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Improving family-centered care in Juvenile Justice Institutions

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Chapter 1

General introduction



The importance of family-centered care in Juvenile Justice Institutions

Over the past decades, a trend emerged in which professionals increasingly involved parents in care for youths with problem behavior. Involving parents in the treatment of troubled youth is important for obtaining and maintaining optimal treatment outcomes (Barth, 2005; Burke, Mulvey, Schubert, & Garbin, 2014; Garfinkel, 2010; Hair, 2005; Keiley, 2007; Latimer, 2001). Particularly for youths in contact with juvenile justice, parental support is beneficial in terms of treatment engagement, well-being, behavior, and recidivism (Walker, Bishop, Pullman, & Bauer, 2015). In case of juvenile detention as well, involving parents has been demonstrated to contribute to achieving positive child and family outcomes (Burke et al., 2014; Latimer, 2001; Monahan, Goldweber, & Cauffman, 2011; Woolfenden, Williams, & Peat, 2002).

When adolescents in the Netherlands are suspects of, or convicted for, criminal behavior, placement in a Juvenile Justice Institution (JJI) is one of the options for juvenile judges. As poor family functioning is common among juvenile offenders (Belenko & Dembo, 2003; Dembo et al., 2000), treatment of these youngsters as well as their families is encouraged (Dakof et al., 2015; Hoeve et al., 2007; Mulder, Brand, Bullens, & van Marle, 2011). The relevance of involving parents in the treatment of delinquent youth is underscored by the finding that poor parenting skills predicted juvenile recidivism. More specifically, the severity of recidivism was shown to be related to criminal behavior of family members, parental alcohol abuse, lack of parental emotional support, past neglect, and physical abuse (Mulder et al., 2011).

Because of the above-described protective effects of involving parents and in an attempt to minimize risk factors for future criminal behavior, parental participation during their child's detention is considered essential. 'Parent' refers to all primary caregivers. As the overall aim of this thesis is to optimize care for detained youth by contributing to the knowledge, policy, and practice of family-centered care in JJIs, our focus is on optimizing parental participation in JJIs.

Evolving towards Family-centered Care in JJIs

In order to protect the society and reduce recidivism, treatment of delinquent adolescents in forensic settings was traditionally predominantly youth-focused. Accordingly, parents were kept at a distance and were barely involved in their child's treatment during detention in a JJI (Sectordirectie Justitiële Jeugdinstellingen, 2011; Vlaardingerbroek, 2011). Realizing the importance of involving families during adolescents' detention to ensure successful reintegration, JJIs in the Netherlands started to implement some family-oriented activities in their usual care program. For short-term detention groups, this included the mentor to call the parents on the first day when the adolescent enters the JJI. Subsequently, it included the mentor having weekly phone calls, inviting parents for a meeting and a tour, and asking parents to sign the treatment goals as set by the adolescents. Additionally, parents were asked to provide feedback on the first treatment plan, and to be present at the second treatment plan discussion (Stuurgroep YOUTURN, 2009). The so-called YOUTURN methodology was implemented in every JJI in 2010 (Stuurgroep YOUTURN, 2009). Although this integration of family-oriented activities precluded a paradigm shift and was in theory a good start to involve parents, YOUTURN did not contain a wide range of options for parental participation, while additional family-oriented activities were quite non-committal according to the manual. Additionally, its guidelines with regard to collaborations with parents were neither well-translated nor implemented into practice. In a process evaluation of YOUTURN, parental participation was described as poorly embedded. Staff members lacked tools to successfully establish contact or collaborations with parents, and were not sufficiently aware of their tasks with regard to parents. Moreover, the training in YOUTURN did not place enough emphasis on working with parents. Consequently, staff did not adequately perform the tasks related to parental participation (Hendriksen-Favier, Place, & van Wezep, 2010).

In a new effort to improve this situation, the Netherlands Government issued a national position paper in 2011 encouraging JJIs to improve parental participation (Sectordirectie Justitiële Jeugdinstellingen, 2011). However, this paper only contained broad outlines which every JJI needed

to detail for implication in everyday practice. Subsequently, two JJs decided to offer evidence-based family therapies during detention: Multidimensional Family Therapy, MDFT (Liddle, Dakof, & Diamond, 1992; Rigter & Liddle, 2011), and Functional Family Therapy, FFT (nowadays RGT in Dutch) (Alexander & Parsons, 1982; Spanjaard & Breuk, 2013). However, family therapists experienced that the outpatient nature of the therapies did not translate fluently to the secure residential setting of a JJ. Therefore, an adapted version of MDFT was developed for residential settings (Mos, Jong, Eltink, & Rigter, 2011). Family-centered care, however, entails substantially more than providing family therapy for specific families only. It requires profound involvement and participation by parents in their child's everyday life in the JJ. However, as adolescents are placed in JJs after ruling of a juvenile judge, placement is mandatory in which neither youths nor parents have a say (Janssens, 2016). Consequently, welcoming parents at a place where their child is held against their and their child's will, is somewhat paradoxical and thus challenging for JJs.

