# Family Centred Group Care Model Building

## Frank Ainsworth

This book is by an author who has had considerable research and practice experience in the area of family and child welfare, particularly in the area of out-of-home care for children. The approach taken in the presentation and in the content reflects this depth of knowledge and, as such, assumes a reasonable understanding by the reader of knowledge in relation to child and family welfare.

In this publication the author addresses a complex and difficult topic for child welfare. It describes the development and empirical validation of a model of group home care and, in doing so, addresses the research design and methodological problems in developing and testing such a model.

A value of the publication is that it is focused upon out-ofhome group care for children and young people, a program approach which has had more than its share of critics who challenge the efficacy and cost of group care.

The author addresses key issues in relation to group care and emphasises the value of group care for certain children and young people. In highlighting the value of group care, the author distinguishes between traditional group care and Family Centred Group Care (FCGC). To do this the author presents a useful framework for comparing both approaches. Components in the framework for comparison include the focus of care, underlying assumptions regarding the rationale for out-of-home care, type of intervention, perceptions help of parent and family, perception of the role of care and the intended duration of care. These components relate to values and principles ascribed to both approaches, and the difference in the underlying assumptions is made clear.

Another strength of this publication is the work of the author in exploring the value and theoretical base of Family Centred Group Care which is the model he develops and tests. The model has its strengths in that it places out-of-home care in context, recognising the role poverty and other environmental factors have in influencing the need for out-of-home care. The author provides a good theoretical framework for the model drawing upon conceptual frameworks of practice in relation to ecological models, family preservation and value of defence of birth family and parents' rights. In the Family Centred Group Care model there is a major emphasis on child-parent connections and parents are seen as partners in the care process.

A definition of Family Centred Group Care (FCGC) is provided:

FCGC practice is characterised by institution structures, services, supports and professional practices designed to preserve and, where ever possible, to strengthen connections between child(ren) in placement and their birth parents and family members. Whether the function of group care is to provide short term shelter, long term care or residential treatment, education or training, a primary goal is always to work toward the child's optimum involvement in family life, even in situations where total

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reunification is not possible" (Small, Ainsworth & Hansen 1994, p1, quoted in Ainsworth 1997, p35).

The author draws on research evidence to support key assumptions underlying the model and identifies three areas of program functioning which shape FCGC. These areas are service availability, parental involvement and staff attitudes and expectations.

The author utilises an existing database in the process of validating the hypothetical construct of the model and, following analysis, a subsequent revised model. An instrument which allows testing of the model is developed and validated. The instrument is then administered to staff at a sample of group care agencies in the New England area of the United States of America. The findings suggest that it is possible to identify programs with support family centred policies and practices. In addition the author suggests that the instrument developed to test the model could be useful in determining the allocation of children and families to different group care programs. This latter finding, if supported in further tests, would be of great benefit in supporting decisions to place a young person in a particular program. The selection of an appropriate program at times appears to be made on what is available rather than what is best for the young person. Such a model, if reliable, could service providers in assessments of appropriate placements.

In the current climate of searching for measurable outcomes of child care it is important to find a method which can test a particular model of care. The fact that the model addresses the context of care in addition to the care process itself provides a promising approach to an holistic approach to outcome research in this area.

As the author acknowledges, the model and the instrument require further testing and refinement, however the research reported in the publication provides adequate information for those who wish to explore the model further. It also has to be stated that the model has not been tested in Australia and caution always has to be used in applying something from another environment to the Australian environment. The different context of support services and the different socioeconomic environments would have an impact on the model and the instrument used to measure it. Also the traditional model of out-of-home care is now fortunately difficult to find in most Australian states. Certainly the model could be used by organisations to explore how they address the principles and values espoused by Family Centred Group Care.

The research design can be recommended to practitioners and policy makers as a guide to developing and measuring outcomes of out-of-home care. A particular value of the publication is the discussion of out-of-home care in relation to conceptual frameworks and values and the integration of research findings from the literature to support the FCGH model.

It should be noted that the book is not presented in a particularly 'reader friendly' style. It is largely a research report and reads as such, presenting a detailed analysis of data and discussion of research design and methodology. It would be unfortunate if the presentation deterred practitioners and others from the book as it contains useful material for those working in this area at all levels. The author provides a useful discussion in relation to the difficulties of research design and methodology in the child and family welfare program area and the publication is thus useful to read for those interested in researching child and family welfare programs. A particular asset of the publication is the bibliography which provides an excellent reference of research and literature in this area, and draws on literature from Australia in addition to the United Kingdom and United States of America.

# Caring for children away from home Messages from research

L. Archer, L. Hicks, M. Little & K. Mount

his book, associated with the remarkable research efforts **I** of the Dartington Social Research Unit in the UK, is the equivalent for residential care of the 1995 publication from the Dartington team about messages from research in child protection. It draws on twelve studies which were part of the research program commissioned by the Department of Health as part of the implementation of the Children Act 1989. It builds on the substantial literature review published by the unit in 1993 and pursues many of the questions posed at the completion of that review. It contains a stunning array of material drawn together in an overview of the field in the UK. This is complemented by summaries of the twelve research projects conducted by notable research teams working from an interesting array of institutions, University of York, Dartington Social Research Unit, University of Bristol, University of Luton, Tavistock Institute and the Cardiff University Business School. Some conclusions of interest to practitioners, among the many issues explored in respect to the children and young people, the organisation, staffing and climate of the homes and management and contextual issues, are outlined below.

# INFORMATION

Better outcomes are seen to be achieved if information about children being looked after and their families is properly communicated to all those involved. Residential social workers and carers need to be trained in the collection, interpretation and presentation of this information, in terms of what it means for the supervision and day-to-day care of the child and work with the family. Information about risks and protective factors can be used to make a prognosis of a child's future life chances as a basis for intervention. Information can thus be used to predict outcomes, in order to It is good to see a publication such as this at a time when outof-home care is not in favour and often used as a last resort. The intent of the model and the research is to see out-of-home care as part of a continuum of care offered by services with the aim of promoting the child's optimum involvement in family life and leading to improved outcomes for the child, family and, in the long term, the community.

#### REFERENCE

Small, R.W., Ainsworth, F. & Hansen, P. (1994), The Carolinas project working paper No 1, Needham MA, Albert Trieschmann Center.

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Margarita Frederico La Trobe University

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encourage realistic expectations about the future, and to tailor the intervention to the specific needs of the child.

Too often residential homes are forced to admit ever more difficult children, whose needs are increasingly incompatible. Information about children in need should be used to ensure a workable fit between children placed in the same setting.

#### ASSESSMENT

It is not just a matter of controlling difficult behaviour, but being able to make judgments about the underlying causes, and developing strategies to break chains of negative effects. Policies and practices in relation to improvement of behavioural patterns needs to be based upon evidence collected from the aggregated client information available.

#### **CHARACTERISTICS**

It is seen as preferable that the ratio of staff to residents be kept as low as possible, to facilitate relationships and to ensure that there are savings in staff time which could be used for purchase of additional support services. Residential homes are seen to be fluid environments and thus frequent changes (of both staff and residents) within children's homes must be expected and anticipated.

#### **MODELS OF INTERVENTION**

The quest for 'treatment' is seen to be futile and it is considered unlikely that behaviour modification or psychotherapy alone are the answer. Outcomes for children are explained by a combination of the child's background, the prognosis were no intervention attempted, the services provided to the child and his/her family, the match between needs and services, and any protective factors operating in the child's favour. Residents in children's homes are not seen to