



FAMILY TIME EVIDENCE SCAN

Designing an evidence informed approach to family time to support reunification and family strengthening.

Written by Jessica Cocks and Tracey Ashton
June 2023

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Strategic Innovation Design and Evaluation

LIFE WITHOUT BARRIERS

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BACKGROUND

Life Without Barrier’s Strategy 2025 has a focus on Family Strengthening. The Strategy aims to increase and improve our services to ensure children and families have strengthened relationships. We want to support children and families to reunify whenever possible. We also want all children we work with, including those in out-of-home care, to have strong and supportive relationships with their families and for them to experience *family inclusion*.

Family inclusion is concerned with children’s experiences when they are in out-of-home care. It is defined as the active and meaningful participation of parents and family in the lives of children. Family inclusion is not something that can be “done to, or “for” children. It can be supported by practitioners and agencies in close partnership with families and requires professional relationships between parents, workers, and carers, characterised by equity, trust and respect¹. When children experience family inclusion, they are more likely to be reunified, to experience relational permanence and to experience less grief, trauma, and loss.

For children in care, family time is an important ingredient of family inclusion.

INTRODUCTION

The purpose of this evidence scan is to summarise current best evidence about family time when children are in care. This review is concerned with all out-of-home care services, including reunification, to align with the Strengthening Families strategic focus of [Strategy 2025](#).

This evidence scan is of published research on family time, the experiences and views of families and children and any evidence about child and family outcomes that appeared. It is not an exhaustive evidence review and does not claim to have explored all relevant services and programs that may be providing an evidence-informed approach to family time. It includes grey and peer reviewed literature.

Aside from research, the other two sources of evidence are practice wisdom and the lived experiences of children and parents (see Figure 1). Some of the research reviewed in this scan draws on these other sources of knowledge through the views and experiences of children, and families (for example Create 2014, Ross et al 2017; Thorpe 2016).

We first provide an overview of current practice and define family time.

Then we explore family time and reunification. There is an increasingly strong link between regular and frequent family time and reunification. However, the *quality* of family time is also important, suggesting that purposeful support is needed to help children and families enjoy their time together and strengthen their relationships.

We also provide an overview of family time’s importance when there is no plan for the child to return home. This evidence is drawn from literature concerned with permanent out-of-home care such as permanent foster care and guardianship. This evidence also supports a stronger focus on quality family time and finds there is limited support available to help children and families enjoy their time together.



Figure 1: Evidence Informed approach to service design (Alla and Joss, 2021).

¹ Definition developed by Family Inclusion Strategies in the Hunter: <https://finclusionh.org/whatisfamilyinclusion/>

Some of the myths about family time are highlighted and compared to the evidence. Finally, design elements are proposed, to inform the design of evidence informed family time support and coaching.

OVERVIEW OF CURRENT PRACTICE

When children and young people in out-of-home care have face-to-face visits, phone calls, video calls, overnight stays, or any other form of contact with their parents, brothers and sisters, extended family, or kinship network, this is family time.

Overall, family time practice in Australia, tends to be risk oriented, with a focus on physical safety and surveillance. Family time is often followed by a written report about the family time session, usually without input from children or families, often written by someone who may not know the family well. If reunification is planned, then family time may also have an assessment orientation. Regardless of reunification, there is often little emphasis on helping or supporting families and children to enjoy their time together or to strengthen their relationships (Wattenberg et al 2011; Taplin & Mattick 2014). Families and children themselves often do not participate in family time processes and planning (Create 2014; Ross et al 2017).

Although supervision of family time is common, there is limited understanding of its purpose. Limited support is provided to parents beyond attendance and making children available (Kiryaly and Humphreys 2015; Wattenberg et al 2011; Taplin & Mattick 2014). Supervision arrangements can be distressing for children and parents and may act as a deterrent for parents to attend family time (Hojer 2009; Bullen et al 2015). It has been argued that supervision can compound “system induced trauma” (Hinton 2018) and undermine parent and carer efforts to work collaboratively (Ross et al 2017).

