspectives and logics in the assignment between the four groups of professionals.

My case is based on the implementation of a developmental strategy (interdisciplinary cooperation is a key concept in the strategy) in a large Danish municipality with 4500 employees. All employees from the political administrative level, through the professional management level and to the level of the frontline workers are all directly or indirectly professionally engaged in perspectives on vulnerable children and the young people. The study is a mixed methods study, including a pre-study with 9 administrative managers, followed by two surveys (January 2017 – 3000 respondents and February 2018 – 2800 respondents) and combined with 33 qualitative interviews (15 individual and semi structured interviews and 18 focus group interviews).

Findings based on qualitative interviews with the political and administrative management show that interdisciplinary cooperation is a matter related to the frontline workers. The management level expects the development of the interdisciplinary cooperation to occur in existing forums and without further skill acquisitions. It looks like the responsibility for the cooperation is pushed over to the employees.

Preliminary findings based on interviews with the frontline workers and the surveys show that the frontline workers experience quite a number of barriers in the interdisciplinary cooperation. The four groups of professionals all express lacking knowledge about each other’s work fields. They point to some kind of professional conformity or intertia that prevent new perspectives to develop. It looks like there is a kind of professional hierarchy within the four groups of professions, which is characterized by conflict of interests and lack of understandings that leads to a protection of one´s own profession rather than exploring new perspectives that accommodates vulnerable children and young people.

I argue that interdisciplinary cooperation as a prerequisite for preventive work and early detection in relation to vulnerable children and young people is challenged by organizational conditions that for the frontline workers - conditions that lead to a protection and high lightening of one´s own profession at the expense of other professions. By exposing interdisciplinary cooperation in confusion of measure, means and method it becomes
unclear for the employees exactly what the task is and how to act under certain circumstances. The initial goal of making preventive work and early detection in relation to vulnerable children and young people become a byproduct. Interdisciplinary cooperation is not a quick fix in professional assignment.
Learning Together while Doing What Works: A New Viewpoint on Evidence-Based Practice in Care and Welfare of Children and Families

Dr. Wim Gorissen (Netherlands Youth Institute), Dr. Germie VandenBerg (Netherlands Youth Institute), Prof. Tom Van Yperen (University of Groningen)

The Netherlands have seen a major shift in responsibilities in the youth field from the provinces and health insurance companies towards municipalities; in 2015. That led to a shift in attitude towards evidence-based practice in the youth field. Local governments were not convinced the ‘old’ knowledge, that was developed on a national level, was applicable to their local challenges. In the meantime a broader criticism arose about the limitations of the evidence-based approach, which had fallen prey to domination by science.

The Netherlands Youth Institute accepted the challenge and formed a think thank to re-address the connection between research, practice and policy. We started by going back to the original core-idea of evidence-based practice: the connection between three types of knowledge: scientific knowledge, practitioners’ knowledge and clients experiences and preferences. In that connection, evidence-based practice is practised on two levels: guideline formulation and everyday clinical practice.

To adress the need for new solutions in local municipal settings, we connected a learning cycle with the use of the three types of knowledge. We called that ‘Learning Together while Doing What Works’. This implies a dual standard: a) learning and developing together: a continuing movement is necessary to prevent and tackle problems better; and b) doing what works: knowledge on what works in policy, purchasing, prevention, support and treatment must be used.

This dual standard is operationalised in four core questions which clients/civilians, professionals, institutions and municipalities can ask themselves and each other.
1. What do we know about the problem and its roots?
Both in terms of what we know about the problem (social problem, client problem, diagnosis) as well as in terms of what we know about the objective of an approach or intervention (treatment objectives, innovation objectives, policy objectives).

2. What do we know about what works?
Effectivity of interventions, as well as effective elements that can be used to develop new approaches and interventions. Also general key factors (e.g. alliance), protective factors and risk factors have to be considered.

3. Do we do what works?
Using knowledge on effective or well founded interventions, guidelines and methods (including effective policies and purchasing processes); as well as being able to substantiate that a newly developed approach will work based on existing knowledge.

4. Do we learn while working?
Do we monitor the outcomes of policy or practice, do we reflect on the outcomes and do we use that to adjust policy or practice and contribute to the body of knowledge?
In the presentation we will present a graphical model that is helpful in working with this new viewpoint on ‘learning together while doing what works’.
Toward Evidence Based Practice in Adolescent Residential Treatment: Experiences of Integrating Dialectical Behaviour Therapy

Friday, 5th October @ 16:30: Evidence-Based Practices (Venue: S. João)

Ms. Bethany Good (University of Toronto), Ms. Patricia Chehowy (Sickkids Centre For Community Mental Health), Ms. Elizabeth Lovrics (Sickkids Centre For Community Mental Health), Dr. Helen O’Halpin (Sickkids Centre For Community Mental Health), Ms. Catherine McCabe (Sickkids Centre For Community Mental Health), Ms. Norma Quee (Sickkids Centre For Community Mental Health)

Background:
Residential treatment is often referred to as the intervention of last resort for high-risk youth. The degree of intrusiveness and restriction associated with residential treatment is at odds with the trend toward community integration and client and family centered practice models. Additionally, residential treatment is under scrutiny to become cost effective, evidence based (EB), and demonstrate permanent positive outcomes. Programs have begun to adopt EB models that address some of the most challenging clinical problems. This presentation will highlight the implementation steps and challenges encountered by one agency as they integrated a Dialectical Behaviour Therapy (DBT) informed model into two adolescent residential treatment programs one rural and one urban.

The Challenge:
While interventions that permit youth to remain in their community homes are preferred, a sub-group of youth require long-term supervised residential care. Youth in residential treatment are a heterogeneous group who present with psychiatric problems including anxiety, mood, psychotic, and eating disorders. Some youth have co-morbid neurodevelopmental disorders such as ADHD, learning disabilities and autism spectrum disorders. The diversity of problems among youth in residential treatment poses difficulties in implementing an inclusive EB treatment model.

Despite the diversity of problems, some common characteristics identified among many in this population, include history of trauma, exposure to violence, significant loss often resulting in complicated attachment. Difficulties with emotion regulation, a capacity to self-sooth as well as long standing challenges with interpersonal relationships with peers and adults are often associated.

Intervention Model:
DBT is an EB treatment approach introduced by Marsha Linehan in the early 1990’s, originally developed to treat adults with borderline personality disorder, presenting with para-suicidal and suicidal behaviours. Over the past two decades, DBT has been adapted and found effective in working with an array of populations, including adolescents with both internalizing and externalizing behaviours.

DBT belongs to the third wave of behavioural interventions. The first applying behavioural approaches to clinical problems, the second emphasizing a focus on cognition and changing problematic thoughts. The third wave reemphasizes behavioural techniques such as functional analysis and skill building, but focuses on context of cognition rather than content. The inclusion of mindfulness, dialectics and acceptance support clients to accept thoughts and emotions as personal and not literal truths. Through validation, the goal of DBT is to target client’s relationship to thoughts and emotions rather than changing them, resulting in a flexibility associated with both dialectics and mindfulness. DBT has been incorporated into youth, and parent skills groups, family and individual therapy as well as educational and recreational programming within residential and day treatment programs, but these changes come with implications to program operation, service provision and broader systemic policy.

Presentation Focus:
This presentation will outline the steps taken to integrate a DBT informed model into two Canadian adolescent residential treatment settings (one rural and one urban). The step-by-step process will be discussed beginning with, administrative buy in, funding, research, and training of staff. A description and explanation of the gradual integration within all domains the treatment program such as youth and parent group therapy(s), recreation and community based activities; individual and family therapy will be provided. The value and significance of collaboration with both international DBT experts as well as with local non-profit parent run organizations will be highlighted. Additionally, strategies taken to traverse obstacles such as staff retention/by-in, change in profile of youth eligible for services, and the resulting impact on the larger systems such as child welfare and community mental health will be discussed. Initial and ongoing methods of evaluation and outcomes measures being conducted in collaboration with academics, neuroscientists and agency program evaluation services will also be shared.
Beyond Competence: Fostering Professional Excellence with the Pro-CARE Model

Friday, 5th October @ 16:45: Evidence-Based Practices (Venue: S. João)

Dr. Huub M. Pijnenburg (Praktikon/Radboud University, and HAN University of Applied Sciences)

When it comes to fostering excellence in effective service delivery to children and families (‘youth care’ for short), possibly our greatest challenge is to promote a more deliberate, evidence-informed practice, and continuous (self)-monitoring based training and learning by and between social professionals. This begs the question: what are effective strategies and tools to foster such professionalisation?

Starting from the premise that nothing is as practical as a good theory, this EUSARF 2018 presentation focuses on the question: what might such a (evidence informed) theoretical frame for deliberate practice look like? And equally importantly: can such an model inform, if not inspire (future) social professionals?

In the context of the invited symposium ‘Translational Research: a collaborative model for practitioners and researchers’ at EUSARF 2016 (chair: prof. Anglin) key lessons from the ‘Stronger Together’ program were presented. The theoretical underpinning of this Dutch program is the Integrative Change Factors in Youth Care model (Pijnenburg, 2010; Pijnenburg & Van Hattum, 2016). This conceptual frame, now inducted in the digital Dutch and Flemish Social Work Canons, features a wide variety of change-associated factors. They are positioned at one of three levels: micro (client-professional cooperation), meso (organisational practice and collaboration), or macro (policy, training, evidence, media), which impact the effectiveness of services for children and families. Considering its ambition to capture all relevant elements at these various levels, inevitably this model is complex. It may therefore come as no surprise that students, and even professionals, experience the ICF-model as rather overwhelming - to the point of being discouraging. This feedback in the wake of EUSARF 2016 challenged us to rework the model into a basic, elegant yet valid, and inspirational professional tool for deliberate practice development.

Fuelled by theoretical developments in the medical field, grounded in empirical research (particularly: the CanMeds medical expert model), we have transformed our comprehensive ICFYC model into a hopefully more appealing, basic conceptual model: the Pro-CARE frame. Its aim is threefold: to provide a normative backbone for initial and advanced professional training programs, to promote client-oriented and evidence-informed service delivery, and – in the longer run - disciplinary jurisdiction: evaluation of professional and organisational conduct that clients call into question.

Work on this conceptual Pro-CARE frame was encouraged by an invitational address at the 2017 ‘Alliance and other key factors in youth care’ Conference, hosted by Dutch care research fund Zonmw. At EUSARF 2018 the Pro-CARE frame takes centre stage. Following an introduction of its background and (eight) basic components, the frame’s potential for initial and advanced training and education of social professionals will be discussed, along with its ambition to synthesize client values, clinical expertise and research evidence on specific and common factors/elements contributing to effective delivery of care and support. As such the Pro-CARE frame seeks to promote dialogue between the hitherto often uncompromising factions of practitioners and researchers who are either convinced that only a focus on specific factors (interventions), or only on common (intervention non-specific) factors, will result in improved outcomes of social service delivery to youth and families in need.
Introduction:
It is always a crucial question if theory could serve in an appropriate way the interest of practice.
Following Kurt Lewin's statement – “There is nothing more practical than a good theory” – I will present a
matrix-style framework to synthetize theoretical and practical approaches.

Objectives:
For this I will demonstrate that the claims of Niklas Luhmann's system theories (ST) and the Participation Theory
of Communication (PTC) are able to be linked to each other, and further, it is possible to link them into the
practice actor's actions. I will offer a frame wherein any interaction or connection between any levels of the
Child and Youth Care (CYC) processes can be interpreted in a mutual conceptual meaning, which is able to
support the area's future developments.

Methods:
By linking the concepts of ST and PTC, I describe in a comprehensible way how the systems affect each other.
The core concept of this “applied bridge model of theory and practice” is that every level and actors of CYC
processes can be identified as independent, separated systems from their environment – from the other systems
–, but the processes of these systems result in information which can influence other systems. The dynamism
of this influential effect is understandable by taking communication as participation (PTC). It means that the
information what the systems have from each other can become part of their “preparedness” – they can take
part in terms of PTC, from its meaning. This “preparedness” is their ability to recognize a change in their status
quo and eliminate the possible difference between the new situation and a wished future status.

This approach can be useful on any level, from the psychological systems of the “subjective” – children and
their families, professionals of CYC –, through the organizational systems to the abstract level description of
CYC's theoretical and practical models. In addition, using this model, the “extra-system level” of the systems
effects can be detected too, such as the upshots e.g. a political or economic change.

Results:
This presentation draws up the theoretical frame of this “applied bridge model”, but with the aim of prepare
and serve many further empirical research as follows.
By exploring the nature of these effects, we can describe and understand better what blocks the professionals'
and the organizations' efficiency, and build on it, we can reengineer, precise the methods and processes with
the aim of increasing our efficacy. In other words, we can analyze both up-down and bottom up processes, and
due to its better understanding, we could avoid their dangers or negative effects.
Furthermore, if we take the elements of these effects as points that need to parametrize – such as the details of
legacy rules which defines the conditions if a family need legal intervention –, the model can serve international
comparative empirical studies.

Conclusions:
By using it in academic research, we shall provide more sophisticated results from qualitative findings, and turn
them back into practice level in a more convenient way, like developing linguistic techniques – for decrease the
distance of the gap between theory and practice.
I believe that, by involving more theoretical statements – such as ST and PTC – to the interpretation of CYC, it
can add a support also to the forces what we are doing as struggle for increase the rank of CYC, and for near the
acceptance of its right to become an individual science and profession.
Community-Based Parenting and Family Support: Incredible Years Program and the Parental Sense of Competency

Friday, 5th October @ 16:15: Family Support and Parenting Interventions (Venue: Ribeira I)

Prof. Isabel Silva (Grupo Aprender em Festa (NGO)), Prof. Maria Filomena Gaspar (Faculty of Psychology and Educational Sciences, University of Coimbra)

Objective

Community-based parenting interventions designed for families help to increased knowledge and skills among parents. The Incredible Years (IY) parenting intervention is a social learning theory-based program for improving children’s behavior and emotional well-being, improving the parent-child relationship, and reducing harsh and abusive parenting practices (Webster-Stratton & McCoy, 2015). Extensive research, across multiple countries and settings, suggests Incredible Years efficacy and effectiveness in a variety of functions for parents in their parenting role, including buffering stress, providing models for appropriate and positive parenting behavior, enhancing access to resources and information, and providing emotional and group support. The present study investigates the parental sense of competency and overall satisfaction with the program reported by the parents as a result of attending to the IY Basic parenting training in a community setting.

Method

The study sample consisted of two groups of 10–12 parents who participated in IY parenting training from 2015 to 2017. The participant families were from a rural area with social and economic disadvantages, some of them struggling on a low-income and were the access to services and support on families issues can be a challenge due to lack of public transportation. A 14-week intervention was delivered weekly in two-hour sessions, by certified IY group leaders. The sequence of topics addressed in the sessions included parent–child play, praise, incentives, limit-setting, problem-solving and discipline. Video clips were used to illustrate different strategies parents use to manage children behavior. Parents were encouraged to discuss their children’s behavior and role plays were used to find solutions and practice skills for managing their child. Each week parents practice tasks at home. Assessments regarding the parental sense of competency took place at two moments, pre and post intervention. The Parent Sense of Competence scale (Johnston & Mash, 1989), a seventeen items, subscales measure efficacy and satisfaction in parenting was used to collect data. At the end of the intervention an overall satisfaction questionnaire was delivered. Results A quantitative approach was used to analyzed data suggesting improvements in perceived parental efficacy and satisfaction. Overall satisfaction with the training and parental efficacy were also related. Conclusion The study intends to demonstrate the importance of directly targeting parental sense of competence in the context of community prevention to promote safe family environments and children’s healthy development. Practice implications are discussed.

Key-words: community-based interventions; incredible years program; parenting sense of competence; prevention
Is the Parent Training Program Incredible Years Predictive of Case Closure in Child Protection Services for Neglect? Does the Fidelity of its Implementation Influence its Effectiveness?

Friday, 5th October @ 16:30: Family Support and Parenting Interventions (Venue: Ribeira I)

Many challenges emerge when it comes to evaluating the effectiveness of child welfare programs. This study offers an interesting and realistic example of a program evaluation using clinical administrative data.

**Purpose**

Each year, in Canada, 4.8 children out of 1000 are victims of child neglect (CN). Since parenting practices are often deteriorated in such context, parents involved with child protective services (CPS) are frequently offered/ordered to participate in parent-training programs (PTP). PTP aim to improve parenting practices to ultimately end the maltreatment and prevent its recidivism.

This study aims to evaluate if participation to the PTP Incredible Years (IY), implemented in a child welfare agency in Montreal since 2003, have an influence on the probability of case closure in CPS. The study also describes fidelity of implementation of IY and evaluates the influence of fidelity on the effectiveness of the program.

**Method**

Data comes from the clinical administrative database of the child protection agency. Effectiveness of IY is assessed for the 299 children followed by CPS for CN whose parents have participated in IY between 2007 and 2015. Control group consist of 299 children followed by CPS for CN whose parent have not participated in IY. Control subjects were matched with IY subjects using the propensity score method, which improves de comparability of groups by reducing selection bias. Cox proportional hazards regression models (with IY as a time-dependent covariate) are used to compare both groups on the probability of case closure in CPS.

Fidelity of implementation of IY is described for 38 groups based on four components: dosage (number of session offered), adherence (methods delivery by facilitators), participation (participants’ presence and engagement) and quality (participants’ satisfaction). The evaluation of fidelity increases the validity of the study. To determine the minimum threshold levels of participant responsiveness, adherence, quality of program delivery and dose necessary for participation in the Incredible Years parent training program to increase the probability of a case file's being closed, we performed Cox regressions on subgroups derived from the original sample.

**Results**

After parental participation in IY, children have greater probability of case closure in CPS (HR = 1.43; p = 0.00) then children of control group. The degree of fidelity implementation varies between moderate (61% to 74 %) to high (≥75%) for most of the indicators representing dosage, adhesion, participation and quality. The families seems to benefit more from the program when the parents attended at least 10 sessions and reported a satisfaction rating of at least 3.44 out of 4 and when the group leaders presented at least 11 topics, 75 video vignettes and 15 role plays.

**Conclusion**

Results suggest that the participation in the program can contribute restoring the family's ability to protect its own child thus reducing the time spent being followed by CPS. The fidelity's thresholds identified represent guidelines that should be followed when Incredible Years is implemented, but that still afford group leaders some degree of flexibility without compromising the achievement of the program's objectives.
Impact and Impact Factors of Social Pedagogical Family Work in Austria, Germany and Switzerland: A Literature Review

Friday, 5th October @ 16:45: Family Support and Parenting Interventions (Venue: Ribeira I)

Prof. Heinz Messmer (University of Applied Sciences and Arts, Northwestern Switzerland), Mr. Lukas Fellmann (University of Applied Sciences and Arts, Basel, Northwestern Switzerland), Mr. Oliver Küch (University of Applied Sciences and Arts, Basel, Northwestern Switzerland), Mrs. Marina Wetzel (University of Applied Sciences and Arts, Basel, Northwestern Switzerland)

This presentation focuses on the impact and impact factors of social pedagogical family work with particular reference to Austria, Germany and Switzerland. This service provides support in various ways to families where the well-being of a child is at risk. The intervention takes place in the living environment of families, mainly in their homes. As recent statistics and research in these countries show, the resource ‘family’ is proving to be increasingly fragile. Single parent families in particular are progressively in need of child and youth welfare services as well as families with a migrant background and/or parents with physical or mental health problems. Accordingly, a steady rise in the need of social pedagogical family work and similar services has been evident for years in the referred countries. Hence, evidence about the impact and impact factors of social pedagogical family work is becoming more and more important.

Based on an extensive review and assessment of literature, research and program evaluations in these countries, we argue that social pedagogical family work is mostly effective, but not always, not everywhere, and not the same for all. On the one hand, we found three main impact dimensions, which strongly influence the impact of social pedagogical family work. These could be categorized under the headings ‘relationship-building’, ‘professionalism’ and ‘institutional framing’. On the other hand, however, it can also be observed that social pedagogical family work operates in a dynamic two-sided relationship that is influenced by developments of social and family policy as well as by the socio-ecological environment of the family. Considering this, we aim to introduce a heuristics of impact dimensions of social pedagogical family work that integrates these elements in an interdependent and co-productive system of action.
The Efficacy of Intensive Family Support in Child Protection Cases: Insights from a Quasi-Experimental Field Trial in Switzerland

Friday, 5th October @ 17:00: Family Support and Parenting Interventions (Venue: Ribeira I)

Dr. David Lätsch (Bern University of Applied Sciences), Ms. Hirmete Hasani (Bern University of Applied Sciences)

In Switzerland, recent years have witnessed an increasing frequency of intensive family support—known under the German term “sozialpädagogische Familienbegleitung”—with families who are seen as unable to take adequate care of their children and to provide them with the necessary conditions for positive emotional, cognitive, and social development. In the child protection system in particular, family support services are ever more frequently mandated by child protection authorities with the intention of preventing the more drastic measure of out-of-home placement. The services are delivered in the shape of intensive home-visitation, typically extending over a period of several months, where social workers visit the families in their homes on a weekly or near-weekly basis and work primarily with parents to encourage more positive attitudes towards parenting and more functional parenting styles.

The main objective of our ongoing study, which is one of the first quasi-experimental field trials with regard to intensive family support services in a German-speaking country, is to rigorously assess the efficacy of these services, using structural equation modeling to investigate causal pathways connecting baseline characteristics of cases and attributes of the intervention to the intervention’s outcomes. More particularly, in the framework of a conditional process model, the research investigates the socio-economic, social and personal characteristics and resources of the families and its members, the observed risks and problems that supposedly necessitate the intervention, and the development of these phenomena over the course of the intervention and a subsequent follow-up period. Applying the design of a longitudinal matched-controls trial with four separate measurements over a period of 18 months, the study strives to identify moderators and mediators of the intervention with regard to observed outcomes (proximal and distal) in several domains of individual and familial well-being and social functioning. Data collection tools encompass interviews and questionnaires addressed to social workers carrying out the intervention, and parents and their children receiving the services. Altogether, the study involves approximately 400 cases in the intervention and the comparison group. In addition, the research incorporates a mixed-methods sequential explanatory design, where the findings from the quantitative analyses will be discussed with frontline workers, child protection authority board members and parents and children in both homogeneous and mixed focus groups. Beyond the task of interpreting and thus further elucidating the causal processes that underly family support services, focus groups will be devoted to drawing specific conclusions, from the perspective of both providers and recipients, about future development of the services. The study, which is sponsored by the Swiss National Research Fund, began in 2017 and will carry on until 2020.

In our oral presentation, we intend to first give an introduction to our theoretical model that underlies the research questions and hypotheses. Working from the assumption that children’s development is determined by an interplay of genetic and environmental factors, we look at the extent to which children’s development may theoretically be assumed as modifiable by characteristics of the environment both inside and outside the family, and then go on to outline specific assumptions about how family support services may actually influence these sources of modification, thus leading first to proximal and later to distal outcomes. Second, we will introduce the analytical tools deployed in our structural equation modeling of the data. Third, we will present results from the first wave of data collection, which is currently underway. These results will cover developments observed, both for the family support group and for matched controls, between baseline and the second assessment after two months of the intervention. Based on these data, we shall be able to present preliminary findings on outcomes and possible mediators and moderators.
Dual Perspective on the Role of Affect Regulation in Foster Children Who Have Been Exposed to Political Violence

Friday, 5th October @ 16:15: Growing Up in Foster Care (Venue: Auditório)

Prof. Rami Benbenishty (Bar Ilan University), Mr. Ohad Gilbar (Bar Ilan University), Prof. Rachel Dekel (Bar Ilan University), Prof. Miriam Schiff (The Hebrew University of Jerusalem)

Background: Exposure to political violence has deleterious effects on children, and especially on children with traumatic background such as foster children. Affect regulation is an important coping mechanisms in such stressful situation. The aim of this study is to explore the role of affect regulation in foster children with regards to their emotional distress as a response to exposure to war events. Specifically, the current study focused on Israeli foster children's reactions to the war with Gaza and examines the ways in which difficulties in affect regulation may moderate or mediate the relationships between levels of war exposure and post traumatic symptoms (PTS) and dysfunctional behaviors. This question is studied from the perspectives of both the child and the foster parent.

Methods: Participants were 70 pairs of Israeli foster children and their foster parents who were exposed to the war. Participants completed structured instruments of child affect regulation, war exposure, PTS, dysfunctional behaviors, functioning, and life satisfaction.

Results: Problems with affect dysregulation were associated with dysfunctional behaviors in the reports of both the children and the foster parents. In addition, according to the foster parents' perspectives, but not the foster children's affect regulation moderated the association between PTS and dysfunctional behaviors.

Discussion: The findings indicate that affect dysregulation is a catalyst of the direct effect of PTSS on dysfunctional behaviors of foster children in times of political violence. Therefore, in order to help these children with their PTS distress, interventions should also focus on their problems with affect dysregulation.
Teleidoscope Identity: Listening to Children’s Stories of Their Time in Foster Care and Creating an A’where’ness of the Role of Space in Self Construction

Friday, 5th October @ 16:30: Growing Up in Foster Care (Venue: Auditório)

Ms. Danielle Douglas (University College Dublin)

There are currently over 6,000 children in alternative care in Ireland and over 90% of these are living with foster carers in family-based settings (Tusla, 2018). Many of these have experienced multiple placements which can result in a change of school, neighbourhood and family environment. There is a paucity of child-centred research which focuses on the everyday interactions and relationships that form within the social worlds of children in foster care. The aim of this study is to give voice to children and young people in foster care in Ireland in relation to their experiences across home, school and community settings. Essentially, it is concerned with where children in foster care spend their time, with whom they spend their time and the possible impacts of interactions within these temporal, relational and physical spaces on their sense of self. Drawing theoretically on symbolic interactionism and Côte and Levine’s Identity Capital Model and methodologically on narrative inquiry and photo voice methodologies, the research seeks to examine processes of identity formation among children and young people in foster care. Of particular interest is their participation opportunities and agency and social interactions, in diverse spatial contexts and those which are specifically linked to their foster care experience. Currently at data analysis stage, the researcher proposes to share preliminary findings from 16 young people in Ireland both in care and from care. The addition of the voice of care leavers is explored to gain a retrospective understanding of how they feel their identity was shaped through experiences in care. The findings focused on throughout this paper will be the physical spaces (including but not limited to where contact with birth family takes place, role of cars, bedroom etc) relational spaces (for example quality of relationship with birth family, foster family, social worker and the interesting role of friends and pets on identity) and virtual spaces of children and young people in foster care and how identities are constructed, deconstructed and reconstructed within those. The paper will conclude with recommendations for practice, particularly regarding relationship building and positive self-formation.
In western countries there has been an increase of children with an ethnic minority background in foster care. Because foster parents often have a (family) ethnic majority background, transethnic placements have become more common. There is reason to assume that foster children with an ethnic minority background struggle with their ethnic identities (Wainwright & Ridley, 2012), which is evident in literature on transracially adopted children (Samuels, 2009).

There are many societal discussions considering consequences for the ethnic identity of these foster children, but literature seemed scarce on this topic. In order to investigate what is already known, we conducted a systematic literature review. The main questions of this review were: 1) What does the existing literature say about the ethnic, racial and cultural identities of transethnic placed foster children and adopted children from care and 2) What ethnic, racial and cultural socialization by foster and adoptive parents can be recognized?

We followed the checklist and flow-diagram of the PRISMA statement (Moher, 2009). We used a wide variety of keywords considering foster care, adoption from care and ethnic, racial and cultural identity and ethnic, racial and cultural socialization and we inserted these in ninety different combinations in multiple databases. More than 81000 hits appeared and after a process of identification, screening and examination, 8 articles were selected for inclusion.

The articles could be divided in studies on ethnic identity and ethnic socialization. Most articles originated from the United States. The majority of the articles on ethnic identity of foster children or adopted children from care showed ethnic identity struggles or losses. In contrary, other studies showed no evidence for a problematic ethnic identity of foster children. Ethnic socialization was in several articles mentioned to be important for foster children or adopted children from care in order to be able to explore their ethnic identity. Two articles presented outcomes on ethnic socialization of foster parents. For foster parents, ethnic socialization seems to be a process of giving and taking between different cultural backgrounds. In conclusion, the review showed that there is little literature on this topic. There is no clear consensus yet whether living in a family with a different ethnocultural background leads to ethnic identity struggles or losses.

References

Kinship Care: Supporting Identity and Resilience for Children in Alternative Care

Friday, 5th October @ 17:00: Growing Up in Foster Care (Venue: Auditório)

Prof. Myrna Mcnitt (Central Michigan University), Ms. Vasundhra Sharma (Centre of Excellence in Alternative Care India)

The authors of this paper conducted a review of literature to determine the importance of kinship networks for children in alternative care. The literature concerning looked after care consistently stress the significant role of kinship networks in building resilience and promoting the social identity of the child (Worrall, 2009). Worrall (2001) stresses the importance of continuity for the child within kin, culture, and community. Many authors take notice of the benefits of kin care as maintaining attachment, promoting identity, and helping children overcome early traumatic events (Dozier & Fisher, 2014). In addition, kin care was less likely to result in a disruptive placement (Denby, 2012, Farmer, 2009, Dortch, Mumpower, & Jochnowitz, 2008, Chang & Liles, 2007, Worrall, 2001, 2009, and others). Continuity of relationship and access to family and community members, including parents, other relatives, church members, and teachers was reported as important in research conducted by Burgess, Rossvoll, Wallace, & Daniel, (2010) and defined by Kufledt (1995) as inclusive care. Burgess et al., echoing the findings of Worrall (2009), describe the healing power of kinship care: “In relation to the promotion of resilience factors, it would seem that kinship care has much potential to help provide the protective environment that might assist young people recover from the adverse life circumstances which many of them have experienced (2010, p. 307).” In addition, research notes that children in alternative care struggle with social relationships and often have delays in emotional and neurological development (Leve, Harold, Chamberlain, Landsverk, Fisher, & Vostanis, 2012). Stability of placement found in kinship care helps to promote healthy attachment and improved impulse control for the child helping to overcome the problems of social relatedness which impacts the positive identity of the foster child.

Despite its time honored place in the care of vulnerable children, kinship care has struggled to find its place in the alternative care scheme: “Is kinship care a formal fostering service or is it the ‘burden’ of the family?” This question represents a two-edged sword for both developed and developing countries for both policy and practice.

For example, India is working to develop inclusive care practices for the 20 million children living in 6472 shelters. India amended its Care and Protection of Children's Act in 2015 where foster care was addressed, but kinship care was not specifically defined in the Act, nor was it explained as an option in the alternative care policy. Yet, informal kinship care exists in India, but little is known how the children and families are faring as they are beyond the scope of the State's practice research. By way of contrast, in 2018 Families First Federal Legislation was passed in the USA. This legislation mandates the use of kinship care along with mental health/substance abuse treatment services to children and families. Placement in foster care, group care and residential care are to be a last resort and time limited. Federal reimbursements to states are linked to the use of evidence-based approaches with the goal of services designed to assure the child will have the best chance to thrive while under care and protection (Annie E. Casey Foundation, 2018).