To provide JJs with clear guidelines on how to improve parental involvement and participation during their child's detention, the Academic Workplace Forensic Care for Youth (in Dutch: AWFZJ, www.awrj.nl) took up the challenge to develop a program for Family-centered Care (FC) in JJs.

Academic Workplace Forensic Care for Youth (AWFZJ)

By bridging the gap between practice, research, education, and policy, the AWFZJ aims at improving care for forensic youth and to reduce recidivism. For this purpose, two JJs, two universities, two centers for child and adolescent psychiatry, and two universities of applied sciences in the Netherlands agreed on an intensive collaboration, which was financially supported by ZonMw and the Dutch Ministry of Safety and Justice. AWFZJ-projects are accompanied by practice-based research, with the emphasis on achieving applicable knowledge and on developing and implementing methods. The development, implementation, and evaluation of the FC program was one of these projects.

As applicability in practice is essential for the AWFZJ's mission, we opted for a bottom-up approach in which staff of the two JJs, Dutch family therapists from MDFT and FFT (RGT in Dutch), and researchers collaborated on the development of the FC program. In workgroup sessions, the theoretical background of both family therapies (Rigter & Liddle, 2011; Spanjaard & Breuk, 2013), the broad perspective from the national position paper (Sectordirectie Justitiële Jeugdinrichtingen, 2011), and the few family-oriented activities from the YOUTURN methodology (Stuurgroep YOUTURN, 2009) were further developed and extended. All these components were translated into practice by providing clear guidelines and directions for providing family-centered care in JJs. As a result, the FC program was launched, accompanied by training workshops for JJI staff, which were also developed in the workgroup sessions.

Along the course of this AWFZJ-project, practice and research worked side by side. Parallel to developing the FC program, the study protocol was also being developed. The details about the stages and contents of our study were discussed and detailed in the workgroups. This helped JJI staff to prepare for the requirements of our study, and ensured that study activities would be attainable in daily practice. Subsequently, the frequent feedback of research findings to staff members stimulated the implementation of FC in the living groups.

Aims of this thesis

The overall aim of this thesis is to optimize care for detained youth. Therefore, we focus on improving family-centered care in JJs. In order to improve care for detained youth, we aim to optimize parental participation. Therefore, this study has five sub-aims. First, we aimed to describe the development and the content of our FC program, including the accompanying training and coaching procedures for JJI staff. Our second aim was to describe how we intended to evaluate FC in a mixed methods practice-based research study. The third aim was examining to what extent parents participated in family activities and identifying which factors predicted parental participation. The fourth aim was to understand what parents' needs are in family-centered care, what they

expect from activities, and from JJI staff members. The fifth aim of this thesis was to gain a deeper understanding of which factors parents consider to influence parental participation.

Outline of this thesis

In chapter 2, we describe the content of our FC program for short-term stay groups in JJIs including the accompanying training and coaching procedures for JJI staff. We additionally discuss our bottom-up approach in developing the FC program.

Chapter 3 presents the design of our explanatory sequential mixed methods study design. It offers an example of how a practice-based research study on evaluating care in a challenging setting such as a JJI could be organized. It discusses three stages of our study and shows how quantitative and qualitative research strategies are combined.

Chapter 4 describes to what extent staff members in a JJI are able to motivate parents to participate after implementing the FC program. Parental participation is operationalized by three family-centered activities (a) family meeting, (b) visits during regular visiting hours, and (2) participation in measurements. Additionally, we use regression analyses to identify predictors for parental participation during their child's detention.

In chapter 5, we focus on parents' perspectives on family-centered care in JJIs. This chapter presents the results of a qualitative study among parents whose son is detained in a JJI. Parents are purposefully selected and data are collected through semi-structured interviewing. This chapter answers how these parents wish to participate during their child's detention and what they expect from contacts with JJI staff. This knowledge could help JJI staff members to increase parental participation.

Chapter 6 presents which factors parents consider to influence parental participation during their child's detention. Data are collected through semi-structured interviewing purposefully selected parents. In this chapter, we aim to identify which factors could facilitate or hinder parental

participation, and to translate this knowledge into implications for policy and practice in order to improve FC.

Finally, chapter 7 consists of a summary of the main findings of the foregoing chapters. This chapter also contains the general discussion of this thesis, in which its strengths and limitations are discussed, as well as implications for practice, for policy, and suggestions for future research.