There is evidence linking quality family time and family participation to child outcomes and placement stability (Sen and Broadhurst 2011; Moyers et al 2006).

Overall, the evidence suggests that many family time practices, especially when supervised, may miss opportunities to help and support children and families to reunify or strengthen their relationships. Punitive and exclusionary practices make things harder for children and families and lead to poorer outcomes. The evidence reviewed supports an expanded focus on felt, as well as physical safety, combined with an increase in child and family participation and helping and supporting children and families to strengthen their relationships.

FAMILY TIME, REUNIFICATION AND PERMANENT CARE

The family time link to reunification is strong but complicated.

Children who experience safe, regular, and frequent family time are more likely to be reunified with their parents and community (Davis et al 1996; Delfabbro et al 2002; Sen & Broadhurst 2011; Wulczyn et al 2011), and to experience reduced time in out-of-home care (McWey & Cui 2021). This is not a direct causal link. The quality of family time is also important as well as other factors such as the child and parent relationship (Taplin 2005). This suggests we need to ensure not only that family time takes place regularly and frequently, but also that it is high quality, strengthens relationships and is enjoyed by children.

Reunification assessment tools in widespread use, such as Structured Decision-Making (SDM) tools, place a heavy weight on the attendance by parents at family time and its perceived quality². When family time is accompanied with supportive coaching there is an association with improved parenting skills, which in turn is linked to reduced re-entry rates after reunification (Fischer et al 2020). When families have access to peer support, helping them to navigate family time and other processes, reunification is more likely (Labrenz et al 2020; Chambers et al 2019)

When Aboriginal and Torres Strait Islander children are placed outside of their culture, they are less likely to have regular family time and to be reunified (Commission for Children and Young People 2015).

There is overall acknowledgement of the importance of family time for children, but limited evidence and availability of specific family time resources or programs focused on relationships and reunification (Bullen et al 2015). This is concerning as we also know from research that there are very likely to be children who were removed from their parents who need not have been (Davis 2019). This lack of emphasis on family time to support reunification may be contributing to lengthy and unnecessary periods of separation and to continuing low reunification rates in Australia (Cocks 2020; Tilbury & Thoburn 2009).

A large quantitative study in the USA found children in care who regularly see their parents have better mental health and shorter stays in care (McWey & Cui 2021) and, in the same study relating to seeing mothers, fewer externalising behaviours while in care (McWey & Cui 2018). McWey & Cui (2021) also found that frequent contact with parents found the benefits of family time extended beyond children's stay in care. There were similar improved mental health outcomes for children not separated from brothers and sisters.

Despite the importance of family time to reunification, some research has shown that caseworkers do not place a high priority on it (Nesmith 2013).

Overall, family time is key to reunification and an opportunity for parents to be helped and supported to build skills, make needed changes, and strengthen their relationship with their children.

Family time and permanent care

There are positive long-term outcomes for children's wellbeing when they have regular and quality time with their families, whether they are reunified or not. One systematic review found that regular and frequent family time contributed to better outcomes for children and that this was more likely when carers and parents had positive and collaborative relationships. However, family time needs to be of good quality. The same review also found that family time was harmful to children if they were being abused or fearful of abuse (Boyle, 2017).

Some prevailing beliefs about family time damaging or preventing the attachment between permanent carers and children are not borne out by the evidence. A systematic review on the impact of family time on children's adjustment in foster care found that while there were some mixed results, regular family time had no negative impact on the attachment between children and their foster carers and that family time did not tend to impact positively or negatively on behaviour for children in foster care (Poitras et al 2021). Unsurprisingly, the same systematic review found there was a positive link between family time and the child /parent attachment (Poitras et al 2021), suggesting that children can retain an attachment with their parents without this impeding attachment to carers.

The family involved principle of CARE also reflects the strong evidence around family connection and involvement (Holden 2009; Holden 2023), supported by family time. Holden refers to family involvement as one of few evidence-based indicators for successful treatment (Holden 2009: 19).