Given the substantive research on the importance of kinship care for the child's identity and well-being the authors urge the use of research informed practice to guide policy and program development. The authors contend the development of family-based care for children should emphasize the important place of kinship as a primary care option given the considerable evidence to support its use and its benefits to the identity and resilience of the child.
Long-Term Outcomes of Former British Child Migrants in Care in the Twentieth Century in Australia

Friday, 5th October @ 16:15: Long-Term Outcomes in Care Leavers (Venue: Arrábida)

Prof. Elizabeth Fernandez (University of New South Wales)

Background and Aims
Ensuring that individuals looked after in care experience optimal outcomes and that their transition into the community is well planned and resourced is paramount in promoting their well-being. People who have lived in child welfare institutions and other substitute care as children are known to have suffered substantial maltreatment and disadvantage in their life course. There has been significant attention internationally towards identifying the impact of historical systems abuse of children and young people, and there are emerging efforts towards investigation and redress of such abuse. This presentation will discuss research which explored the range of experiences and long-term outcomes for those who experienced institutional and foster care in Australia between the years 1930-1989. The study was designed to explore care leavers trajectories in care and post care; identify factors in their past or present experiences that are protective or accentuate risks; and assess current support needs and ways to respond to them to enhance favourable outcomes.

Methodology and Findings
The research utilised a mixed-methods design which included surveys, interviews, and focus groups, the sample comprising 700 respondents across Australia. This presentation will report specifically on the experience of the British Child Migrant cohort within this large-scale study. Descriptive statistics were primarily employed to analyse data from surveys utilising IBM SPSS Statistics 23 (IBM Corp., 2015). Qualitative data from interviews, focus groups and open-ended questions of surveys were analysed using NVivo software.

The study’s key findings indicate that the trauma and disruption experienced by children upon removal to placements in the United Kingdom often intensified following their exportation to Australia. Upon relocation, many child migrants found themselves living and labouring in large institutions located in remote rural or regional areas. The Australian institutions were almost always socially and emotionally alienating and were often characterised by oppressive child rearing practices that gave licence to serious abuse of all types and gross neglect. The consequences of maltreatment in care extended well beyond their childhoods persisting into adulthood. The paper draws on both quantitative findings and voices of research participants.

Implications of the findings for redress and reparation, and for policy and practice in contemporary out of home care systems are discussed. The need for responsive interventions to enhance current and future well-being of this population and for responding to children who are currently in care, and who will transition out of care in the future, will be elaborated.
Introduction: Given the large number of children in care and the high cost of child welfare, research on the outcomes of care leavers has been a worldwide trending topic for years. However, quantitative research that combines results on different extents (social relations, education, employment, mental health, substance abuse, criminality and housing) is sparse and in Belgium, quantitative outcomes are non-existent. International research indicates that children who experienced an out-of-home placement, often experience lower educational outcomes than their peers from the general population. Furthermore, they often have lower employment rates, a lower income, lower health outcomes, experience bad housing circumstances, more substance abuse and seem to be more involved in criminality. However, they mostly indicate that they are satisfied with their lives.

In this study we present the first results of a longitudinal quantitative research in Belgium, studying both family foster care and residential care leavers (age 17-27).

Methods: 343 care leavers, who lived in a foster family or residential care facility for at least 2 years, filled in a questionnaire on social relations, education, employment, income, housing, health, substance abuse and criminal activities. The data allows us to make a comparison (1) between family foster care and residential care leavers and (2) between the care leavers and the general Belgian population.

Results: Care leavers stop school at a younger age than their peers from the general population. Furthermore, almost 40% of the residential care leavers did not finish their general education. If they finished, they seemed to be at high risk at extending the required time to complete their education, this also counts for family foster care leavers. Compared to the general population, both foster care as residential care leavers significantly obtain lower degrees. At the time of the interview, 70% of the care leavers were employed, however, they started working at a younger age than their peers from the general population. When comparing income, residential care leavers own significantly less than foster care leavers, who own less than their peers from the general population. Concerning health, all care-leavers reported high rates of depression, anxiety and sleeplessness compared to the general Belgian population. Residential care leavers have more complaints concerning their mental health than their peers from foster care or the general population. The numbers of substance abuse are sobering as well, almost half of the sample indicated they use(d) cannabis and 23% said they use(d) hard drugs, those numbers are both more than double of the numbers in the general population. However, most care-leavers were satisfied with their lives and reported an average to good resilience and a good physical health. Furthermore, the rates of Belgian care-leavers that continue in college or university education is higher than most rates in other research as is the samples average income. Their housing circumstances are equal to those of their peers in the general population. Overall, family foster care leavers obtain better outcomes than residential care leavers. They more often have stable relations, obtain higher degrees, earn more, have a better mental health, less problems with substance abuse and are less involved in criminal behavior.

Discussion and conclusion: As a conclusion it is remarkable how young care leavers continue to struggle on multiple areas in their lives, even after they leave care. As in other research, most Belgian care leavers seem to have many disadvantages compared to their peers in the general population. However, they seem to have a good resilience and indicate that they are mostly satisfied with their lives.
Length of Stay, Functional Follow-Up Outcomes, and Return on Investment in Residential Care

Dr. Jonathan Huefner (Father Flanagan’s Boys Home)

The relatively high cost of residential services is an ongoing concern, and has formed the basis for arguments made in the US for reducing or eliminating residential services for troubled youth. In 2005, the top three highest expenditure services for the almost 2 million Medicaid eligible children using behavioral health services in the US were residential treatment/therapeutic group homes (3.6% of these youth, $1.5B), outpatient treatment (53.1% of these youth, $1.3B), and psychotropic medication (43.8% of these youth, $1.1B). While a disproportionate amount of public funds are dedicated to the care and treatment of a relatively small number of youth in residential treatment, it is also true that these high-risk youth are the most likely to require public funds in the future due to limited education, underemployment, and higher risk of criminality. Based on the argument that shorter stays are better, some current policies aimed at limiting time in residential care specify that residential stays should be 6 months or less. In this research we compared long-term outcomes for youth in a residential care program for 6 months or less with youth in the program for more than 6 months. Based on our prior research, we hypothesized that youth who are in residential care for more than 6 months will have improved outcomes over youth who are in residential care for less than 6 months. Furthermore, the improved outcomes will be associated with better long-term cost benefits for youth in the program for more than 6 months.

Data for this study came from administrative 24 month follow-up data from 1172 youth who were served in a therapeutic residential care program and were now over 19 years of age at the time of the interview. Results showed that youth who were in the program for more than 6 months had better educational, employment, and criminality outcomes than youth that were in the program for less than 6 months. In turn, these outcomes were associated with significantly better estimated financial societal benefit over the long-term. Youth who were in the program for more than 6 months had an average treatment cost of $200,080, this was $167,140 more than youth who were in the program less than 6 months. The net societal benefit of completing the program was more than $450 million (a 361% return on investment), and the net governmental benefit of completing the program was just under 45 million (a 26% return on investment). These results show that follow-up functional outcomes are better for youth with longer lengths of stay, and that improved outcomes are associated with large fiscal impact over the adult life of a child. Sonuga-Barke (2014) observed, “once fully established, child and adolescent mental health conditions are often unusually stubborn beasts: rarely completely cured, challenging to manage; frequently escalating in complexity, increasing in severity and intensifying in functional impact” (p. 849). The emotional and behavioral challenges youth experience developed over time, and sufficient time needs to be spent helping them overcome these issues. This research supports the view that longer lengths of stay are actually more cost effective when taking long term societal returns into account.
Patterns of Criminal Activity among Care-Leavers in South Africa

Friday, 5th October @ 17:00: Long-Term Outcomes in Care Leavers (Venue: Arrábida)

Prof. Adrian van Breda (University of Johannesburg)

Research on young people transitioning out of care in South Africa is still in its infancy, and most research to date is descriptive and generic. The majority of looked after children in South Africa (over half a million, out of 18.5 million children in the population) are in formal foster care, mostly kinship care, due primarily to being orphaned. A smaller number (approximately 21,000) are placed in residential care, often due to behavioural or family problems. Legislation requires young people to exit care at the end of the year of their 18th birthday, though application can (but seldom is) made for extension up to 21 years, if they are studying. There is very little legislative or policy support, and even less funding for aftercare services, resulting in most residential care-leavers having to become ‘instant adults’ during their 18th year.

This paper focuses on one specific aspect of care-leaving in South Africa, viz. care-leavers’ engagement in criminal activities. Data are drawn from a longitudinal mixed-methods study of care-leavers, now in its sixth year, run jointly by the University of Johannesburg and Girls and Boys Town South Africa. Young people choose to enrol shortly before they leave care, at which time history is collected from their social worker, they participate in a readiness interview and complete a resilience assessment. Every year thereafter they are approached to participate in an unstructured narrative interview and complete a structured assessment of care-leaving outcomes.

For this paper, quantitative and qualitative data concerning the outcome of criminal activity are utilised. 61 individuals, who had been out of care from one to five years, participated in the study. Data from all available post-care interviews were utilised.

Results indicate that about one third of the participants were involved in criminal activity at some point since leaving care. About one third of those engaged in criminal activities who had two or more interviews reported criminal activity in only one of their interviews. The data suggest three groups of care-leavers: about three quarters do not engage in criminal activity, just under half a quarter report low-severity crime just once and about one fifth report higher-severity crime over multiple interviews. Quantitative and qualitative findings suggest that criminal activity may be associated with drug abuse and/or being NEET (not in employment, education or training). Qualitative narratives of several participants are used to illustrate the findings.

Based on the findings, greater investment in after-care services to South African care-leavers is recommended, especially during the first year out of care, with a particular focus on substance abuse rehabilitation, diversion from criminal activity and the facilitation of engagement in education, training and/or employment.
“Somehow I Am Happy with My Life”: A Longitudinal Mixed-Method Study of Care Leavers’ Life Satisfaction

Friday, 5th October @ 17:15: Long-Term Outcomes in Care Leavers (Venue: Arrábida)

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

Background and purpose
Most studies on young people aging-out of residential care (care-leavers) have examined their situations in various post-care life domains (e.g., education, employment, involvement in risky behaviors). These studies consistently indicate that care leavers struggle in multiple life domains more than their general age group. Relatively few studies, however, have focused on care leavers’ Subjective Well-Being (SWB) and particularly their life satisfaction, or examined what factors may predict it.

The proposed presentation focuses on a longitudinal study which examined whether life satisfaction changes between one and four years after leaving care. It then presented a model predicting life satisfaction of Israeli care leavers based on their personal resources (self-esteem and self-efficacy) and the formal and informal support at several points in time. Lastly, the study explored care leavers’ life stories to better understand their perspectives on their SWB and the factors impacting their life satisfaction.

Method
Mixed-methods and longitudinal approaches were used. The quantitative sample included 276 adolescents during their last year in care (T1), 234 one year later (T2) and 220 three years later (T3). At T3, the response rate of the original sample was 80.4%. This response rate is considered very good within this population. Structured and validated questionnaires examined personal resources while in care (including self-esteem and self-efficacy), support from parents and friends during all three waves, and formal support at T3. A hierarchical regression was conducted to examine the contribution of personal and environmental resources to predicting life satisfaction at T3. This study used a mixed-methods approach to enrich the quantitative data as well as to broaden our understanding of contributors to SWB and life satisfaction. Sixteen narrative interviews were conducted at T3. Content analysis of the qualitative data was conducted by two researchers.

Results
The quantitative findings showed that the change in life satisfaction between one year after care (T2) to four years after care (T3) was not significant. Background variables, personal and environmental resources accounted for 36.1% of the variance in life satisfaction at T3. The self-efficacy to deal with independent life tasks before leaving care (T1) was strongly associated with life satisfaction four years later. Parental and peer support (T3) also contributed significantly to predicting life satisfaction.

Using care leavers’ life stories, we attempted to gain a broader understanding of the differences in the young people’s satisfaction with their current lives. The qualitative findings highlighted the complexity of care leavers’ relationships with their birth parents and four different patterns of family relationships emerged. While some experienced these relationships as empowering and contributing to their life satisfaction, others see them as a source of their emotional distress. For some, missing parental support is related to their emotional distress, while others felt the need to avoid relationships with their parents in order to protect their life satisfaction. The interviews also demonstrated the potential contribution of other types of resources including siblings, romantic partners and stable formal support from practitioners in residential care and in the community.

Conclusions and implications
The findings suggest that, to enhance care leavers’ life satisfaction, practitioners should empower them and support them to increase their personal resources and particularly their self-efficacy before leaving care. Various interventions should be used in and after care to help birth parents become a source of support for their
children. Extended family members are another source of support who should be located and reconnected with young people when relationships with the parents are not possible. Future quantitative studies should examine the perceived contribution of the different support resources to life satisfaction of care leavers.
Listening to the Adopted Child: Implications for Practice from Research Evidence

Friday, 5th October @ 16:15: Promoting Good Practices in Adoption (Venue: Porto)

Ms. Joana Soares (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto)

Background: Adoption practices must be guided by the child's best interests. To ensure the best interests of an adopted child, it is essential to know the adoptee's perspective of adoption, being adopted, being a family member and belonging to a school. It is crucial to give a voice to the child and to listen to each unique story. Although research on adoption is on the rise, studies taking into account the school-aged adopted child's perspective are still scarce. Adopted children are of more difficult access for researchers and they are frequently considered less reliable sources of information. Objectives: This presentation is intended for adoption social work professionals and adoption clinical practitioners and aims to present a set of adoption research data focused on school-aged adopted children's perspectives. The central goal of this session is to promote discussion around the implications for practice while providing data about children's points-of-view on their transition, integration and adaptation into the adoptive family, adoption-related gains and losses/difficulties, adoption understanding and concept, adoption-related experience and feelings in the school context, and communication about adoption within and outside the family. Method: Data are related to one-hundred and three adopted children (59 boys), aged 8 to 10, which were adopted from the Portuguese Welfare System at the age of 3.29 on average. Most of them had a past of adversity within the birth family and an experience of institutional care. Results: These data are the main findings of different studies part of a more global Portuguese adoption project on school-aged adopted children's social competence. The following implications for practice will be presented: the child's preparation for adoption; preparation of prospective adoptive parents; postadoption services; inclusion of adoptees in schools; preparation of teachers; promotion of adoptee's acceptance within peer groups and global socialization of adoption.
Psychological Adjustment and Search for Origins on Adopted Adolescents

Friday, 5th October @ 16:30: Promoting Good Practices in Adoption (Venue: Porto)

Ms. Raquel Barroso (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Ms. Débora Oliveira (University of Porto)

Background: The psychological adjustment of adopted adolescents has been widely studied. Although several authors report that these adolescents have adjustment problems compared to non-adopted adolescents, others point to the absence of adjustment problems in this group. Exploring identity issues is more complex in adoptive adolescents, since there is a need to integrate the existence of two families in a coherent narrative: the adoptive and the birth one. Therefore, the search for origins is understood as a process in which the adoptee tries to create an articulated narrative about himself, based on questions such as: “Where do I come from? Who are my birth parents? Why am I adopted?.”

Objectives: This study aims to explore the relationship between the adoptees’ psychological adjustment and the search for origins.

Method: Eighty-one adolescents participated in the study, with ages ranging between 12 and 17. Data was collected using a mixed methodology, through the Strengths and Difficulties Questionnaire (SDQ) and the Adopted Adolescent Interview (EAA).

Results: The majority of adopted adolescents were well-adjusted psychologically and had minor implication on process of the search of origins. Also, no evidence being found that the search of origins is due to a psychological maladjustment.

Conclusions: Results are discussed considering recent research in the psychology of adoption. Furthermore, this study contributes to an increase in knowledge among practitioners specialized in the subject of adoption, providing information that may be useful in post-adoption follow-up.
Parental Bonding during Adolescence as a Protective Factor for Psychological Well-Being in Adopted Adults

Friday, 5th October @ 16:45: Promoting Good Practices in Adoption (Venue: Porto)

Dr. Yolanda Sánchez-Sandoval (University of Cádiz)

YAPA20 Research Project is a 20-year follow-up of Spanish domestic adoptees. One of the aims of the YAPA20 is to determine the level of adjustment and psychological well-being of young and adult adoptees, and to identify risk and protective factors that may be having an impact on their adjustment. In this paper, we analyze the association between psychological well-being in a group of adopted adults and their relationship with their parents when they were adolescents. Participants were 124 young adults who were domestically adopted by Spanish families (mean current age = 26.79 years, SD = 3.32, range: 18–35 years; mean adoption age = 1.67 years, SD = 2.49, range: 0–9 years; 45.2% male). The measures used in this paper are the Parental Bonding Instrument (PBI; Parker, Tupling, & Brown, 1979), Self Esteem Scale (RSE; Rosenberg, 1965), Student’s Life Satisfaction Scale (SLSS; Pavot & Diener, 1993), and Psychological Well-Being Scales (Ryff & Keyes, 1995).

Adopted adults expressed high satisfaction with the affection and requirements shown by their parents. Perceptions of parenting received in adolescence (PBI) revealed very high scores in the Care dimension of the adoptive parents (affection, emotional warmth, empathy, and closeness). Participants were classified as Optimal Parenting (24%), 50% Affectionate Constraint (50%), Affection Less Control (18%), and 1-3% Neglectful Parenting (1-3%). Currently, half of the participants continue to live with their parents.

Correlations between Care and self-esteem, life satisfaction, and psychological well-being were high. ANOVAs showed significant differences in adult well-being measures as a function of a PBI group. The Optimal Parenting group showed the highest self-esteem, life satisfaction, and psychological wellbeing. The Affection Less Control group presented lower self-esteem, life satisfaction, and psychological well-being than the Optimal Parenting Group and the Affectionate Constraint group.

These results highlight the quality of parental bonding in adolescence as a positive protective factor for adult adjustment. These are preliminary analyses. At this moment, we have finished data collection. We intend to draw a more complete picture about other prior variables involved in the current psychological adjustment of adults who were adopted as children.
**Enhancing Adoption Satisfaction and Reducing Parental Stress in Adoptive Families: Recommendations for Practice**

Friday, 5th October @ 17:00: Promoting Good Practices in Adoption (Venue: Porto)

*Ms. Isabel-Sofía Costa (University of Porto), Ms. Joana Soares (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto)*

This presentation is for a Portuguese/Spanish thematic session and is intended for adoption social work professionals and adoption clinical practitioners.

Adoptive parents’ satisfaction with adoption has been considered an important indicator of adoption success and is strongly correlated with parental stress. Highly stressed parents tend to feel less satisfied with adoption. In spite of abundant international research, these topics are still unexplored with Portuguese adoptive families. This presentation aims at discussing the implications of two studies conducted on adoption satisfaction and parental stress with Portuguese adoptive families having adolescent children. In the first one, both adoptees (e.g. psychological maladjustment) and adopters’ variables (e.g. adoptive parenting difficulty) were significantly and negatively correlated with adoption satisfaction. In the second one, spouse support during the adoption process and satisfaction with the parent-child relationship in post-adoption were significantly and negatively correlated with parental stress. The findings of both studies will be presented and the implications for practice will be discussed at two levels. Firstly, at a preventive level, findings will be used to stimulate recommendations for adoption professionals working with prospective adoptive parents before child placement and adopters during the post-adoption period. Secondly, findings will also be discussed as indicators of strengths and specific needs of the adoptive families, promoting the design of remedial interventions aimed at families with high levels of stress. This presentation intends to stimulate awareness and discussion among adoption practitioners.
A Specialized Intervention Service for Adoptive Families: The Cubic Psychotherapeutic Model

Friday, 5th October @ 17:15: Promoting Good Practices in Adoption (Venue: Porto)

Prof. Margarida Rangel Henriques (University of Porto), Ms. Sara Silva (University of Porto), Dr. Emília Moreira (University of Porto)

Developed in the Unit of Adoption of the Psychological Support Service at the Faculty of Psychology of the University of Porto, the cubic intervention and psychotherapeutic model provided a framework for the psychological intervention with adoptive families. Adoption is considered a powerful intervention to promote the child’s physical and mental health recovery, but it also brings loss and grief to children and adoptive parents. Thus, adoption poses challenges to the level of adaptation, the establishment of the child’s bonds with parents and the sense of belonging in the family by all. In order to deal with these difficulties, the cubic psychotherapeutic model integrates a specific initial interview proposal, underpinning the great tasks of adoption (building of belonging and opening of communication), building life history, externalization of emotional problems and focus on the specific difficulties of each case. Each case is conducted according to its specificities, fitting to the child’s and family needs.

The cubic intervention and psychotherapeutic model is inspired on systemic, narrative and cognitive models. The Systemic Approach conduces the therapy to focus on the family, the child, and other systems of the child’s life (e.g., school). The model is also inspired by the Narrative Approaches, namely in the assumption that it is through narratives, telling what happened, that the meaning emerges, and it is from this meaning that projects are made, that the future is planned and that is choosing, at every moment, to act in a way that seems to correspond to greater success and well-being. Therefore, narratives are the way of locating the events of the past in a concrete space and time, different from the present moment, allowing a greater opening of the child to here and now. The construction of a coherent narrative about his/her life will enable the child to open up his/her past with the new family as well as to integrate the arrival of this new family into a continuous and meaningful whole. In addition, the narrative model of re-authorship, which is widely used in this service, allows us to use externalization as a way of putting the problem outside the person, allowing parents and children to begin a new and different relationship with the problem and become allies in the struggle against it, thus strengthening family relations. The Cognitive-Behavioral Model can be a reference in adaptations of techniques typically used with other cases, for situations of adoption and more indirect interventions towards the child, through parental support and articulation with other contexts of socialization of the same.

In this communication, this specialized service to work with adoptive families and this model will be presented.
Objectives: Child welfare, especially in many developed countries, has a relatively clear definition and status through social and welfare systems. In Iran, however, a consistent and coherent sense of child welfare is hardly recognized in scientific and political literature, in spite of Iran’s adherence to the Convention on the Rights of the Child since 1991 and numerous and diverse services established in the country toward various groups of children, particularly vulnerable children and their families. This lack of consensus has clearly limited the outcomes and impact of these welfare activities, along with hindering collaborative efforts to address problem children in the country. Therefore, the purpose of this study is to define the concept of child welfare and identify its target groups by content analyzing Iran's laws. It also attempts to find out how important issues such as the problem of abuse, and the relationship between parents and governmental organizations, or in general the roles of state are mentioned in laws. The results of our study can contribute to forming a somewhat unified understanding of child welfare, paving the road for implementing better services and policies.

Method: The paradigm of this research is qualitative. Iran's national laws are to review and analyze. Directed qualitative content analysis is applied to documents to distinguish how the problem of abuse was framed, the nature of the interventions and the relationships between the parents and the state.

Results and Conclusions: According to the extracted analysis, the problem of abuse is often framed as the dysfunctional parenting that caused by individual factors and government interventions are often limited to harm reduction rather than promoting the well-being of children. Although the government of Iran doesn’t play an active role in supporting and serving family, there aren’t large numbers of children ending up in out-of-home placements due to the importance of the family unit underlined in Iran's Law. In Iran, despite all significant developments in child wellbeing in recent decades, the child welfare approach faces many conflicts and obstacles. Adopting the Convention on the Rights of the Child to reform national laws can lead to child development and family service orientations.
Objective
The objective of this work is to reflect on the activity of female caregivers, based on the work developed by social workers and psychologists of the Public Ministry of the State of São Paulo, following complaints forwarded to the Prosecutor's Office of the Childhood and Youth of the Capital - Department for the Defense of Diffuse and Collective Interests, regarding bad care, negligence and/or mistreatment. In practice these female caregivers are running unregulated home care service.

Method
Based on the requests of the above mentioned Prosecutor's Office, a technical team (social workers and psychologists) conducted visits to the caregivers' homes to check the complaints. In this context, they also observed the reasons which led these caregivers to provide this service; the details of the care provided to the children; the physical space used; the characterization of the users and how they became aware of the activity of the caregivers; and what difficulties were identified in this activity.

In addition to the visits, bibliographical research was carried out on the issue at hand, to understand the context of the caregivers' work, as well as to check the existence of other possibilities of care for these children. From this survey, a historical summary of the emergence of day-care centers was presented, as well as the way they are portrayed in Brazilian reality and the circumstances that sustain the demand for this kind of activity; the research also enabled the discovery of some alternatives for child care both from the private sector as well as from the municipal sources.

Results
The majority of the complaints of bad care, negligence and/or abuse were unfounded. This activity was carried out by women (some for more than 25 years) who sought a form of income, and used to care for an average of 15 children. The children's care was flexible and according to the users' needs, covering the time that children were not in day-care centers or schools, including at weekends, holidays and school vacations, also being an alternative for the care of children due to the lack of places in day-care centers and preschools. The main forms of publicizing their activities were through the use of other people (word of mouth), school professionals and school bus drivers.

Among the difficulties observed for the accomplishment of this type of home care, vulnerability conditions were observed in some households, absence of training for childcare, lack of pedagogical stimulus activities according to the age and the length of stay of the users with the caregivers.

Conclusion
From the assessment of the results, it was possible to identify the children's homecare as an informal practice widespread in the city of São Paulo, which survives for decades dissociated from the public policies of integral protection to the children. Despite this condition, this activity ensures that children receive home care while their parents engaged formal and informal work activities. In this sense, there is a need to regulate this function, transforming the activity of these women, who currently operate as informal services, into a public policy of home care. To do so, it is necessary to produce a mapping to know the quantity of caregivers and children served, the regions of greater demand for this service, the characterization of the physical spaces used, the profile of caregivers and users of the service. This design will allow the construction of strategies to ensure
qualified home care for children.
Comparative Study of the Juvenile Justice System in Norway and Albania

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Marsida Grami (University of Tirana, Institute of European Studies), Dr. Torill Tjelflaat (Norwegian University of Science and Technology)

Introduction: This presentation is part of a larger comparative study which aims to bring forth theoretical and practical approaches in juvenile justice in different European countries such as Albania, Norway, The Netherlands and UK. The main goal of this research is to provide a general view regarding the juvenile justice system in Albania, and how the youth delinquents are treated in other European Countries. The comparative profiles between countries are relevant as they can serve as a model for developing countries. This presentation focuses on the comparison between the Albanian and the Norwegian system.

Objective: The main aim of the study is to analyze and study the juvenile system in Norway in order to find the best approach towards restorative justice, and how this could be implemented in Albania. Implementation of new practice is a complex issue, affected by a lot of factors (e.g. economic, social, psychological, traditional and historical).

Method: A study visit was conducted to study the Norwegian youth care and juvenile justice system. The aim was to explore new and alternative methods of convictions, and focus on practice relevant for changing the old and traditional system for juveniles in Albania towards an emancipated system that offers juveniles an opportunity for the future rather than a punishment. The theoretical framework is based on the restorative justice model. Unlike retributive justice, which is primarily concerned with punishing the crime, restorative justice focuses on repairing the injury that crime inflicts. The concept of restorative justice was widely studied, researched and implemented in different countries with different political system and hierarchy, important this statement as it shows the reliability of this approach universally. The main concept of the Restorative Justice “a problem- solving approach to crime which involves the parties themselves and the community in general in an active relationship with statutory agencies” (Marshall, 1999).

In Norway, empirical data was mainly collected at Konfliktraadet which is a mediation service to help young delinquents, and is a part of the Norwegian juvenile justice system. Interviews were also conducted with professionals working with youth with severe behavioral problems and criminal activity. In addition to empirical data collection, policy documents were studied.

Results: Results show that Norway has a well-integrated system in juvenile justice, with focus on prevention, avoiding pruning and reintegration. The theoretical fundament, in working with young persons in youth care and juvenile justice, is based on principles in the UN Convention on the Rights of the Child. Integration, non-discrimination, education, family contact etc. are key concepts. Cooperation with different systems in the young person’s community is mandatory (a system/ ecological approach). Avoiding discriminatory policies is crucial.

Conclusions: Albania has undertaken big steps towards legislative reforms. Social services were introduced in 2001. The first step towards a more integrated juvenile justice system in Albania is to decentralize the services, that are provided to youth delinquents, to the local authorities. Factors from Norway, that we found in our comparative study, can contribute to this and other changes in Albania that will benefit the young people concerned; at the individual, structural and political level. In the presentation some thoughts on how this can be achieved will be presented and discussed.
Development of Outcome Indicators for the Foster Care System in Catalonia

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Joan Llosada-Gistau (Direcció General d’Atenció a la Infància), Dr. Josefina Sala Roca (Autonomous University of Barcelona), Dr. Laura Arnau Sabates (Universitat Autònoma de Barcelona), Mr. Jordi Muner Armengol (Direcció General d’Atenció a la Infància), Dr. Antonio Pérez Romero (Universitat Autònoma de Barcelona)

Background:
Some countries have created evaluation indicators to assess their child welfare system policies. In this regard, the US has a long tradition in collecting data systematically from welfare services to assess services and providers, design policies based on evidence and encourage innovation and more effective programs. An example of this tradition is the Adoption and Foster Care Analysis and Reporting System (AFCARS) that collects case-level information on all children in foster care and those who have been adopted. Another is the Performance Based Contracting focused on the efficiency and effectivity of programs (BASSC, 2008; Kearney, McEwen, Bloom-Ellis & Jordan, 2010).
The UK also has a system to assess the achievements with children in care and to guide policies, the Assessment and Action Records. That system assesses seven dimensions: health, education, emotional and behavioral development, family and social relationships, social presentation, identity, self-care skills and transition to independent life. To collect these data, they created the Looking After Children system that has been used in 15 other countries such as Australia, Canada, New Zealand, Belgium, Norway, Sweden, Hungary, Macedonia, Russia, Poland, etc. This system collects information from children in care, foster families and biological families. These systems have also been criticized. For example, the Looking After Children has been criticized for not being objective enough and for producing not desirable effects in practice (Garret 1999, 2002; White, Waste, Broadhurst & Hall, 2010). However, having an indicator system makes it possible to monitor the achievement of the main goals of the protection system, therefore it is an essential tool to develop more effective protection policies.

In Catalonia, the Law (14/2010) about the Rights and Opportunities of the children and adolescents, in its article 20, establishes the need to assess the results of the applied policies; but so far, the achievement of the protection goals has not been assessed.
The present contribution is an ongoing study developed by the IARS research group and the DGIA, the Catalan administration department responsible for the protection of children in care. The project aims to develop and validate an indicator monitoring system that allows the Catalan administration to assess periodically the level of achievement of their main goals in the protection of the children in care.

Methodology:
This project uses a participatory methodology. There is a leader team with researchers from IARS and DGIA that develops core proposals which are later discussed and validated by DGIA managers, professionals, children, families and other consultant researchers using focus groups and interviews.
In the first phase, the objectives to be assessed have been defined. In the second phase, the team has set a collection of indicators considering their objectivity and power to provide key information of the results achievement. Prior to this, a literature review has been carried out in order to collect indicators used in researches and assessment systems. In this phase, it is also being established which sources of information will be used. In the next step, the pilot indicators system will be applied to assess the problems to obtain data, the indicators objectivity, appropriateness and redundancy. The results, process and impact of this application will be analyzed to finally select a reduced number of indicators that will conform the monitoring system sustainable over time.
Nowadays the project team is validating the objectives and has yet to develop a first set of indicators. At EUSARF 2018, the progress of the project will be presented.
**Objectives:** This paper presents selected results of a recent inquiry carried out as part of an EU action grant “Improving Decisions through Empowerment and Advocacy (IDEA): Building Children's Rights Capacity in Child Protection Systems” (2017-2019), funded by the European Commission. The participants of the action grant are Ireland, Finland, Sweden, Hungary and Estonia.

The aim of the inquiry was to examine child representatives’ professional competence to support children's rights to participation in judicial proceedings, specifically in child removal process. In Estonia, child protection officials (CPO) and lawyers (Lo) are the main actors who present children in judicial proceedings. The research aimed to answer the following questions: 1) How do the main actors (CPO and Lo) – child representatives in court proceedings – assess their professional competence to support child participation in child removal cases? 2) What are the respondents’ needs to improve their professional competence in order to better support children's participation in judicial proceedings?

