



Systemic Practice and Family Interventions

Course Evaluation: 2013/2014

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July 2014

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1 Introduction

1.1 Background

Young people who are involved in sustained offending during childhood and adolescence are often affected by multiple and complex difficulties in childhood, and face significant disadvantages while growing up (Arnell et al., 2005). While these challenges will naturally vary from person to person, a common feature in the backgrounds of these young people is that of dysfunctional, disrupted or disconnected family relationships. For example, a study of 41 young offenders in one London borough found that 66% lacked a positive relationship with one or both parents; 39% had experienced family breakdown or divorce, and 34% had lost contact with significant people (Liddle and Solanki, 2002).

In Scotland, while concerted efforts have been made to shift the balance of care away from residential to supporting young people in their families or in family placements, the reality is that many young people are still removed from their families and placed in institutional provision or detention. During 2013, out of 16,041 looked after children, only around half were looked after at home with their parents or with kinship carers (56%). The remainder were accommodated in foster placements or residential establishments (Scottish Government, 2014). While for some young people this will be the only available option in order to ensure their safety and development, for others it may reflect a missed opportunity to heal damaged relationships and to help families to support and nurture their children. Furthermore, removal from the family home often only offers a short-term yet undesirable solution, considering the poor outcomes that are well-documented among the leaving care population (Stein and Dixon, 2006) and that young people tend to return to those exact same families that were previously deemed unsuitable immediately upon leaving care (Gray, 2011).

The provision of support to families is therefore an essential ingredient of an effective system that supports children and young people. While there is evidence that family interventions can be effective (Farrington and Welsh, 2003) it has also been observed that "...a major limitation in Scottish practice has been the capacity of the social work workforce to work confidently and directly with families and family networks..." (Schinkel, 2013: p.1).

In response, the Scottish Government identified family work in the youth justice sector as an important priority for practice development. In the context of the *Whole Systems Approach* that supports a systemic approach to practice in general, the potential for a systemic approach to family networks clearly had synergy with the overarching policy framework. Consequently, funding was made available and in 2012 the Family Therapy Training Network delivered the first post-graduate programme in Systemic Practice and Family Interventions, aimed specifically at youth justice practitioners.

The programme was first evaluated by the then Criminal Justice Social Work Development Centre based at Edinburgh University (Schinkel, 2013) and the findings and recommendations from this research informed course development and delivery. The purpose of this current report is to present the findings from the evaluation of the programme across the academic year 2013/2014. In order to reflect these course changes, the focus of the evaluation was not on the long-term implementation of systemic family interventions, as indicated by the previous evaluation, but instead focused on motivations, experience of the course, learning and early impact on practice.

1.2 Systemic Practice and Family Interventions

The Family Therapy Training Network (FTTN) is a multi-disciplinary professional network and members are the only Scottish based providers of accredited, post-graduate professional training in family therapy and systemic practice. The programme is accredited by the Association of Family Therapy (AFT) and includes a Foundation course, an Intermediate course, and a two-year Masters which is open to eligible participants who have completed the Foundation and Intermediate stages.

The Systemic Practice and Family Interventions programme in this context was specifically aimed at youth justice practitioners. Tailoring case examples to the relevant client group, the aim of the Foundation Course (FTTN, 2013) was to allow trainees to develop:

- an in-depth awareness and understanding of theory related to systemic practice and family interventions
- the skills necessary for reflective therapeutic practice
- engagement with the professional agenda for those working with families.

The Foundation course was divided into two modules that incorporated both contact study days and independent study. The trainer-led study-days were divided into six blocks of two-days and used a range of teaching methods including lectures, seminars, experiential exercises; skills practice work and group work. Attendance at these 12 study days was the only element of the course that required the participant to leave the workplace. The remainder was self-supported study which included: portfolio development, practical application of skills in the workplace and reflection.

Module 1 was designed to provide a basic introduction to systemic thinking in relation to families. Key learning outcomes included, but were not limited to: understanding the basic concepts of systemic theory; awareness of the influence of social contexts on systems of ideas or beliefs and an awareness of the relevant professional literature. Module 2 provided an overview of the practical application of this theory. Key Learning outcomes included: capacity and ability to discuss core components of systemic practice and awareness of the practical skills involved in working systemically. Assessment involved the submission of a Learning Portfolio (to be self-and peer-assessed) and the completion of a 3,000 word assignment at the end of each module.

