SCHOOL SOCIAL WORK

FROM AN INDIVIDUAL APPROACH TOWARDS
A COLLECTIVE APPROACH

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In 2023 maakten bijna 474 duizend Nederlandse jongeren gebruik van de jeugdzorg, dit is nog nooit zo hoog geweest. De jeugdzorg helpt jongeren met verschillende problemen, zoals een slechte mentale gezondheid, met gedragsproblemen of met drugsmisbruik. Doordat meer jongeren gebruik maken van de jeugdzorg wordt de wachtlijst voor hulp steeds groter wat kan zorgen voor steeds hogere kosten bij de jeugdzorg. Deze kosten worden betaald door de gemeenten in Nederland. Ook moeten gemeenten taken uitvoeren die voorkomen dat er meer jongeren in de jeugdzorg komen. De gemeente Rijssen-Holten zet hiervoor het Schoolmaatschappelijk Werk (SMW) in. Bij het schoolmaatschappelijk werk worden jongeren geholpen met beginnende problemen.

Vanaf 2026 krijgen gemeenten minder geld vanuit de landelijke overheid. Daardoor kan het zijn dat er minder geld gaat naar het SMW, waardoor er misschien minder jongeren geholpen kunnen worden. De gemeente heeft daarom onderzoek gedaan naar groepstherapie. Bij groepstherapie worden meerdere jongeren tegelijk geholpen, waardoor de kosten misschien omlaag kunnen. Om te kijken of groepstherapie past bij het SMW zijn medewerkers van het SMW en van de middelbare scholen in Rijssen-Holten geïnterviewd. Daarnaast is er een vragenlijst onder jongeren gehouden, waarin gevraagd is naar hun mening over groepstherapie.

In het interview met medewerkers is gevraagd naar de voordelen en de nadelen van groepstherapie voor jongeren. Ook is gevraagd wat er volgens de medewerkers nodig is voor het geven van groepstherapie of waar rekening mee gehouden moet worden. De digitale vragenlijst is gehouden onder jongeren van 12 tot en met 18 jaar die geholpen zijn bij het SMW. Aan deze jongeren is gevraagd hoe zij het SMW hebben ervaren. Daarnaast werd aan jongeren gevraagd waarom ze wel of niet willen deelnemen aan groepstherapie. Voor het onderzoek is er gekeken of er een verschil was tussen de jongeren die eerder geholpen zijn in een groep en de jongeren die niet geholpen zijn in een groep.

Aan het onderzoek hebben 3 medewerkers van het SMW meegedaan, 6 intern begeleiders en 1 unitleider, van de middelbare scholen in de gemeente Rijssen-Holten. De medewerkers zagen meerdere voordelen voor jongeren wanneer zij in een groep geholpen worden. Bijvoorbeeld dat jongeren elkaar kunnen helpen en advies kunnen geven. Daarnaast kan het helpen om sociale vaardigheden te verbeteren. Daarnaast gaven medewerkers aan dat groepstherapie er misschien voor kan zorgen dat medewerkers minder uren nodig hebben om evenveel jongeren te kunnen helpen. Ook zagen ze enkele uitdagingen voor groepstherapie. Zo geven medewerkers aan dat het lastig wordt om jongeren te vinden die tegelijk in een groep geholpen kunnen worden. Niet alle problemen zijn volgens medewerkers geschikt voor groepstherapie. Ook komen niet alle problemen vaak genoeg voor om groepstherapie aan te bieden. Daarnaast geven medewerkers aan dat er goed gekeken moet worden naar de wensen van jongeren. Medewerkers denken door deze uitdagingen misschien meer uren kwijt te zijn aan het plannen van een groep, waardoor groepstherapie misschien geen kosten bespaard. In de vragenlijst gaven een paar jongeren aan dat zij voordelen zien in groepstherapie. Zij gaven bijvoorbeeld aan dat ze van elkaar kunnen leren en dat het gezelliger kan zijn. Ook zagen jongeren nadelen van groepstherapie. Jongeren vinden het niet altijd fijn om met andere jongeren te praten over hun problemen. Ook gaven zij aan liever één-op-één in gesprek te zijn met een medewerker. Toch lijken jongeren die eerder in een groep geholpen zijn, eerder bereid om opnieuw deel te nemen aan een groep.