² The [Structured Decision Making Tool](#) takes parental attendance and the caseworker's assessment of quality into account when helping to determine reunification viability.

M et al (2020) found that family time for Aboriginal and Torres Strait Islander children family needed to start early in care and continue over time in ways that suit children and young people, regardless of reunification. This research also found that family time and family connectedness needed to be supported by skilled and knowledgeable Aboriginal and Torres Strait Islander cultural specialists. There is good evidence that quality family relationships during and after care leads to better outcomes into adulthood (Mackillop 2020, Mendes et al 2020, Bamblett et al 2014). Family time is an important part of strengthening, maintaining, and nurturing these relationships.

THE SOCIAL, HISTORICAL AND POLITICAL CONTEXT OF FAMILY TIME.

Family time and out-of-home care occur in a social context. A range of external and systemic factors affect how and when family time happens and how it is experienced by children and families.

Parents face social disadvantage and likely have trauma histories, creating barriers to family time.

Until recently, the experiences of parents with children in care have been oversimplified and interpreted in ways that individualise the problems parents face. Practice and policy have assumed that children are in care solely because of parental deficits and choices. There is now growing research and other evidence highlighting the social and historical context of child removal which challenges this assumption (Bywaters et al 2016; Menzies 2019; SNAICC 2021).

Many parents of children in care come from backgrounds of poverty, disadvantage, and past trauma (Davies et al 2023; Ross et al 2017; Harries 2008). They may have had children removed because of family violence, substance abuse, mental illness, disability, or a range of other reasons, very often including past trauma (Mason et al 2020; Menzies 2019). They may also have experienced discrimination and racism (Davis 2019; Menzies 2019). These issues can and do hinder regular attendance at visits. Structural barriers, such as poverty, distance, and lack of affordable housing are common and make family time difficult for parents and children (Kiryaly and Humphreys 2011).

Research has found that little sustained work with families takes place once children have been removed (Atwool 2013; Healy et al 2023). Overall, the practice in Australia has not been to provide substantial support for parents before, during or after family time despite the complex barriers faced by parents and family.

Family time is contested, emotional, and morally complicated.

Family time remains a complicated and contested part of child protection practice (Thorpe 2016; Atwool, 2013). For example, some researchers have argued that contact arrangements have more to do with satisfying law courts than with the best interests of the child (Barber & Delfabbro 2004, cited in Taplin 2005.)

Carers and caseworkers may hold strong views and beliefs about family time, which may or may not be evidence informed, and bring these into their decision making and their interactions. This can occur to support family time or to restrict it. Either way – opinions can be very strongly held. This may be due to a lack of clear guidelines (Bullen et al 2015) with decision makers relying on their own values or fears when planning family time. For example, caseworkers and carers may perceive there to be higher levels of pain-based behaviours after visits with parents which they then misinterpret as meaning visits need to be reduced or stopped rather than as a normal response to a stressful situation (McWey and Cui 2021).

Parents and children can experience anxiety and fear. There is often a high level of surveillance around family visits, with parents unsure of how to behave. Parents and children may not know the purpose of supervision and may worry about what is being said and written about them (Ross et al 2017; Thorpe 2016). Parents, children, and staff may be frightened during family time for a range of reasons including fear of violence (Taplin 2005) and fear of permanent separation (Ross et al 2017).

Other stakeholders in the system, including foster and kinship carers, also have strong views about family time. While many carers are supportive of family time, others find it stressful, worry that it is harmful for children and see it as an added burden on their caring role (Ankersmit 2016; Collings et al 2020). Quality family time can be undermined when carers and parents (who may both bring a parent identity) have relationship difficulties (Collings et al 2020). When carers and parents can form collaborative relationships, this can change attitudes and beliefs for the better. (Collings & Conley Wright 2022).