Following successful completion of the Foundation stage, there is the opportunity for participants to progress to the Intermediate Stage, which has an increased emphasis on the application of theory to practice. Learning at the Intermediate Stage is assessed by three end-of-module assignments, and successful completion of this stage is a prerequisite for entry to the Postgraduate Diploma or Masters in Family Therapy and Systemic Practice.

1.3 Research Focus

The main focus of this evaluation is on the Foundation stage of the training, as this comprised the bulk of participants on the programme. Only three participants were undertaking the Intermediate Stage during the evaluation period and none had yet advanced to the Postgraduate Diploma / Masters stage.

The primary aims of the research were to:

- Describe the motivations, expectations and experiences of participants attending the course
- Assess whether participants had achieved the key learning objectives of the course
- Identify whether participation in the course has had any impact on individual practice

These aims broadly map on to the first three of Kirkpatrick's (2006) four levels of training evaluation as shown in Figure 1. This evaluation model aims to get beyond the immediate experience of the learning process (*reaction*) to explore in more depth exactly what has been learned, how that learning has changed behaviour, and what the results of that behaviour change have been. The final stage broadly relates to *impact on outcomes* (in this case for children and families) which has not been included in this evaluation proposal due to the timeframe available.

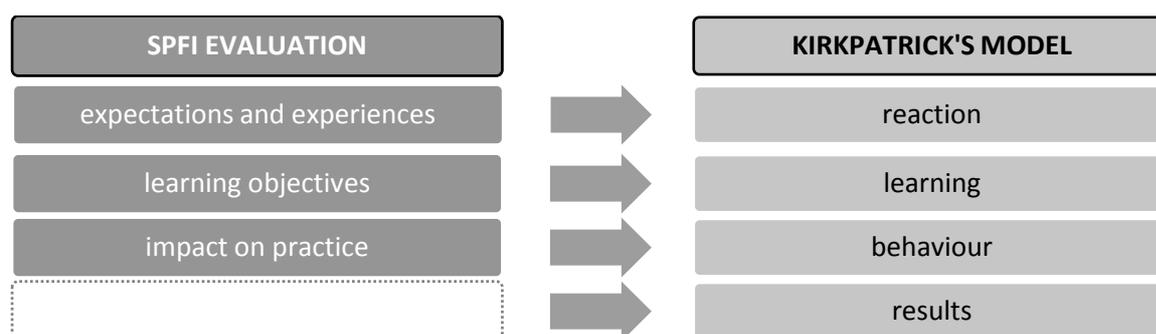


Figure 1: relationship of research aims to Kirkpatrick's model

The secondary aims of the research were to:

- Identify any potential barriers or facilitators to participation in the course (individual or organisational)
- Identify any potential barriers or facilitators to implementing the learning from the programme (individual or organisational)

2 Methodology

2.1 Ethical Considerations

The research was approved by the ethics committee of the School of Social Work and Social Policy at the University of Strathclyde. Informed consent was obtained from all participants; participation in the research study was optional and there were no consequences for course participants regardless of their decision to be involved in the research or not. All personal data was kept securely, and in accordance with the Data Protection Act (1998).

2.2 Research Design

A standard within-subjects pre-post design was used to measure change in knowledge, skills and confidence over time for participants undertaking the Foundation course, supplemented by additional consultation with participants and other relevant stakeholders to explore experiences, impact on practice and organisational issues.

2.3 Data Collection, Participants and Analysis

Data was gathered from those participating in the Foundation course using a paper survey prior to and at the end of the course. At the pre stage, all participants completed the survey with the exception of one participant who missed the data collection session. At the post stage, two participants had left the course and one participant missed the data collection session.¹

Line managers of participants were consulted by online survey using Qualtrics at the start of the course. An additional focus group was held mid-course (February 2014) to gather further experiences from managers and a follow-up online survey was issued after the course had finished (June 2014). Response rates from managers were very low after the initial survey period.

The intention was to interview all three participants at the Intermediate stage pre and post the course, which ran separately but concurrently to the Foundation course. However, while all participants were invited to participate, only one interview was achieved pre-course, and none post-course². Table 1 overleaf summarises the target populations and response rates for each stage of the programme.

¹ Participants who missed the data collection session were offered the opportunity to catch up via email.