Uit het onderzoek komt dus naar voren dat medewerkers positief kijken naar groepstherapie binnen het SSW. Wel zijn er uitdagingen die de implementatie van groepstherapie lastig maken. Er moet namelijk rekening gehouden worden met de persoonlijke voorkeur van jongeren en medewerkers. Daarnaast moet er rekening gehouden worden met dat groepstherapie niet altijd kostenbesparend hoeft te zijn.

Summary

Background: In 2023, 474 thousand young people in the Netherlands made use of youth care services, a record number. Youth care focuses on young people with various issues, ranging from psychological and behavioural problems to social awkwardness and drug use. As more young people require youth care and need assistance for longer periods, waiting lists grow, which can negatively impact the well-being of young people and lead to higher costs for youth care. Since 2015, Dutch municipalities have been responsible for youth care and its costs. Furthermore, Dutch municipalities are responsible for preventive measures for youth, an example of this in the municipality of Rijssen-Holten is the school social work (SSW). With potential budget cuts in 2026 and the end of funding from the National Programme for Education (Dutch: NPO), a cost-effective innovation may be necessary to prevent the downscaling of the SSW. One possible solution is to offer group therapy within SSW. To determine whether this is feasible, research was conducted to understand how various stakeholders in school social work perceive the feasibility of integrating group therapy within SSW, and to identify the factors that contribute to successful implementation.

Method: A qualitative study was conducted using semi-structured interviews with school social workers (SSWs) and school's care coordinators (SCCs) from all four secondary schools in the municipality of Rijssen-Holten. The interviews were based on the Non-adoption, Abandonment, Scale-up, Spread, and Sustainability (NASSS) framework. The data were analysed using thematic analysis to identify patterns and insights related to the feasibility and potential benefits of implementing group therapy within SSW. In addition to the interviews, an online survey was conducted among young people aged 12 to 18 years with experience in SSW. The survey was an exploratory study to gather perspectives of young people on group therapy. The survey data analysis focused on the difference between young people who received individual support and those who received group therapy.

Results: A total of 8 interviews were conducted with 3 SSWs, 7 care coordinators and 1 team manager from four secondary schools in the municipality of Rijssen-Holten. Employees saw benefits for young people in offering group therapy, such as peer support and improving social skills. Employees indicated that group therapy could potentially reduce the caseload and therefore the hours required. However, challenges were also mentioned, such as group dynamics and individual needs of young people. Additionally, respondents noted that it could become more challenging organisationally. Planning group sessions, considering schedules, individual problems, and preferences, could possibly lead to more time spent on planning rather than helping young people. In the survey among youth, 15 young people participated. Young people who were helped in group therapy showed that some young people saw benefits in group therapy, such as learning from others. Furthermore, the results showed that young people who had previously been helped in a group were more willing to participate in a group again.

Conclusion: This study shows that almost all employees have a positive attitude towards group therapy within SSW, but employees also highlight challenges that need to be addressed for successful implementation. Individual choices of both young people and employees should be taken into account. Furthermore, organisational factors that could potentially lead to increased bureaucracy must also be considered.

Table of Contents

1. Introduction

In 2023, 474 thousand young people in the Netherlands made use of youth care, the highest number ever recorded (1,2). Youth care is for youth with different types of problems, for example those with psychological or mental health issues but also for those with behavioural or parental problems. Moreover, it provides support to youth which are socially awkward and youth who (experimentally) use drugs. Also foster care and youth rehabilitation (for youth with police reports) are included within youth care (3). The number of young people in youth care has been on the rise since 2000, when approximately 3,8% of children and young people (0-17 years old) made use of youth care, this number had increased to 11,7% in 2018 (4). In addition to more young people using youth care in 2023, the average duration of the support that young people receive has also increased (5). Due to the increasing number of young people in youth care and the longer durations of support, waiting lists continue to grow, despite the addition of over 1.500 new youth care providers since 2015. These escalating waiting lists pose problems. Waiting for help has serious consequences for the child, existing problems worsen, tensions within families can escalate, school dropout rates may increase, which could lead to even more social isolation (6). This can result in the need for more intensive youth care and eventually lead to a further increase in the costs of youth care, despite the youth care system already requiring significant costs, with an average of €10.207 per young person receiving care (7). In 2022, the costs of youth care was approximately € 6,51 billion. This surpasses by far the regular budget of nearly € 4,3 billion (8).