Everyone has a different view of what the best interest of the child is ... so that can be a barrier, when people get locked too strongly into their viewpoints, and you see that quite a bit. (Caseworker quoted in Ankersmit 2016: 279)

Parents find family time processes hard to navigate (Ross et al 2017). While many parents yearn to see their children, some may still find it too stressful to continue – leading to damaged relationships and lost opportunities for reunification (Taplin et al, 2021; Broadhurst and Mason 2013). Families often lack opportunities to process their grief and other emotions and to plan for family time to make it fun and happy for their children. Some guidance and resources to support evidence informed practice are now starting to emerge. These resources emphasise a trauma informed approach and the need to support parents and children to enjoy their time together³.

FAMILY AND CHILD EXPERIENCES OF FAMILY TIME

Children and Young People

Most children in care want contact with their families and many want more contact than they have.

“There is nothing I don’t like about contact; I just love it. I always like it.”

Young person, Create 2014: 7.

“What young people are saying to us is that when they go into care their contact with their family and their community and even going back to country is diminished a lot...”

NGO representative, Mendes et al 2020: 147.

Children need the opportunity to express feelings and views with practitioners and carers about seeing their parents, as well as opportunities to be directly involved in making decisions about family time (Morrison et al 2011; Create 2014). They need their carers to be empathic and respectful towards parents, and, when reunification is being planned, they need carers to be supportive. (Collings et al 2018; Morrison et al 2011). One evidence informed tool, the *icebreaker* meeting, enables parents and carers to meet early in a supportive setting. This may help children adjust to their situation and contribute to reunification (Luu et al 2019).

Aboriginal and or Torres Strait Islander children need to experience a high level of meaningful and sustainable family and community time for connection to kin and country so that they grow up with a communal sense of belonging, a stable sense of identity, know where they are from and their place in relation to family, mob, community, land, and culture. Their participation and the participation of families and cultural specialists is essential (SNAICC 2017; Davis 2019; Mendes et al 2020).

Fun, safe, supported, and natural.

“I want contact in open places like parks. Somewhere with space where we can have fun.”

Create 2014: 8.

³ See for example the resources developed by the Fostering Lifelong Connections project at the University of Sydney: <https://rccf-fostering-connections.sydney.edu.au/>

“I only like seeing my parents. The contact itself isn’t exciting.”
Create 2014: 7.

“Caseworkers and parents should be supporting you after – asking simple questions, how are you feeling, what can we improve for next time? Taking into account your opinion...maybe have a treat for the young kids when they get home.”
Young person, Create 2014:13.

Fun and happy family time experiences for children and their parents may need support from skilled helpers (Ross et al 2017). Children overall prefer that their time with their families is not supervised – that it is as normal as possible.

“Contact is always supervised but it’s never explained why.... my mum would never do anything to us.”
Create 2014: 17.

“It feels like being in a cage: for most of the visit, when there’s no space, and we don’t get a say.”
Thorpe 2016: np.

Young people are often not told the reasons for contact being supervised and want to participate in safety planning if it is needed (Create 2014). It is not clear if children perceived their carers as “supervising” or supporting the family time, although some young people felt their carers played a key role in supporting them before and after family time. This again suggests the importance of the foster or kinship carer role in supporting and responding to children’s feelings around family time (Thorpe 2016; Collings 2021; Create 2014).

Family time is best enjoyed in natural settings, mimicking normal family life.

“I want to go to the beach, park, bowling, pools, café, or my parents’ house.”
Young person, Create 2014: 9.

Research into supervised family contact with children in long term care has found parents are more likely to attend when visits are held in natural settings away from the agency, supervised by carers rather than by agency staff (Taplin et al, 2021).

Parents and Family

Many parents are highly committed to family time – and appreciate its importance.

“I just was bursting with enthusiasm leading up to the visits”
Parent (Ross et al 2017: 45)

“I think my showing up consistently for our visits started the healing process. It helped to show my son that I could be trusted again. If I told him I would be at the agency to see him in two weeks, and then I showed up, he knew I was reliable and kept my word. It also showed the agency that I was capable of being a responsible parent again. Eventually, our visiting time was increased. Then I was able to take him for overnights, then weekends. Finally, after almost 18 months of hard work, I got him back”⁴

A mixed methods study in Newcastle, NSW, found that parents continued to exercise their parental identity during visits but found this very challenging (Ross et al 2017). They felt family time visits lacked both frequency and quality and this impacted on their relationships with their children and their ability to effectively parent them. One parent explained how he knew he wasn't seeing his children frequently enough, leading to a reduced chance of reunification.