**Method.** The data was collected during an online inquire in summer 2017, LimeSurvey environment was used. The questionnaire was developed by the international partners of IDEA project with Finnish leadership, translated, piloted and carried out by every national partner. The respondents include two groups of specialists – child protection officials, working in local municipalities and lawyers/attorneys, representing children in court proceedings. Analysis is based on 105 filled questionnaires (86 by child protection workers and 19 lawyers). The questionnaire contained four topical blocs: 1. Knowledge of the child welfare and child protection; 2. The realisation of children's rights; 3. Cooperation between professionals; 4. Well-being at work. In addition, background information on the respondents was collected. The data was analysed using IBM SPSS Statistics and graphical output was designed using Microsoft Excel.

**Results.** There are differences between the competences of two respondent groups. One of the expected results is that lawyers with juridical education report about higher knowledge in law and legal regulations comparing with CPO with social work education, who assess higher child-specific competences (e.g. knowledge on children's rights, child welfare and protection, communication skills with children and knowledge about child development).

Both respondent groups evaluate highly the listed rights of the child giving the highest results among other partner countries of IDEA project. Listening to the child is the core of child participation for all respondents. 83% of CPO meet children always, while lawyers – 67%. The difference can be explained with different positions: CPO is the guardian of children at risk and work with the child and his family before, during, and after the removal, while lawyers represent the child only during the removal process.

All respondents assess their communication ability quite high, but they also reported about lack of child-friendly communication skills, particularly with children of special needs and from ethnic minorities (CPO – 85%; Lo – 100%).

Lack of co-operation between different specialists during child removal is one of the most problematic results of the inquiry. Specialists express they willingness to communicate and trust each other, but there is a lack of know-how. The last topic analysed, the well-being at work is not reported as a problem by lawyers, who think that they are guided by law during the proceedings. CPO receive support by the employer in the form of individual and group supervision.

**Conclusions.** Lawyers and social workers lack knowledge in several areas of child rights protection. Some contradictions in assessments need particular exploration and interpretation. There is currently little or no
co-operation between them in the court proceedings, even though both groups of professionals express their desire for cooperation.
Background
Child care workers are a good example of what Lipsky terms “street-level bureaucrats” (1980). They represent the user towards the system and the system towards the user, and have to relate to different understandings on a daily base. Several serious incidents in child welfare, causing harsh reactions and reviews have cemented an already anxious and defensive organizational culture (Turnell et al. 2013).

Child welfare services are always scrutinized in the Norwegian public sphere. Several structural and legal changes have been made the recent years. The need for increased competence is a continuous theme (Oterholm 2016) and today a comprehensive education program for employees and managers is offered. With the so-called “knowledge initiative” by the authorities, child-welfare service are meant to develop into a “learning organization”, which involves continuous development of their activities.

This project focuses on the practical competence management and development through studying one child welfare office as a community of practice.

Objectives / research questions
The question is how employees in a Norwegian municipal child welfare service understand themselves and work on their professional development through their daily work.

RQ: How do child welfare staff design practices in terms of learning and knowledge development? Here, I discuss how managers and employees conduct sensemaking and develop “shared” practices.

Theories and concepts
Organizations are the result of organizing processes, assisted and followed by retroactive sensemaking (Weick 1995). These terms will be used to discuss how employees and managers understand themselves.

Based on different perspectives of knowledge, the understanding and implications of knowledge sharing, communication and knowledge development in organizations differ (Hislop 2009; Elkjær 2004).

An objective perspective, a practice-based perspective (Hislop 2009) and a third perspective based on the human being and the body to explain how knowledge arises and is expressed (Elkjær 2004: 430).

These perspectives of knowledge are used to discuss the service’s practices related of professional development.

Schön (2001) assumes that knowledge lies in our patterns of action and our intuition in relation to the tasks we are going to do. Reflection in action means we think about what we are doing as we do it.

Methods
I have used fieldwork «backstage» in a municipal child welfare service with 35 employees. The project has a bottom-up angle. The field study takes an ethnographic approach, lasting six months (done by the end of October). The results presented here are based on the first 1.5 months of fieldwork. The findings are preliminary, but qualified through an internal workshop with the entire service.

Results and discussion
What matters to employees and managers when they create meaning and practices? So far, five themes were emphasized:

1) Time - time was solely focusing “here and now”: Take one task at a time, and coordinate offices and meeting-rooms. 2) “Backstage”, flexible and safeguarding referring to social work environment, with humor and laughter. Complex and time-consuming as too small locations required constant reorganizing before or when children and parents come, or for internal discussions. 3) Organization and management, focusing on external cooperation and dependencies. Processes are being delayed and hampered. 4) Their own emotional reactions,
and how these were not thematized. No reflections or debriefing. 5) Need for internal consensus, a need described as tyranny. Where agreement, comfort and support were backing of each other.
The discussion shows sensemaking is an ongoing complex kind of negotiation process. A process in which meaning is created, brokered and maintained.
The different perspectives of knowledge development help to highlight and clarify different expectations, understandings and dilemmas of learning and knowledge development as “shared” practices.
Introduction:
It's a continuous challenge to find pathways between theory and practice. Many researches seek and find evidence for the efficiency of Child and Youth Care (CYC) actors. Many of them try to describe the weaknesses of the process, but only some of them offer complex frame to understand the connections deeper and its effects between the different levels of systems in CYC.

Objectives:
Using the concepts of social communication science, we can create a “frame matrix”, which can provide us a complex approach to see the correspondences between different levels of the CYC related systems. From the individual, through the organizational systems, to abstract levels of the CYC models. Or to the “extra-organizational level” systems.

I state – by implementing Niklas Luhmann's System Theory's and Özséb Horányi's Participation Theory of Communication's principles –, that every system is closed from its environment, and may “connect” to other systems solely via the information they result. Systems have to work-up/process the information, but sometimes it fails. This failure come from the all-time biological, physical, mental abilities' limits of systems. Reasons for failure are not observable directly, but the information resulted by the systems are observable as “clues” of failures in their information processing. Analyzing these “clues” we can formulate deductions about the reasons behind failures, and we can develop more precise methods to avoid them. Staff trainings are information-transfer platforms from the system of organizations toward the system of professionals. The purpose is to understand better what and how blocks the staff trainings' efficiency.

Methods:
In my empirical research, I used this approach. My aim was to clear the effects of different systems and identify “clues” of blocking factors.

For this I used a special grouped-interview method designed by me to discover colleagues' cognitive representations about key factors about organizational developmental trainings.

The research focused on observation/analysis of verbal specialties which can be identify as “clue” of failure in information processing in professional's mind.

The interviews contained four questions:

- Positive/negative feed-backs about the training occasions?
- The participants’ biggest problem/difficulties in their job?
- Any useful content from trainings what they could use in real professional life?
- If yes, can it be linked to the mentioned problem?

In the answers I sought for

- Presence of extra-organizational factors’s effect on the training evaluation.
- Active or passive-suffered approach when mentioning problem/difficulty – use of 1st Person Singular form in verbal manifestations.
- Could they use any content?
• If yes, can it be linked to their mentioned problem? How appear the recognition of it – is it aware or not? What verbal forms or contents are observable in the answers?

Results:
Findings show remarkable effects of extra-organizational factors on the trainings’ awarding. 52.4% of the answers contain associations to extra-organizational facts – salary, overloaded work, etc. The passive-suffer approaches’ rate is over 90% according to difficulties. However, the results also show evidence about positive developmental effect. 57.6% of the passive approach said “yes” for utility, and 71.7% answered “yes” to link it to their problems. It is evidence for staff training’s efficacy.
Interesting findings came out from deep analysis on verbal forms: only 34.2% was aware of personal development, the rest showed implicit or non-aware recognition of it (with typical verbal forms – e.g “yes, but...”).
Conclusions:
Focusing on the results we can develop more precise training programs. It can be a base for preparing international comparative research for serve more efficiently bridge theory and practice.
Shifting Images of Professional Occupations in Social Sectors and Professionals Governance

Dr. Frans de Vijlder (HAN University of Applied Sciences), Dr. Korrie Melis (HAN University of Applied Sciences), Ms. Linda Rothman (Tilburg University)

Introduction: Social services, family and youth care among them, is primarily about helping people as a soloist worker. However, the image of a soloist helping or supporting a family, child or mentally disabled person can be viewed as a romanticized image of the profession and its professional field. And it seems not to correspond with today's reality. Professions, the division of tasks between different types of professionals, and professional systems are continuously changing. We are keen to identify these dynamics in professional work and the much slower shifts in professional images. The main characteristic of professionals is that they share a more or less well developed and institutionalized, distinctive, set of traits. Access to the profession is often legally protected and regulated through formal registration and membership of a professional association. There is, in other words, professional control or so-called professionals governance: some form of a self-regulating professional community.

Objectives: The aim of the study is to explore ‘shifting images’ of professional work in the social sectors. We define professional images as the set of hidden or more explicit expectations of what a profession should be. We also want to know what new requirements imply for the professional's image. And what all this means for the training of social professionals.

Methods: In order to gain insight in shifting professional images of work floor professionals empirical data have been collected. These data consisted of 25 semi-structured interviews with 26 professionals working in social services in the area of Nijmegen, the Netherlands. Social services contain a broad spectrum of professions (WRR, 2004). The interviews were conducted in three main fields of social services: disabled care, social work and youth care.

Results: The social professionals identify various characteristics and practices of a ‘good’ social professional. The main category of distinguished characteristics have to do with a basic attitude. The respondents point to ‘empathy’, ‘open attitude’ and ‘respectful’ as important elements. They also make clear that communicative skills and knowledge are important. In dealing with change we identify two groups. One group does feel the urge to change. These professionals see the need to look across the borders of the original ‘job description’. They feel uncertain about the changes, but approach them positively and stress opportunities. A second group is negative about the changes, which they find hard to accept.

Conclusions: The results show that social changes influence the work and the professional image of professionals. The respondents indicate that their profession became more complex over the last years. They notice a shift from a supply-driven approach towards a demand-driven approach. The professionals are no longer providers of care but they are facilitators of care. A professional cannot longer only follow standard procedures; instead he or she has to provide customized care. As a consequence, the professional for example has to know whom to approach for a specific kind of care demand. In order to deal with these kinds of changes the professionals rely on their experience to a great extent. An important outcome of our study is also that a successful professional cannot be a soloist anymore but needs to be a ‘network professional’, as we use to call it. However, networking, dealing with bureaucratic routines, accounting results and the like are not part of the somewhat ‘romantic’ image many students have about a professional in the social services. Therefore, special attention should be paid to the role of education and training in not reproducing more or less outdated professional images, but instead ‘designing professionals for the future'.
Client Centered Care: An Organizational Perspective - Results of a Best Practice Case Study

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Linda Rothman (Tilburg University/HAN University of Applied Sciences), Dr. Frans de Vijlder (HAN University of Applied Sciences), Prof. René Schalk (Tilburg University), Prof. Tine Van Regenmortel (Tilburg University)

Introduction
In this poster presentation we will present the results of a case study that focuses on the organizational characteristics that facilitate client centered care. The theoretical framework, sensitizing concepts, the results of the case study and implications for practice and research are presented.

Objectives
The aim of this study is to identify organizational characteristics that facilitate professionals to centralize clients in care. We've used Organizational Empowerment (OE) as a starting point. OE refers to ‘organizational efforts that generate individual empowerment among employees and organizational effectiveness needed for goal achievement’ (Peterson and Zimmerman, 2004, p.130). Within this concept a model is presented which provides a framework to study the characteristics that influence client centered care from an organizational perspective. To get an overview on the latest insights of the model we first we conducted a literature review. This led to identifying sensitizing concepts as a basis for the case study. The aim of the case study is to provide insights on how these concepts are put into practice and how they affect client centered care.

Methods
Literature review: We searched for articles published between 1 January 2005 and 1 March 2018. The start date corresponds with the publication year of the original model. We used the Google Scholar to find the literature on articles that cited Peterson and Zimmerman’s (2004) original model. In order to be included, articles focus on the components of OE and have a theoretical or empirical nature.

Casestudy: The casestudy was performed in an organization which successfully centralizes clients in care in the Netherlands. Between June 2017 and March 2018 30 individual interviews and 5 group interviews were held. The individual interviews were held with professionals, coordinators, managers, behavioral experts and the director. The group interviews were held with teams of professionals and the supervisory board. Using grounded theory and Atlas.ti the collected data is analyzed.

Results
Preliminary results show that a decentralised process of decision making with great responsibilities for the professional and room for professional autonomy (on every level in the organization) positively contribute to OE. Another result is that professionals should be supported and stimulated by their co-colleagues and management to really centralise clients in care, especially in situations in which the stakeholders demands are in conflict with the needs of the client. In these situations, the professionals aim should be centralizing the clients best interest.

Conclusions
The literature review and the case study revealed that, several factors of the existing model positively contribute to client centered care such as social support. In addition we found that there is a need for the further development of OE. Suggestions are made to include elements of professionals governance and organizational theories. Professionals governance provides tools (professional standards, education, and governance) to further empower professionals and by doing so, facilitating client centered care. Furthermore, organizational theories provide the perspective to study how the institutional environment influences organizational empowerment. This perspective might provide further insights in how organizations react to the demands of institutions and how organizations are able to create new institutions which are in the best interest of the client.
Objective:
The aim of the evaluation was to carry out a peer review on the quality of the Norwegian Kvello assessment framework (AF) for gathering information in child welfare investigations, and to compare the design and the content with similar frameworks from Sweden (BBIC) and Denmark (ICS). The study was part of an extensive research project commissioned by the Norwegian directorate for children, youth and family affairs.

Methods:
Based on detailed descriptions of each framework we developed a revised ecological framework to compare the core dimensions for gathering information in the three frameworks. The focus of the comparison was to identify if the Kvello AF asked for more or less or other information than the other frameworks. The reliability and validity of central methods and procedures for gathering information and risk assessment were considered. In addition, we evaluated the quality of the material available for the users of the Kvello AF.

Results:
The Kvello AF includes many of the same elements for gathering information as the other two frameworks, but we found some important differences. On the dimension “the Child’s development”, the Kvello AF seemed to have a stronger focus on individual factors and the interaction within the family, while the child’s daily functioning and relationships on other social arenas were less in focus. We found similar differences on the dimension of “Parenting capacity”, where the Kvello AF had a strong focus on the interaction between the child and its parents and focused less on basic care issues in the child’s everyday life. Regarding the last dimension, “Family and environment”, we found that the Kvello AF focused less on environmental factors which could have an impact on the child’s development.

Concerning the validity and reliability of certain methods for gathering information and risk assessment in the Kvello AF, several shortcomings were remarked. The quality of the material available for the users also had some deficits, compared with the other frameworks.

Conclusion:
The Kvello AF includes many of the same elements for gathering information as the other Nordic frameworks, but it still lacks central elements to ensure an ecological based investigation. Several of the suggested methods and risk assessment systems cannot be recommended for use in the child welfare services. The Kvello AF should not be used alone, and there is a need for a revised quality system for investigating child welfare issues in Norway.
Objectives: Families with multiple problems (FMP) face severe, chronic and intertwined problems in different areas of life. This wide range of problems has led to a similarly wide range of interventions. Information on which practice elements (i.e. distinct techniques delivered by the practitioner to promote positive outcomes) and program elements (aspects of the intervention design or service delivery system) of these interventions lead to the desired outcomes is scarce. This lack of knowledge hinders our understanding of the outcomes of interventions targeting FMP and calls for research on practice and program elements to improve outcomes. Our aim was to develop a general taxonomy of practice elements and program elements of interventions targeting FMP and to examine the interrater reliability of this taxonomy.

Methods: We developed the taxonomy with a procedure consisting of four steps in which different data sources were used. First, we developed a draft version of the FMP taxonomy based on existing taxonomies and national guidelines for FMP. To supplement the draft version of the taxonomy we assessed practice elements of manuals of FMP interventions (step 2) and we performed a field consultation to explore which practice and program elements we were missing in the draft taxonomy (step 3). Fourth, we developed a final version of the FMP taxonomy. Finally, we assessed the interrater reliability of the FMP taxonomy.

Results: The FMP taxonomy consisted of eight main categories (e.g. working on behavioural change and relieve tasks) comprising 52 practice elements (e.g. analysis of competencies, working on desired behaviour, learning to set rules, mobilizing and expanding the social network), and one category with six program elements (e.g. duration and intensity of the intervention). The mean interrater agreement was 84.9% for rating the practice elements with the FMP taxonomy.

Conclusions: A wide range of FMP interventions can be described reliably with a general FMP taxonomy that comprises practice and program elements of interventions. Using the FMP taxonomy provides insight into the actual content of interventions and enables us to better assess similarities and differences between interventions targeting FMP. For practitioners, the taxonomy may help to reflect on the care they provide. For example, reflection on the timing of applied practice elements (e.g. activities to improve communication skills of the family) or reflection on program elements (e.g. the duration and the intensity of the intervention) in relation to the specific needs of the family, may lead to care that is better tailored to the needs of a family. For researchers, the FMP taxonomy may help to identify effective elements in interventions and so improve the quality of care for FMP.
Objectives
Working with high risk families requires an adequate assessment of the safety of their children, in order to predict future unsafety, and to assess the possibility to influence the risks. Safety and risk assessment measures support social workers in their assessments and predictions. Youth Protection Amsterdam participated in the development of a safety assessment tool and a risk assessment instrument (Van der Put, Assink, & Stams, 2015), and was the first organization in the Netherlands to implement these instruments in daily practice. In the process of trying to make these measures into meaningful measures, constant guidance and evaluation proved to be of uttermost importance.

Methods
In order to guide social workers in working with the instrument, psychologists provided frequent feedback and coaching when discussing the high risk families in weekly case meetings. One psychologist was part of the organizations research team to make ongoing evaluation and adjustment possible.

Results
Using the risk assessment instrument, social workers were able to predict future unsafety based on a weighted decision, and to assess possibilities to influence the risks. Guidance was frequently needed and resulted in a constant flow of feedback to the research team. The feedback was used to make an adaptation in the way outcomes of the instrument were displayed, and provide clear guidelines for use in the work process of the social workers.

The safety assessment tool was used in the first contact with the high risk families. Implementing the instrument, it was expected that the safety assessment tool would support social workers in their actions regarding unsafety. However, in daily practice the tool was experienced as a mandatory and formal step in the work process. Social workers did not regard the outcomes of the tool as supportive. The tool and its outcomes did not guide their actions with respect to unsafety.

Conclusions
To assure the risk assessment instrument was a meaningful measure for social workers, constant guidance, evaluation, and some adjustment was necessary. Through use of a risk assessment instrument, social workers were able to assess intervention urgency and intensity, to define static and dynamic risk factors, and felt supported in their decision making and case planning.

Contrary to the expectations, the safety assessment instrument did not prove to be a meaningful measure for social workers. Instead of providing information on when and how to act on child safety to make sure a child was being more safe today, the instrument was used as a crisis assessment. Based on the experiences with this instrument, a new safety assessment instrument is currently being developed to provide social workers with an instrument that they regard as a meaningful measure for decision making.
Practitioner-Administered Measures as Boundary Objects between Research and Practice

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mrs. Barbara Regeer (Athena Institute, Vrije Universiteit Amsterdam), Mrs. Nienke Van Veelen (Vrije Universiteit Amsterdam), Ms. Inge Busschers (Amsterdam University of Applied Sciences), Mr. Marc Dinkgreve (Youth Protection Amsterdam), Prof. Jacqueline Broerse (Vrije Universiteit Amsterdam)

Introduction
Practitioner-administered measures are increasingly used to evaluate performance and outcomes as well as effectiveness of interventions of public sector organisations, such as routine-outcome measurements in (mental) healthcare. Despite availability of frameworks for enhancing their feasibility, low implementation rates jeopardise their potential. This study introduces the concept of boundary object to reconceptualise the relationship between research and practice as shaped by routine-outcome measures. It studies the introduction of an actuarial risk assessment tool (ARIJ) in the practice of a youth protection agency, Youth Protection Amsterdam (YPA).

Objective
With the case study of the ARIJ, we aimed to explore features of the instrument that enable it to act as a boundary object. We did this by studying the conditions in which the instrument would be acceptable and valuable to both researchers and practitioners.

Methods
To explore practitioner-administered measures as boundary objects we used a qualitative case study design. We conducted interviews with researchers (n=6) involved in the development of the tool and interpretation of data, and with psychologists (n=2) and case managers (n=6) who use the tool in their daily practice. To enrich the data collected in the interviews, two focus group discussions took place, one of psychologists and one with case managers. In these sessions, participants were asked to reflect on good-practices and obstacles from their experience of working with the new measures in comparison to the old measures.

Results
We found that there is a variety of conditions under which an instrument can be of value and acceptable to practitioners. Value-enhancing factors for practitioners, whilst administering the instrument, are provision of concrete action perspectives for decision-making in the context of monitoring high risk families, identification of blind spots and enabling of team member interaction. It thus refutes the image of practitioners primarily gathering data for research or management purposes, and provides clues to enhance feasibility, such as the inclusion of experimental items and the construction of a shared research agenda.

Conclusion
The concept of boundary object allows for a more symmetric consideration of the relation between research and practice throughout the phases of design, administering and data analysis. The study holds lessons for the field of evaluation regarding bridging the gaps between research and practice, and contributes more broadly to the scholarly debate about accountability versus learning in the field of evaluation. Finally, it holds lessons for managers of public sector institutions (in particular in child welfare) regarding the integration of data collection into daily practice, linking child welfare research and practice.
The objective of this presentation is to explore social workers' assessment practices of the emergency placements in Finnish child protection. Assessment is seen as being a crucial and inseparable part of decision-making process as social workers simultaneously assess the situation of the child and decide whether the emergency removal of the child is obligate. According to the Finnish legislation, one single social worker can assess and eventually make the decision of taking the child into emergency care for the length of 30 days. The focus here is on the situations 'as they happen', in which the social workers assesses whether the child is in immediate danger and needs protection and on the responses of front line social workers. The ethnographic approach enabled the access to very close to the decision-making moments, and to observe the social workers in action.

The ethnographic data consists of observations of situations in the child's homes or in the social welfare offices in which social workers met children and their parents (n=12) to assess whether the child was in immediate danger as well as situations in which social workers were preparing their decision whether the child needed to be taken into emergency care (N=35). In addition, interviews with 51 front-line social workers are used as a complementary data to deepen the understanding of the topic. The data has been collected in five municipal child protection units in 2015-2017.

In the studied 12 situations, social workers met children between the ages of two weeks up to 15 years and their parents. The social workers were challenged by the variation and unpredictability in emergency situations, yet they aimed to collect as much information as possible. That is why they consulted the colleagues and red even briefly up on the case files if the family was previously known to the agency, and tried to collect other information intensely. Nevertheless, they needed to make decisions with little information in some situations. In those cases, the making the ‘right assessment’ and the ‘right decisions’, included a high level of emotional impact, and an obvious difficulty to assess the child best interest.

When the social workers meet the child, they do not only assess the child's situation, but they also actively search for the alternative solution (for example supportive in-home measures) instead of the emergency removal. In other words, the assessment process is orientated towards solving the problem situation. However, when they assess the situations, they very rarely verbalize their thoughts about risks or sings of danger in child’s situation. The cognitive assessment process may therefore partly remain hidden in an ethnographic study. Nevertheless, the findings do highlight that the assessment and decision-making practices do not rest only on one social worker's view but rather they rest on social interaction with children, parents, peer workers and other professionals.

These findings are part of on-going ethnographic PhD study 'Decision-making of emergency placements in child protection'. It examines social workers decision-making of emergency-placements of the child, focusing to the decision-making process on individual level (how front-line social workers make decisions in situations where child is in danger) and community/ system level (how decision- making is instructed by legislation and other formal regulation). The research will continue until the end of the year 2019.
This presentation highlights the role of team leaders in care order decision-making. As the preparation of care orders rests on social work discretion, it leaves a lot of room and responsibility to social workers and team leaders and therefore the team leader’s position in the care order process has an essential role in assessing different types of knowledge and the sources of the information. This is especially important in the Finnish context in which a voluntary care order decision can be made by the team leader (leading authority in child welfare), if the custodians and a child of twelve years of age or older do not oppose the care order proposal and the placement. There are only few formal regulations concerning the preparatory work and the decision-making process. There is always a social worker and another child protection professional preparing the care order before the team leader can make the legal care order decision.

The focus of this presentation is to picture decision-making in care orders, especially the team leader’s role. The presentation is based on the nationwide data, which was collected from the child welfare team leaders during 2016–2017 and it is based on a web survey with 77 respondents and on the thematically focused telephone interviews with 29 respondents.

The findings suggest that the team leader’s position and distance from the preparatory work differs considerably between municipalities. Team leaders can be categorized as experts in child protection or administrative decision-makers. Experts in child protection monitor closely the care order preparation work and the co-operation is seamless and flexible with the social workers. The experts form regularly a comprehensive overview of the need of out-of-home care before making the care order decision. They have direct or indirect managerial relations to social workers and other child protection professionals preparing care orders. They can also be categorized as active decision-makers. Administrative decision makers do not monitor closely the care order preparation work and they only have few face-to-face contacts, if any, to social workers during the care order preparation. The distant administrative decision-makers form the overview of the need of out-of-home care by reading documents or some of them (case notes, decisions of in-home services and actual preparatory work). They have indirect managerial relations to social workers and other child protection professionals preparing care orders. They can also be categorized as formal signature-makers.

The different roles of team leaders demonstrate that they have knowledge base which varies in amount and routes when making care order decisions. Feelings and intuition are also differently present depending on the decision maker’s role in the process. The team leader’s role in the care order process should be given attention because the care order decisions have major influences on the lives of those involved.

The preliminary findings are a part of the current PhD study “Team leader’s responsibility in the voluntary care order decision-making”. The study explores the Finnish voluntary care order decision-making process, especially the responsibility of the team leaders in the child welfare offices. The study examines how decision-making is organized in different municipalities and organizational contexts and how the team leaders collect, test and evaluate information and facts coming from social workers, clients, authorities and other sources.

The research questions are:
1. How is voluntary care order decision-making organized in Finnish municipalities?
2. What is the team leader’s role in care order decision-making?
The modern family has been defined as paradoxical: there is a normative representation of infancy as a specific age category that is marked by vulnerability and needs nurture, care and affection; but still we witness the existence of parental abuse and neglect. When such maltreatment does take place, a decision has to be made about whether to keep the child in the family or to put him/her in out-of-home placement. That decision has been characterized as complex, ambiguous and marked by errors and uncertainty. In Portugal, as elsewhere, the law has been described as vague and as lacking in definitions of key-concepts for case assessment and decision-making. Furthermore, this uncertain and ambiguous decision-making context makes child-protection professionals more aware and fearful of institutional and social judgment, leading them to adopt self-defensive decisions and to postpone the intervention until a ‘catapult’ event occurs.

Therefore, the literature suggests that the largely studied child, family and case characteristics, are only part of the decision-making equation. Worker’s and contextual factors have also been pointed out but often understudied. Recently, one further step was taken: based on a more integrated, dualistic and ecological version of the Theory of Planned Behavior (Ajzen,1985), Rodrigues and colleagues (2015) empirically demonstrated the adequacy of a psychosocial model of the residential-care placement decision-making process, through which the worker integrates those multiple factors in the decision. But how that process depends on the type of maltreatment and on the level of ambivalence perceived is still unclear. This presentation extends this work by focusing on the differentiating features of the psychosocial process underlying the out-of-home placement decisions depending on the case and how the professional perceives it. More specifically, how rational and intuitive factors (cognitive, emotional, value-laden, normative) play a differentiating role in professionals’ judgment about residential care placement following parental abuse or parental neglect, as well as depending on how both positive and negative the professionals’ attitude is towards the case.

Three hundred and seventy-two professionals from different Children/Youth Protection Units throughout the Portuguese territory participated in this online study. After reading a vignette, either depicting a (psychological and physical) neglect case (fictitious but presented as real) or a (psychological and physical) abuse case towards a one-year-old child, participants were presented with a group of questions that measured worker’s assessment of risk, intention, attitude, attitudinal ambivalence, subjective norm, behavior control and beliefs towards residential care placement decision, as well as worker’s behavior experience, emotions and family/child-related-values involved in that decision.

A set of structural equation modeling analyses have proven the good fit of the proposed model (44%), as well as the double/cross moderating role of both type of abuse and level of ambivalence. The psychosocial process of decision making following a parental abuse case presents features of an automatic reasoning process, while following a parental neglect case the influence of professionals’ beliefs makes it a more rational process. The influence of perceived significant others support is the only common factor in all four conditions. In the condition of abuse and high ambivalence, the level of risk/danger is the main determinant of intention. Only in the neglect conditions, do emotions play a role. The most striking result was the presence of a conflict and only in the decision towards a parental neglect case perceived as highly ambivalent by the professional: the conflict was not between the value of the child and the value of the family, as expected, but rather within the value of the child itself, i.e. two opposite forces seem to in worker’s judgment related to the child’s best interests.
Assessing Children’s Situation during a Foster Placement: The
Place of Parents and Children

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Amélie Turlais (Université Paris-Nanterre), Dr. Severine Euillet (Université Paris Nanterre), Dr. Claire Ganne (Université Paris Nanterre)

An individual, in our contemporary and western societies finds his/her place not by being a member of a group anymore, but by defining himself/herself through his/her life aspirations. A new norm is guiding the construction of the self: action capacity (Ehrenberg, 2010, Gaulejac, 2009). In this new norm, it is understood that an individual cannot not master his/her fate, but must be able to master his/her life (Astier, Duvoux, 2006). This social change transforms the conception of a social intervention. Social workers must then accompany everyone in their reflexive capacity to produce themselves (Lacharité, 2015, Lacroix, 2016).

A lot of European research (Knorth, Van Den Bergh Verheij, 2002; Join-Lambert, Euillet, Boddy, Statham, Danielsen, Geurts, 2014) highlights that a quality of a social-educational intervention is determined by the implication of users such as parents and children. In France, in the field of social intervention, the 2002-2 law promoted the place given to users in the organisation of this type of intervention. In the field of child protection, the 2007-293 and the 2016-297 laws defined the evaluation of practices and the assessment of the situation of a child as being necessary to determine and plan an intervention. In this context, parents and children' participation has become a democratic issue (Robin, 2012).

From these observations, the research we are going to present here aims to get a better understanding of the place given and taken by parents and children during the assessment process of a situation of a child placed in foster care especially when decisions such as meeting arrangements between a child and his/her parents, schooling orientation, or a possible return to their family home, need to be taken. To conduct this research the methodology was divided into two phases. The first one was to gather data on resources used to conduct an assessment through a questionnaire. The second one was to access the point of view of professionals as well as children and parents in the assessment process through interviews, as well as observations of professional meetings happening either because the intervention is starting or ending, or due to a dramatic incident during the placement. It will be argued that the implication of parents and children by professionals in the assessment process depends on criteria such as the age of children and the capacity of both children and parents to elaborate on their situation and difficulties.
Implementation Science in Developing Economy Contexts: Foster Care in Jordan

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Rawan W. Ibrahim (German Jordanian University)

Objectives: Multiple factors contribute to the stagnating shift from institutional care to family-based care in the Middle East and developing-economy contexts. Some challenges are due to the nascent stage of the professionalisation of social work, poor resources, continuous changes in leadership within child welfare systems, and poor infrastructures for evidence-based decision-making. Despite these challenges, Jordan developed a foster care programme based on an implementation science framework. The programme expanded to three cities serving 200 children. With support from UNICEF, the Jordanian government is seeking to prepare for country-wide expansion. As such, this study is investigating what promotes or hinders implementation with fidelity and what is required for expansion.