The increase of young people in youth care is caused by several factors. The COVID-19 pandemic has had a significant impact on many young people. Schools have been closed multiple times, and students received education at distance, resulting in an interruption of the social life for many students. While some may have almost forgotten the COVID-19 pandemic, some students still struggle with the consequences of it (9). A portion of students still struggle with mental health issues caused by the social restrictions imposed by the COVID-19 pandemic. Yet the pandemic is not the only cause of the increasing number of young people with mental health problems. The performance pressure experienced by young people at school and the social stress they encounter also lead to more mental health issues (10–12). Additionally, the pressure that young people feel from social media and concerns that they have about the future, housing, climate, and livelihood security contribute to uncertain and even depressive feelings. This increase in uncertainties and depressive feelings has led to a rise in the number of young people entering youth care (10,11).

In the Netherlands municipalities are responsible for youth care since 2015. The responsibility was taken over from the Ministry of Health, Welfare and Sport both in terms of funding and implementation. The municipality where young people are registered is responsible for providing youth care. This means they are responsible for care related to upbringing, parenting, and mental health problems and disorders. In addition, municipalities are responsible for developing policy plans to support young people and develop policy plans that prevent them from entering institutionalized youth care (13). An example of preventive policy is the deployment of school social work (SSW) in secondary schools. SSW can be seen as a form of secondary prevention. Students with emerging issues are identified by a school social worker (SSWer), in collaboration with a school's care coordinator (SCC), and an intervention is offered to prevent them from requiring more intensive and more costly youth care or to prevent school drop-outs. These interventions address a wide range of issues, including behavioural and socio-emotional developmental problems in students, as well as

issues related to family and school situations (14). So, in collaboration with the student, parents, and SCC, the SSWer aims to map the issues and provides and executes a personalized action plan. These action plans often consist of low-threshold, short-term one-on-one sessions aimed at supporting individuals dealing with for example depressive thoughts and practical inquiries.

During the COVID-19 pandemic, municipalities received funding from the National Programme for Education (NPO). This funding, provided by the national government, was intended to promote the socio-emotional and cognitive development of students and to address the educational disadvantages caused by the pandemic (15). Many municipalities used this funding to expand the activities of the SSW. However, this funding is temporary and will end in 2025. In addition to the ending of the NPO funds, it is expected that by 2026, municipalities will need to make significant budget cuts. According to the current budget, a reduction of over 3 billion euros in the municipal fund is planned (16,17). A reduction in the municipal fund could have significant consequences for the SSW. To prevent a scale down of the SSW or a loss of quality of the SSW due to the decrease in funding, group therapy could be a solution.

Group therapy, is a form of psychotherapy in which small groups of individuals with similar problems come together to form a group. This group is then guided by a SSWer, with the focus on interaction and feedback among the participants (18). Applying more group therapy can bring significant benefits. Various studies indicate that offering collective care, or group therapy, can be as effective or even more effective than individual therapy (19–21). The fact that it can be more effective than individual therapies is partly due to the reduction of stigma surrounding the therapy. Additionally, the presence of peers is positively perceived, as there is solidarity among those who receive group therapy. The solidarity and presence of peers have the advantage that people realize they are not alone in their thoughts or feelings (18,22,23). Another advantage of group therapy is the sense of community, by helping others within the therapy group, the self-esteem of people can improve. Additionally, observing progress among fellow group members can have a positive effect on people. Seeing progress in others can provide hope and courage for their own progress. Furthermore, group therapy helps in observing and learning from peers, which can result in new insights and further development of social skills. For example, a study among adolescents with ADHD showed that these adolescents were very satisfied with group therapy. According to the same study, group therapy has the potential to lower the chance of resistance towards therapy and improve the adherence to therapy (24).

However, there are also disadvantages of group therapy (18,25,26). One of the disadvantages of group therapy, compared to individual therapy, is that the individual is not at the centre of attention. This can result in only the people with the loudest voice receiving the most attention. Consequently, people who are less outspoken may receive less attention, which could lead to a less effective treatment. Another drawback of group therapy is that it reduces confidentiality. Individuals are grouped with others, which could lead to the risk that information, which must be remained within the group, may leak out. This risk could cause people to hold back information about their process in dealing with their mental health, while sharing this information is important for addressing mental health issues. Additionally, mismatches may occur among participants of group therapy. Some may be extremely shy while others may be overly impulsive, leading to clashes in the group, which does not benefit anyone. Furthermore, it could be the case that people stay silent because they fear saying the wrong things or misinterpreting others (27). To prevent this, individual pathways may still be necessary. Another reason why individual therapy is likely to remain necessary is

because people have different needs, and when these needs are not met during group therapy, it can have negative effects on their experience (28). From a study conducted among Dutch youth, it appears that young people generally prefer individual treatments over group treatments. However, it was also found that young people place more value on treatment effectiveness than on the type of treatment. Furthermore, young people indicated that they also consider waiting times for treatment to be important (29).