“...they really try and break that bond between you and the kids...Then that's one of their reasons for not letting you have the kids back (they say) “they are settled in their placement, and you've only been seeing them once a fortnight”...”

Parent, Ross et al 2017: 30

Other research into parent experiences in Western Australia also found parents had a child focus and knew the importance of time with them.

“I got to visit my older kids twice before they gave them back and they've got no clue the damage it does for a three-year-old to be torn from its mother, particularly the three-year-old.”

Parent, Harries 2008: 31.

Fathers are not involved as much as mothers.

In a recent survey of children in foster care in Victoria, 73% saw their mother compared to 46% who saw their father, and fathers were much less likely to have family time on their own without the mother being there (Kertesz et al. 2021). A report on a US out-of-home care file audit found that when fathers are highly involved with their children, including attending family time visits, children's time in care is likely to be shorter (Coakley 2013).

Parents can find supervision during family time challenging and may not know its purpose.

Parents do not find supervision of family time helpful, although they do express appreciation when supervisors are respectful and kind. The below quotes are from Ross et al (2017:30; 42).

“(I had) probably a little bit of anxiety there because it was a supervisor.”

⁴ Rise Magazine, 2021. Quoted from an article written in Rise Magazine, based in New York City, by Lynne Miller, a mother with lived experience of reunification. The article forms part of a series of resources written by parents for parents to support family time entitled: Rise Tips – making the most of visits. Available from: <https://www.risemagazine.org/item/rise-visiting-tips-set-of-4-handouts/> While this is not empirical research it is consistent with research messages and enables us to integrate other forms of knowledge into this evidence scan.

“Our supervisor changed and said, ‘how about we go over to the netball courts. Then we can be just by ourselves’, and we weren’t around that whole environment of supervised carers and contact everywhere. She said, ‘how about we get out of here, and go over there where it’s more private. You can interact with your kids more”.

Parents felt that supervision of family time did not help them strengthen their relationships with children and may undermine it. Parents reported feelings of powerlessness, emotional suffering, anger, fear and distrust toward staff and the system overall when involved in supervised visits (Ross et al 2017; Collings et al 2021; Fischer et al 2020).

When carers supported visits, as opposed to having paid supervisors, this may have made it easier for parents – who may perceive the carer role differently and not as supervision. (Ross et al 2023; Taplin et al 2021).

“When we went back to having a supervisor [when the carer wasn’t supervising], the supervisor was sitting there. They said “why are we here? There is no reason for us to be here. the kids are not in danger. They’re happy.”

Parent, Ross et al 2023: 61.

Parents and children can find family time stressful and want to participate more than they do.

Parents explained how their feelings about family time could swing from positive anticipation to dread as visits approached. Some parents described family time as a longed-for return to their role as parents while others found its short-lived and infrequent nature was traumatic and left them feeling disconnected from their children. Significant times of the year, for example Mothers' Day and Christmas, were times when parents found it particularly difficult to navigate family time arrangement (Harries 2008; Ross et al 2017). Parents can be unaware they could question family time arrangements or other case planning decisions.

“The worst part was when I heard him call the foster mother “mum.” I flipped out. The worker and foster mum tried to reassure me that I still was and would always be his mum. But I felt sure that the workers wanted to keep my child from me. I left in a daze, like I was in a bad dream in slow motion”.

Parent⁵

Practitioners may need support and guidance to facilitate parent and child participation in family time (Larkins et al 2015).

Families and children find it hard to say goodbye.