Methods: Methods entail two phases. The first is a methodical review of all programme documents, research activities and reports against a proposed set of frameworks developed by the National Implementation Research Network (NIRN). These frameworks range from selecting interventions through to improvement cycles. Due to the stage of the foster care programme, a focus of the review is on implementation drivers. Guided by review findings, purposive sampling will be used to recruit foster families, service providers and key stakeholders to participate in semi-structured interviews conducted in Arabic (expected N = 45). Participating families and practitioners would comprise of the first cohort to join the foster care programme and have remained to be part of it.

Results: Preliminary findings suggest that political will and commitment to deinstitutionalise children is ongoing. Significant strides were also taken in the development of foster care and in building the foundation to implement evidence-based interventions. Several good practices were identified within the stages of implementation. Some examples include the selection of evidence-informed interventions that was based on factors such as suitability for children-in-care, foster parents and the level of experience of practitioners. Because the professionalization of social work remains to be at a nascent stage, a multi-faceted training module was developed to enable practitioners to implement interventions with fidelity. After the completion of an initial 20-hour training component, the module then shifted to shadow-training, with on-going clinical support. Interventions were manualised in order to provide practitioners with a step-by-step guide to implement interventions with fidelity. To protect the quality of services and strengthen implementation drivers, comprehensive standard operating procedures were developed. Other initiatives pertaining to drivers included the development of what was referred to as a core training team that would lead building the capacities of practitioners in cities selected for expansion. Despite these accomplishments, findings reveal that fidelity tracking is no longer taking place, and available data is limited to basic administrative data. These findings not only suggest that implementation of evidence-based interventions with fidelity has faltered, but also the adequate monitoring of the psychosocial well-being of children in foster care. In short, while various milestones have been achieved within an implementation science framework, emerging findings suggest that the quality of implementation is heavily influenced by an interplay of multiple factors within a developing-economy context.

Conclusion: There is a need to increase understanding of what promotes or hinders the implementation of evidence-based interventions in the Jordanian foster care system. Findings elucidate the importance of addressing structures that perpetuate barriers to implementation as well as those that promote implementation with fidelity. Given the shared dynamics and challenges in child welfare systems evident throughout the Middle
East, the results of the study can inform policy and practice development in the region. Additionally, it offers understanding to expand implementation science within child welfare systems in the Middle East and other developing-economy contexts.

**Track:** Foster Care Evaluation
It is generally agreed that contact visits with birth families are important both for the foster child’s wellbeing and for ensuring that the foster placement is successful. However, the benefits and potential disadvantages of contact visits for children in family foster care have been the subject of much debate and controversy in recent decades (Quinton, Selwyn, Rushton, & Dance, 1999; Prasad, 2011; Selwyn, 2004). So, there is a need for continued research to provide fresh evidence and compare it with existing findings. The views and opinions of those involved can provide useful information regarding how such visits might be improved. In order to this, the present study analyzes the opinions of birth families, foster families and social workers responsible for supervising contact visits regarding the benefits and problems associated with contact visits. The sample for this study comprised 23 birth families, eight social workers and nine foster families. In the case of biological parents, semistructured individual interviews were conducted in order to explore the parents’ opinions regarding the contact visits and the main areas they felt needed improving. Regarding foster families and social workers, data were gathered through two focus groups, comprising both participants, respectively. As in the case of biological families, the analysis applied considered their views regarding the benefits and problems associated with visits, as well as their proposals for how they might be improved. Transcriptions of the parents’ interviews and of the two focus groups were examined using an inductive method and ATLAS.ti v7.0 software to identify themes among participants’ responses. The findings showed that, in the case of the birth parents, the main themes to emerge concerned their general view of contact visits, the input and support from social workers, the contribution of foster families, the contact venue, and the organization of visits. In general, when comparing the results about the opinion manifested by the participants, it is worth highlighting the positive view that biological families show regarding support they received from social workers and saw the relationship as being based on mutual trust. More specifically, they felt that the social workers, were prepared to answer questions, and made them feel welcome when they attend the visits. However, social workers and foster families put forward the need of providing birth families with more information, preparation and support. Another proposals put forward by foster carers for improving contact visits concerned the importance of a collaborative relationship between the birth family and foster carers, the need for greater preparation of foster children and adapting visits to the specific needs of each child. The results suggest several ways to improve social work practice. For example, is necessary to develop a specific program aimed at providing birth families, foster carers and foster children with adequate training in relation to contact visits.
Fostering research has been very much oriented towards the analysis of children’s outcomes. Comparatively, much less is known about intra- and inter-personal processes. Very few studies have analyzed the interactions between careers and foster children and there is still scarce research focused on the exploration of the functioning and family dynamics in non-kin foster families. As a contribution to overcoming this limitation, the aim of this work is to describe the interactions between the main career and the child, as well as to analyze the relations of some indicators of the quality of the interaction to parental stress, and their connection with socio-demographic variables of both the children and the adults involved.

A sample of 28 long-term non-kin foster families from Spain was studied, whose children in care were between 4 and 8 years old. The 28 career-child dyads were observed while interacting in a co-construction task. In the context of a wider study, carer-child interactions were analyzed using a building task (“Co-construction task”, Steele et al., 2005, 2007). Both verbal and non-verbal variables were coded. Verbal interactions included contents such as vocal expressions, reference to shared past experiences, use of the child’s name, or use of pronouns “we” or “us”. Non-verbal interactions included facial expression of affection, patterns of touch and patterns of proximity. Parental stress was assessed with the “Parenting Stress Index Short-Form” (PSI-SF) (Abidin, 1990). Data was collected at three years, on average, after the beginning of the placement, at their homes.

The results, in general, demonstrate an important presence of some attachment promoting behaviors from the caregiver during the interaction (looking behavior, positive verbal expression, use of child’s name, asking questions/making suggestions, positive verbal reinforcement, encouraging behaviors, sensitivity to child). Also, the parental stress scores shown by the families correlate with some contents of carer-child interactions, especially when the child is seen as difficult by his or her caregivers. Moreover, only a few significant relationships were found between the carer-child interactions and socio-demographic variables both of the carers and the children.

In conclusion, non-kin foster families seem to be a great resource for children recovery since they actively promote an affective and stimulating relationship with their children. In addition, children and carers’ behavior during interaction is related to their level of parental stress and a few socio-demographic variables both of the carers and the children. The analysis of carer-child interactions and parental stress of these families have enabled us to establish an interesting discussion about some intra- and inter-personal processes in the dyads and families studied, helping us to gain a better understanding of these complex dynamics in non-kin foster families. Finally, these results have important implications for the intervention with foster families and their children in care.

Keywords: Carer-child interactions; non-kin foster care; parental stress; socio-demographic variables.
Foster Care Process: Challenges and Coping of Youth and Families

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Mariana Negrão (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Ms. Sofia Sousa (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Ms. Mariana Tavares (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. Elisa Veiga (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. Lurdes Veríssimo (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa)

Family foster care is a topic that currently gives rise to some interest, however, it still presents little research in the Portuguese context.

International research shows that the main challenges of foster families are related to the separation from the child and to reduced external support in financial, emotional, psychological, and social domains. To address these challenges, families have to put together coping strategies related to family resilience in the fostering process, such as: personality traits; family cohesion; family flexibility; self-esteem; skills in problem solving and organization. Regarding the youth, there are few studies on the challenges faced by children and youth in foster care but also on adaptation strategies and protective factors that may help to circumvent them. Main challenges identified relate to withdrawal of the birth family and integration into the foster family. Perception of their relationship, both with the foster family and with the biological family, can be equally a challenge or a protective factor. Regarding to adaptation strategies, psychological resilience stands out.

Thus, this study intends to integrate the results of two complementary investigations, conducted as a part of two Master's Degree Dissertations. On the one hand, a study that aims to understand the challenges and the coping strategies throughout the foster care process in the perspective of the foster care youth, and, on the other hand, a study that intends to understand the challenges and coping strategies throughout the foster care process in the perspective of foster care families.

Both studies are still ongoing, in the data collection phase. Using a qualitative methodology, young people in a situation of family foster care and foster families are currently being interviewed, based on a semi-structured script. Both scripts include dimensions such as sociodemographic data, relationship between foster family and youth, challenges and coping strategies throughout the foster care process. The script for the foster families, also includes a dimension “motivations to foster”.

Because it is still an ongoing study, we can not yet present any results. However, the data collection will be finished in the coming months and it is expected that the results can add to the investigation in the area of family foster care in Portugal. More specifically, because this study allows, on one hand, to understand perspectives of families and youth and, on the other hand, to address their complementarity, since the same issues, in both perspectives, are adressed.
Antecedents of Social Development in Children in Non-Kin Foster Care: Emotion Understanding and Language

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mr. Pablo Carrera (University of Seville), Dr. Jesús M. Jiménez-Morago (University of Seville), Dr. Maite Román (University of Seville), Dr. Esperanza León (University of Seville)

Like for all children, for children in foster care an adequate social adaptation is a key factor for healthy psychological development, although it can also become a challenge for which certain skills are needed. Among those skills, emotion understanding and language have been found to be relevant.

Emotion understanding refers to the recognition and comprehension of emotional displays, their causes and relations with other mental features. It is part of the broader concept of social cognition, which permits children to understand and anticipate others in social interactions. As for language, it plays also a prominent role in social development enabling—or impeding if it’s impaired—social interactions, and consequently the opportunities for further development of social skills.

Both areas are tightly related and may be delayed in children who have suffered neglect or other adversities in early childhood, thus being a possible pathway to later poor social outcomes in foster children. On the other hand, they could also function as protective factors in their positive pole facilitating adjustment to the school and the peer group.

Although the scientific literature is consistent in the language developmental delays shown by maltreated children in general, there is also evidence of a great recovery when children are placed in a more stimulating environment, as it occurs in foster care. Regarding emotion understanding the results are more inconsistent.

The aim of this poster is to describe the emotion understanding and language development of foster children in preschool age and middle childhood. We also explore the relations of pre- and post-placement variables like age of entry into care, time in current foster placement, or type of maltreatment suffered with these two dimensions.

The sample is formed by 51 children (27 girls, 52.9 %) from four to nine years-old ($M = 84.90$ months, $SD = 19.68$) in non-kin foster care from Southern Spain, without a severe disability, and at least five months of time in their current foster placement. The Test of Emotion Comprehension (a vignette-based measure) was used to assess emotion understanding and the expressive Vocabulary test of the K-Bit for language development. Both tasks were administered to the child by a trained researcher during home visits.

Contrary to expected, the sample didn’t present delays neither in emotion understanding nor in language development: the mean in emotion understanding by age group was comparable to that of the standardization sample of the measure and the standard score mean in the language assessment was 96.39 ($SD = 13.70$), near to the standardized mean of 100. Both dimensions were highly correlated ($r = .54$, $p < .001$). The results will be discussed considering developmental theory and current foster care practices in the study context.
Psychosocial Adjustment and Executive Functions: Teachers’ and Caregivers’ Assessments in Non-Kin Foster Children

Ms. Cristina Murillo (University of Seville), Dr. Jesús M. Jiménez-Morago (University of Seville), Dr. Maite Román (University of Seville), Mr. Pablo Carrera (University of Seville)

Psychosocial adjustment and executive functions are areas which need to be more explored in foster children. Some studies highlight problems in behaviour, hyperactivity, or attentional and inhibitory difficulties, which can compromise the child’s development in different contexts. In this sense, family and school are essential settings in early life where foster children usually present more problems than the general population. Most research about children in foster care includes the caregivers’ view, but data about the teachers’ perspective are still limited. The few studies have compared the teachers’ and the caregivers’ assessments about these aspects of children’s development show inconclusive data. Some of them show that caregivers tend to perceive more behaviour problems than teachers do, although other studies reported similar assessments or even the opposite. Moreover, some research indicates that caregivers report more impulsivity or inattention difficulties. Because of the diverse results in the literature, it seems clear that we must deepen the vision of teachers and caregivers on the behavioral and cognitive dimensions of the development of foster children.

To provide a greater understanding of these issues, the main objective of our study is to compare the teachers’ view with those of the caregivers about psychosocial adjustment and executive function in foster children. The sample is part of a wider research in process. It is composed of 45 children in non-kin foster care from the provinces of Seville and Cadiz (Spain) between 4 and 9 years old ($M=7.15; SD=1.6$). Both teachers and caregivers have completed two questionnaires, the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) to evaluate psychosocial adjustment, and the Behavior Rating Inventory of Executive Function (BRIEF; Gioia, Isquith, Guy y Kenworthy, 2000) to assess executive functions.

Preliminary results indicate that correlations between the teachers’ and the caregivers’ assessments are elevated and positive in most of the scales explored. It means that both teachers and caregivers perceive foster children in a similar way. The more problems teachers observe the more problems caregivers also notice or vice-versa. However, we also have found some significant differences. Concretely, teachers evaluate foster children more negatively in BRIEF subscales of emotional control, organization of materials, behavioral regulation, and also in the global index of the executive functions. In conclusion, like previous research indicates, there is a high degree of agreement between teachers’ and caregivers’ assessments. However, it appears that the teachers of our sample perceive more difficulties in foster children in some scales of executive functions than caregivers do. Probably, teachers are more sensitive to the cognitive aspects of children’s performance and behavior, since these aspects are closely related to school tasks. For that reason, the use of multiple informants allows us to have a more complete assessment of the foster children’s development in different contexts. That way, we can adjust the intervention depending on the child’s needs and promote the continuity and stability between settings. Finally, a better knowledge of the teachers’ view about foster children helps us to identify their needs at school and support their adaptation to this important context.
Kinship Care or Upbringing by Relatives? The Need for ‘New’ Understandings in Research

Our published paper addresses the knowledge production on formal kinship foster care. In spite of growing interest in this phenomenon, little attention has been paid to how kinship care should be understood in research – as a service under child protective services or as upbringing by relatives. Each of these understandings leads to different research questions and creates guidelines for what falls into or outwith the focus of research. In kinship care research, this phenomenon has primarily been studied as a service. Research that seeks to evaluate the effect of kinship care compared to non-kinship care is used as a case to discuss the implications for the type of knowledge that researchers produce. While we acknowledge the importance of this research, we demonstrate the many challenges it involves and why this should not be the primary focus in kinship care research. On the background of these limitations, we argue in favour of approaching kinship care as upbringing by relatives – as ways in which family life can be organised and structured. This can lead to relevant knowledge that will enable us to obtain a better understanding of what kinship care is and involves.
This paper sets out an international review of the literature concerning listening to and consulting with children for research in kinship care. It presents the current state of knowledge having utilised a narrative review and a comparative frame to reflect on why children's voices are relatively absent in kinship care research.

Kinship care arrangements are when children become looked after by their relatives or non-related extended family members. It is a time-honoured childcare mechanism as well as a family support system. Although in many communities looking after one's young relatives is a natural thing to do, in the last 25 years, formal kinship care has become a newer placement paradigm in Europe, the United States, Australia and New Zealand. This is reflected in a shift in policies, with kinship care now seen as an alternative to non-kin foster care and adoption. Around the world, it is now the most used family arrangement for children that are unable to be cared for by their birth parents.

Surprisingly, there is a paucity of research into kinship care. The little research that has been done shows a preoccupation with the effect of kinship care compared to that of non-kinship care. This produces a range of descriptive outcome studies with most reflecting the goals of child protection services: safety, permanency and well-being. As such, it is usually studied as a service, and most research, therefore, evaluates tangible outcomes such as physical health and achievement, rather than less concrete ones such as identity.

In studies of kinship care, children's views are usually pursued extempore or as an adjunct to another primary objective. The little research that has sought the views of children has generally found that the children state they are happy and feel safe in their placements. They also report that they are pleased that other care options such as non-kin foster care or adoption have been avoided. However, questions on the casual mechanisms for these feelings are rarely tackled, and it is argued that cultural contexts, including social policy, are not adequately taken into account.

This paper, therefore, questions how kinship care is typically constructed and how this is reflected in the research, or rather the relative lack of it. Kinship care straddles the gap between care by family and care by the state; between the private and the public. It is, therefore, useful to reflect on the ideologies of the systems in which each phenomenon is placed.

The paper concludes by highlighting how further researching of children's views can add value to kinship care research and recommends how they should be sought. It argues for a focus not just on what kinship families are, or on evaluating them in comparison to normative family practices, a service, or as alternative child-care arrangements, but also on finding out what families in these arrangements do, and what matters to the children that are at the centre of them.
According to the Annual Categorization Report on the Situation of Residencial Care of children and young people, the number of new arrivals in recent years has exceeded two thousand. Considering that residential care is one of the most frequently used promotion and protection measures, it is worrying how little is known about the perspectives of children and young people in this situation. Recognizing one of the principles of the United Nations Convention on Children's Rights, that its perspective must be taken into account in any decision affecting its welfare, there has been a gradual but profound shift in national and international research on the theme, seeking to include the perspectives, opinions and experiences of the children and young people in residencial care, especially in relation to the practices and services provided to them. Our interest is particularly focused on the experience of entry and adaptation (or not) to the measure and the residential home, so we developed a qualitative study with 7 young people aged between 11 and 15 years who were in residential care for less than a year (we continue the data collection process). The data were collected through a semi-structured interview developed for this purpose, which dealt with aspects that preceded the institution's entry, such as the perception of the reasons for the application of the residential care measure, the process of applying the residential care measure and the participation in the process; on the immediate experience at the time of entry, in particular the memories of the entry into the institution, the description of the institution and experience of living in the institution. A socio-demographic questionnaire with open and closed response was also applied to the case manager of each participant in order to collect information about the participant, the case manager and the institution. We follow an inductive approach to data analysis, of semantic and categorial nature, using a process of validation by consensus. Of the main themes that emerged from the preliminary analysis, deserve to be highlighted the process of application of the measure and the perception about the measure, which shows that only when they are the ones requesting the residential care, the participants evidently know the reasons and procedures of the process, in which they play an active role, which in turn contrasts with the ignorance and non-involvement of the other participants. The emotional experience at the time of reception is described with testimonies of sadness and suffering. The presence and the involvement of the technical team upon entering the institution is an aspect considered very important by the participants. Finally, the current perception about residential care and the experience of living in the foster home are based, on the one hand on families' longing, and on the other hand, with satisfaction with the residencial care, with the people and with the relations established, mainly in terms of the support received from the technicians. We hope with this contribution, from the views of the main users of the children and youth promotion and protection system, to deepen the reflection on the residencial care policies and in particular on the processes implemented (or not), in order to identify the facilitating factors of the experience.
Evidence suggests the need to belong as a driven human motivation to establish long-lasting social bonds, with impact on mental and physical health, emotional and psychosocial well-being and behavior. Literature acknowledges that children and youth in residential care often share a damaged sense of belonging and that the journey to restore it during placement is often long and troubled. Despite the relevance and impact of a sense of belonging on the life chances of children and youth living in residential care, the literature and empirical research on this topic remains scarce.

Objectives: We will conduct a literature review to provide an overview and summary of the findings regarding the sense of belonging of children and youth living in residential care.

Method: Departing from Hamish Canham (1998) metaphor on children’s homes as “station waiting rooms”, we conducted a comprehensive literature review focusing on the sense of belonging of children and youth living in residential care facilities, and on intervention models seeking to restore it. Search terms such as “belonging” and other keywords related to this topic (“identity”, “place attachment” and “sense of community”) were typed into several databases.

Results: Literature highlights that, the sense of belonging of children and youth in care is often strongly damaged by the removal from their birth families, where they felt they belonged, despite the experiences of abuse, maltreatment, neglect or lack of security and protection. We will present how factors associated to the residential care context may represent further constraints on the journey to restore the sense of belonging of these children and youth, but also how residential care professionals might play a key role on this mission. Literature also hypothesizes the challenges that, not only children and youth in care, but also residential care professionals face towards developing a sense of belonging.

Conclusions: We will promote further discussion and reflections on how the residential facilities’ culture and climate, personalized and therapeutic relationships, and the residential care professionals’ recruitment and training may play a major role in restoring the sense of belonging of children in care. We conclude that, to better inform policies, practice and training, further empirical research, measures, and evidence-based interventions is needed to achieve a deeper understanding of the sense of belonging of children and youth in care, on its impact on their mental health and life chances, and on the journey to restore it.
My Home and I: Residential Care Quality and Adolescents’ Psychological Adjustment, Self-Esteem and Satisfaction with Life

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Background: Residential care (RC) in Portugal accounts for over 96.8% of out-of-home placements of children and most of them are adolescents (56.9%) aged 12-17. Youngsters in RC often display mental health problems, lower psychological adjustment, self-esteem and life satisfaction. The scarcity of studies on RC quality in Portugal underlies the importance of research about how far the available services meet the real characteristics and needs of young people in care, including mental health issues and the behavioural and emotional problems displayed. Objectives: The aims of this research were to identify and characterize the behavioural and emotional problems of youngsters in RC; measure self-esteem and life satisfaction (cognitive dimension of well-being); evaluate youngsters’ perception of the quality of RC centres; and explore the relationships between these variables. Method: Five RC centres were visited within a pilot-study of a nationwide assessment on the quality of the Portuguese RC system (EQAR: Estudo da Qualidade do Acolhimento Residencial em Portugal / Assessment of RC Quality in Portugal). Sixty-one adolescents living in RC settings, aged 12 to 20, participated in this study. Data on RC quality was collected using the ARQUA-P: The Portuguese Comprehensive Quality Assessment System for Residential Care. From all the ARQUA-P’s instruments only data collected through the “Previous Information Survey” and the “Interview for children and youngsters” were used. Adolescents filled in the Youth Self-Report for ages 11-18 from Achenbach’s System of Empirically Based Assessment (YSR), the Strengths and Difficulties Questionnaire (SDQ), the Rosenberg Self-Esteem Scale (RSES) and The Satisfaction with Life Scale (SWLS). Results: The results showed that adolescents in care positively evaluated the quality of the RC centres where they lived. Adolescents’ gender and RC centres’ size were significantly associated to quality. Adolescents in care presented more signs of maladjustment, lower self-esteem and life satisfaction than their normative counterparts, with girls revealing even lower results. Significant positive correlations were found between some dimensions of the RC quality and the measures of adolescents’ psychological adjustment, self-esteem and life satisfaction. Conclusions: In agreement with other countries’ research, participants in this study revealed high levels of mental health symptoms and psychological maladjustment. Implications for further research and for the improvement of professional practices in are discussed. RC centres should pay more attention to children’s opinions so as to meet their needs. It is specially important to safeguard the specific needs of female adolescents since they show higher levels of psychopathology, lower self-esteem, wellbeing and satisfaction with RC. There is a need to promote better mental health assessment in order to provide adolescents in RC with the necessary support in a timely manner and to reduce the observed psychopathological symptoms. The importance of investment in the quality of RC facilities may also help to promote higher rates of self-esteem and wellbeing in adolescents in RC.
Peer Influence in Residential Care: Positive and Negative Peer Contagion

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Jonathan Huefner (Father Flanagan’s Boys Home)

The goal of residential care programs is to provide effective treatment for troubled youth, minimizing those situations where these youth might run the risk of getting worse. Policy and system reformers who are critical of residential care often contend that behavior problems in youth in these settings get worse due to the influence of negative peers.

Concern about negative peer contagion for youth in group care settings has been long-standing and widely shared. There is strong evidence that the influence of negative peers is significantly associated with problem behavior in youth, however, most research examining negative peer influence has been conducted in naturally occurring peer groups and may have limited relevance to group treatment settings.

Recent research that has specifically looked for negative peer contagion has not found evidence supporting it being an issue in the residential care program examined. Specifically, there is no relationship between exposure to deviant peers and an individual youth’s externalizing behavior patterns over time, youth with more serious problems showed the greatest improvement, and having a higher percentage of troubled youth (those identified as conduct disordered) in a residential home was not related to the total number of problem behaviors within the home. Each of these studies used clinical diagnosis as the criterion for negative peer.

Previous research using diagnoses to identify negative peers has not found evidence for negative peer contagion in residential care. Additionally, previous research has not examined the potential for positive peer contagion in residential care. Our present study used youths’ expressed level of problem behavior to examine the impact of both negative and positive peers on changes in problem behavior in a residential care program.

Analysis based on data for 886 youth who were admitted to a residential care program in the US between January 1, 2010 and June 31, 2013. Administrative data for behavioral functioning was used in the analysis. Current levels of expressed problem behavior were used as the criterion for identifying a negative peer versus a positive peer. Specifically, youth whose number of problem behaviors for a given month was at the average or higher for the residential program as a whole were classified as negative peers. Additionally, youth who expressed no problem behaviors for a given month were classified as positive peers. Latent Growth Curve Modeling (LGCM) was used examine the impact of positive and negative peer influence on behavioral change over time.

Results showed that while overall there was significant behavioral improvement for youth in the program, those who had a greater number of negative peers in their home did not improve as much as the overall norm. Conversely, youth who had a greater number of positive peers in their home demonstrated a rate of behavioral improvement that was greater than the overall program norm. Peer contagion is the view that children’s behavior is influenced by the behavior of other children around them. The results of this study are consistent with this view, both in terms of benefiting from positive influence and from being held back by negative peer influence. However, it is important to note that overall the youth in this program improved regardless of the nature of the peer influence around them. Additionally, these results indicate the importance of actively managing the group composition in residential programs. A strategy of manipulating normative behavior within a home based on the group norming literature might also create situations controlled by positive peers. Other potential strategies to maximize the potential for positive peer influence will be discussed.
A global paradigm shift is currently taking place with regard to the understanding of health and disease throughout the human life span. International research indicates that adverse childhood experiences (ACEs) play a key role in child development and subsequent adult health. This new perspective on the foundations of health offers hopeful insights to promote health and mitigate negative health consequences. Children with intellectual disabilities (ID) and their families are currently underrepresented in international ACEs research, while it is important that the current insights can also contribute to the improvement of their health and well-being.

In this poster presentation, the results of an exploratory case-file study (N=69) on ACEs in children with ID in Dutch residential care will be presented. This study is part of PhD research focusing on the development of an ACE screener for children with intellectual disabilities. Because of the interdependence of the child and the family, a two-generational approach will form the basis for this screener. ACEs assessment can form a basis for a dialogue between children, parents and professionals in which threats, resources and (in) formal support can be identified and translated into successful interventions. Such a dialogue-based approach can contribute to “ACE awareness” in children, families and professionals, contributing to breaking the cycle of childhood adversity.
Future expectations consist of plans, aspirations, and fears about possible events in life related to different domains (Seginer, 2009). They have been considered important predictors of adolescent behavior and development (Sipsma, Ickovics, Lin, & Kershaw, 2012). This study examines the future expectations of adolescents in residential care in Cádiz (Spain) and of their classmates. Participants were 78 adolescents (29.5% female) from 10 foster homes, aged 11-17 years ($M =15.4, SD =1.56$), and 723 classmates. Of these 78 adolescents, we visited 45 in their schools (43.5% female), aged 12-17 years ($M =15.17, SD =1.51$). We visited 38 classrooms from 17 schools. A total of 723 classmates completed the same questionnaires. The selection procedure for the participants belonging to this control group consisted of randomly selecting the three students who followed the residential care child on the class list. The classmates were between 11 and 21 years old ($M =14.26, SD = 1.73$). Fifty-two percent of these participants were female.

Given the extreme confidentiality of the information handled and the difficulty in accessing the foster home, it was necessary to sign a Research Collaboration Agreement between the University of Cádiz and the Junta de Andalucía to carry out this study. In addition to this agreement, those responsible for the administration signed the informed consent regarding the specific adolescents and foster homes that would participate in this study. Consent was also obtained from schools and families.

The measure used is Adolescent Future Expectations Scale (EEFA, Sánchez-Sandoval & Verdugo, 2016). This scale has the following subscales: Economic/labor Expectations, Academic Expectations, Well-being Expectations, and Family Expectations.

We present descriptive analysis and contrast tests. As a prior analysis, the chi-square test ($\chi^2(1) = 1.259, p > .05$) indicates that the distribution by gender between the two groups is not different at that statistical level.

The descriptive analyses show that the future expectations of adolescents in residential care are high, except for the academic expectations. In general, they have a positive perspective of their future. They trust that they will do well in the economic/labor, personal well-being and family areas in the future. They show the greatest distrust toward their future in the academic area.

The comparison of average scores of the two groups shows that the adolescents in residential care have lower future expectations than their classmates. The differences are significant both in the global scale, and in the subscales of academic expectations and personal well-being.

Adolescents in residential care present positive levels of future expectations, despite showing lower levels than their classmates. This fact should be considered as a key aspect for intervention with these children because the fact that they have high aspirations can motivate them when it comes to setting their own goals in different areas of their lives. In turn, their approach to goals and objectives will influence them to act in a certain way. This should be the main target of our work because children with the lowest expectations may behave in the present according to their expectations of some reward or immediate satisfaction, which can lead them to perform risk behaviors.
Studies of looked-after children have traditionally focused on family. However, we know little about their friendships. Furthermore, adolescence, compared to infancy and toddlerhood, is an under-researched area in the context of child protection, even though a large number of children in the system are in this developmental period. During adolescence the peer group gains more importance. However, some studies have found that looked-after children present more emotional and behavioral problems, as well as difficulties in social competence, which affect their friendships. Some research has found that less than half of looked-after children have close friends. The objective of this work is to study the satisfaction and perceived social support in adolescents who live in welfare centers, kinship, and a reference community group.

**Method**

**Participants:** The sample was comprised of 28,998 adolescents between 11 and 19 years old. Out of these, 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 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 Friendship Satisfaction and Multidimensional Scale of Perceived Social Support (MSPSS) for perceived friend support.

**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 groups in satisfaction ($p \leq .001$) and in perceived peer support ($p \leq .001$). Specifically, the differences seem to be higher in adolescents who live in residential care, both in satisfaction and in perceived support. The kinship group showed more similarities to community adolescents than to the adoptees in perceived peer support.

**Discussion**

Coinciding with previous research, as well as with certain preconceived expectations given their adverse past, institutionalized adolescents show lower scores in satisfaction and perceived social support with peers. Conversely, kinship adolescents showed better scores than expected in perceived peers support, even better than adoptees. Nevertheless, adolescents who live in residential care showed a lower satisfaction with friendships than the community adolescents. These facts demonstrate that looked-after adolescents need more support from the system.
Mismatching Choreography in Substitute Care Work

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Tuija Eronen (Faculty of Social Sciences, University of Tampere), Dr. Riitta Laakso (National Institute for Health and Welfare)

This presentation is based on the research project, which examines emotionally and ethically challenging moments in substitute care work. In care, the responsibility for children's day-to-day care and upbringing is transferred from parents to foster parents, or to the employees of residential institutions, as well as, to the social workers responsible for the child's affairs.

With the concept of “substitute care work” we refer to the tasks of various actors protecting children's wellbeing after the care order decision in cooperation with the various occupational groups in the child welfare system – social workers, employees of the child welfare institutions and foster parents. In this work different actors have the shared social responsibility of the wellbeing and the good life of a child in care.

Laura Steckley and Mark Smith (2011) have described the differences in work orientation between social work and substitute care work through Nodding’s (1984) conceptualization. The concept of care is divided into two dimensions, “caring about” and “caring for” children. “Caring about” reflects a general predisposition to see that children are well treated but do 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 the 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.