Given that the effectiveness of group therapy is comparable to that of individual therapy (30,31), group therapy could be more cost-effective due to lower intervention costs per person (32). Consequently, total costs could be reduced. By incorporating more group-oriented therapy into SSW, where possible, the costs of SSW could be lowered. To implement group therapy within the SSW, it's important to research the perspectives of stakeholders such as SSWers, SCCs, and young people. This includes the acceptance of group therapy and organisational factors that may influence the implementation. By using the NASSS framework (33), these different factors can be investigated to understand what is needed for implementing group therapy within the SSW. Since relatively little research has been done on all these components, this study may provide insights into what is required according to important stakeholders.

The first group of important stakeholders are the SSWers employed by the foundation Avedan in the municipality of Rijssen-Holten and SCCs employed by secondary schools in the municipality of Rijssen-Holten. Currently, Avedan offers relatively little group therapy. To offer more group therapy in secondary schools that meets the preferences of professionals, it is necessary to investigate what is required to provide more group therapy. This information can be gathered from SSWers and SCCs, because they understand the requirements which are needed or which requirements SSWers and SSCs need. Additionally, they are familiar with the issues present in secondary schools and which students may be suitable for group therapy. Besides, they are the ones who have to implement group therapy in their work, and if group therapy does not align well with their current field of work or if they do not accept the implementation of group therapy, it is likely that group therapy will not be effectively applied at the SSW.

A second group of stakeholders are students who receive or received support of the SSW. Their opinions are also crucial in determining the feasibility of offering group therapy. Because they are the ones who will participate in these programs. They can provide insight into the types of issues where group therapy could be beneficial, as well as those where it may not be beneficial. Furthermore, they can provide insight into which factors hinder successful implementation of group therapy within SSW and which factors contribute to a successful implementation.

Therefore, the aim of this study is to explore how various stakeholders in school social work perceive the feasibility of integrating group therapy within school social work, and to identify the factors that contribute to a successful implementation.

Sub-questions are:
- How do school social workers and school's care coordinators perceive the feasibility of integrating group therapy within school social work, and what factors contribute to a successful implementation?
- How do students, who have received school social work, perceive the feasibility of integrating group therapy within school social work, and what factors contribute to a successful implementation?

2. Method

2.1 Research design

An exploratory qualitative approach was applied. This study made use of interviews which were designed in a semi-structured way. The choice for a semi-structured interview was made because it provides the opportunity to ask for further clarification from SSWers and SCCs. Additionally, a semi-structured interview provides a framework, ensuring that the same topics are covered by all SSWers and SCCs, which increases the validity of the research (34).

Furthermore, this study utilized a digital survey among youth. This digital survey aimed to explore the perspective of young people on group therapy and their willingness to participate in this form of therapy. The survey among youth can be regarded as an exploratory investigation into their perspectives on group therapy. Additionally, this research was part of a broader study on the well-being of youth in the municipality of Rijssen-Holten.

2.2 Research setting

The research took place in the municipality of Rijssen-Holten from February 2024, to July 2024. The study among professionals was conducted at the 4 secondary schools located in Rijssen-Holten, with 3 secondary schools in Rijssen and 1 in Holten. These different locations were chosen because they can be seen as a familiar environment for the employees. Furthermore, this choice was made because it is more practical for the employees because of travel time, however, if an employee preferred to conduct the interview at a different location than the secondary school, they were invited to the town hall in Rijssen or an online meeting.

The research conducted among young people was carried out through a digital questionnaire, which was combined with a digital questionnaire from the study of the municipality of Rijssen-Holten on the well-being of youth in the municipality of Rijssen-Holten. It was decided to combine the questionnaires to avoid overloading young people in the municipality of Rijssen-Holten with questionnaires. This questionnaire was distributed in the period from May 7, 2024 to June 7, 2024.