We know from practice wisdom, lived experience, and research that saying goodbye is hard for children and families. Goodbyes may be particularly difficult for parents to navigate (Haight et al 2002) suggesting that explicit help is needed. Children can have serious reactions to forced separation from parents and caregivers which can play out in pain-based behaviours. In turn these behaviours can be misinterpreted as evidence that family time itself bad for children (McWey & Cui 2021; Haight et al 2005). Parents and children feel a range of emotions during child protection involvement including sadness, anger towards workers, and confusion which they may find hard to contain during goodbyes and which may be misinterpreted by workers (Ainsworth & Hansen 2015; Haight et al 2017). One study found that most parents do express love and use a range of other strategies to support their children at leave taking (Haight et al. 2005). The trauma experiences of parents and children may also increase distress associated with saying goodbye. Most young children in one small study experienced significant distress at leave taking (Haight et al. 2005) reinforcing that distressed behaviours are a normal response to a difficult situation and that we need to respond with caring support and empathy.

⁵ Ibid Rise Magazine

INTERROGATING THE EVIDENCE: COMMON MYTHS ABOUT FAMILY TIME.

Common Myths	What the evidence says.
<p>Children should have time to settle with carers before they see their families.</p>	<p>Family time can help children settle in care, increase reunification, and improve relationships with parents.</p> <p>Children and parents need to see each other and be in regular and frequent contact for the best chance of reunification, without delays. Children who have quality family time, experience more stability in care.</p> <p>There is no evidence that family time inhibits attachment building with carers and some evidence that family time contributes positively to adjustment in care, to stability, to externalising behaviours and to continuing attachment with parents.</p>
<p>The purpose of family time in reunification is to assess parenting skills and the quality of the child's attachment.</p>	<p>Assessment is one important function of family time. The main purpose of family time is to help and support families and children strengthen relationships and learn skills. It is also vital for reunification.</p> <p>When we provide culturally safe support to children and parents with practical considerations, and make sure there are frequent visits with explicit scaffolding and coaching, then family relationships are strengthened, and the chances of reunification are increased.</p> <p>When support and care is given to family time, in close consultation with children and families, it is beneficial to both.</p>
<p>The kids get so upset before and after contact. It's usually not in their best interests to keep putting them through it.</p>	<p>It is up to us to provide opportunities for children and parents to manage transitions, address and process feelings of distress, loss, or anger before and after visits.</p> <p>Children and families experience grief, loss, and trauma when they are separated by the care system for a range of reasons. Seeing each other can be something they look forward to but can also be stressful. This stress can often manifest itself during transition times – before and after family time. Goodbyes can be very hard. By supporting children and their families during these transition times we can help them to process feelings. Distress during transitions alone is a normal response to a very difficult situation.</p> <p>If children struggle with pain-based behaviour before and/or after family time, then this is best resolved in relationship with parents and carers and in helping children process their feelings.</p>

Common Myths	What the evidence says.
<p>Children in care need to be protected from their parents to keep them safe.</p>	<p>Children tend to be safer in care when they have family time with their families.</p> <p>The Royal Commission into Institutional Responses to Child Sexual Abuse (2015) has found that a connection to family and culture is a protective factor for children in care. <i>Family and Community Involved</i> is one of the ten elements of a child safe organisation developed by the Commission.</p> <p>Research has found children experience lower mental health symptoms if they have more frequent family time with their mothers.</p> <p>When reunification is planned, it is important that children and families have frequent and increasing time together without supervision so they can rebuild their relationships and thrive. Supervision on its own, without support or coaching, is not helpful for children and families and, when not needed for safety, should be reduced, or removed whenever possible.</p> <p>When supervision is needed for safety, it needs to be provided.</p>
<p>Children should see their families regularly but infrequently, as time with families is only for the purposes of identity.</p>	<p>Children should see their families as frequently as they need.</p> <p>A formulaic approach to family time, with restricted times and supervision, is not based on any empirical evidence. Identity is an essential connection for children and is connected to all other aspects of children’s wellbeing. Low levels of family time may damage this essential connection. Infrequent contact may hinder reunification, damage relationships, and contribute to children’s trauma, grief, and loss.</p>
<p>The family time plan must be followed to the letter as it is court ordered.</p>	<p>Family time arrangements may be able to be changed as circumstances change.</p> <p>Sometimes court orders are prescriptive about family time, but often they are not. It is more common for courts to set minimum requirements for family time. These arrangements are often flexible. They can be changed as circumstances change over time without having to go back to court. For example, in a reunification plan a flexible and responsive approach can see children return home sooner.</p> <p>Check the court order before assuming it is being prescriptive about family time. If the court order is prescriptive, we may need to advocate for a change.</p>
<p>Children should not be allowed to see parents who have abused them.</p>	<p>Most children need and want to see and have caring relationships with parents and family.</p> <p>While some children have been abused by their parents, many have not, and most children have family members who have not harmed them</p>