The research has been carried out in the years 2016 – 2017 with social workers, residential care workers and foster parents in two Finnish municipalities. The data consists of foster parents’ and care workers’ written narratives (12) and the focus group interviews of social workers in foster care (two groups with 11 employees). The material has been analyzed in accordance with the content analysis principles, cyclically and dialogically, based on the researchers’ triangulation.

It was found out that the challenges in substitute care work were adhered to in situations involving the mismatch between the prevailing situation and the intended one. The emotionally and ethically challenging situations and the complexity of substitute care work relate to the employees’ ability to respond to the needs and care of the children living in care.

(As a result,) we have identified three challenging themes: 1. persistent organizational changes and need of continuity, 2. mismatch between institutional and personal responsibility, 3. systematic expectations for work and situational specificity in daily life. These three themes construct the complex choreography of mismatches in substitute care work, as they also intertwine and are simultaneously present in many everyday situations in caring for and caring about children.
More than Grades: Redefining Educational Success for Youth in Government Care

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Stephanie Martin (McCreary Centre Society), Ms. Maya Peled (McCreary Centre Society),Ms. Annie Smith (McCreary Centre Society)

As part of a larger project conducted by the BC Office of the Representative for Children and Youth (the Ombudsman for children and youth in government care in British Columbia, Canada), McCreary Centre Society was asked to capture the perspectives of youth in and from government care with respect to the barriers and supports they experience in achieving educational success. The larger project also examined the perspectives of social workers, foster parents, teachers and school principals.

McCreary initially aimed to engage 80 young people with government care experience in diverse urban and rural communities across the province. However, there was such interest in the project from young people that a total of 105 youth participated in focus groups and a further 57 completed an on-line survey.

Focus group participants ranged in age from 13 to 24, and around a quarter (26%) were aged 19 or older. Just under half (48%) identified as male, and the same percentage as female. The remainder identified as gender fluid, transgender, or another gender identity. All project participants had experienced at least one type of government care. Fifty-nine percent of focus group participants were currently in government care, including foster homes, group homes, and on Youth Agreements.

Most focus group participants (64%) were currently attending high school or middle school. Among those who were not in school, over half (52%) had stopped attending before graduating high school.

Focus group participants were asked to define what educational success meant for youth in government care. At each focus group, youth reported that educational success looked different for youth in care, compared to their peers not in care. The main reason was that youth in care had priorities and responsibilities beyond school which other youth typically did not have. These included needing to earn money, taking care of their personal needs (e.g., buying groceries, cooking, doing laundry), caring for younger siblings, and sometimes finding a safe place to sleep that night.

Project participants saw educational success as more than achieving good grades, graduating from high school and pursuing post-secondary education. They described it as attending school regularly, despite the challenges in their lives, and feeling connected, safe, and engaged there. They deemed they were doing well in school if they felt comfortable approaching teachers for help and had good relationships with staff and their classmates.

Youth felt that graduation with their same age peers should not be the primary goal of school for youth in care. They wanted to learn at their own pace without their graduation date looming over them. For many attending school regularly, arriving on time and staying for the full school day were considerable achievements.

Youth identified a number of ways youth in care could be supported to succeed in school. These included offering more opportunities for youth to receive one-on-one support and individualised learning, more access to life-skills training, the option to enroll in alternative education, having a named adult within the school whom they could approach for support and who knew their care history, engaging foster parents in school activities, and being supported to develop healthy peer relationships.

Youth researchers with government care experience who worked on the project have shared the findings of the
report with educators and the provincial government's Ministry of Education. As a result of this project, some changes are occurring within the BC school system including the appointment of individuals within each school who are responsible for ensuring the smooth transition of youth who change schools due to a change in care placement, and for supporting youth in care through the school system.
FARE SCUOLA – Project with the Preschools and the Primary Schools in Italy

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Novella Pellegrini (Enel Cuore Onlus), Mr. Massimiliano Massimelli (Foundation Reggio Children), Ms. Barbara Donnici (Foundation Reggio Children)

In 2015 the Foundation Reggio Children - Loris Malaguzzi Centre and Enel Cuore Onlus launched the project called FARE SCUOLA (‘Making School’) that aimed to intervene in 75 preschools and primary schools in the whole Italian national territory during 4 years, with the goal of improving the quality of school environments intended as learning contexts and relational places.

The project established a dialogue between the pedagogical experience of Reggio Emilia and the experience of social solidarity of Enel Cuore Onlus.

The possible interventions aimed to qualify the school environment by proposing new and different sensory qualities by means of colours, of lighting, of furniture, of communication proposals. The entire process also offered formative opportunities that engaged the officials and the teachers of the schools involved in a dialogue with the educational experience of Reggio Emilia.

Areas of intervention:

• places of interconnection (reception areas, corridors, halls, squares)
• classrooms / departments
• ateliers / laboratories
• classrooms for small group activities

The choice of the areas where to intervene and develop the qualification project is shared between the school and the multidisciplinary working group of FARE SCUOLA – composed by pedagogistas, architects, interior designers, landscape architects.

The whole process also includes training opportunities that bring together both school principals and teachers involved with the educational experience of Reggio Emilia.

The training courses examine in depth the main educational issues that emerged during the project development and that are linked to the proposed qualification interventions.

The meetings are held both in Reggio Emilia and in other locations on the whole national territory (Naples, Milan, etc.).

The most innovative element of the project is the process, a result given by a first initial prototyping phase. It develops according to the following phases:

• Launch of the institutional dialogue with the territories;
• Proposal of a target school within the territory;
• Dialogue with school principals;
• First inspection and dialogue between the FARE SCUOLA team, the local administration and school principals and teachers;
• Identification of the intervention area(s);
• Identification of the designer and development of a project proposal;
• Project sharing with the school and families;
• Start and implementation of the intervention;
• Training courses both in Reggio Emilia and in other locations.

In numbers:

• 75 completed interventions
• 10,275 children involved
• 140 teachers involved in the professional development opportunities
• 26 designers involved
• 7.4 million, the economic value of the Project.
The Youth Research Academy (YRA) is for youth aged 16–24 who are currently in government care or have recently transitioned out of care. It operates out of McCreary Centre Society, a non-profit community-based research and evaluation organization in British Columbia, Canada.

Youth in the YRA are trained to design, deliver, analyze, and disseminate research projects of interest to young people with care experience and the agencies that serve them. To date, there have been three cohorts (starting in June 2016), including the current (third) cohort which started in June 2018 and will end in May 2019.

The goals of the YRA are to increase youth-led research; train youth in and from care in community-based research and dissemination; assist participants to develop marketable employment skills; offer community agencies access to trained youth researchers who can conduct research and evaluations of interest to those agencies; and offer evidence of the success of this model of engaging and supporting vulnerable youth.

Each cohort of eight participants takes on a variety of projects. Examples of projects carried out to date include an initiative commissioned by the Federal Department of Youth Justice examining how to improve residential substance use treatment programs for Indigenous youth. Provincial projects have included examining ways to improve educational outcomes for youth in care; assessing the applicability of a “Family Finding” model for use in British Columbia; investigating risk and protective factors associated with underage alcohol misuse among girls; and evaluating an initiative aimed to support youth from care to obtain their driver’s license.

The final project of each cohort is to design and deliver a two-week ‘Youth Research Slam’ which involves peer-to-peer training with other young people who are interested in learning about community-based research and who want to be involved in a short-term research project. The first cohort of the YRA chose to carry out a project on how young people experience and manage stress, to gain a better understanding of how youth can best be supported to manage their stress. The second cohort decided to investigate the relation between nutrition and mental health. Slam participants created an online survey, analyzed the survey data, and produced a report and other dissemination materials which they shared with key stakeholders at the completion of the Slam. They have also delivered workshops across the province to engage other young people in a dialogue about improving youth health.

The evaluation of the YRA entails a self-report survey at intake and another at discharge which the first cohort were involved in developing. In addition, each cohort creates a clay-animation film at the start and end of their involvement in the YRA, reflecting their experiences in the Academy. Findings to date indicate that participants are gaining skills not only in research but also in other areas, such as teamwork, communication, working in an office environment, and conflict-resolution. They have reported that the knowledge and skills gained through the YRA have helped prepare them to find and maintain meaningful employment after they leave the Academy. Some have also indicated that their experience has helped them find their career path. In addition, participants have reported a greater sense of connection to their community and a desire for continued involvement in community activities and decision-making to contribute to positive change.
Addressing Risk Factors in Colombian Youth Transition to Adulthood from Care

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Natalia Moreno Lara (University of Groningen)

Transition to adulthood can be a challenging process for young people aging out-of-home care due to some of risk factors to which they are exposed. These risk factors are exclusion, early parenthood, low education and unemployment, higher chances to get in contact with criminal justice, and health problems (López, Santos, Bravo, & del Valle, 2013; Stein, 2005). In addition, young Colombian leavers have to face specific difficulties related to the Colombian context regarding education and labor. Education because only 48% of students in Colombia enroll in higher education after finishing school, being economic difficulties the main reason (MEN, 2015.). With regards to labor, the youth unemployment rate is 17%: 13% for males and 23% for females (DANE, 2018).

To support young leavers who are in the transition to adulthood, Colombia has developed policies and projects. Dream Project: Opportunity to Fly is a national project that gathers actions aimed at generating conditions to continue studying and enter to the labor market, strength the identity of youngsters, provide social skills, capacity for self-management and participation, preparing youngsters to subsequently assume an autonomous, prosperous and independent life (ICBF, 2016).

Is the above-mention Dream Project addressing the general and specific risk factors for young leavers in Colombia? A documental review is made to provide an overview of the country situation regarding youth transition to adulthood. Finally, the conclusions are presented revealing that the national project targets the general risk factors by: delaying the exiting, providing housing, offering economic support for educations and training, making alliances to help the youngster to enter the labor market, promoting trusting and supportive relationships for them, and providing an individual approach by working with each youngster to identify its personal path.

However, focusing on the specific Colombian difficulties, Dream Project lacks a gender perspective which may tackle specific difficulties as labor disparity. In consequence, further analysis is needed to identify if individual approaches gear gender disparities.

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Topic: Transition to adulthood from care

REFERENCES
Care Leavers, Well-Being and Control

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Claudia Mollidor (Ipsos MORI), Ms. Raynette Bierman (Ipsos MORI)

Background
While in care, young people in the UK often experience placement changes and high social worker turn over. This, as well as other factors, means that young people often do not have a positive relationship with a trusting adult by the time they leave care. Care leavers are also less likely to have strong social networks with support to fall back on when they experience difficulties. In England, care leavers are allocated to a Personal Adviser, who is there to support them in becoming independent adults.

Under the Department for Education Innovation Fund in Children's Social Care, we have been commissioned to evaluate a new way of delivering care leaver support – called Local Area Coordination – in a local authority in the Midlands region of England. Care leavers in the local area have particularly poor outcomes, compared nationally and with statistical neighbours.

Method
The evaluation will focus on a process and impact evaluation of delivering Local Area Coordination to care leavers in a proportion of neighbourhoods of the town. Other neighbourhoods will not have Local Area Coordinators and care leavers living in these neighbourhoods, as well as those in neighbourhoods who do not take up the new support will form a comparison group.

The evaluation captures baseline data of care leavers via an online survey in August / September 2018, and two follow-up surveys to measure change over time and between care leavers who do and don’t receive the additional support.

The survey includes standardised measures such as the short Warwick-Edinburgh Mental Well-Being Scale (sWEMWBS), questions from the Good Childhood Index (GCI) as well as questions about social networks, relationships, accommodation and financial confidence.

Baseline findings
As expected, care leavers in the study area had substantially lower sWEMWBS scores than a national sample of 16-24 year olds in England. Preliminary findings suggest that control over pathway planning and finances are important factors linked to care leaver wellbeing. Those who 'always' feel involved in their pathway planning scored on average 5.7 points higher than those who only feel involved ‘sometimes’. Similarly, those who feel most in control of their finances and the things they have score 6.7 points higher than those who are least happy with this. Recommendations to other care leavers focused predominantly on making the best use out of one’s network and the support provided by PAs.
A Monitoring System for the Evaluation of Care Services and Support for Young People Leaving Care

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mrs. Federica Gullo (University of Oviedo), Mrs. Laura García-Alba (University of Oviedo), Mr. André Tavares Rodrigues (University of Oviedo), Prof. Jorge F. Del Valle (University of Oviedo)

The research tradition on transitions to independent life of adolescents reaching the majority age being in care has increased significantly in the last years, becoming also a major concern for child care authorities and policy makers. International comparative research (the international INTRAC network has contributed with a book and a special issue in a scientific journal, etc.) shows the difficulties of this process of leaving care and getting an independent life avoiding serious risks of social exclusion. Therefore, a raised awareness emerged in last years about the importance of preparing young people before (in residential or foster care) and gradually in their pathway to adult life in order to make it as successful as possible.

The Government of Catalonia has the most developed transition assistance and support projects at national level in Spain, being a pioneer in offering a guaranteed service for care leavers. With the creation of the “Area of Support for Youth in care and leaving care” (ASJTET, a unit of the General Directorate of Child and Adolescent Care, of the Government of Catalonia) a number of services were guaranteed to young people between 16 to 21 years old, both in the time of preparation (16-18) and aftercare time. Those services include socio-educational monitoring, housing, psychological support and supervision, financial aid, socio-labour insertion and legal assistance.

The aim of the present work is to show a “monitoring system” which will allow to collect data and indicators in a systematic and permanent way to facilitate process and outcomes evaluation of the leaving care support program. This tool also facilitates the initial assessment of each young person, the design of an individual plan of intervention adjusted to their own needs and the assessment of the progresses achieved.

This system collects indicators of both process and results, thanks to three components included: the Cumulative Register, the Individual Work Plan and the Assessment of Objectives of Intervention. The method requires to designate a professional of reference (key worker) for each young person, who is responsible for initiating, keeping updated and closing the system.

The main aim of this monitoring system is to make a methodological contribution to program evaluation in this field. By evaluating progress in terms of academic and educational achievements, access to employment, availability of accommodation, perceived psychological well-being, self-esteem and mental health, it will be possible to verify whether the programs have improved the quality of life and well-being of this population. In this way, it will be easier to analyse the key aspects which promote a successful transition from childhood to adulthood, as well as to improve the existing benefits and the interventions that are carried out for this vulnerable group, with the objective of improving their life conditions.
Design of a Monitoring System to Evaluate the Outcomes of Care Leavers in Catalonia

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Clara Sanz Escutia (Autonomous University of Barcelona), Dr. Josefina Sala Roca (Autonomous University of Barcelona), Ms. Ana Villa Uriol (Federació d'Entitats amb Projectes i Pisos Assistits (FEPA)), Mr. Joan Prat Armadans (Fundació Servei Solidari)

Aims
Longitudinal studies in the field of former foster youth transition are presented as a necessary strategy to redirect the existing support services, as shown by the work of Dr Courtney in the US context through the Midwest Study and the CALYOUTH.

On the other hand, in Catalonia the data show the benefits provided by the transition support services (ASJTET, 2011), although there are only a few cross-sectional studies addressing this issue (Montserrat y Casas, 2010; Montserrat, Casas y Sisteró, 2015; Sala, Villalba, Jariot y Rodríguez 2009; Arnau-Sabatés y Gilligan, 2015). Thus, the need to monitor the situation of these young people is brought to light.

In this communication, the CALEAMI is presented (Care Leavers Moving to Independent Life). This project arises from the synergies between the IARS research group of the Autonomous University of Barcelona and FEPA, the Federation of Entities with Projects and Supervised Apartments, and it is led by a promoter committee comprising different professional profiles.

The purpose of the project is to systematically collect information on the transition to adult life of the same group of former foster youth in order to provide empirical evidence on the effects of current transition support services and programs for their constant improvement.

Method

The CALEAMI project is presented as a longitudinal study. In a first phase, a mixed methodology will be used to design and validate a monitoring system. After refining the instruments, the monitoring of the different cohorts that leave the protection system every year because they have come of age will begin. These same young people will be subsequently interviewed every two or three years until they reach the age of 26, thus obtaining information throughout the process of transition to adult life. The results obtained will be contrasted by conducting discussion groups.

The validation of the indicators and of all the instruments will be carried out through an advisory council made up of educators, policy workers from the Government and non-profit organizations of the field, former foster youth and researchers.

Results

The monitoring system is currently being developed. Specifically, a documentation analysis is being carried out in order to define monitoring indicators, and the instruments for collecting information are being designed.

Discussion

The project will allow to create and validate a monitoring system in order to collect information systematically over time, and therefore provide the support resources managing organizations with quality information to adjust the existing programs maximizing their effectiveness. At the same time, it will be useful in policy creation processes for designing new services. It will also help to understand how young people experience the transition process.
What Factors Support the Successful Transition from Adolescence to Adulthood for Care Experienced Young People Who Have Lived within Residential Care in Scotland?

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Ruby Whitelaw (Kibble Education & Care Centre, University of the West of Scotland)

In July 2017, 14,897 young people in Scotland were looked after by their local authority due to care and protection grounds or offence-based behaviours. Of these figures, 1509 young people were placed within some form of residential care (Scottish Government, 2018). It is widely accepted that care experienced young people are more likely to need mental health services, to get to prison, become homeless, to have their own children removed and to have issues with substances (Scottish Government, 2017). As a residential practitioner and manager with 24 years experience I am familiar with the poor outcomes some young people experience.

There is recognition that leaving care is a difficult time for young people and that there is an experience of an accelerated transition from adolescence to adulthood (Stein & Dixon, 2005). An American psychologist, J. J. Arnett, has termed the life stage between adolescence and adulthood ‘emerging adulthood’ which reflects the time between 18 and 29 years in contemporary western society (Arnett, 1997, 2000, 2007, 2015). While studies have largely concentrated on American college students, the research highlights that sociological milestones like leaving home and getting married are not how young people view the progression to adulthood. Financial independence, responsibility taking and decision-making mark this transition in modern societies.

As a third year part-time PhD student with the University of the West of Scotland and employee at Kibble Education & Care Centre I have explored this concept from the perspective of young people who have left residential care. Qualitative data from 12 semi structured interviews of 18 – 29 year olds was collected from individuals who have experienced between 6 months and 8 years in group care. The average leaving care age was under 18 years and only one of the young people returned to live with family for three weeks while waiting on their own tenancy. Most young people were not prepared for moving on from their residential service although preparation skills improved for those who spent time within supported accommodation, more than half of this group.

Key themes from the research were family and gender; chaotic lives and negative assumptions; and identity and emerging adulthood. Young people reflected on stigma associated with residential care largely due to a belief that establishments were set up to manage badly behaved children. This added to feelings of isolation with some young people creating narratives to protect themselves from the negative attention of peers. All of the young people interviewed received support from a child welfare advocacy group which gave them a positive sense of their own identity. I used a gatekeeper within this agency to help identify young people for this study.

Similar to studies carried out in emerging adulthood, the participants did not focus on traditional sociological measures such as marriage, children and work to reflect on how much they felt like an adult. Young people highlighted responsibility taking and decision making as key features of being an adult with over 70% of those interviewed feeling they were not quite adults yet. A recent Lancet (2018) publication reflects medically puberty begins earlier and adolescence later extending the transition to adulthood. This research has implications for services who provide residential care and ongoing support from adolescence to adulthood. It has been difficult to gain access to young people who met the criteria for this research. Despite this the 12 interviews conducted have provided rich qualitative data giving valuable insight into the experiences of these young people's lives. This aside, Adler and Adler (2012) view saturation as the ideal with 12 - 60 participants the ‘best bet’.
The Role of Possible Selves and Resilience in Young Peoples’ Journey from Care in a Town in the Eastern Cape of South Africa

Dr. Sue Bond (University of Johannesburg)

South Africa provides no mandated after care services for care leavers, and this group of young people frequently make their way into adult life unsupported and with few resources at their disposal. In 2015 a group of 12 young people in four child and youth care centers in a town in the Eastern Cape of South Africa took part in research to explore the inter-relationship between the possible selves theory of self-concept and resilience. The young people were between the ages of 17 and 18 years and were about to age out of the residential care system. The participants were interviewed using a life map, which asked about their futures at three distinct points; immediately after discharge from the statutory system, and three and five years later. The possible me tree activity was used to explore their hoped for and feared possible selves, and how these might contribute to their resilience as they embarked on the transition from care. These young people were also asked about the preparation for leaving care services they received and how they evaluated these services.

It is now three years from the time these young people participated in the original study and subsequently left the child and youth care centers. A small group of five of the original participants took part in a follow up study. The aim of the study was to explore the participants’ journeys from care and to ascertain if their identified possible selves at the time of the original study, and resilience factors had played a role in facilitating their transition from care thus far. The follow up study was qualitative in nature, using a semi-structured interview schedule to guide face to face interviews with the participants. Participants were invited to discuss their experiences as they left the child and youth care centers and made their way into adult life. The participants were referred back to their life maps and possible me tree activities from the original data collection, and were asked how these had been instrumental (or not) in their journey from care so far. They were also asked if the preparation for leaving care services they had received while in care, had been of any value to them after their discharge from the care system.

The findings suggest that the possible selves of the young people did contribute to their transition from care, and that these emerging adults showed considerable resilience as they began their after-care journey. Based on the findings, the paper makes recommendations for practice with this vulnerable population.
Transition to Adulthood for Care Leavers with Disabilities - A Study of Norwegian White Papers

Wednesday, 3rd October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mrs. Ingri-Hanne Braenne Bennwik (VID Specialized University)

Background

This poster-presentation has its starting point in a PhD project that seeks to explore what characterize aftercare for care leavers with disabilities in their transition to adulthood. It is the first study of care leavers with disabilities in Norway, but it draws upon a couple of international studies, especially the work of dr. Berni Kelly from Northern Ireland (Kelly, McShane, Davidson, Pinkerton, Gilligan & Webb 2016). It has been found that care leavers with disabilities are less likely than other care leavers to achieve positive transitions to adulthood, and that there is a need to improve policies and services for this group of care leavers. User participation and autonomy building seem to play a positive role for the outcome of the transition to adulthood.

Objective, methods, results

The poster-presentation will draw attention to the first part of the PhD-project, and the objective is to explore the political guidelines for aftercare for care leavers with disabilities in Norway. Questions related to user participation and autonomy building will be emphasized. Care leavers with disabilities are more likely than other care leavers to interact with several welfare organizations. Aftercare services and disability-services are organized as separate units, and with separate legislation. Care leavers might, as such, be exposed to a higher number of organizational transitions and are more likely to experience a rather complex “transition-web”. There is no coordinated policy making for this group of care leavers in Norway, and there is a need to explore the political context of their transition to adulthood.

The method chosen is a document analysis, and the data consist of white papers related to the fields of aftercare and disability-services in Norway. Four documents are chosen from the field of aftercare, and four documents from the field of disability-services. The document analysis is performed as a summative content analysis consisting of a word count followed by an interpretation of the underlying context. The main unit of analysis is values related to autonomy and independence for the group of care leavers with disabilities, expressed in Norwegian white papers. Norwegian white papers are reports from the government to the parliament, expressing the governments views and policies on certain matters. As such, white papers and laws are sources to knowledge about the value base of the welfare organizations, because they express the intentions for, and the framework of, the work done by these organizations. Values are here seen as governing the work of welfare organization, and will influence the support of care leavers with disabilities.

The purpose of the poster presentation is primarily to establish a dialogue with more experienced colleagues, especially in perspective of validating the analysis. I also would like to use this poster presentation as an opportunity to establish connections to other researchers within this field and to inspire further discussion on the topic.

Some questions that will be discussed in the poster are:

- To what degree is the group of care leavers with disabilities identified in Norwegian white papers from the field of aftercare and the field of disability services?
- How are values related to independence/autonomy expressed in these white papers?
- Can any differences be identified in how the concept of support is expressed in these two categories of white papers?

Key words
Transition to adulthood, care leavers with disabilities, autonomy, user participation, policy

Purpose: About 1% of children and youth living in British Columbia (Canada) are currently in the care of the province. Youth with a history of foster care have been found to be at increased risk for mental health problems, are more likely to experience substance abuse issues, and experience high rates of homelessness. The purpose of this study was to explore these vulnerabilities by examining the association between history of foster care and socio-demographics, mental illness, and substance use among street-involved youth enrolled in an intensive case management (ICM) program in Vancouver, British Columbia.

Methods: The ICM program provides health care, shelter, and social support for homeless or marginally housed youth with a mental illness and/or substance use disorder living in Vancouver's inner city. Data were obtained through a retrospective chart review of intake assessments of youth enrolled in the program between 2007 and 2013. In these assessments, program psychiatrists used the DSM-IV classification to diagnose the following disorders: anxiety, mood, psychotic, attention deficit hyperactivity disorder (ADHD), history of fetal alcohol spectrum disorders (FASD), and/or substance abuse or dependence in the past month (alcohol, cannabis, cocaine, amphetamine, and/or opioid). They also recorded patients' gender, date of birth, ethnicity, highest level of education attained, type of housing, sources of income, and history of foster care. Relationships between history of foster care (yes/no) and categorical dependent variables were analyzed using logistic regressions. All analyses were adjusted for gender, age, and Aboriginal heritage.

Results: Of the 411 youth who provided information on history of foster care, about a third (33.6%) reported staying in care. Of these, 32.6% had stayed in one home, 31.2% in 2 to 4 homes, and 36.2% in 5 or more homes. In this sample, 36.1% were female, 20.3% had Aboriginal heritage, and 56.6% self-identified as Caucasian. The mean age was 21.3 years and 23.5% had graduated from high school.

Patients with a history of foster care were significantly more likely to be of Aboriginal heritage (OR=2.20, p<.01) and live in a single room occupancy hotel (OR= 2.18, p=.04), and they were less likely to have graduated from high school (OR= 0.40, p<.01) and to have disability assistance as a source of income (OR=0.29, p=.01). History of foster care was significantly associated with history of FASD (OR=8.02, p<.01), cocaine abuse or dependence in the past month (OR=1.64, p=.06), and concurrent mental illness and cocaine abuse or dependence (OR=1.85, p=.03).

Conclusions: These results confirm the vulnerability to homelessness, mental illness, and substance abuse of youth transitioning out of care. In particular, we found a 30-fold overrepresentation of youth with history of foster care among street-involved youth enrolled in the ICM program. Further, the association of history of foster care with history of FASD and with cocaine abuse/dependence alone and concurrent with mental illness highlights the need of more support and monitoring of these youth before and during their transition into independent adult living.
A Closer Look at the Maltreatment Experiences of Spanish Children in Non-Kin Foster Care

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mr. Pablo Carrera (University of Seville), Mrs. Nuria Molano (University of Seville), Ms. Cristina Murillo (University of Seville), Mrs. Raquel Garcés (University of Seville), Dr. Esperanza León (University of Seville)

Maltreatment is one of the main reasons for removal of children from their birth families and placement in out-of-home care (family foster, residential care, or adoption). Accordingly, most research in these areas considers the maltreatment experienced by the children; the most prevalent approach is to register dichotomic categorizations of broad maltreatment types—namely, physical abuse, emotional maltreatment, neglect, and sexual abuse.

Notwithstanding, this approach leaves behind much information on the concrete adverse experiences of these children. The labels of physical abuse or neglect, to name two, may reflect an array of different experiences in terms of severity, emotional or representational significance, or attendance of developmental needs.

In fact, most recent theoretical accounts on maltreatment emphasize that many of what we consider behavioral and emotional disturbances in maltreated children are adaptations to the characteristics of the atypical rearing environments they’ve grown up in, which may be adaptive in the short-term but negative for their adaptations to other contexts.

Following this account, a more detailed knowledge of the kinds of adverse experiences suffered by children in the child welfare system may allow us to understand their behavior when placed in a foster family or what might be their more vulnerable areas. This information is useful for intervention and support with foster parents, who often demand more information of foster children's past experiences.

We present in this poster descriptive analyses on the specific maltreatment experiences of Spanish children in non-kin foster care. The sample is comprised of 51 children (27 girls, 52.9%) between four and nine years-old ($M = 84.90$ months, $SD = 19.68$) from Southern Spain placed at the time of the study in non-kin foster families. They had been at least five months with their foster family at the time of the assessment and didn’t present any severe disability.

The information on maltreatment indicators was collected through data collection sheets completed by case workers. We asked for the information on each child’s file of the “Sistema de Información sobre Maltrato Infantil en Andalucía (SIMIA)” [System of Information about Child Maltreatment in Andalusia], a local child maltreatment detection and notification system that includes several indicators for each maltreatment type. Descriptive indicators and an open-ended question on the risk factors experienced were also included, which were then converted to the SIMIA system.

Preliminary results show that the most prevalent adverse experiences were related to neglect and emotional maltreatment, present in almost all the sample. Very common indicators were lack of parental response to physical and educational needs, care during long periods of time by other children, lack of medical care, child repeatedly hungry, dirty, or bad dressed, chaotic home life, or lack of family structure. Emotional maltreatment indicators like rejection, exposure to family violence, or ignoring were also prevalent. Regarding physical or sexual abuse indicators, they were much less present and predominantly as bruises or marks, or sexual touching, rather than as the most severe forms.

These preliminary results remark the predominant presence of neglect and emotional maltreatment forms in foster children, as well as the prevalence of specific forms like exposure to family violence, chaotic home life, and others; it should be noted that this picture is different than the media gutter focus on severe forms of sexual and physical abuse. This detailed knowledge has potential implications for understanding foster children's behavior.
and, therefore, improving intervention and support to foster families.
Child Sexual Abuse: A Holistic Continuum of Care

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Mildred Mushunje (Justice For Children East and Southern Africa), Ms. Mufaro Musiyazviriyo (Justice For Children East and Southern Africa), Ms. Joan Mushunje (Justice For Children East and Southern Africa)

Introduction
In this discussion we seek to share experiences from Zimbabwe on how children that are sexually abused are cared for. We discuss the roles of the various players and how these converge to provide a continuum of care for the children. Using statistics from a local NGO, we also discuss issues of access to care and treatment of sexually abused children.

Background
Child Sexual abuse is dealt with under the Zimbabwe Children’s Act through a multi-sectoral child protection system. Because of the burgeoning numbers of orphans, the care and protection of children is increasingly regarded as the collective responsibility of all members of society, with all systems of social provision working together to provide a holistic response. In keeping with this responsibility and a commitment to the protection and care of sexually abused children, Zimbabwe developed a Protocol on the Multi-Sectoral Management of Sexual Abuse (Government of Zimbabwe, 2012; Mushunje & Mafico, 2007). The Protocol establishes the respective responsibilities of government ministries, NGOs, and community structures, as illustrated below.

The multi-sectoral network in the Victim Friendly System
The multi-sectorial approach comprises the Victim Friendly Unit (VFU) which is found within the police system. The police department is responsible for escorting children for medical examination following abuse, explaining the ensuing process, and referring them to specialised clinics such as those run by NGOs such as the Family Support Trust. The Ministry of Health and Child Care runs survivor-friendly clinics at various health centres and monitors units offering equivalent services for the medical care and support of children following abuse in terms of the guidelines for health workers in the management of sexual violence (Government of Zimbabwe, 2012). Services provided include forensic examinations by medical staff in terms of the Procedure and Evidence Act as Amended (Government of Zimbabwe, 2004). Where necessary, priority access to emergency medical care is provided, including post-exposure prophylaxis (PEP) within 72 hours. PEP is short-term antiretroviral treatment to reduce the likelihood of HIV infection after potential exposure, either occupationally or through sexual intercourse (World Health Organisation, 2015).