2.2.1 Research population

This research was conducted among school social workers employed by the Foundation Avedan in the municipality of Rijssen-Holten. Employees with at least 1 year of work experience as school social workers were included in this study. School's care coordinators working at secondary schools in the municipality of Rijssen-Holten were also included if they had at least 1 year of work experience as SCCs. A minimum of one year of experience was chosen to ensure that interviews were conducted with SSWers and SCCs who had at least some experience.

Due to the fact that there are 4 secondary schools within the municipality of Rijssen-Holten, it was decided to interview 1 SSWer and 1 SCC from each secondary school. This allowed insight to be gained from 4 secondary schools, each with its own characteristics, thereby increasing the likelihood of generalization within the municipality of Rijssen-Holten and beyond. It was expected that 8 employees, 2 from each school, could be interviewed to achieve theoretical saturation. If an SCC preferred to conduct the interview together with a colleague, this was also possible.

2.2.2 Recruitment

The recruitment of employees took place at Foundation Avedan. This recruitment was carried out by the executive supervisor of the school social work at Foundation Avedan. The executive supervisor asked colleagues, who work as school social worker, if they were willing to participate in the research on offering more group therapy in SSW. The contact details were then shared with the researcher. The recruitment of SCCs was carried out by the researcher. Contact details were provided by the policy maker of the municipality of Rijssen-Holten who is in contact with the schools. The researcher emailed the SSWers and SCCs to arrange an interview. In this email, the purpose of the research was explained and the informed consent was attached (Appendix 1). In some cases, the contact person was called to establish contact more quickly. After the call, an email was sent with additional information of the research.

Furthermore, the research was conducted among adolescents who have experience with school social work. For this purpose, the questionnaire on adolescents well-being was employed, which was distributed among adolescents aged 12 to 18 in the municipality of Rijssen-Holten. Since not all adolescents have experience with SSW, a question was added to the questionnaire asking whether the respondent had experience with SSW. When this was the case, they were presented with 7 additional questions about group therapy. The remaining adolescents, who had no experience with SSW, were excluded from the study.

2.3 Data Collection

2.3.1 Data collection professionals

The semi-structured interview schema partially utilized components of the Non-adoption, Abandonment, Scale-up, Spread, and Sustainability (NASSS) framework by Greenhalgh et al. (33,35). The interview schema can be found in Appendix 2. The semi-structured interview schema made use of following 6 components of the NASSS framework:

- Condition: understanding the challenges young people face and their specific needs;
- Technology, understanding the requirements of SSWers and SCCs for implementing group therapy within school social work, including resources, personnel, training and financial considerations;
- Value Proposition, the added value of group therapy for employees and students, potential negative effects of group therapy, and impact on school social work;
- Adopters, the perception and acceptance of group treatment by students and school social workers;
- Organisation, the requirements and changes in duties needed to offer group therapy;
- Wider System, external factors that could influence the implementation of group therapy, for example political policies, professional care or the parents of students;
- Embedding and adapting over time, the future perspective that SSWers and SCCs have regarding offering group therapy (33,35).

2.3.2 Data collection students

The digital survey conducted among young people in the municipality of Rijssen-Holten consisted of 8 questions. These questions included both closed and open-ended questions. They inquired about their experiences with the SSW and their opinions on group therapy or how they perceive it. For example, "Why would you want to participate in group therapy?" The full questionnaire can be found in Appendix 3.

The digital survey was sent out through a letter containing a QR code that young people could use to complete the survey. This letter was sent from the municipality of Rijssen-Holten to all young people in the municipality. The letters were addressed to the young people at their address, but they were not personalized. To increase the response rate of the survey, the letter mentioned that young people could collect a € 5,- voucher from one of the youth organisations in the municipality of Rijssen-Holten. Since this survey also targeted young people between the ages of 12 and 16, the letter requested young people to seek permission from their parents to complete the questionnaire. Additionally, participants were asked at the beginning of the survey to confirm their own consent and, if they were between 12 and 16 years old, also their parents' consent regarding the use of their data in this research.