Common Myths	What the evidence says.
	<p>including brothers and sisters. Parents often face significant disadvantages which have made it very hard for them to parent safely and with the right help and support they can make positive changes.</p> <p>Children who leave care with strong and loving family relationships will have better outcomes overall. These relationships will have a much better opportunity to be strong through regular family time which is supported in safe and flexible ways.</p> <p>Reunification is the first preference for all children in out-of-home care, even when children have been harmed by their parents, and this is more likely to be achieved through regular, frequent, and high-quality family time.</p> <p>It is important not to leave children in the care of any adults when there is a risk they will be harmed.</p>
<p>If parents don't show up for family time, this means they are not interested in their children.</p>	<p>If families don't show up for family time, we need to figure out why, so we can partner with them to create the conditions for them to attend and do well.</p> <p>Australian evidence has found that providing even small amounts of support with parents can reduce cancellations (Taplin et al 2021).</p> <p>Families often face significant practical and emotional barriers to attending family time and can find it very stressful.</p> <p>Some of the evidence-based conditions we can create to set up parents and children for success are: helping to solve practical problems; creating culturally safe places and practices; asking parents if they need help and support; asking children and parents for feedback; conducting pre and post visit coaching; reducing supervision, and doing relationship based practice consistent with CARE.</p>

DESIGNING AN EVIDENCE INFORMED APPROACH TO FAMILY TIME

CARE provides us with an evidence-based practice framework for family time. All the CARE principles and concepts are relevant to family time. The rest of this scan aims to bridge the gap between evidence and practice by highlighting areas where we can take active steps to make family time more positive for children and families.

Relationship based partnerships with families to strengthen relationships with children.

Parents and family are agents of change in the lives of children, including in reunification, and have been called by parents: “the most underused resource in child protection” (Life Without Barriers and the Reily Foundation 2022: 12). As workers and carers our role is to form helping relationships with parents and family, building a foundation for fun and positive family time. Factors key to child and parental satisfaction with staff at family time include involvement in decision making; responsiveness, practical support, provision of information and emotional support and investment in building relationships (Larkins et al 2015).

If children don't want family time, we need to respond with empathy and care.

Children who don't want to see their parents or are fearful of them, should not be forced. This can be particularly challenging for parents who will need support and a caring response. If children don't want to see their parents it is important to be curious, find out what is going on, and, when possible and safe, consider other ways of strengthening the relationship and keeping family involved.

There is some evidence, from broader out-of-home care practice, that children can continue to be abused during family time, including sexually abused (Taplin 2005). Adults need to protect children from abuse.

Children and families need and want the opportunity to participate in family time decisions and planning.

Most children do want to see their families and benefit from it. Children want family time to be fun and relaxed and to have a say in how it happens. It is important we create developmentally focused ways for children to participate. For example, a three-year-old can be encouraged to share artwork and information with his carers and parents before and after family time, while a 15-year-old can choose when and where she will see family, who will be there and generally determine activities.

By reconceptualising families as change agents with a strong parental role, the possibilities for participation grow and are not limited to receiving and giving information – although this is also important. Many of these ideas may also apply to older children.