Conclusion
The establishment of the multi-sectoral system has made addressing CSA more structured and systematic. However, resources are still a challenge. There remains insufficient personnel to respond to cases of CSA. Financial resources also continue to hamper and compromise the response time reports.

Recommendations
• There needs to more resources towards child protection services. This should be catered for within the overall national financial budget
• A multi-sectoral approach is key for effective child protection and this should be strengthened with resources.
Maltreatment Experiences and Psychosocial Functioning: The Mediating Role of Domain-Specific Self-Representations

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Carla Silva (ISCTE-IUL), Prof. Maria Calheiros (Faculdade de Psicologia da Universidade de Lisboa)

Research on associations between child/adolescent maltreatment and psychosocial functioning has not yet focused on analyzing self-representations as mediators of those associations. Research has suggested that self-representations may develop unevenly across domains. This may account for differences between self-representation domains in their associations with psychosocial functioning. This study aimed to analyze the mediating role of domain-specific self-representations in associations between maltreatment experiences and children's and adolescents' psychosocial functioning.

Participants were 204 children/adolescents (52.5% boys), 8-16 years old (M=12.6), referred to children/youth protection committees, their parents and committees’ case workers. Case workers reported on youth maltreatment, children/adolescents reported on self-representations, and parents reported on psychosocial functioning. A multiple mediation analysis was conducted to test the hypothesized mediational pathways. A moderated mediation analysis was performed to analyze children’s and adolescents’ age as a moderator of those pathways. Controlling for potential effects of children’s and adolescents’ gender, results revealed four significant indirect effects: 1) higher levels of physical and psychological abuse were associated with lower levels of externalizing behaviour through lower levels of social SR; 2) higher levels of physical neglect were associated with lower levels of externalizing behaviour through higher levels of opposition SR; 3) higher levels of psychological neglect were associated with higher levels of externalizing behaviour through lower levels of physical appearance SR, but 4) associated with lower levels of externalizing behaviour through lower levels opposition SR. The moderated mediation analysis showed that age was a moderator of the indirect effect of physical and psychological abuse on internalizing and externalizing behaviour, through different SR domains. Only for the older adolescents, these experiences were associated to higher levels on both internalizing and externalizing behaviour through lower levels of instrumental SR. Also, only for 12-13 year old adolescents, these experiences associated with lower levels of externalizing behaviour through lower levels of social SR.

Findings support the mediating role of children’s and adolescents’ self-representations in the relation between maltreating experiences and their psychosocial functioning. Findings regarding the role of opposition SR are quite straightforward. Indeed, as suggested by the literature, unresponsive caregivers, lacking in emotional support, are more likely to reinforce their children’s negative self-representations. Particularly considering the opposition self-representations, it could be expected that mothers of children and adolescents with more negative self-representations in this domain would report higher levels of externalizing behaviour displays. However, these results found can be framed in the literature about the relation between adverse family experiences and displays of false-self behaviour.

Children and adolescents who are victims of abusive and neglectful parenting practices are at a greater risk for suppressing their true selves and displaying false-self behaviour. Such parenting practices may lead children and adolescents not only to feeling that significant others do not value their true self, but also to devaluing it themselves. The more they feel this way, the more likely they are to display false self behaviour. In the context of higher levels of physical abuse and psychological neglect from parents, the high levels of parental conditional support may lead children and adolescents to learn to engage in behaviours less attuned with their attributes, in an effort to gain the needed approval, support and validation from their parents.

Results point not only to the need to reduce child/adolescent maltreatment as a primary target in preventing negative self-representations and externalizing behavior in children and adolescents, but also to the need to promote the construction of positive and, most importantly, realistic and adaptive self-representations as pro-
tection against maladjustment.
Victimization and Psychological Functioning of Adolescents: 
The Moderating Role of Social Support

Ms. Patrícia Moreira (Universidade Lusófona do Porto), Prof. Carla Antunes (HEI-LAB, Universidade Lusófona do Porto), Prof. Célia Ferreira (HEI-LAB, Universidade Lusófona do Porto), Ms. Clara Moreira (Universidade Lusófona do Porto), Prof. Eunice Magalhães (HEI-LAB, Universidade Lusófona de Lisboa; CIS, ISCTE-IUL, Lisboa, Portugal)

Background: Peer victimization in adolescence has been described in terms of potential implications for youngsters’ psychological functioning. However, scarce evidence has been provided assuming a broadly and multidimensional perspective on violence and mental health.

Objectives: We aimed to test the moderating role of social support in the relationship between victimization experiences from peers during the last year (sexual, psychological and physical victimization) and the current psychological functioning, here conceptualized and measured in terms of psychopathological symptomatology (internalizing and externalizing problems) and psychological well-being.

Method: 116 adolescents (66.4% female), aged from 10 to 18 years old (M= 16.19; DP= 1.69) participated in this study. Data was collected using self-reported measures from adolescents, including: 1) a sociodemographic questionnaire, 2) Scales of Psychological Well-Being (Ryff, 1989; Fernandes, Vasconcelos-Raposo & Teixeira, 2010); 3) Depression Anxiety Stress Scales (Lovibond & Lovibond, 1995; Pais-Ribeiro, Honrado & Leal, 2004); 4) Self-Report Delinquency Scale (Carroll, Durkin, Houghton, & Hattie, 1996; Pechorro, Vieira, Marôco, Barroso & Gonçalves, 2015); 5) Victimization Experiences Questionnaires (Lisboa, Barroso, Patrício, & Leandro, 2009, adapted by Magalhães, Antunes, & Ferreira, 2017); 6) Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet, & Farley, 1988; Carvalho et al., 2011).

Results: Significant moderating effects were found in the relationship between psychological and physical violence and psychological functioning. Globally, we found that the social support from friends, family and significant others buffer the negative impact of psychological and physical victimization in terms of psychological functioning.

Conclusions: These results provided important implications for practice, both in terms of prevention of mental health problems and of promoting optimal functioning outcomes, considering the social support’s potential role.
The Position of the Child in Life-Experiences of Abused Women: A Study from Professionals’ Perspective in Spain

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Gaby Ortiz-Barreda (University of Bergen), Ms. Raquel Herrero Arias (University of Bergen), Dr. Ragnhild Hollekim (University of Bergen), Dr. Erica Briones Vozmediano (University of Lleida), Dr. Carmen Vives Cases (University of Alicante)

Background: Intimate partner violence (IPV) is a global public health concern that has serious effects on the wellbeing of women and their children. Being a mother and immigrant are determinant factors that can increase women’s risk of psychological and physical abuse by their partners. Evidence suggests that immigrant mothers make decisions to maintain their own safety as well as the physical safety and emotional well-being of their children. Children are one factor that a mother weighs as she manages the abusive relationship. Little is known about the position of children in the experiences of abused women. This study aims to explore, from the perspective of service-providers in Spain, the position of the child in life-experiences of abused migrant mothers.

Methods: A qualitative design and phenomenological approach were used. Data were collected by carrying out 23 in-depth interviews and 4 focus group discussions with 43 professionals involved in providing support to battered immigrant women. We interviewed social workers, psychologists, intercultural mediators, judges, lawyers, and public health professionals from different cities in Spain (Barcelona, Madrid, Valencia, and Alicante). All data were digitally recorded and then transcribed verbatim. Transcripts were imported into the software of Atlas Ti. The data was analyzed by thematic analysis as described by Braun & Clarke, 2006.

Results: In the context of an abusive relationship, immigrant women appear utterly dedicated to their upbringing and caring role/responsibility. For immigrant mothers, children are a critical issue because they influence the decision-making with respect to their abusive relationships. In this study, two main themes emerged; a) A Position of the child as a trigger to leave the abuser, especially when children themselves are seen as direct victims of the abusive relationship and, b) A Position of the child as a trigger to stay because children linked mothers with the abuser in three ways. First, the child, as well as the mother, as economically dependent on the abuser. Second, the child in need of a father figure, and third, the child as the bond between the mother and the Spanish national territory.

Conclusions: Children play an important role in the mother’s decisions to end and/or return to an abusive relationship. Service providers and policymakers require a better understanding of how immigrant mothers’ see and manage children’s needs and interests when at the same time also navigating own experiences of abuse. Generating this knowledge can be helpful for improving services offered to mothers and children, as well as professional relationships. More research is needed to identify effective ways of addressing not only the protection and support of women but also of their children.
Harmful Care. Are Concepts from Medicine and Psychology Applicable to Categorize Inferior Care for Children?

Validating the effectiveness of care for children in care has evolved as a highly prioritized objective in Swedish child welfare and in many other international counterparts during the last decades. Evidence based practice (EBP) has been a key concept in this respect, extensively guided by rationales derived from the medical discourse, such as assessing the effectiveness of specific interventions by rigorous study designs and conducting systematic reviews of prevalent research studies in the field.

In stark contrast to the medical discourse, however, there is an apparent lack of systematic approach in evaluating harmful interventions employed in child welfare. In fact, the paramount ethical principle in medicine of not inflicting harm on the patient has no corresponding explicit status in discussion of social work interventions such as residential and foster care for children. The possibility of care being harmful has however been subjected to discussion in child welfare work. For example, malpractice by abusive foster parents has been subject to state inquiries in many countries.

In the medical – and later in the psychological – discourse, however, it has become evident that the concept ‘harmful care’ has empirical references that vary in essence. A plethora of related concepts has emerged in these fields, such as malpractice, side effects, deterioration and non-response. These concepts denotes different phenomena such as incompetent practitioners, interventions that are detrimental, non-efficient or suboptimal as well as adverse events, which to a varying extent are contingent on the interventions itself.

The purpose of this paper is to define and compare contemporary concepts used in medicine and psychology to categorize different aspects of harmful care. Further, the paper explores to what extent these concepts are applicable to differentiate harmful care prevalent in out-of-home interventions for children. Methods used are empirical semantics and epistemological reflections on to which certain concepts are best considered general or discipline specific. Results show that several concepts used in medicine and psychology are relevant to use in an attempt to categorize different aspects of harmful residential and foster care, albeit there are often substantial discipline specific differences to consider. An overall conclusion is that it would be beneficial to expand and specify the terminology for harmful out-of-home care, which in turn may facilitate better awareness to prevent such events in the future.
Mapping Parenting Interventions in Portugal

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Orlanda Cruz (University of Porto), Prof. Ana Almeida (School of Education, University of Minho), Prof. Cristina Nunes (University of Algarve)

International and national literature have shown that parenting interventions are effective at making parental educational behaviors more effective, improving family relationships, and preventing behavioral problems and improving psychosocial adjustment in children (Van Ryzin, Kumpfer, Fosco & Greenberg, 2016). The interventions that have been studied are standardized and manualized and have a strong conceptual model underlying the definition of the intervention strategies and objectives, that explains how these strategies can lead to the achievement of the objectives, i.e., it explains the change process.

In Portugal there is no public or private institution responsible for recording, evaluating or monitoring parenting interventions. A study carried out between 2006-08 under the auspices of the Social Security Institute and the National Commission for the Protection of Children and Youth at Risk has shown that parenting interventions have several formats: (1) standardized and replicable programs of international and national origin; (2) tailored, non-manualized structured interventions, and (3) flexible interventions, composed by a series of talks delivered by specialists (Abreu-Lima et al., 2010). The first type of interventions, which is the most similar to the “evidence-based” format, was less numerous (6 out of 28), but involved more participants because of their ease of replication (402 out of 609). After about 10 years, it becomes relevant to know the current situation of parenting interventions in Portugal.

The present study aims to provide an overview of parenting intervention in Portugal. An online questionnaire with 15 questions was drawn up, and the link was sent to about 2819 e-mail addresses, taken from the contact lists provided by the General Directorate of Education, the National Commission for the Protection of Children and Youth at Risk, the National Confederation of Social Solidarity Institutions and the Union of Portuguese Misericórdias. Three hundred valid answers were obtained, which were distributed by all the districts of mainland Portugal and the islands of Madeira and Açores.

The results revealed that 48% (n = 144) of the respondents developed some kind of parenting intervention, which could take the form of a lecture, a parenting school, an individual consultation, a structured program designed by the practitioner and a standardized program. Most of the parenting interventions are developed in the school context. Only a small percentage of the interventions corresponds to the concept of evidence-based program, is integrated into a broader program and is targeted for specific funding.

As a conclusion, we can assert that, with the most relevant exceptions, parental intervention in Portugal is carried out in an unsustainable way, both from the theoretical point of view and from the empirical point of view, the practitioners do not receive specific training in evidence-based programs and there is no guidelines on how this type of intervention should be implemented.
Recognizing the direct and integrative intervention of the singularities of each family in the context of the protection of children and young people, our association - ASAS – Associação de Solidariedade e Ação Social de Santo Tirso - has been betting, throughout its years of existence, on structures such as Parental Counseling and Family Support Centers (in Portuguese - Centros de Apoio Familiar e Aconselhamento Parental - CAFAP).

The lack of intervention responses focused on the family led the ASAS team to create a project based on an innovative methodology of intervention focused on strengthening family skills giving priority to actions in their own environment. This was the motto for the formation of its two centers – CAFAPs – named of “To know To Grow” (“Saber para Crescer” (SC)) created in 2004 at Santo Tirso and “Growing in the Family” (“Crescer em Família” (CF)) created in 2008 at Trofa.

CAFAP SC and CF have been taking on importance in diagnosis, prevention and repair situations of psychosocial risk of families, as well as the promotion of positive parenting.

With its activities divided into family preservation and reunification modalities, as well as a family gathering point, its objectives are to enable families to better carry out their parental functions, solidify family dynamics and relationships, increase individual and family resilience, strengthen their potential and reduce the incidence of risk factors, in order to prevent children from leaving their natural environment and/or to promote their reintegration into the family at the time of their previous removal. ASAS CAFAP also aims to sensitize and mobilize the communities in which they work to defend and promote the rights of children.

These structures recognize the family as the fundamental cell of society, focusing on the well-being of children and young people. It focuses on parental education, training and awareness raising, family mediation, always working together with different entities.

In CAFAP's intervention, it is intended that the family can be empowered to recognize the need for change, according to their diverse choices, characteristics and experiences.

Developed by professionals from different areas, the methodology used is collaborative and systemic, where the intervention occurs as a compromise between the professional and the family, in a context of respect for their singularities and their natural context of life. In the intervention, the family is considered as a “specialist” of change, actively defining and participating in the objectives outlined.

In the strategies used, the primary focus is on the child, his/her distinct needs and the conditions, contexts and resources involved in promoting their development and well-being. On the other hand, the need for parental support, in an intrinsic understanding of the pathways, experiences, cognitions and beliefs, must be deeply known so that intervention takes place in an empathic, understanding and adjusted way.

In this sense, the (long) experience of the CAFAP of ASAS, and based on a battery of indicators of measurement of its impact, have been pointing to the fundamental work in the execution of the measures of promotion and protection, being primary partnerships for the CPCJ and the Courts, avoiding the removal of children or making possible the reestablishment of their family ties, the deepening of diagnoses, the multidisciplinarity of the work developed.

We understand that the complexity of the family system challenged by the constant mutations of society, validates the relevance of a psychosocial response close to children and families, in a perspective of support and protection. Our project will persist, to know to grow and grow in family!
Social Support in Group Intervention as a Facilitator of Change in Families of the Child Protection System

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mrs. Sara Pérez-Hernando (University of Barcelona), Dr. Nuria Fuentes-Peláez (University of Barcelona), Dr. Crescencia Pastor (University of Barcelona)

Introduction: Recently there has been an increase in interest in the influence of formal and informal networks on the functioning of the child protection system and the social and educational intervention with the families that are part of this system, especially the support dynamics created in group interventions. These support dynamics can favor the creation of social support networks. This allows them to face everyday moments as well as crisis situations. This social support is related to the emotional, psychological, physical, instrumental, material and information support that facilitates facing the difficulties of families, promoting the change in families.

Group intervention not only allows families to receive support, but it favors that these families are sources of support for themselves by wanting to pass on to others what they have learned to help in other experiences of reunification.

The communication presents the results obtained in interviews with families of the Spanish protection system participating in the group intervention program for the reunification of the Social Network Analysis methodology with the aim of analyzing the support networks that are created among families who use the program and how these support networks facilitate the change of families.

Aims:

• Analyze the distribution of support networks among families that participate in the “Walk in family” program.
• Identify the elements that favor the creation of an informal support network.

Context of the study: The study is part of the implementation of the “Walking Family” program that has been carried out in Spain (Catalunya, Castilla La Mancha, Navarra) and Portugal (Porto and Braga).

Sample: 10 families who had participated in the discussion groups for the evaluation of the group intervention program Walking Families were asked to identify the people in their lives who had been sources of support during the process of family reunification.

Results: families who had participated in the discussion groups for the evaluation of the group intervention program Walking Families were asked to identify the people in their lives who had been sources of support during the process of family reunification.

We asked them what kind of support they considered most important and what kind of relationship they had with these people.

When we analyzed the resulting networks of these families, we saw that they can be classified into three large groups:

• A first group we can see people who mainly perceive professional support (mainly emotional support and information). We can see these 4 people that are the professionals who dynamised the program but the other people reflected are also professionals.
• There is a second group of families in which they identify as sources of support (mainly psychological) their family members, but also identify the families and professionals who participated in the group intervention as sources of mainly emotional support.
• Finally, there are families that identify as sources of support (emotional, psychological and information) to the participants of the group intervention, both equal and professional.

**Conclusions:**
• First step for change
• Learning to trust others, but also in themselves
• Mostly emotional and instrumental support
• Changes in the perception of formal support
• Greater use and effectiveness of the program
• Informal support resources in themselves for the rest of the group members
• New evaluation methods such as Social Network Analysis
Introduction
‘2thepoint’ is a method used by Dutch youth care organization De Rading in the reunification process of children that have been living in foster care. Professionals work together with birth parents to define and decide within 6 to 12 months if reunification with birth parents is possible. 2thepoint has been developed using well practice based knowledge, evidence based common factors and evidence based interventions. De Rading started using the programme in 2006 and has adapted the method over time. The current version of 2thepoint has been in use since 2012 (Albrecht & Breg, 2012). Thus far, all parties involved in 2thepoint have been positive about this method. It has however not been properly researched. A solid scientific basis is important for De Rading to justify the use of 2thepoint. Furthermore, the scientific basis is necessary in order to share 2thepoint with other youth care organizations in the Netherlands. De Rading has asked the research group Youth of HU University of Applied Sciences Utrecht to develop and carry out a study on the 2thepoint programme.

Objectives
The objective of the study is to provide a scientific basis for the 2thepoint programme and to get insight into the efficacy of the method.

Method
The study consists of three parts: 1) a literature study on the theoretical basis of 2thepoint, 2) a file analysis on the families that participated in a 2thepoint trajectory since 2012, and 3) a qualitative study on the experiences with 2thepoint.

1). In the literature study, we will examine to what extent 2thepoint is based on sound scientific theories. Moreover, we will report the relevant theories and literature for future use and reference.

2). The file analysis will show whether the children that have participated in a 2thepoint trajectory have returned to care at De Rading or not. This is an indicator of the efficacy of 2thepoint.

3). For the qualitative study, we will conduct interviews with people involved in 2thepoint (such as professionals, birth parents, and foster parents) in order to assess their experiences with this programme.

The results of parts 1 and 2 will be presented in the current symposium.

Results
At the time of writing this abstract, the study has not been completed yet. We expect to have finished parts 1 and 2 of the study at the time of the 2018 EUSARF conference. Therefore, only the results of the literature study and the file analysis will be presented, and no results can be shared yet in this abstract.

Conclusions
The first results and conclusions of the study will be presented at the symposium.

References
Supporting Family Reunification after Out-of-Home Care: The
Example of a French Program Called “Placement à Domicile”

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Julie Chapeau (Université Paris Nanterre)

Although the European Court of Human Rights noted that “measures taken should thus have been consistent
with the ultimate aim of reuniting the natural family[1]”, family reunification does not attract in the first place
the attention of child welfare services (Wulczin, 2004), especially in France where the number of placement
has increased by 10% over the last five years registered (DREES, 2010-2015).

But as research literature shows, reunification with birth families is a complex process and raises many issues
such as preparation during out-of-home care (Tillard and Rurka, 2009; Farmer, 2009), assessment and decision
making (Bullock et al, 1998; Fernandez, 2013) and support for families after reunification (Barlow et al, 2006;
McMillan et al, 2009).

If article 18 of the 2016 March 14th law on child protection guarantees a support by local authorities for families
reunited and the follow-up aftercare of these children, there is no dedicated legal measure as of today. French
local authorities tend to keep on activating socio-educational measures despite the fact those have proven to be
inadequate considering the high rate of failure and return in care.

In this context, how could professionals promote family reunification whilst ensuring children safety and well-
being? For almost forty years, some French child welfare services have experimented alternative programs
between parenting support and out-of-home care as part of the development of deinstitutionalised child pro-
tection system. The “placement à domicile” consists in providing a strong parenting support and a specific
safety net (on-call 24 hours a day duty and fall-back solution). The child is always in the local authority's care
but allowed to live permanently with his birth family in his home. He could be removed immediately from his
family without further judge’s decision in case of a proven danger.

As this alternative care has spread across the country over the last decade, this PhD research aims to understand
the impact of this specific program on the family reunification process. This study is based on an ethnographic
analysis in a child welfare service in the north-east of France setting up “placement à domicile”. It involves
interviews with social workers, parents and children and direct observation at the service and at the home of
the 6 families on the panel.

Preliminary results show that this program is particularly protective for children and recognized as such by
local authorities and judges: fall-back solutions are underused and returns to out-of-home care unusual. But
the notion of “home placement” is really difficult to understand for professionals, parents and children and has
many implications. First of all, for the parents: this “partial” restitution of the child affects the restoration of
parenthood and the transfer of responsibility between the local authority and parents, with a risk of dependence
on the service. Second of all, for the children: the fear of returning to out-of-home care impacts their well-
being. They express a strong need for reassurance to remain at home. Last of all for the professionals: this
program has no legal existence and the intervention framework remains unclear. Moreover, it changes social
workers' positions and influences practices due to the implementation of out-of-home care methods in the home
setting. The syncretism between parenting support and the placement framework implies the development of
new intervention methods that differs from the methods already used in other family reunification programs
analysed (Thoburn, 2009).

Family Reunification in Portugal: Professionals’ Practices and Attitudes

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Orlanda Cruz (University of Porto), Dr. Liliana Alves (Universidade do Porto), Prof. Maria Barbosa-Ducharne (University of Porto)

Background: Family Reunification (FR) refers to the return of children placed in out of home care to their birth parents’ home. It is the most frequent permanency plan in Portugal accounting for 43.5% of the children in care, aged 6 to 11. In spite of the high rates of FR disruption (around 70% of the children re-entering care stem from unsuccessful FR) and the multiplicity of professionals intervening on FR, research on this topic is still scarce in Portugal. Objectives: The present study aimed to: a) characterize the professional practices used with families for FR in Portugal; b) identify children and family related factors associated with (un)successful FR; c) report professionals difficulties in implementing successful FR and d) identify factors associated with FR success.

Method: Seventy-four FR professional team coordinators were invited to participate in this nationwide study. An online 25-question survey, developed within the study, allowed for data collection. Participants were asked to focus on case files regarding 2016. The survey was fully completed by 18 participants, although most answers were filled out by more than 40 participants. Results: The study results showed that a diversity of professional practices were used aiming to tailor interventions to family specific needs and stemming from different understandings of FR held by the professionals, since supervision and guidelines are lacking. Professional practices were not evidence-based. Professionals claimed for supervision and specific in-service training. Conclusions: Findings highlight the need for further research in order to develop better FR professional practices.
The Detectives and the Giraffes - Enhancing Young Children’s Collective Participation in Substitute Care

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mr. Mikko Oranen (Nuorten Ystävät NGO), Mrs. Sari-Anne Paaso (Pesäpuu NGO), Mrs. Pipsa Vario (Pesäpuu NGO), Mrs. Hanna Piiroinen (Pesäpuu NGO), Mrs. Hanna Särkiö (Pesäpuu NGO)

The Convention on the Rights of the Child requires children to have a right to express their views in all matters affecting them. This right expands to situations where the best interest of children as a group are considered collectively. The General Comment no.12 underlines that there is no age limit in exercising the right to collective participation. However, in child protection this participation very often means working with young people in focus groups, youth parliaments or advocacy projects. Participating in such activities requires certain cognitive level and literacy skills leaving younger children out. The research focusing on children’s participation is actually more about young people and less about children under school age.

Since 2013 several Finnish NGOs have been elaborating ways to invite and include young children into developing child protection. The leading organization has been Pesäpuu running two development projects: The Detectives (2013->) and The Giraffes (2017->)

The Detectives are children aged from 6 to 10 years. They investigate and develop child protection with professionals and other adults close to them. The Giraffes is an activity for even younger children aged from 3 to 5 years.

Both projects share the objectives of reinforcing the participation of younger children in child protection and developing tools and methods for the participatory work with this group of children. There is a strong focus on having an impact on the child protection practices and changing the way young children are seen not only as objects of care but as competent actors in their life.

It is evident that alternative ways of working had to be developed in order to make it possible for the young children to participate. The Detectives have a context story of “Badger” who can’t live with his/her birth parents. When entering foster care Badger experiences many things that need to be investigated. What is a social worker and does she/he do? Why is meeting with one’s parents sometimes supervised? What are good ways of helping a child who misses home? What is safety and how to help a child feeling scared? The children do their own investigations to help Badger.

The Giraffes was named by a pilot group of children. The project has been exploring different tools, methods and group compositions with children. They have been working with digital cameras facilitated by a professional photographer. Children have taken pictures of the environment, important places and objects and taught the adults how the world looks like from their perspective. Philosophy oriented group used storytelling to elaborate essential themes of home, security and love with children.

The presentation will outline how the groups for younger children were organized and what were the key elements in the processes. The importance of taking ethical questions into consideration through the process is underlined. The main focus will be on the children’s messages to the adults and challenges to the professional’s thinking about and understanding of children and children’s experiences in the substitute care.
Policy documents and legislation have ambitious aims regarding children's participation. This project explores challenges and conditions for participation for children who experience special barriers in participation; children with intellectual disabilities in foster care. We are interviewing and collecting experiences from foster children with intellectual disabilities, aged 12-18, foster carers and social workers in child welfare services. We will present the main findings and discuss the challenges related involving foster children with intellectual disabilities.
Crosswalk of Quality Standards for Residential Care for Children and Adolescents Published in English

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Jonathan Huefner (Father Flanagan’s Boys Home)

Residential programs face increasing demands for quality and accountability. Some groups have argued for the elimination of residential care for children and adolescent in the US because some programs have failed to keep youth safe and better prepared to succeed in life. Rather than elimination this level of care, we argue that the best solution to these problems is establishing and promoting quality standards for residential care. Quality services are important because they have been shown to be related to better outcomes for children and adolescents with emotional and behavioral challenges. By definition, a quality service produces desired outcomes using the best available practice knowledge while following ethical standards. This present review is an effort to determine what practices have been identified in published English-language sources as important elements of quality residential care and treatment practice standards.

A review was conducted to identify published materials which outlined quality standards specifically for residential treatment programs for children and adolescents. Only those publications that contained a list of proposed quality standards were included in the present review. As most of the work in this area has not been published in professional journals, a “grey” literature search using Google Search and PsychInfo was used using the terms “quality standards,” “residential care,” and (adolescent or child). Seven sources of information were identified and reviewed. These materials were published as early as 1992 and as recently as 2012. Four of the sources were developed in the United States (two professional associations, one managed care company, and one nonprofit service provider), while 3 were developed by government agencies in other countries (Australia, Ireland, and Scotland). The objective of the review was to identify the breadth of concepts proposed for quality residential practice, and then to assess the degree of consensus for these concepts across the published sources.

A crosswalk of individual practices across the published sources for each standard was developed. Sixty-four practices within eight domains were identified. Overall there was a 72.5% consensus across the 7 sources for quality standards (an average of 5.1 mentions per standard). It is noteworthy that only 9 of the practices were mentioned in all of the sources. Conversely, several important practices were only mentioned in 1 or 2 of the sources. The identified practices clearly show the multidimensional nature of quality for residential care for children and adolescents. Meeting all or most of the 60 identified quality standards will require consistent, persistent effort and dedicated resources, but can produce good long-term outcomes that research has shown will result in positive return on investment. It is imperative that a comprehensive approach to quality become pervasive and fully integrated into the services provided to troubled children and adolescents and their families.
A Model of Good Care: Exploring Residential Childcare Provision in Ireland

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Lavinia Mclean (Institute of Technology, Blanchardstown), Dr. Emmett Tuite (Institute of Technology, Blanchardstown)

The evolution of residential childcare provision across the developed world has seen very significant investment in terms of human and financial resources, physical infrastructure and in many cases a complex framework of management support and various inspection regimes. In an Irish context from the 1980’s onwards there was movement from large scale industrial provision largely managed by religious orders to small scale ‘homely’ facilities managed by various elements of the public sector, not for profit organizations and more recently the private sector. There has been comparatively little research into the sector in general and no Irish research looking specifically at models of provision. The current study is an analysis of models of residential childcare provision in Ireland with a specific focus on its theoretical underpinnings.

There are approximately 2217 children in residential care in Ireland, including aftercare. There are 153 residential care centers including a small number of secure facilities, a variety of supported aftercare settings and a large group community-based care homes catering for children aged between 12 and 18. The current study involved a survey of all such service in Ireland to establish the broad nature of their provision and a number of specific questions regarding the theoretical model which underpins their work with children and young people. Results from the current study indicate several common themes in terms of the nature of service provision with little in the way of differentiation across the public, not for profit and private sectors. Small services with little in the way of specialization are the norm. Challenges were commonly encountered in term of managing behavior, dealing with issues which required some specialized intervention such as sexualized behavior and substance misuse. A wide variety of training was offered to staff, both in relation to mandatory and needs based training.

In terms of specific theoretical underpinnings and utilization of particular models of care there was very little evidence to suggest wide scale use of any particular model and a limited understanding of theoretical models related specifically to residential childcare. Respondents cited a number of broad practice approaches (such as using a strengths-based approach) and in a number of cases referenced models designed for the prevention and management of challenging behavior (such as TCI, MAPA etc.). A small number of respondents cited a specific model (such as social pedagogy).

The results of the research are discussed in relation to previous findings on the positive impact of services striving to work towards a model of care (Whitaker et al., 2014) and discussed with comparative analysis of international research on children’s residential services.
Adults in residential care settings can potentially play a powerful protective role in the lives of residents. Yet, this often requires significant changes at both individual and organizational levels to insure that beliefs and practices are aligned with current knowledge about the needs of this unique population of youth. The current poster reports qualitative data from a sample of residential child care staff regarding changes they perceived, both personally and organizationally, as their agency implemented the CARE program. We made no explicit hypotheses, but instead took the opportunity to learn from staff, in their own words, about the impact of this intensive, agency-wide change effort.

CARE (Holden et al., 2010) is a principle-based program that helps agencies use a set of evidence-informed principles to guide programming to better serve the developmental and relational needs of residents. 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.