² One participant did return a completed consent form post-course, but at that stage analysis was complete and writing was underway and it was therefore not possible to undertake an interview. The participant instead provided key feedback by email.

Table 1: Target population and actual responses for each stage of the course.

Foundation Stage					
Target Group	Total target population	Time	Method	No. of responses	Actual Response Rate
Course Participants	21	Pre	Paper Survey	20	95%
Managers	13	Pre	Online Survey	10	77%
Managers	13	During	Focus Group	3	23%
Course Participants	19	Post	Paper Survey	18	95%
Managers	13	Post	Online Survey	1	8%
Intermediate Stage					
Course Participants	3	Pre	Telephone interview	1	33%
Course Participants	3	Post	Telephone Interview	0	0%

All quantitative data was analysed using SPSS, version 21. All qualitative data was manually coded across individual participant groups for emerging themes. Data from the one manager who completed the post-survey was analysed alongside the focus group data (topics were almost identical across the two consultation methods) to ensure anonymity.

3 Findings

3.1 Profile of Participants

Basic data on demographics and professional affiliation was collected for participants in the Foundation course. Participants were predominantly female ($n=19$, 91%) and tended to be aged between 31 and 40 ($n=10$, 48%). Participants were asked to indicate their highest qualification level, and were broadly split between an undergraduate degree or higher ($n=10$, 48%), and other forms of qualification, for example, an HND ($n=10$, 48%). Of those with a formal degree, three had undertaken some form of postgraduate study.

Participants were mostly drawn from a social work discipline ($n=18$, 86%), with one from Health and one from an 'other' professional reference group. Participants were therefore mainly employed by Local Authorities ($n=15$, 71%) but were also employed in the Third Sector ($n=5$, 24%).

As expected, participants were working regularly with children, young people and their families although the range and focus of this work often varied. In general, the young people worked with were aged under 18 (although on occasion up to age 21) and around half of participants directly specified that their client group were involved in some form of offending behaviour³. The SPFI approach was clearly very relevant to the workload of participants, as around half ($n=10$, 48%) thought that they could identify more than 10 families on their current caseload who would benefit from such an approach (see section 3.4 for further information on the use of SPFI with families).

3.2 Expectations and Experiences

Participants acknowledged a range of motivations behind their decision to participate in the SPFI programme. First and foremost, participants were keen to gain acquire new knowledge and gain skills and tools ($n=13$), or to enhance and build upon existing skills ($n=7$). However, a focus on the potential benefits for young people and families of using an SPFI approach was also evident in the responses ($n=8$).

More knowledge on family interventions and systems theory, reflection, inspiration

Enhance knowledge, skills and practice. Have time to reflect and build and reinforce existing skills

To have a structured approach which will bring better outcomes for clients and their

³ It should be noted that this proportion is almost certainly higher, however participants were asked to describe their client group in their own words and may have not specified offending even though this was a focus of their work.

families

Other important motivators were: to increase confidence and conviction when working with families, mostly by having a theoretical base to underpin practice ($n=7$); a desire to work more systemically ($n=5$); and also the opportunity to attain further qualifications ($n=2$).

At the post-course survey participants were reminded of their initial motivations and expectations and were asked to reflect on to what extent these had been met. All respondents felt that their expectations had been met to some extent, although only around one-third ($n=6$, 31.6%) felt that their expectations had been fully met. Others felt that their expectations were 'mostly' met ($n=8$, 40%) or only 'slightly' met ($n=4$, 20%). While many felt that they had gained theoretical knowledge, skills and confidence during the course ($n=9$, 50%), it also appears that there may have been some potential misunderstandings about the scope and depth of the Foundation course which may, in part, explain some of the unmet expectations. This suggests that the pre-course communication is important, and that this should also ensure that participants have processed pre-course information and fully understand the scope and limits of each stage of the programme in advance.

There were clear benefits for my practice which stemmed from participation in the course

The course has provided a theoretical backdrop which has enhanced my work with families.