- Family time planning – determining the when, who and how of family time.
- Goal setting.
- Co-production of notes and reports.
- Reviewing family time, ideally in partnership with carers.
- Helping to determine supervision requirements, if any. Reducing supervision when it not needed or helpful.

Provide supportive coaching.

Family time coaching has an evidence base in reunification (Fischer et al 2020) and in long term care (Taplin & Suomi 2020). Supportive coaching has also been recommended in research findings in reunification (Luu et al 2019) and in long term care (Collings & Conley Wright 2021). Family time coaching occurs when the parent and a supportive helper work together to set goals, practice skills, manage emotions and ensure the parent is available to children during their time together.

In 2017 a survey on *visit coaching* across 21 programs in the United States showed that coaches and parents had positive program experiences (Beyer, 2004). A more recent study found that coaching improved parenting skills (Fischer et al. 2020). This reunification approach⁶ includes one on one time with parents before and after visits when needed, ensures parents can spend time with each of their children alone and is flexibly stepped down in intensity over time as reunification draws near.

Other evidence also shows that structured and tailored parental support may lead to strengthened relationships, fewer cancellations, and other benefits (Taplin et al 2021; Bullen et al 2015). When young children and parents are supported in playgroup settings with peers there are positive outcomes (Salveron et al, 2009). Collings & Conley Wright (2021) also suggested benefits to children and parents when practitioners helped to scaffold initial family time interactions with parents who had recently had a child removed, providing clear information and emotional support.

Create the conditions for success – an agency /practitioner responsibility.

While parents and family have responsibilities in family time, so do agencies and practitioners. The practical barriers parents and families may encounter with coming to family time can be identified and overcome such as transport, finances, scheduling, providing activities and more. Feelings of distress, loss and anger can be processed before and after family time visits to help parents be available to the children. Cultural specialists can be invited to provide advice and support to create culturally safe places and inform practice by non-Aboriginal and Torres Strait Islander staff and carers. The availability of Aboriginal and Torres Strait Islander staff is very important along with involvement of supportive community members and extended family (SNAICC 2017, 2018; Mendes et al 2020; Davis 2019).

In a study on *supervised* family time Taplin et al (2021) found that parents were more likely to attend family time when the following were in place:

- Coaching interventions (pre and post) – see above for more detail.
- Family time was held outside an office environment (park, carer’s home, family home or other “natural” setting).
- Offer and /or encourage activities, snacks, and other resources (don’t assume parents have the resources to provide these).
- Reduced and informal supervision. If supervision is needed, ensure everyone understands why and consider reducing the formality by asking parents and children who they would prefer to play the supervision role.

These tend to be ecological in nature – by changing the environment we improve family time for children and families.

Outside of reunification, parents and children in care are rarely offered help and support to strengthen their relationships. One international review found only 12 studies related to services with parents with children in care and only some of these supported children and families to spend time together (Healy et al 2023). This is

⁶ [Visit coaching](#) reviewed in this study was developed by Marty Beyer and is in widespread use in the USA.

an example of a gap between what the system knows and what it does. We know parents and children need support to strengthen relationships, yet this support is not being offered.

Involve fathers.

Consider male workers and /or peer fathers to support involvement. If it is believed that “the father isn’t interested” – don’t just accept this. Look into it and find out more.

Support and involve carers.

While family time and partnering with families can be stressful for carers it is very important for reunification, for family inclusion and for strengthened relationships with families. Family time is improved for parents and children when carers are supported and involved and know the parents (Wilson & Devaney 2018; Child Welfare Information Gateway 2011).

Carers may need support and training /coaching to help them navigate family time, especially if children have been abused. Early meetings between parents and carers can help break down emotional barriers and forge a child focused partnership (Luu et al. 2019) and need to be supported whenever possible⁷. However, they shouldn’t be mandatory for either carers or parents.



⁷ The *icebreaker* meeting has been identified in research evidence as linked to reunification (Luu, Conley-Wright and Collings, 2019). For more information on icebreaker meetings see Biehle and Goodman (2012). This is not a licensed approach and can be adapted to meet the needs of children and families.

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