



What Works in the assessment and decision-making processes with children and their families?

Cora Bartelink
Ingrid ten Berge

Nederlands Jeugdinstituut
e infojeugd@nji.nl
i www.nji.nl

Background

The efficacy of treatments is a hot topic in child welfare. However, for an effective child welfare system we need more than effective interventions. An effective assessment and decision-making process is essential for better services and outcomes for children and their families. Practitioners should not treat any client without assessing what the problems are and deciding which treatment is the best answer to solve them effectively.

The effectiveness of the assessment and decision-making process in The Netherlands seems to fall short. Practitioners make their decisions based on their own experiences and standards. A shared knowledge base on what is effective in assessment and decision-making is lacking and practitioners do not use existing scientific knowledge. Recent theories on child development and psychopathology are not generally used. Knowledge about 'what works' (i.e. knowledge about effective treatments) is currently not widespread. In addition, practitioners do not always involve parents and children in their decision-making process. Often, they make a decision and then inform their clients about what will happen. If permanent changes are to be made, this is not a very effective approach.

Purpose

The question is how to improve the assessment and decision-making process so that children and families get the best services they need. This study presents recent insights into what is known about effective assessment and decision-making in child welfare. It investigated which knowledge, tools and skills practitioners need to assess the problems effectively and to decide which services are most likely to be effective. We suppose is that effective assessment and decision-making are systematic and structured, based on knowledge about what works for specific problems and involve children and parents from the beginning. This is most likely to result in effective services and better outcomes for children and their families. Based on a literature study, we examined which knowledge, skills and tools practitioners needed to make evidence-based decisions about services needed while simultaneously involving children and parents in the decision-making process. To answer this question a secondary data analysis was done. The databases of PsychInfo, Cochrane, Campbell collaboration, Medline and Picarta were searched for relevant studies using combinations of the following search terms: assessment, (structured/diagnostic) decision-making, clinical judgment, child abuse, child welfare, youth services, youth care, child protection.

Key findings

Empirical knowledge about successful assessment and decision-making procedures is limited. Research indicates that clinical judgment seems to improve when practitioners work systematically and use tools such as standardized questionnaires.



Based on other theories, we expect that practitioners make better decisions if they use a theoretical framework for analyzing and interpreting the problems of children and parents. They should also use knowledge about ‘what works for whom’ when they make decisions about the necessary services. Little is little known about how this ‘what works’ knowledge can be spread effectively and used in child welfare.

Some research suggests the necessity of involving parents and children in the assessment and decision-making process. Their preferences for a certain treatment have impact on the treatment outcomes. There are some sound methods that can help practitioners to make the preferences of clients explicit and stimulate them to cooperate, such as motivational interviewing, solution-focused therapy and family group conferencing. These methods have in common that they focus on the client’s perspective on the problem and the possible solutions, they empower the client by seeing him as the expert of his own life and by asking him for solutions, and they support self-efficacy. Our assumption is that partnership with parents and children in the assessment and decision-making process enhances the chance that parents and children will accept the practitioner’s advice about what is the most effective treatment for their problems.

Implications and recommendations

These insights into effective assessment and decision-making processes have to be integrated into a practice method. This method should be based on a theoretical framework that guides the information-gathering and analyzing of the results of the assessment. Knowledge about ‘what works’ is integrated in this method that practitioners can easily use it in their decision-making process with children and parents. Such a method supports practitioners by working systematically and involving parents and children. It can also support them in deciding when and how to use tools in the assessment. Practitioners need to be trained in skills such as motivational interviewing and solution-focused therapy.

Research is needed to determine what the effects are if practitioners use this practice method in the assessment and decision-making process. The assumption that this method leads to an improvement of the decisions that practitioners make, should be tested. One hypothesis is that structured decision-making improves the transparency and accountability of the decisions. With regard to the involvement of children and parents in the process we assume that this increases treatment outcomes and decreases drop-out.

Key references

Bartelink, C., Berge, I. ten & Yperen, T. van (2010). *Wat werkt in indicatiestelling? (What works in the assessment and decision-making process?)* Utrecht: Nederlands Jeugdinstituut.

More information

Cora Bartelink, MSc.
Netherlands Youth Institute
P.O. Box 19221
3501 DE Utrecht
The Netherlands,
c.bartelink@nji.nl