After implementation began, staff completed an annual “Looking Back” survey, asking for a numerical rating of the extent to which CARE implementation influenced (a) their beliefs about the needs of children and how to be most helpful, (b) the nature of their interactions with residents, and (c) the topics discussed in supervision. Open-ended questions asked for narrative description of changes in each of these areas, and in aspects (positive or negative) of agency functioning. Data include quantitative responses from over 400 staff, and qualitative responses from a subset of these. Staff were drawn from 13 agencies, all of which served mostly youth referred from the child welfare system, typically both males and females from 7 to 18 years of age. In most cases direct care staff lived full-time in the home for 1 or 2 week shifts. Agencies reported no coherent program model that guided day-to-day childcare and management matters.

Over 80% of staff reported that CARE influenced themselves and their agencies “A lot” or “Somewhat.” A wide diversity of themes emerged from staff responses. Regarding relationships between staff and youth, these include being more thoughtful and intentional in their interactions with youth, more efforts to listen and understand their perspectives, attending to their ability level and adjusting expectations accordingly, less rigidity and punishment, and making time to just “be with” youth. Regarding supervisory discussions, commonly reported themes included explicit discussion of CARE principles and other key ideas when discussing children at staff changeover, particularly finding ways to help youth by building key competencies. Agency-wide changes paralleled findings in other areas, including greater flexibility, focus on understanding youth's ability level and past history, particularly their experience of trauma. Some reported challenges included differing interpretations of practice principles among their peers, misunderstandings about the CARE approach, and anxieties about loss of control. Other important aspects of the CARE model received little or no mention (e.g., family involvement).

This study offers valuable insights about the change process based on data from a large sample of residential care staff. The types of changes reported by staff align well with the intended learning goals of several implementation components of the CARE program. It is both plausible and consistent with the CARE theory of change that these changes partially account for the significant reductions in behavioral incidents and improved youth-adult relational quality demonstrated in prior quantitative evaluations of CARE. Results will help program developers and evaluators to “map” areas of implementation success and refine both assessment and
implementation strategies.
Disciplinary Strategies Used by Caregivers in Residential Care: Children’s Perspective

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Maria Barbosa-Ducharne (University of Porto), Mrs. Sofia Carvalho (University of Porto), Ms. Sónia Rodrigues (University of Porto), Ms. Joana Campos (University of Porto), Ms. Mariana Leal (University of Porto), Ms. Ana Martins (University of Porto)

Background: Residential care (RC) for children is intended to provide adequate conditions for children's development in terms of their physical, psychological, emotional and social needs following the respect of the Child’s Rights. Further to providing the recovering of trauma experiences previous to placement and promoting development, RC is also an education context. It should provide conditions to stimulate the children’s awareness of discipline and self-control. The disciplinary strategies used by caregivers in RC are critical for the child’s wellbeing and upbringing.

Objectives: This study is part of a nationwide research on RC quality in Portugal and aims at characterizing children's perceptions of the discipline strategies used by caregivers in RC and thus constructing a typology of educational consequences of the children's behaviour used in RC.

Method: Three-hundred and four children (151 girls) in RC, aged 6 to 22, participated in this study. Data was collect using the ARQUA-P (Portuguese Comprehensive Assessment System of Residential Care Quality) interview for children in care. Data analysis is still in progress, resorting to both quantitative and qualitative procedures.

Results: Preliminary results showed that children positively evaluate educational consequences of their behaviour. There was no significant correlation with the child's age, but girls evaluated educational consequences more negatively. The qualitative analysis of the children's answers may provide insight on the way these educational consequences (dis)respect the Child’s Rights.

Conclusions: Children in RC are an especially vulnerable group and it is essential for caregivers to be aware of the children's rights when considering disciplinary measures. Findings will be discussed in these terms.
Children Voices in Child Care: Satisfaction and Perceptions about Strengths and Weaknesses of Residential Care Services

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Mrs. Silvia Pérez (University of Oviedo), Prof. Iriana Santos (University of Cantabria), Prof. Jorge F. Del Valle (University of Oviedo)

BACKGROUND
It is difficult nowadays to find scientific research about children's views and perceptions on satisfaction with child care services. Particularly, residential child care services provide an intensive experience with a large array of interventions in terms of school and training, social skills, personal autonomy, activities in the community, etc. As a consequence, it is extremely important to know how the children evaluate their experiences in residential care. Their opinions have vital importance in order to get a better knowledge about their feelings and thoughts concerning what is going well and what should change in the management of the programme.

OBJECTIVE
Our main aim in this research is to know what are the issues that children and youth in residential care value as the best strengths as well as those aspects that should improve weaknesses.

METHOD
The sample consisted of 117 children, 30% aged between 6 and 11 years old and 70% youngsters from 12 to 20 years old, from 15 children's homes in 4 regions of Spain. We developed a system, called ARQUA, to assess the quality of residential child care homes in Spain. This system is based on the Spanish national residential child care quality standards EQUAR (Del Valle, Bravo, Martínez & Santos, 2012). This tool is multi-method, including individual and confidential interviews, natural observation, assessment of projects and documents, etc. The instrument also combines data collection in quantitative form with a five point Likert scale and open response questions to provide qualitative information, allowing children to express in a more open and friendly way.

RESULTS AND CONCLUSIONS
One of the top-rated issues by children is the role of staff as supporters, confidents and people they can trust in. Another issue with positive evaluation is living together with peers, providing an experience of community, that allows them to be trained for adult life skills. The instrumental support is also evaluated positively as an important chance they would not have otherwise.

With respect to weaknesses, some of the worst-rated issues are also social educators, when they couldn't achieve a good relationship, particularly when they feel a lack of trust in the staff. Sharing space is another negative point, as sometimes it is difficult when other peers pick up things without permission or are messy in the room. Being away from their families is also a negative matter that combines with the feeling of loneliness that some children sometimes feel. Finally, another negative perception is related to the lack of the staff's skills to manage and solve conflicts and crises in everyday life.

The main conclusion is to emphasize the relevance of giving a voice to children and young people in quality and program evaluation as they are the reason of the existence of these services. Bringing them the opportunity to contribute with their views about how the programs are running is an extraordinary way to collect information to improve services.
Family centred models are increasingly recognized as best practice in residential care settings (Affronti & Levison-Johnson, 2009). In fact, engaging and intervening with the family within the context of residential care is paramount, may it be in order to enable reunification, or may it be just to ensure positive involvement with the youngsters growing in care. In Portugal, in the last few years, demands of intervening with families are increasing in child residential care contexts. Family centred models require the ability to partner with parents and work side by side towards the child’s best interest, which involves a perspective of family strengths, resourcefulness and ability to change, and upholds principles of respect and empowerment of families (Alpert & Britner, 2005; Madsen, 2007; Michalopoulos, Ahn, Shaw & O’Connor, 2012).

This study analyses the representations of 44 residential care professionals about the characteristics of families of children in care, and also about the obstacles and facilitators of intervention with these families. Data were collected as part of training exercises carried out with the professionals.

Results show a strong predominance of negatively-laden characteristics attributed to families (97.5%), reflecting a view of the family as tangled in its problematic history, part of the problem, poor in resources and unable to commit to change. In the same manner, obstacles to intervention are mostly attributed to families (71.6%), and only a minority attributed to professionals (19.4%) or institutions (9%). Contrastingly, facilitators are more commonly attributed to professionals (62.7%) and only a minority is ascribed to families (31.3%) or institutions (6%).

This description is not aligned with the assumptions of the family centred models; it reflects the tenets of the deficit model that still seems to prevail and guide professional practice in child welfare contexts in Portugal. It seems to correspond to a view of families as the problem and the job in residential care facilities as protecting children from maltreating parents (Root & Madsen, 2013). As some authors point out (e.g. Alpert & Britner, 2005; Root & Madsen, 2013) changing to a family development approach, to shared power paradigm, and to a vision of the job as partnering with parents to protect children from problems requires the acceptance of a whole new paradigm. Though this can be demanding for professionals, it is certainly critical for effectiveness of intervention efforts, and particularly important in a country as Portugal where 88% of looked after children enter residential care (ISS, 2016). The results of this study call for massive support to professionals, through training and supervision, to allow their capacity building to intervene with families of children in care, so they can better unravel the ever-present tension of having to simultaneously protect children and empower family.
Improving Intervention with the Families in Portuguese Residential Care: Evaluation of a Training Process with Professionals

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Mariana Negrão (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. Elisa Veiga (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Ms. Carlota Pereira (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa), Prof. Lurdes Veríssimo (Faculdade de Educação e Psicologia da Universidade Católica Portuguesa)

Despite the global pressure for the deinstitutionalisation of children in care across Europe, and recent changes in national legislation, Portugal remains a country with very high prevalence of residential care amongst at risk children (87.4% - ISS, 2016). Professionals who work in residential care face many demands, not only in working directly with the children, exposed to risk factors for their development, but also in addressing their biological and extended families in order to accomplish the best interest of the child (Mullins, 2011). However, in contrast with the multiple requirements of social work, these professionals are described as frequently lacking the specific training and updated scientific knowledge required for an effective assessment and intervention with these at risk children and families through the out of home care process (Bergmark & Lundstrom, 2002; Rosen, Proctor, Morrow-Howell, & Staudt, 1995).

This study aims to evaluate a training program, designed at request of the Social Welfare Services and tailored to the specific needs of 44 residential care workers (psychologists, social workers, educators from 12 residential care institutions of in the district of Porto, northern Portugal), regarding the relationship and intervention with the families of children in care. The main goals, contents and strategies of this 28h long training program will be presented, as well as a mixed method evaluation of the process, encompassing data from questionnaires and focus group with the participants to assess their views about training process, the satisfaction with the training, and the ability of the training to alter perceptions and promote changes in professional practices. Preliminary results point to the relevance of the training in altering professionals’ perspectives about the families they work with, and the ability to stimulate reflective practice. Results will be discussed in relation to the stages of change and also to the urge of supporting professional development.
Family Reunification from Care: Perspectives of Caregivers and Children in Residential Care

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Maria Barbosa-Ducharne (University of Porto), Mrs. Leonor Faria (University of Porto), Ms. Sónia Rodrigues (University of Porto), Ms. Joana Campos (University of Porto), Ms. Ana Martins (University of Porto), Ms. Mariana Leal (University of Porto)

Background: In Portugal, Family Reunification (FR) is a life project for 36% children in Residential Care (RC) and for 43.5% when considering children aged 6 to 11. The prospective of the child's return to his/her family after RC implies the intention of maintaining family relationships, which involves consistent and systematic work with families and promotion of regular visits and phone contacts. Despite FR failure in Portugal rounding 70%, research on the FR process developed in the context of the RC is scarce. Objectives: The main purpose of the present study is to explore the perspectives of the children in care and the caregivers related to the work developed in RC towards FR. Considering the nested nature of the data, a multilevel data analysis will be performed. Firstly, the data related to FR will be exposed to an exploratory factor analysis in order to achieve components of analysis. These components related to the RF issues will then be hierarchically analysed. On a lower level of analysis, children's perspective will be assessed, followed by caregivers' perspectives on a set of children, in turn, embedded in RC centres. In addition, the impact of individual variables related to the children and the caregivers will be identified. Method: From 74 residential care centres, 697 children (50% girls) aged 6 to 18 years-old ($M = 14.02$) and 508 caregivers (418 females) participated in this study. Data were collected through the Portuguese Comprehensive Assessment System of Residential Care Quality (ARQUA-P), namely the ARQUA-P Interview for Children in Care and the ARQUA-P Interview for Caregivers. Results: Data analysis is still in progress. Nevertheless, preliminary descriptive results show that children positively evaluated FR strategies. There were no differences according to child gender but children aged 6 to 11 or living in mixed gender RC centres evaluated FR significantly more positively. Caregivers also evaluated FR strategies positively, especially female caregivers. Conclusions: It is expected that this study will allow for the characterization of the Portuguese situation of FR from care simultaneously considering the children' and caregivers' perspectives within the RC centres.
BACKGROUND: Transition to adulthood from care has been described in the literature as an accelerated and compressed process faced by these young people with less support and skills than their peers. This places them in a vulnerable position towards a period which is nowadays challenging for young people in general. In order to promote their success in this process, the reform in Spanish child protection law in 2015 recognized the need to develop and offer services to prepare these youngsters for independent life, especially those living in residential care homes. In this sense, there are independent life skills programs, such as program PLANEA, which has been developed by our research team. This program follows the steps of Umbrella Program, which was used in several European countries, including Spain. PLANEA has broadened and updated its contents and its particular feature is that it is designed to be used in an online platform in which youths can interact with their social educators. However, there was still a need to have a Spanish updated and adequate skill assessment tool that could complement the intervention with these kind of programs, like the Ansell-Casey Like Skills tool. For this reason, we have developed an independent life skills self-reporting questionnaire (PLANEA questionnaire) that could serve a dual purpose: to guide both children and practitioners during the intervention and to test efficacy of independent life skills programs. OBJECTIVE: Therefore, the main objective of this study is to analyse the preliminary results of an application of this instrument to a dual sample with both young people living in residential care and young people attending a leaving care service.

METHOD: The sample consisted of 55 young people 15-20 years old. 21 of them were living in residential care and had taken part in a new independent life skills training program (PLANEA Program) whereas the rest of the sample was attending a care leavers support service (ASJTET). These young people completed the independent life skills assessment instrument, which consists of 53 items about their perception of achievement in different skills and 10 items about how often they do different tasks related to being independent.

RESULTS: Results showed higher scores for young people in care leaving services compared to those in residential care facilities. Age was also related to these higher scores, whereas sex or origin (being UASC or not) were not significant except for specific items. CONCLUSIONS: Our results support the thoroughly accepted importance of developing services to prepare children in care to be independent adults in the future. They also highlight the importance of developing instruments aimed to measure success in these programs and services in order to make interventions easier and reliable.
Objectives. Residential child care has to fulfill various goals. It has to provide for a safe place for healing traumatized children and youth who for various reasons can neither live at home with their family of origin nor in foster care. Furthermore, residential child care has to provide for educational and recreational opportunities to foster human flourishing as well. More importantly, even if children only spend a few months in residential care, this is a long period of time in the subjective experience of the children as well as in terms of the child's lifetime. Consequently, residential child care needs to be a place enabling a good quality of life in the present as well as leading to a good quality of life in the future. The presentation will propose a comprehensive method for measuring quality of life (QOL) – a topic that has been underutilized in child welfare research so far.

Method. For health care research Taillefer et al. (2003) have reviewed 68 quality of life models that had been published in the period 1965–2001. Based on 4 criteria for construct validity they conclude that Shye's (1989) Systemic Quality of Life Questionnaire (SQOL) is superior to all the 68 reviewed models. The SQOL provides a formula for developing questionnaires consistent with an eudaimonic conception of the good life, including a subjective understanding of well-being. The presentation will extend this literature review to include recently developed quality of life measures to infer which measure would be suitable for research and evaluation in residential child care.

Results. First, it is shown, that the results of the review conducted by Taillefer et al. (2003) still hold today. In comparative perspective, the SQOL is still a measure of high construct validity. Second, the SQOL proves to be a useful formula for developing questionnaires for research and evaluation in residential child care. A Quality of Life Questionnaire for Residential Child Care composed of 16 items developed by the authors according to Shye's formula is presented.

Conclusion. The SQOL proves to be a promising model for the evaluation of residential child care from which specific questionnaires could be derived. The questionnaire developed by the authors should be tested by future research.
Verification of the Temporal Stability (Test-Retest) of the Test of Social-Emotional Skills Development in Young People (DCSE-J)

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Sara Rodríguez Pérez (Autonomous University of Barcelona), Dr. Josefina Sala Roca (Autonomous University of Barcelona), Dr. Eduardo Doval Diéguez (Autonomous University of Barcelona)

Abstract

Background and aims: During the last decades, it has become evident the need to include emotional education in the different educational settings. It has been demonstrated that social-emotional skills influence the transition processes to adulthood of young people in care (Sala-Roca, Villalba, Jariot and Rodríguez, 2009). These skills also, are related with better academic outcomes (Durlak, Weissberg, Dymnicki, Taylor and Schellinger, 2011), and more positive ties with their friends and their parents (Lopes, Salovey and Straus, 2003), among others. It is therefore necessary to have an instrument for the assessment of the level of socio-emotional skills of young people in care in order to design socio-educational programs tailored to their needs. However, the psychometric instruments developed so far present some difficulties: 1) most of the tests are of self-report type and have limited predictive validity, 2) most of the social-emotional skills tests have a high cost, hindering their use. This communication describes the Test-Retest reliability analysis process of the Test of Social-Emotional Skills Development in Young People (DCSE-J).

Methods: The instrument used is the Social-Emotional Competence Test developed by the IARS group (Sala, Filella, Oriol, Ros, Secanilla and Rodríguez, 2015), of which the temporal stability is analysed. This test is an instrument for the diagnosis of social-emotional skills in minors between 12 and 18 years old. Specifically, the instrument takes into account: 1) self-esteem, 2) assertiveness, 3) understanding one's emotions, 4) understanding other people's emotions, 5) regulating one's emotions, 6) regulating other people's emotions. The initial sample consists of 164 students from the Faculty of Education Sciences of the Autonomous University of Barcelona, of which 144 (87.80%) are girls and 20 (12.19%) are boys. After the analysis of the verification questions, 58 people were discarded, so the final sample consists of 106 students.

Findings: The distributions of the variables are not-normal. Test-Retest was analysed by means of the Spearman correlation coefficient, and the correlation was verified for each skill:

• Emotional understanding ($\rho = .558; p < .001$)
• Emotional regulation ($\rho = .700; p < .001$).

Conclusions: In this study, the temporal stability of the DCSE-J is confirmed. These findings, together with those contributed by previous studies (Sala, Filella, Oriol, Ros, Secanilla and Rodríguez, 2015), allow us to conclude that the DCSE-J scores show evidence of reliability and validity for the psychoeducational diagnosis of the measurement of social-emotional skills in young people. In addition, the instrument is a tool easy to use and it awakens the interest of the boys and girls who answer it. It is proposed as a copy-left test that allows any professional to use it at no cost. Based on this, and with the aim of continuing in the validation process of the test, the verification phase of the convergent validity is currently under development.
Convergent Validity of the Test of Social-Emotional Skills Development in Young People (DCSE-J)

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Sara Rodríguez Pérez (Autonomous University of Barcelona), Dr. Aida Urrea Monclús (Autonomous University of Barcelona), Prof. Clara Sanz Escutia (Autonomous University of Barcelona), Dr. Josefina Sala Roca (Autonomous University of Barcelona)

Background and aims: During the last decades, the need to include emotional education in the different educational settings has become evident. It has been demonstrated that socio-emotional skills influence the transition processes to adulthood of young people in care (Sala-Roca, Villalba, Jariot and Rodríguez, 2009). These skills also favour academic outcomes (Durlak, Weissberg, Dymnicki, Taylor and Schellinger, 2011) and the development of positive ties with friends and family (Lopes, Salovey and Straus, 2003), among others. It is therefore necessary to have an instrument for the assessment of the level of socio-emotional skills of young people in care in order to design socio-educational programs tailored to their needs. However, the psychometric instruments developed so far present some difficulties: 1) most of the tests are of self-report type and have limited predictive validity, 2) most of the social-emotional skills tests have a high cost, hindering their use.

This communication describes the Test-Retest reliability analysis process of the Test of Social-Emotional Skills Development in Young People (DCSE-J).

Methods: To conduct the convergent validity verification, three tests have been selected considering the DCSE-J components. Criteria of validity and reliability have been observed in order to select these tests. In particular, these tests are:

Findings: Once the data have been collected, the appropriate correlation statistical analysis will be conducted in order to verify the convergent validity of the DCSE-J.

The instruments will be administered, along with the DSCE-J, in March and April 2018. The sample will be composed by at least 120 students of the Faculty of Educational Sciences of the Autonomous University of Barcelona, and the Faculty of Education, Psychology and Social Work of the University of Lleida.

Results. The results of the data analysis will be obtained after the administration of the instruments that is about to start. The results may be presented at the congress.

Conclusions: With the data collected so far, the DCSE-J is presented as a valid psychoeducational diagnostic tool for measuring socio-emotional skills in young people. The temporary stability of the test has been verified. In addition, it is a simple tool and it awakens the interest of the boys and girls who answer it. It is proposed as a
copy-left test that allows any professional to use it at no cost.
Employability skills are a set of basic skills needed to obtain a job, being able to maintain it, and to promote regardless of the type of job. In the present work, the criterion validity process of the test Big Eight +12 is described, a test of employability skills for adolescents between 12 and 18 years old. The aforementioned test is based on the model proposed by Arnau-Sabatés, Marzo, Jariot, Sala-Roca (2014) which considers 8 skills: self-organization, professional project construction, decision making and problem solving, teamwork, communication, perseverance, flexibility, and responsibility and co-responsibility.

Employability skills are acquired in the course of socialization (Sheffield, Silk, Steinberg, Myers, Robinson, 2007), and it has been demonstrated that their attainment at an early age facilitates the transition to adulthood of young people in care, since it improves both their employment integration and their comprehensive development (Arnau-Sabatés et al., 2014). These young people find it difficult to obtain a stable employment and when they do, it is in temporary jobs and with low wages (Sala, Villalba et al., 2009). Different studies indicate that the relationship with significant adults (Arnau, Gilligan, 2015), and the acquisition of employability skills have a positive impact on the labour integration of these young people (Dixon, 2006, Sala, Jariot et al., 2009). However, there are no psychometric instruments to measure employability as a basic skill to obtain a job, maintain it and earn a promotion.

This is why the IARS group developed the situational test of employability skills Big Eight +12 (Sala, Arnau, Jariot, Marzo, Pagès, 2015). The test development was conducted in different phases. In the initial phase, the situations were built around 5 stories, and a group of adolescents was interviewed to check their answers. These interviews allowed for closing the responses, and, subsequently, validating and scaling the test with the collaboration of experts. The test was administered to 1123 adolescents. The factorial analysis did not allow the corroboration of the test structure, as is usually the case situational tests, but it provided evidence of criterion validity.

Method. The analysis is conducted with a sample of 150 participants, university students from different faculties of education.

Currently, an administration of the test is being conducted. Once the data are collected, the opportune correlational statistical analysis will be conducted in order to verify the Test-Retest reliability. Likewise, the verification of criterion validity is being conducted. To that end, a questionnaire that seeks to collect employability skills evidence in real-life, prepared by the research group, will be administered along with the Big Eight +12 test. To select these evidences, 12 work hypotheses related to work experience, leisure and education have been defined, and the content has been validated by a group of experts. The thesis is that participants with a higher level or employability skills will obtain better scores with respect to the 12 defined hypotheses.

Results. The data collection of the Test-Retest is currently being completed and we are about to start the administration of the questionnaire for the criterion validity procedure. This will allow us to present the results of the analysis at the congress. Conclusions: The data collected so far show that the Big Eight +12 test is easy to answer and it awakens the interest of the respondent adolescents. In addition, it is proposed as a copy-left test that allows any professional to use it at no cost.
Development of an Inventory of Adoption-Related Beliefs

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Raquel Barroso (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Ms. Adriana Ferreira (University of Porto)

**Background:** Adoption is an ancient social practice. However, the way adoption is thought, practiced and assessed has suffered many changes over time. Currently, adoption is guided by the child's best interest and prioritizes the well-being of the adoptee. Furthermore, adoptive families are becoming increasingly more frequent. Adoption-related beliefs held by the adoptive family have an impact on the way adoptive parents and adoptees experience adoption, especially in relation to the openness of adoption communication. Moreover, adoption-related beliefs are associated to the adoptive status' social stigma. The scarcity of research on adoption-related beliefs can be associated to the lack of specific instruments. This study aims to fill in this gap.

**Objective:** The main goal of this study is to develop an inventory of adoption-related beliefs.

**Method:** Four hundred eighty-seven parents, aged 27 to 65, participated in this study. Out of these, 78 (16%) were adoptive parents.

**Results:** An Exploratory Factorial Analysis showed a four-factor structure accounting for 73.1% of the variance: 1) negative discrimination of the adoptee, 2) positive discrimination of the adoptee, 3) attitudes pro closed adoption communication 4) adoption as a child protection intervention. Significant differences between adoptive and non-adoptive parents were found regarding adoption-related beliefs. Non-adoptive parents reported significantly higher scores in negative discrimination of the adoptee, positive discrimination of the adoptee and attitude pro closed adoption communication when compared to adoptive parents. Thus, results showed that there is still a current stigmatized judgement about adoption and adoptees by those not involved in adoption.

**Conclusion:** The present study focused on the development of an Inventory of adoption-related beliefs to be used in further research in adoption socialization.
Children Placed in Alternate Care in Norway: A Review of Mental Health Needs and Current Official Measures to Meet Them

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Nanna Kayed (Regional Centre for Child and Youth Mental Health and Child Welfare – Central Norway, Department of Mental Health, Faculty of Medicine and Health Sciences, Norwegian University of Science and Technology), Dr. Stine Lehmann (Regional Centre for Child and Youth Mental Health and Child Welfare -West, Uni Research Health)

Background: There is a growing body of knowledge concerning the mental health of children and adolescents in out-of-home care in Norway. On this basis, several Governmental reports have recently been issued aiming to strengthen the service provision and cooperation between health and child protection sector.

Objectives: The main aim of the article is to review the knowledge base on the prevalence of mental disorders of children and adolescents in alternate care in Norway, and give an overview over official measures taken to improve service provision for children placed in alternate care.

Results: There is high prevalence and comorbidity of mental disorders, including attachment disorders, in children and adolescents in alternate care and they have limited access to mental health services. They have to a large extent a need for specialised treatment and therapeutic help in several important life areas. A number of measures are now taken by the Government to ensure better and more available health care services, as well as more coordinated services, for youth in institutional care. They propose five measures to improve service provision. First, early identification and assessment of healthcare needs when children are moved out of home are recommended strengthened. Second, it is recommended to establish primary care teams with competency on children and youth with complex needs, encompassing children in the CPS. Third, services from GPs is proposed strengthen by establishing child protection physicians. Fourth, it is proposed to increase use of digital tools in treatment. Fifth, continued development and strengthening of specialized institutions run by the CPS, in cooperation with CAMHS. The Governmental recommendations for further development of the field focuses almost exclusively on youth in institutional residences. While there is a substantial and much needed effort to move forward in the coordination of services needed to promote healthy development for youth in RYC, a differential approach to all children and adolescents placed in alternate care by the CPS as a group is still lacking. All in all, very few children placed in alternate care are in need of specialised in-patient treatment. Given that 9/10 of the children placed in out-of-home care in Norway live in foster families, these reports are strikingly unbalanced in their focus on improving the services offered to the minority of youth in need of RYC.

Conclusion:
A majority of maltreated children with mental disorders are, as children and youth in general, in need of both a caring and developmentally supportive family settings AND out-patient treatment interventions tailored to their needs on an out-patient basis. We do have some indications that evidence-based treatment approaches may not have the same effect on children with complex symptom patterns or high comorbidity. We need more knowledge of what works for whom.
Adolescents in Spanish Residential Care: Psychological Adjustment in the School Context

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Yolanda Sánchez-Sandoval (University of Cádiz), Mrs. Elena Vizcaya (University of Cádiz), Mrs. Claudia Aragón (University of Cádiz), Dr. Laura Verdugo (University of Cádiz)

There are almost 6,000 boys and girls from the Community of Andalusia (southern Spain) who are served by the Child Welfare System (nearly 3,500 in foster families, the rest in Residential Care). These children suffer psychosocial risk and may present various psychosocial difficulties. Adolescents in residential care are more likely to be less psychosocially adjusted than non-institutionalized adolescents. Despite previous research, there are still few studies that assess the impact of institutionalization on adolescents' development, psychological adjustment and mental health, and their subsequent social integration.

The aim of this paper is to analyze psychological adjustment in a sample of 144 adolescents from the province of Cádiz (45 children in foster care and 99 classmates). We performed an ex post facto cross-sectional design with two groups. The participants (aged between 11 and 19 years) come from 38 classrooms of 18 schools and high schools. As specific objectives, we aim to identify possible psychological needs or difficulties in the foster care subsample, what type of problem behaviors occur more frequently, and whether these are clinically significant. We will also determine possible significant differences according to gender and the cause of admission (Foreign Unaccompanied Minor (FUM) or not). Many of these children emigrated from their countries to Spain in search of a better future. Due to its geographical location, the province of Cádiz receives many FUMs from Africa on their way to Europe. For this purpose, the teachers completed the Behavior Assessment System of Children and Adolescents (BASC-T).

The results suggest more externalizing problems than their classmates in children in foster care. There were no significant differences in the adaptive scales of Social Skills and Leadership. The girls presented more internalizing problems but were more adapted than the boys. FUMs showed more learning disabilities. At present, we find children who have specific needs that require diverse and specialized resources for their present and future welfare. The aim of this work is to identify key aspects for psychosocial intervention and to improve the quality of care and mental health of this population.
The Relationship between Perceived Social Support and Well-Being in Institutionalized Spanish Adolescents

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Carmen Paniagua (University of Seville), Dr. Francisco Rivera (University of Seville), Dr. Pilar Ramos (University of Seville), Dr. Inmaculada Sánchez-Queija (University of Seville), Ms. Ana Villafuerte-Díaz (University of Seville), Dr. Jesús M. Jiménez-Morago (University of Seville)

Social support is fundamental for adolescent development due to its relationship with well-being and its buffering role on health and risk behaviors. Conversely, isolation has been related to worse psychological functioning. Different authors have highlighted the importance of perceived social support, defending its benefits in psychological well-being even above real support. However, there are few studies that have analyzed the role of perceived social support in look-after children, and even less in children who live in residential care. The present study analyzes the relationship between perceived social support and well-being in a sample of institutionalized Spanish adolescents. Furthermore, the source of the perceived social support is also analyzed.

Method

Participants: The sample was comprised of 35 adolescents living in residential care who took part in the 2014 Spanish edition of the WHO collaborative study Health Behaviour in School-aged Children (HBSC). Of the sample, 46% of children were girls and 54% were boys. The average age was 14.48 years old.

Instruments: The instruments used were Cantril’s Scale for Life Satisfaction, Kidscreen-10 Index for Health-Related Quality of Life (HRQL), and a special version of The Multidimensional Scale of Perceived Social Support (MSPSS) for perceived social support. In MSPSS, each item asked for a “special person”, therefore allowing for consideration of different personal situations. A question about who the “special person” is was used after the MSPSS.

Statistical analysis: Descriptive analysis and the Pearson’ $r$ were used.

Results

Data analysis showed a significant positive correlation between perceived social support and both measures of well-being: life satisfaction and health-related quality of life. In addition, results showed that the main sources of perceived social support were the center workers (20%) and peers (20%), followed by family (17%). It was also common to find a combination of the three previous ones (20%). However, a relevant percentage of institutionalized adolescents did not answer this question or answered that they did not have anyone special.

Discussion

A relationship between perceived social support and well-being has been found in institutionalized Spanish adolescents. However, a relevant part of them do not have a significant person in their lives to support them, which may have a negative impact on their well-being.
Social Support and Mental Health of Young People in Residential Care: A Qualitative Study

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Sofia Ferreira (ISCTE-IUL), Prof. Eunice Magalhães (CIS, ISCTE-IUL, Lisboa, Portugal; HEI-LAB, Universidade Lusófona de Lisboa), Prof. Ana Prioste (HEI-LAB, Universidade Lusófona de Lisboa)

**Background.** The literature suggests the positive role of social support on mental health of youngsters in residential care. However, most of studies are focused on psychopathology outcomes and fewer on well-being dimensions. Also, theoretical-oriented and multidimensional studies on social support are needed.