Having completed the course, clear now that I have been given an INTRODUCTION to theories and tools

Similar numbers had positive expectations about the applied nature of the course, but had not managed to implement the learning to the extent that they had anticipated, either because they encountered organisational pressures that acted as barriers to implementing learning ($n=3$) or simply because not enough time had yet passed to allow them to gain the confidence or practice that they needed ($n=2$). These implementation issues are covered in more detail in Section 3.5. Others ($n=3$) felt that there were factors relating to the course delivery and approaches to learning that might not have met their hopes for the course at the outset. These tended to relate to challenges in engaging with the materials, either due to the venue; the volume/breadth of reading required; or because participants had additional learning needs that were not fully supported by the mode of delivery.

I am actively using the learning... However there are times when finding the amount of time necessary is problematic

I feel that I would like more practical experience. Perhaps watching / seeing / experiencing / doing

Some of it was difficult and there was a large range [of reading] which is probably necessary on a Foundation course

Prior to the course commencing, the participants' immediate line managers were asked why their employee had been selected or given permission to attend the training. All responses focused on the benefits for the *individual* employee, for example their interests or their desire to undertake professional development, and it appeared that there were little in the way of *organisational* drivers for adopting a systemic approach to practice. However, two managers did mention that the individual would be able to make direct use of the training with their current client group and a number also anticipated that there would be an impact on service provision and outcomes as a consequence of the employee participating. Similarly, managers viewed it as unlikely that the employees would be deployed any differently as a result of participating in the course, rather the employee was expected to assimilate the skills gained into the current service delivery model. Some managers noted that the employee may be required to take on more family oriented cases in accordance with their new skill set. It may be that this focus on the individual, and their responsibility to implement learning, has some bearing on the challenges facing participants to actively employ the learning gained, as explored in section 3.5.

Participants also shared feedback at various points throughout the consultation that suggest how the learning process could have been improved for them. Overall the course was viewed as positive, with the course leaders found to be supportive and the majority of participants stated that they enjoyed the course despite any less positive elements. Common (but spontaneous) suggestions for improvement included: using a more suitable venue in terms of acoustics and limiting venue changes; improved and updated materials such as the DVD / computer which a number of participants found difficult to hear or see. There was also a sense that the pace was rather slow, with too much time spent on unstructured discussion and reflection in groups without as much input from the facilitators as would have been liked to keep the work on track. In addition, a small number of participants felt that communication and preparation could be improved, for example in relation to the advance circulation of materials, or that there had been some confusion regarding the facilitators organising visits to local teams which had been requested but not been progressed.

Facilitators were enthusiastic and helpful, especially with feedback in prep for assignments.

At times pace is too slow for me...feel too long given for group tasks, again just led to procrastination. Feel could have been better structured at times.

I think that at times visions / expectations have been unclear. For example, details of assignment etc. has changed. Just consistent, clarity required.

3.3 Achieving Learning Objectives

In order to assess the achievement of the key learning objectives on the Foundation course, participants were asked the same specific learning questions in both the pre- and the post-course survey, alongside additional questions to monitor general change in knowledge and in communication with peers about systemic practice. Each question was presented as a four-point Likert scale⁴, tailored to each question. Each Likert scale was treated as ordinal data and analysed using Wilcoxon Signed Ranks, which is a statistical test to assess the significance of any observed changes.

Each of the measured objectives showed a significant change in a positive direction, which was significant at the $p < 0.01$ level (i.e. 99% likely to not be as a result of chance variations), with the exception of how frequently participants communicated with peers (which was significant at the $p < 0.05$, or 95% level)⁵. The results of each pre-and-post measure are reported below, with overall frequencies and statistics reported. Data is only reported for the 17 participants who had both pre- and post- measures available. Items marked with an asterisk are directly related to key learning objectives. The effect size reflects the magnitude of any change and categorisations are as follows: .1=small effect, .3=medium effect, .5=large effect (Cohen, 1988).



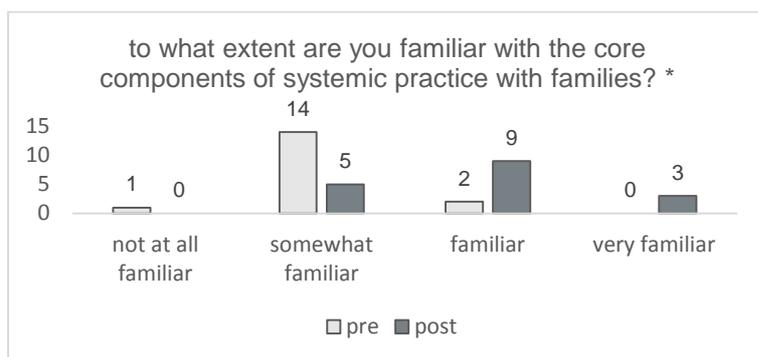
This is a statistically significant increase in knowledge of systemic practice:

$z = 2.97, p < 0.003$, with a large effect size ($r = .51$)

There was a significant increase in overall knowledge about systemic practice between pre and post measurement. Of note is that six participants still rated their knowledge as just 'OK' following completion of the course, however, this may relate to the observations noted earlier that a number of participants had come to realise there was a limit to the knowledge that could be gained on a Foundation level course. A substantial 59% of participants now rated their knowledge as at least 'good' in this area, up from 6% prior to the course.

⁴ Typically a four or five point scale that is used to measure respondents' attitudes to a topic.

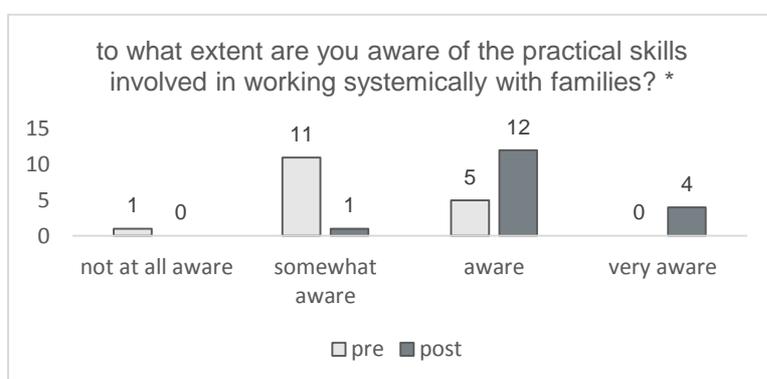
⁵ 'p' in this instance stands for probability i.e. the estimated probability that a difference did not occur by chance. 'z' is the test statistic that determines, based on the level of probability selected, whether the differences are significant.



This is a statistically significant increase in familiarity with the components of systemic practice:

$z = 2.91, p < 0.004$, with a large effect size ($r = .50$)

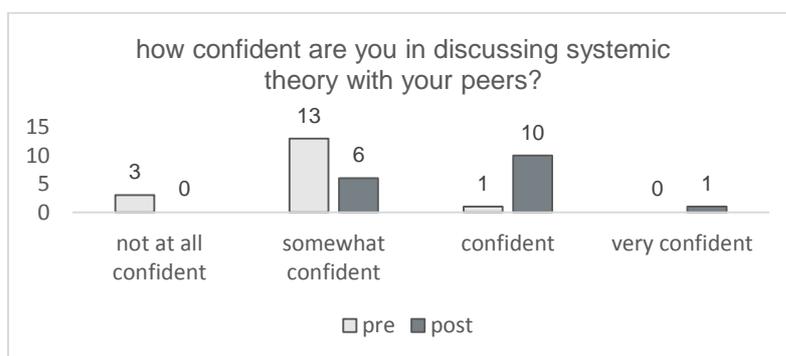
At the post-course stage, participants were most likely to rate their awareness and familiarity of the key elements of systemic practice as either ‘familiar’ or ‘very familiar’ ($n=12, 71%$), compared to only 12% ($n=2$) before the course had started.



This is a statistically significant increase in awareness of practical skills:

$z = 3.09, p < 0.002$, with a large effect size ($r = .53$)

The practical focus of the programme was evident, as this was the learning objective against which the participants demonstrated the most progress throughout the duration of the course. Almost all participants rated their awareness of practical skills as at least ‘aware’ following the course (94%), up from just over one-quarter prior to the course (29%).