**Objectives.** Through this qualitative empirical study, we aim to explore the young people's representations and meanings of social support, based on a multidimensional, comprehensive, holistic, and theoretical-oriented approach (Tardy, 1985), as well as to assess the perceived impact of social support by youth on their mental health, in terms of psychopathology and well-being. Also, this study allows us to provide an opportunity of active voice in research processes to these vulnerable youths (Emond 2003; Fournier et al., 2014).

**Method.** To address these problems, a qualitative study was developed with 29 young people in residential care (76% males), aged from 12 to 19 years old. Data was collected with a semi-structured interview focused on youths' representations about social support from a multidimensional, holistic and theoretical-oriented approach as well as their perceptions about the relationship between social support and mental health, both in terms of psychopathology and well-being.

**Results.** Overall, young people identified meaningful sources of social support (peers, residential care and family context), considering also themselves as available sources and providers of social support. Besides, social support was identified as an enhancer of positive psychological functioning and a buffer of psychological functioning problems.

**Conclusions.** In sum, this study seems to contribute with new insights on young people's meanings about supportive relationships, by providing a multidimensional and comprehensive approach of this phenomenon in care and considering a more complete picture of mental health indicators (psychopathology and well-being). Considering that young people identified both formal (e.g., educators) and informal sources of support (e.g., family, friends), the psychosocial intervention with them in residential care should consider the role of different elements of support.
Comparing the Well-Being of Care-Experienced Young Adults in Northern Ireland: Does Placement Type Matter?

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Montserrat Fargas (Queen’s University Belfast), Dr. Dominic McSherry (Queen’s University Belfast)

Young children who enter the care system, often as a result of abuse or/and neglect, are provided with different types of long-term placements, including returning to their birth parents, kinship and non-kinship foster care, or (in certain countries like the UK) adoption. In Northern Ireland, they might also be placed under a Residence Order. Research has been conducted looking at different outcomes for these children in some of these placements, but longitudinal research of care-experienced young people across a range of placement types has been scarce. This poster will report findings of a longitudinal study that has been following all the children who were in care in Northern Ireland and under 5 years old on 31/3/2000. The study has examined a range of issues across the different types of placements the young people ended up moving into (i.e. adoption, foster care, kinship care, returning to their birth parents, and Residence Order). We are currently in the study’s Wave 4, and data collection is ongoing with the young people (now aged 18-23) and their parents or carers. This poster will present findings on the young people’s state of physical and mental health, life satisfaction, self-concept, and it will be broken down by the type of long-term placement they were provided with. The poster will also show the type of factors that appear to impact the young people’s wellbeing. The data is being collected through an online survey for parents/carers and one for young people (with a range of psychometric instruments, including the ASEBA Adult Behaviour Checklist and the Tennessee Self-Concept Scale TSCS2), and a semi-structured interview with the young people and another with the parents/carers. So far, data has been collected for 48 young people. The data for this phase of the study has not yet been analysed. However, data from Wave 3 suggested that all the children that we interviewed (all being in long-term placement types at the time, aged between 9 and 14) were securely attached to their current carers and were happy about themselves, but differences were noted in terms of their behaviour and their carers’ parenting stress, where the adopted children and those in kinship care seemed to do better. The poster will reveal whether their well-being at this stage of their lives follows a similar pattern or not. Implications for policy and practice will be outlined.
Emotional and Behavioural Problems and Psychosocial Skills in Adolescents in Residential Care

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Joana Campos (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Prof. Pedro Dias (Catholic University of Portugal, Centre for Studies in Human Development, Faculty of Education and Psychology), Ms. Ana Martins (University of Porto), Ms. Mariana Leal (University of Porto), Ms. Sónia Rodrigues (University of Porto)

Background: Several studies indicate a prevalence of mental health problems in adolescents who live in Residential Care (RC) when compared to adolescents living at home. Thus, it is essential to identify the psychosocial skills of adolescents in RC, since these act as protective factors.

Objectives: This study aims to compare adolescents in RC with adolescents from a national normative sample in relation to the frequency of mental health problems and psychosocial skills; identify differences related to the gender of adolescents in RC, and explore the relationship between mental health problems and psychosocial skills.

Method: 443 adolescents (50.1% female), aged 11 to 18 (M = 15.42, SD = 2.33) from 45 RC centres in Portugal participated in this study. Data were collected using the Youth Self-Report, which is a self-report questionnaire for adolescents, 11 to 18 years old, allowing for the assessment of their own psychosocial skills and emotional and behavioural problems in a standardized format. Sociodemographic data were collected from the Previous Information Survey (belonging to the Portuguese Comprehensive Quality Assessment System of Residential Care), which allows for sociodemographic, health and family information of adolescents in RC.

Results: Results showed that adolescents in RC tend to have higher levels of mental health problems (particularly girls), lower academic performance, more engagement in sports and hobbies, and in a greater number of domestic chores (with higher incidence in girls) and a poorer social support network when compared to adolescents living at home. There were significant negative correlations between adolescents’ psychosocial skills and mental health problems. Skills such as sport and hobbies are negatively correlated with Rule-Breaking Behaviour and Externalizing Problems, indicating that these types of activities promote higher rates of well-being and resilience, reducing the probability of delinquent behaviours. Domestic chores were also negatively correlated with Rule-Breaking Behavior, Aggressive Behavior, Externalizing Problems and Total Problems. These results indicate that when adolescents are involved in “home” dynamics they tend to present less symptomatology. At asocial level, it was possible to observe that the integration of adolescents in community organizations, as well as their interaction with other adolescents, reduce Withdrawn/Depressed feelings, allowing for the normalization of adolescents’ life.

Conclusions: It is important to detect socio-cognitive resources and the needs of adolescents early, allowing for the implementation of socio-educational programmes of stimulation and self-enrichment. The results of this study highlight the importance of applying specific programmes to promote social skills as well as social support networks in order to minimize adolescents’ emotional and behavioural problems. RC centres must be transformed into quality and safe environments for adolescents.
Mental Health of Youth in Residential Care: A Longitudinal Analysis from a Multi-Informant Approach

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Prof. Eunice Magalhães (CIS, ISCTE-IUL, Lisboa, Portugal; HEI-LAB, Universidade Lusófona de Lisboa), Prof. Maria Calheiros (Centro de Investigação em Ciência Psicológica, Faculdade de Psicologia, Univ. Lisboa), Prof. Patrício Costa (ICVS/3B’s Associated Laboratory, University of Minho, Braga, Portugal; Faculty of Psychology and Educational Sciences, University of Porto)

Background. There is extensive evidence suggesting mental health problems of young people in residential care, comparing them with young people in the community and/or in other out-of-home placements (Fernandez-Molina et al, 2011). However, more longitudinal designs are needed in non-specialized residential settings and considering a multi-informant approach.

Objectives. In this study we aimed to explore patterns of change or stability of mental health outcomes of youth in residential care during one year of placement in care.

Method. A sample of 213 youths (57% females) participated in this study, aged from 11 to 18 years old (M=14.36; SD=1.85). A multi-informant approach with repeated measures was used. Youths completed the YSR and educators filled out the CBCL (at the admission in care and twelve months later). A set of mixed design factorial Anova was conducted on internalizing problems and externalizing (YSR; CBCL), with gender and age as factors.

Results. Non-significant main and interaction effects were found on internalizing and externalizing difficulties reported by young people (YSR). Significant interaction effects were observed with age and gender for internalizing outcomes (CBCL) and with gender on externalizing (CBCL). As such, if for younger adolescents there is a decrease on these problems for both males and females, for older adolescents, females increase their internalizing symptoms and males decrease those problems. Also, if females increase their externalizing symptoms across time, males tend to decrease those problems.

Conclusions. This evidence suggests that females’ adolescents revealed an increase on both internalizing and externalizing problems from educators’ perspectives. This is consistent with some previous data in residential treatment, suggesting that girls revealed a significant increase of psychopathological problems, but this was not the case for males (Weis & Toolis, 2009). It also suggests an increased vulnerability of older females regarding the internalizing problems during their experience of placement in residential care, which calls for a careful discussion about the intervention in residential care.
Objective. Adolescents in residential-care show high rates of emotional and behavioral problems, which have been empirically linked with their attachment representations and their levels of alexithymia, especially with alexithymia’s factors Difficulty to Identifying Feelings (DIF) and Difficulty to Describing Feelings (DDF). In this preliminary report, we aimed to jointly investigate attachment and alexithymia, as possible risk factors for the levels of emotional and behavioral problems showed by institutionalized adolescents, because it has never been done before.

Method. Participants were 26 adolescents aged 13-18 (69% males; $M=16.4, SD=1.3$), placed in residential-care due to their adverse past experiences (76% birth-family's difficulties/abuse; 24% delinquency), enrolled for a larger multi-method research through social and health services in Northern Italy. Measures were: 1) the Child Behavior Check List 6-18 (CBCL), a parent-report questionnaire compiled by educators for this study, to measure the level of emotional-behavioral problems; 2) the Friends and Family Interview (FF; Kriss, Steele and Steele, 202; Pace, 2014), an audio-taped semi-structured interview suitable for age 10-17 years, used to assess attachment representations both in terms of classifications and corresponding scales (Secure [S]; Insecure-dismissing [Ds]; Insecure-Preoccupied [P]; Disorganized[D]). 3) The Toronto Alexithymia Scale (TAS-20), a self-report questionnaire to detect the levels of alexithymia, in a global score and also in terms of factors DIF and DDF.

Procedure was approved by the Ethical Committee of the University of Genoa and included the signing of an informant consent by the legal care-takers and the participant before the data collection, that occurred in home-visits in the participant's residence-house.

Results showed that higher levels of symptoms were associated with lower attachment security ($rs=-.551, p=.012$) and higher levels of alexithymia, in terms of DIF ($rs=.428, p=.029$) and DDF ($rs=.522, p=.006$). A multiple regression revealed that a model with attachment security, DIF and DDF predicted 46% of the total level of emotional-behavioral problems ($adjusted-R^2=.46, p=.027$), despite the only significant predictors were attachment security ($\beta=-.476, p=.17$) and the alexithymia’s Difficulty to Describing Feelings ($\beta=.435, p=.27$).

In conclusion, we discussed the potential preventive and clinical utility of assessing attachment representations and alexithymia in teenagers in residential-care, because they may could be related to their rate of behavioral and emotional problems. A multi-method assessment - e.g. using clinical interviews for alexithymia, as done in the larger study that includes this report - could be useful to direct the intervention. For example, as suggested by these results, adolescents could be supported in gaining trust in meaningful relationships –fostering their attachment security - and in their ability to describe their feelings to others, because it could be protective for their mental health.
Non-Suicidal Self-Injury Behaviors among Adolescents Living in Residential Care

Non-suicidal self-injury behaviors are particularly salient during adolescence. These types of behaviors seem to be linked to a triple failure in the adolescents’ lives at the familiar, social and individual levels, which contributes to a desperate need to alter a situation that they perceive as unsustainable. The attention given to the family factors, such as dysfunctional and poor affective relationships, raises a special interest in the analyses of non-suicidal self-injury behaviors in extra-familiar contexts as residential care. The aim of this study was to understand if the adolescents living in residential care tend to present more non-suicidal self-injury behaviors than adolescents living with their families. Sample comprised 174 adolescents aged between 12 and 18 years old, equally divided in two groups: One Group (G1) of adolescents in residential care (n=87; 64,4% girls; mean age=15.7, SD=1.73) and other Group (G2) of adolescents living with their family (n=87; 64,4% girls; mean age=15.7, SD=1.73). First group was collected in Residential Homes and the second group in Schools, both from the Centre and North regions of Portugal. As instrument it was used the Impulse, Self-harm and Suicide Ideation Questionnaire for Adolescents. Adolescents in residential care are more impulsive, practice more self-harm, exhibit more risk behaviors and present more suicidal ideation than adolescents that live with their family. In the group of adolescents in care, girls and boys don’t differentiate from each other in the parameters referred before. These results corroborate the perspective that adolescents in out-of-home care are a vulnerable group, more prone to follow maladaptive pathways. Care practices in the Residential Homes that intend to be therapeutic should contemplate the assessment of the risk to develop psychopathology and the capacity to intervene as early as possible.

Keywords: Adolescents, residential care, non-suicidal self-injury behavior
Background:
Adoption is commonly used in Western child welfare systems to provide legally secure and stable family placements for children growing up in out-of-home care. In Ireland adoption-from-care is not usual, with fewer children adopted from care than in the majority of other child welfare systems. Only 0.3% of children growing up in foster care in Ireland were adopted in 2017 (www.aai.gov.ie and www.dyca.gov.ie) This compares to 8% in England (www.gov.uk) and 13% in USA (www.acf.hhs.gov). Most studies focusing on adoption-from-care seek to understand the potential impact of adoption during childhood, for children growing up in long-term out of home care. Adoption is viewed as providing a more legally secure and stable status than that offered by long-term foster care. However, understanding the ongoing impact of adoption into adulthood could provide valuable insight particularly relevant to policy and practice as adoption from care continues to feature widely in Western child welfare systems.

The Irish adoption-from-care system can serve as a valuable ‘laboratory’ from which to investigate the impact of late adoption. In Ireland most adoptions-from-care involve young people aged 16 years or older who are adopted by the long-term foster carers with whom they have lived for most of their lives. Thus, being adopted brings a new legal status but makes little practical change to the young person’s daily life. This Irish system, of late adoption by long-term foster carers, has arisen within a particular historical, cultural and political context. It provides an opportunity for a study seeking to understand what might the new adoptive status add, when compared to leaving stable care at 18, in entering into the period of youth transitions. It can further allow an investigation into the potential for adoption to hold a symbolic meaning during this period of transition.

Objectives:
This poster presentation has three objectives:
1)Provide an overview of the Irish system of late adoption from long term care, identifying the unique aspects of this system that make Ireland an ideal laboratory from which to investigate the issues at the center of this study.
2)Outline the ways in which the lens of transitions is relevant to this study and how the lens of transitions has the potential to shine new light in investigating the lived experience of young adults adopted late from within long-term stable foster care.
3)Introduce an in-progress PhD, being undertaken by the presenter who is both a PhD candidate in Trinity College Dublin and a Social Work Practitioner with 17 years’ experience in adoption. The presentation will include an overview of the key elements of the study which seeks to shed new light on the meaning of adoption through investigating the lived experience of adoption for young adults who have been adopted late from care.
Foster & Adoptive Parent Proficiencies & Characteristics for Increasing Placement Stability & Permanency: A Systematic Review

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Amy Salazar (Washington State University), Ms. Lori Vanderwill (Wayne State University), Ms. Jessica De Larwelle (University of Washington), Dr. Angelique Day (University of Washington), Dr. Kevin Haggerty (University of Washington)

Objectives: Permanency is the ultimate goal for all children in foster care; this most commonly includes reunification with one’s biological family and adoption. A key factor in achieving permanency is placement stability. Unfortunately, placement stability has been notoriously hard to achieve for many youth in care, and gets more challenging the longer youth are in care and the older they get. This is often because children and youth in the foster care system and who have been adopted have complex challenges and needs resulting from their traumatic histories that foster and adoptive parents are often not prepared to deal with. In order to improve foster/adoptive parent preparedness, there is a need for a comprehensive understanding of the characteristics and skills of families that enable them to successfully provide placement stability and permanency to youth in out-of-home care. The goal of this study is to conduct a systematic review of scholarly literature to better understand malleable/trainable factors that contribute to permanency and placement stability, in order to provide a strong foundation for developing and improving trainings available to foster/adoptive parents.

Method:
Step 1 of our systematic literature review process involved compiling a list of articles that we would subject to full review. We used four databases (Psycinfo, Medline, ERIC, and Social Services Abstracts) to search for articles using 15 search terms. We limited results to articles published 2003-current, English language only, and peer reviewed. Articles were included if their content suggested they may review factors (caregiver characteristics, proficiencies, or other malleable factors that parents may be trained to affect) that contribute to placement stability, permanency, or other key outcomes (such as child behavioral problems) that are closely linked to placement stability and permanency. Step 1 resulted in 420 articles. In Step 2, we conducted full reviews of the 393 articles for information they provided on factors that contribute to placement stability, permanency, or related outcomes. Step 2 resulted in 177 of the original 393 articles containing information regarding proficiencies and characteristics that contribute to placement stability, permanency, or related outcomes. These proficiencies and characteristics were coded based on the type of evidence found for them being related to the outcomes of interest: statistical evidence (SE), qualitative evidence (QE), a reference to other studies in the introduction (RE), or a simple discussion of a factor as one likely to impact that outcome in the discussion section (DI).

Results:
Our analysis resulted in the discovery of 11 parental proficiencies and 10 parental characteristics that were related to placement stability, permanency, or related outcomes for adoptive/foster/kinship youth. The five parental proficiencies with statistical evidence from 10 or more articles included “Ability to maintain attentiveness to the parent/child relationship” (SE=29), “Understanding the effects of trauma and teach social emotional health” (SE=18), “Valuing a connection to child's birth family” (SE=18), “Behavior management/positive parenting” (SE=11), and “Collaboration” (SE=12). The three parental characteristics with statistical evidence from 10 or more articles included “Access to support systems” (SE=16), “Having sufficient economic resources” (SE=15), and “Healthy family and marriage functioning” (SE=10).

Conclusions:
There are a wide variety of factors that have been found to be associated with improved placement and perma-
nency outcomes for children and youth in foster care and who have been adopted. Many of these are factors that can be used in the foster/adoptive parent selection process, or trainable factors that can be addressed in foster/adoptive parent training curricula. This study identified 22 such factors. Using a research-informed foundation for developing foster/adoptive parent training curricula is a promising strategy for improving foster/adoptive parent preparation, and in turn, child and youth outcomes.
Different Adoption Practices for Different Families? Gay, Lesbian and Heterosexual Adopters and “Hard-to-Place Children”

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Pedro A. Costa (WJCR, ISPA - Instituto Universitário), Dr. Fiona Tasker (Birkbeck, University of London), Prof. Isabel Leal (WJCR, ISPA - Instituto Universitário)

According to the UK Department of Education, on 31st March 2017 there were 72,670 children in the care of local authorities. Some authors have argued there is a shortage of suitable applicants coming forward to adopt children, and efforts have been made to recruit Lesbian, Gay, and Bisexual (LGB) prospective adopters for the 5,250 children in the social care system waiting for a permanent placement with a family. However, research has suggested that LGB adopters may be more likely to be matched with harder-to-place children than heterosexual adopters. The purpose of this study was to investigate whether LGB adopters have been matched with harder-to-place children. A national sample of adoptive families were recruited through adoption agencies, and invited to participate in an online survey about child well-being in different types of adoptive families (Empowering Adoptive Families study [EAF]). A final sample of 253 families was collected, and comprised 40 lesbian/bisexual-mother, 36 gay/bisexual-father, and 176 heterosexual-parent families. Parents responded to a sociodemographic questionnaire, and were also asked about child's preadoptive history and child's characteristics. Based on previous studies, we assessed “hard-to-place” children through the following group of variables: (1) Prenatal adverse experiences (mother's use of drugs/alcohol during pregnancy); (2) Trauma experiences (physical neglect, physical abuse, sexual abuse, emotional neglect); (3) Placement characteristics (age when taken into care, age at adoption, number of previous placements, duration of previous placements); (4) Child's problematic characteristics (physical problem/disability, learning disability, psychological problem). Despite the differences in numbers in each group of families, parents only significantly differed in the following variables: heterosexual parents were older than both lesbian and gay parents, and gay and lesbian parents were more likely to live in or around big cities than were heterosexual parents.

Results from the EAF study revealed that LGB adoptive parents were not more likely than heterosexual parents to be placed with children whose mother used drugs/alcohol. Regarding child's placement experiences, no differences among the three family groups were found on the duration or number of previous placements. However, it was found that gay and bisexual men tended to adopt significantly older children, as well as children who were older when they were first taken into care, than either lesbian/bisexual or heterosexual adopters. Regarding children's problematic characteristics, LGB adopters were more likely than heterosexual adopters to be matched with children with a physical problem/disability but no differences were found for placement of children with learning disabilities or psychological problems. Lastly, no differences between the three family groups were found on being matched children who had suffered physical, sexual or emotional abuses. Literature has further shown that some child characteristics beyond adverse experiences may pose additional challenges for successful adoptions, namely being a boy, ethnic minority, or part of a sibling group. In this study it was found that gay and bisexual men were more likely to adopt boys, whereas lesbian and bisexual women were more likely to adopt children from ethnic minority backgrounds when compared to the other family groups.

In sum, some support was found for the assumption that LGB adopters are more likely to adopt harder-to-place children. However, the differences found in this study were related to child's characteristics and not to child's adverse experiences prior to adoption which seems to suggest that these different placements may be related to adopters' openness to adopt children across a varied range of profiles at least to some extent, and not necessarily to a differential treatment by the adoption agencies.
The Development of Ongoing Training for Carers and Prospective Adoptive Parents: Key Strategies to Maximise Engagement

Ms. Lisa Velickovich (University of Sydney and Barnardos Australia), Ms. Ruth Drennan (University of Sydney and Barnardos Australia)

The Find-a-Family program of Barnardos Australia is an adoption and permanent care agency in NSW, Australia. The provision of opportunities for carer engagement, and, ongoing learning and development of authorised carers and prospective adoptive parents (subsequent to initial carer authorisation) are fundamental to the Find-a-Family program.

The overall objective as articulated in the Barnardos Strategic Directions (2017-2020) is to enhance our pool of committed and capable carers to support them to care for vulnerable children. Continuous learning and development is beneficial to the carer, child and agency.

Ongoing training aims to assist carers to develop strategies to care for children and young people by updating their knowledge base and ensuring they have a current understanding of practice, policy, legislation and research relevant to their role, both within the agency and across the Out of Home Care sector.

Barnardos has established a benchmark of training participation for all carers post authorisation in the Find-a-Family adoption and permanent foster care program.

This poster presentation will provide an overview of the development of this standard, and, the main objectives of the growth of the Find-a-Family carer learning and development program as below:

- to incrementally increase expectations regarding participation of carers in further education, training and learning (specific to the carer role) whilst simultaneously expanding the portfolio of learning and development opportunities
- to seek input from carers and prospective adoptive parents (direct and indirect) to continue to shape our ongoing carer training schedule to provide best outcomes for children in adoptive and permanent care placements

Over the last 4 years the Find-a-Family program has purposefully expanded its approach to ongoing carer training in a staged manner with the specific aim of increasing carer participation.

The methodology employed included the incorporation of 5 key strategies, outlined below:

- creation of an internal position to coordinate and develop, monitor and evaluate the ongoing carer training program.
- implementation of targeted Carer Development Plans (as a component of authorised carer review processes) that identify learning needs particular to the carer and child
- application of an agreed minimum expectation of carer participation in ongoing training
- development of a robust and flexible post authorisation program of internal and external training for carers, including mandatory modules accessible by group or individual delivery. Key to this methodology is the consolidation of learning through individual consultation ensuring that identified training needs are met.
- continuous development, execution, and evaluation of a program wide carer engagement strategy.

Our methodology and strategy of engagement and commitment to ongoing learning and development has resulted in improved service delivery - enhancing the lives of the children and young people in our program, and, the day to day experience of our carers and prospective adoptive parents.
Outcomes: Through the implementation of these 5 key strategies, the Find-a-Family program have achieved the intended outcomes of increasing carer engagement and participation in individualised ongoing learning and development opportunities over the past 4 years. Authorised carers and prospective adoptive parents within the program are an invaluable resource when it comes to the role of caring for children within the NSW Out of Home Care system. The opportunity for authorised foster carers and prospective adoptive parents to offer feedback and comment regarding the realities of caring for children and contribute towards the future directions of the program in relation to the recruitment, support and training of carers is central to Barnardos key values.
Motivations and Decision-Making Process in Becoming an Adoptive Family: An Exploratory Study with Portuguese Adoptive Parents

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Sara Ralha (University of Porto), Ms. Joana Soares (University of Porto), Ms. Silvia Fonseca (University of Porto), Ms. Inês Salgado (University of Porto), Ms. Sofia Pinho (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto)

Background: In the decision-making process in becoming an adoptive family, several underlying motivations can be found. Adoption literature has shown that parents' adoption motivations can influence the adoption process itself and the success of the parent-child relationship. However, research exploring in-depth adoption-related motivations is scarce. The few studies on this issue have essentially focused on infertility-related motivation and have not explored other motives. Objectives: This study aims to fill in this research gap by exploring, in a sample of adoptive parents of school-aged children, the motivations underlying the adoption project and the adoption decision-making process (in terms of initiative, spouse reaction, easiness, sharing with the extended family and friends and others' reactions). Method: The motivations and adoption decision-making process of 126 Portuguese adoptive parents were retrospectively assessed using the Adoption Process Interview, in a mixed method study. When data were collected, adoption had taken place on average five years before. Qualitative data were studied using content analyses (an interrater agreement of 90%) and quantitative data were explored through univariate and bivariate statistics (descriptive, mean differences and bivariate correlations). Results: Qualitative results allowed for the identification of seven general motivations for becoming an adoptive family: a) biological issues, which included infertility, health risk, running out of options and biological unviability; b) filling in a void/loneliness, which included sharing, company and personal/couple fulfilment and death of a birth son/daughter; c) expanding the family; d) adoption as a life project; e) contact with the reality of child care; f) philanthropic ideas; and g) parenthood. The parents are the focus of the first four motivations, i.e., they are essentially self-centred. In turn, contact with the reality of children in care and philanthropic ideas are child-centred motivations. The last motivation (parenthood) appeared associated both to the desire of having a son/daughter (child-centred) and wanting to be a parent (self-centred). Findings revealed that biological issues were the most frequent adoptive parents' motivations, followed by parenthood. Contact with the reality of childcare was the less frequently reported motivation. Motivations seemed to be dynamic and connected, even permeable, to each other, showing the complexity of the process. In relation to adoption decision-making, adoption was not always a decision shared by both members of the couple, and often it was kept private and not communicated to family and friends. Conclusions: These data reinforce the complexity of adoptive parents' motivations and bring new evidence to literature/research and additional information to professional practice on adoption. These results highlight the need of discussing parents' motivations in order to promote adoption success and prevent “loss of motivation” and adoption disruption.
Predictors of Adoptive Parents’ Parenting Stress in Families with Adolescent Children

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Isabel-Sofia Costa (University of Porto), Prof. Maria Barbosa-Ducharne (University of Porto), Prof. Jesús Palacios (University of Seville), Ms. Joana Soares (University of Porto)

Background: Parenting stress is related to the child's and parents' characteristics as well as to the parent-child interaction. In adoptive families, parenting stress has been pointed out as determinant to the family's adjustment to adoption. The stress experienced by parents of adopted adolescents deserves special consideration as adolescence is a critical period in the adoptees' developmental pathway due to the specific challenges related to the identity formation. Objectives: The present study aims to identify the adoptee', parents' and family-related predictors of the adoptive parents' parenting stress, exploring direct and indirect effects. Method: Fifty adoptive parents of adolescents aged 12 to 18 participated in this study. Parenting stress was evaluated through the Stress Index for Parents of Adolescents. The Strengths and Difficulties Questionnaire was used to evaluate the adoptees' maladjustment. Variables related to the parents' experience of adoption and family relationships were assessed using the Parent’s Interview about the Adoption Process. Results: Results showed that higher adoptees' maladjustment and lesser closeness on the family relationships were significant predictors of higher levels of parenting stress in adoptive parents of adolescent children. Additionally, parents' satisfaction and adolescents' maladjustment mediated the negative relationship between parents' evaluation of family experience of adoption and parenting stress. Conclusions: These findings provide new insight into adoption research in parenting stress, highlighting the importance of adoption-related variables such as the family experience as consequence of adoption and the relationships between its members.
Adoption-Related Losses and Gains: The Adopted Child’s Point-of-View

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Ms. Joana Soares (University of Porto), Ms. Sara Ralha (University of Porto), Ms. Catarina Botelho (University of Porto), Ms. Catarina Lopes (University of Porto), Prof. Maria Barbosa-Ducharme (University of Porto)

Background: Adoption provides stability, loving care, security, and family interactions for children that have been separated from their birth parents. It also entails many challenges and difficulties, especially for adoptees in middle childhood, since feelings of loss can be particularly strong at this developmental stage. Objectives: Aiming to use empirical evidence to improve adoption-related policies and practices, this study focused on the adoption-related gains, losses and difficulties, poorly explored in adoption research. Method: One-hundred and two adopted children (59 boys), aged 8 to 10, participated in this study. They were adopted from the Portuguese Welfare System at the age of 3.29 on average, after living 15.80 months with their birth families and/or 23.86 months in out-of-home care (94 in institutional care). They were with their adoptive families for 5.51 years. The Children’s Interview about Adoption was used to collect the adoptees’ perspectives on adoption-related gains and difficulties/losses. Data collected on gains, losses and difficulties were submitted to content analysis. Results: Results showed that adopted children identified four main gains inherent to the experience of being adopted. The most frequent were related to being part of a family and experiencing family life. Adoptees identified losses related to their pre-adoption life, particularly birth family loss (parents and siblings), and previous relationships loss (especially school peers). Most adoptees reported facing family and social relationships difficulties in their post-adoption life, such as communicating openly about adoption with the adoptive parents and peers. Conclusion: Findings showed that children’s adaptation to adoption is complex, ambivalent and individually experienced. The present in the adoptive family exists in detriment of the past, therefore, adopted children need parents and professionals to help them elaborate and make sense of their life story. Important implications for practice and research with adoptees, adoptive parents, adoption professionals/practitioners and school staff were drawn from data.
Contact and Identity Formation in Domestic and Intercountry Adoption: The Adoptee’s Perspective

Thursday, 4th October @ 17:30: Poster Sessions & Coffee Break (Venue: Salão Nobre)

Dr. Mariela Neagu (Department of Education, University of Oxford)

Shortly after the adoption of the UN Convention on the Rights of the Child, Romania made international headlines for the precarious conditions in the country’s residential institutions. The media attention led to a high number of couples from the Western world that travelled to Romania to adopt children (Neagu, 2015). The children born and adopted from Romania (in Romania and abroad) in the early 1990s are now into their adulthood. Using life history interviews, this study explores narratives of domestic and intercountry adoption for this cohort of children from the adoptee’s perspective. In discussing these, the study employs identity theories, examining how adoption plays out in identity formation (Grotevant & Von Korff, 2012; Hoopes, 1990).

The study brings a unique perspective as it identifies similarities and differences between domestic and intercountry adoption, the latter being a highly disputed type of placement (Bainham, 2005), from an adoptee’s perspective. It explores how the adoptees learned about their adoption status in both types of adoption, how it affected their identity formation and the experience of reunion in both types of adoption.

Adoption contributed to conflicts during adolescence that were dealt with in different cultural and social contexts. In both intercountry and domestic adoption, search for the birth family was often triggered by conflicts with the adoptive family.

While those adopted in Romania found the procedures to identify their birth family onerous, reunion or lack did not appear to interfere with their development in adult life. Most of them benefitted from their adoptive parents support in their transition to adulthood and spoke about a strong commitment of the adoptive parents towards them. Contrastingly, in the case of intercountry adoption, the conflicts that occurred during adolescence led in several cases to termination of the relationship and in one case, legal termination of adoption.

This study indicates that although those adopted internationally were told about the fact that they were adopted, they were raised with biased narratives about their country of origin. Moreover, none of the research participants were taken to Romania during their childhood.

One important finding is that although reunion with the birth family seemed to be a concern for adoptive parents, it did not modify the quality of relationship between the adoptee and their adoptive family.
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