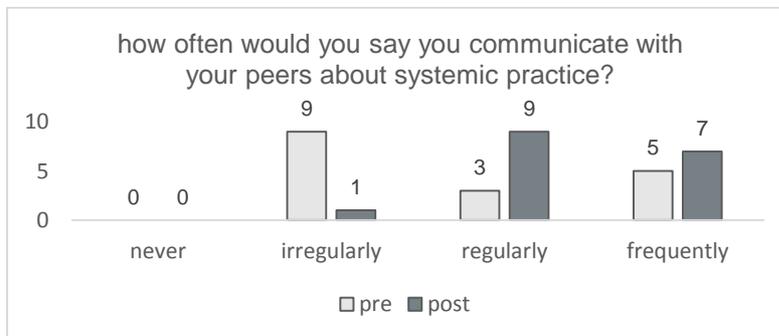


This is a statistically significant increase in confidence:

$z = 2.91, p < 0.004$, with a large effect size ($r = .50$)

The broad similarities observed between this measure and that of familiarity with the core components of the systemic family practice, may indicate that as participants become more au fait with the concepts and underpinning elements of systemic family practice they also

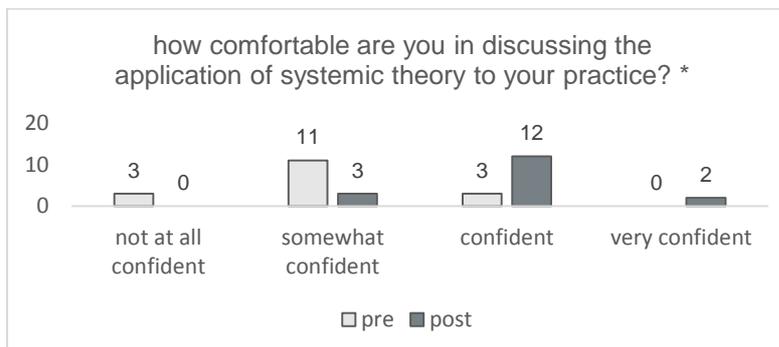
display a parallel increase in confidence in this area, although this relationship was not explored statistically. By the end of the course, almost two-thirds of participants were confident at discussing systemic theory (64%), compared to 6% before the course.



This is a statistically significant increase in communication:

$z = 2.00, p < 0.045$, with a moderate effect size ($r = .34$)

Despite this increase in confidence, the actual change in levels of communication with peers about systemic practice, although increasing significantly, displayed the smallest size of change across each of the pre- and post- measures. This may relate to the fact that participants tended to discuss systemic practice with peers even prior to starting the course, potentially as a result of their interest or desire to learn about this approach.



This is a statistically significant increase in ease with the application of theory:

$z = 3.03, p < 0.002$, with a large effect size ($r = .52$)

Participants were clearly more able to make the connections between theory and practice following completion of the course, with 14 participants (82%) able to articulate these links by the end of the course.

When asked to reflect in their own words on the most important learning that had been taken from the course, participants most frequently mentioned the knowledge gained about practical tools ($n=8, 47%$).

I have enjoyed learning about and practising the different tools that I have been used to

Models of practice – particularly use of genograms, life stories

The use of genograms to look at family history, patterns and poor attachment have been beneficial

Other skillsets acquired could broadly be described as either generic or transferable skills i.e. reflection, use of self, communication skills (specifically active listening and methods of questioning) or more specific skills to family work i.e. theory; family engagement, systemic formulations etc.)

Developing reflection and the use of self; pacing and actually working at the speed of children and their families

I learned the importance of good communication and active listening skills

Ways of formulating family functioning / systemic formulations

3.4 Impact on Practice

Feedback from participants would suggest that change that has occurred as a result of attending the course has been incremental rather than transformative, perhaps reflecting the ability or confidence of frontline staff to effect change in their workplaces. While all participants could identify an impact on practice, this was for the most part categorised as 'some' impact ($n=13$, 72%) as opposed to having a 'big' impact ($n=5$, 28%). This may also reflect the inexperience of the participants at this stage of their involvement in systemic family practice, as many had previously outlined the need to practice and consolidate the knowledge and skills gained on the Foundation Course.

I have used all of the tools that I have been introduced to and have found them to be really helpful in my work

Made me think differently. Helpful to reflect. Limited time to use practical skills so far, but wish to find ways of changing this

There were aspects of systemic practice which it was possible to assimilate with the work that was ongoing

However, from the limited feedback gained from Intermediate Stage participants it is not possible to draw any definitive conclusions about whether the impact increases with experience and / or further learning, although one participant suggests that, for him or her at least, this was the case:

I think last year was more about reflecting on your preparation and getting your head around the models and approaches, whereas this year is trying the models out.

Encouragingly, almost all participants planned on using their new found knowledge and skills in the future, and hoped to continue learning and developing this area of their practice, either informally through on-the job learning, or more formally. Seven participants indicated a desire to progress to the intermediate stage of study. Where there were no plans to continue using the approach, this was due to unanticipated reasons, rather than reflecting any dissatisfaction with the utility or relevance of the approach. However, at the point of data collection post survey, the number of families that the SPFI approach had been used with was noticeably lower than anticipated at the outset. At the pre-course stage participants thought that they would be able to use the approach with more than 10 families on their caseload ($n=10$, 48%), or with between six and 10 families ($n=10$, 48%). In reality, by the end of the course, the majority had used the approach with between one and five families ($n=14$, 74%).

At times, employees in organisations that could not fully support learning or delivery expressed dissatisfaction that they could not implement their learning. Managers recognised that lone employees who had been trained in this approach lacked support networks or the capacity to create wider impact across families or outcomes, although they also acknowledged that there may be positives at an individual case level.

3.5 Factors influencing participation and implementation of learning

While Foundation course participants were asked directly about challenges and opportunities to their future use of systemic practice in family interventions, relevant feedback was also drawn from other elements of the consultation where issues had been raised spontaneously, in order to better inform thinking around this area.

In relation to participating in the course there were not a huge number of barriers, and those that existed tended to be fairly practical with obvious solutions, as well as the expected challenges in returning to a formal learning environment after a gap, or limited experience, in academic study. Section 3.1 outlined some of the immediate reactions that were experienced, and suggested that consideration of a venue more suited to learning, plus improved format of materials and consideration of how to balance the varied requirements of a mixed group in terms of pacing and additional support needs might facilitate learning by participants.

Time and workload management were clearly important issues, and while managers appeared to have tried to support their employees by reallocating cases and providing study leave, this was often a challenge for both managers and employees. Other factors such as family or other commitments also intruded on time available and therefore affected participants' abilities to engage fully with the learning.

She has had to be flexible. I have given so many study days to do the course – one a month.

Would like to go on to 2nd year level but feel that work and family commitments will get in the way

We have a small team, so therefore there has been difficulties covering and allocating case work

Time was also the biggest factor that influenced whether participants were able to apply their learning in the workplace ($n=12$, 67%). Other factors included a lack of organisational fit (although this was more to do with focus and process, rather than with overarching values); challenges in engaging families; or simply the limited impact that one person can have in creating change in a busy team with a large caseload.

At the moment the team is very short staffed with no immediate prospect of this changing...the support to effect change is lacking because of staff shortages

Main issue is time – whether I will be able to balance a full case load with the time I would need to complete specialist work

There has been no strategic ownership of systemic family therapy regarding where it should sit in a wider authority perspective.

Support from management and wider colleagues were seen as the main strategy to overcome barriers to learning and implementation. Managers also felt that they would appreciate more prior engagement with the course leaders, or others who had experience of the course, in order to discuss and identify how the learning could be incorporated into a busy team, or how to support culture and practice change across the organisation.

4 Recommendations

It is clear that, despite some misunderstandings about what the Foundation course entails, the learning objectives were met, as knowledge, confidence and skills had significantly increased across the duration of the course. However, there were also some suggestions that could be made to improve the learning experience for participants or to help with the translation of that learning into practice change. It should be noted that this evaluation report mostly draws on the experience of those attending the Foundation course and their managers. There was limited feedback from participants in the Intermediate Stage, although some managers had experience of staff attending in previous years or who had progressed to the next stage. Lastly, the evaluation did not consider the longer-term impact on practice and whether that ultimately has an impact on outcomes for young people and families. However, at this stage recommendations are as follows:

- The scope and content of each stage should be clearly articulated to potential participants, and course facilitators should try to ensure that this has been fully understood in order to ensure that expectations of the course are realistic.
- Consideration should be given as to how to engage with managers prior to the course and how to support managers to facilitate their employee's engagement with the learning process and also their implementation of learning on the return to the workplace. This might include, for example, the creation of networks or forums where participants can go to seek support, advice, or just generally to refresh skills and share practice ideas. However, this will not preclude the need for wider strategic discussions about how systemic practice can be supported at the organisational, regional or national level.
- Course delivery methods should be reviewed in response to feedback; with the venue; audio quality of DVD materials and amount of time spent in reflection / discussion each mentioned as potentially impeding learning on occasion. Some participants with additional learning needs felt that the materials also did not support their learning requirements.

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