2.4 Procedure

For the interviews voice recording equipment was employed to record the interviews. Prior to the interview, the recording equipment was checked. Following this, the interviewer thanked the employee for participating in the interview. A short introduction was then provided by the interviewer. Additionally, the interview's goal and predicted duration of the interview (30-60 minutes) were communicated to the employee. The employee was told that they did not have to answer any question if they did not want to. Also, permission from the employee was asked to record the interview. After that, the interviewer asked if the employee had additional questions. If this was not the case, the recording started. At the start of the interview, the employee was again asked for permission to record the interview. At the end of the interview, the employee was thanked for their time and cooperation.

2.5 Data analysing

2.5.1 Data analysis of professionals

After the interviews, the recordings were placed in the secured environment of the University of Twente. Additionally, the audio fragments were transcribed using "Amberscript". The transcript was then coded using a deductive coding technique. The relevant information provided by the professional was processed in "Atlas.ti" (version: 24.1.0.30612).

For the analysis of the qualitative data from the interviews, a deductive approach to thematic analysis was used. This involved the use of predetermined categories based on the NASSS framework. The relevant information provided by the professionals was coded under the main categories of the NASSS framework, including Condition, Technology, Value Proposition, Adopters, Organisation, and Wider System. Additionally, some subcategories were created to enable a more detailed analysis. Within the Adopters category, subcategories were Students and Employees, while the Organisation category included School Social Work, Schools, and Both.

The unit of analysis focused on the responses provided by individual employees, aiming to identify where consensus existed and where it was absent. In cases where consensus was absent, the individual point of view of employees were taken into account during the analysis.

2.5.2   Data analysis of youth

After closing the survey among young people, the results were analysed. The analysis of the survey focussed on the closed questions and examined how young people experienced the SSW and what they thought were possible advantages and disadvantages of group therapy. The analysis explored whether there were any notable differences between young people who were helped in groups and those who were helped individually. If there were differences, the researcher categorized them as either positive or negative. Furthermore, it was also investigated whether respondents' expressed a notable difference in the willingness to be helped in a group the next time. The analysis also explored what young people consider to be reasons for participating and not participating in group therapy. Here too, it was examined whether there was a difference between young people who had previously been treated in a group or who had been helped individually. In addition to examining whether there was a difference between the young people who received group therapy, the individual reasons given by young people for why they did or did not want to participate in group therapy in response to the open questions were examined. This was done by a narrative analysis.

2.6   Ethical considerations

The recordings of the interviews are stored on secured servers on the University of Twente. The full transcripts of the interviews are also located on these secure servers. These data may not be shared due to the General Data Protection Regulation (GDPR). The storage period for this data at the University of Twente is 10 years.

The research was approved by the ethical committee of the University of Twente (request number: 240341).

3. Results

3.1 Research population professionals

In total, ten respondents participated in this study among professionals. The characteristics of these professionals can be found in Table 1.

Due to a miscommunication between a school and the researcher, a team manager of a school was contacted. It only became clear at the beginning of the interview that it was a team manager instead of a SCC. Since this team manager still has some influence on how schools collaborate with the SSWers, it was decided to continue with the interview.

Table 1: Research population professionals

Characteristics	Respondents
Gender; n (%)	**10** (100)
Male	**3** (30)
Female	**7** (70)
Years of experience (During interview)	
Average (range)	**9,7** (5 – 27)
Profession; n (%)	
School social worker	**3** (30)
School care coordinator	**6** (60)
Team manager	**1** (10)

3.2 Description of results professionals

3.2.1 Condition

The chapter "Conditions" provides an overview of the various issues young people face, such as performance pressure, family problems, and behavioural issues. It also discusses the challenges and considerations in implementing group therapy, emphasizing the need for careful planning due to the diverse backgrounds and needs of the young people.

SSWers and SCCs report that they see various types of problems among young people. These problems range from minor issues that can be resolved in a few counselling sessions to serious issues that need intensive help as soon as possible. It was noted that employees did not perceive any differences between young people in the municipality of Rijssen-Holten and those in municipalities nearby.

The most common issue among young people, according to employees, was the pressure to perform. This pressure, according to employees, can lead to various problems. For instance, several employees mentioned that young people become stressed more quickly or drop out of school more easily. It can also result in a lowered self-esteem or depressive thoughts.

Employees report that they see different forms of pressure among young people. This pressure comes from different sources. At school, pressure can be due to parents having high expectations of their children, or from themselves. The latter is especially noticeable among girls.

"I also see students who experience performance pressure, but often they put this pressure on themselves. It does not always come from home." (Respondent 3)

In addition to the pressure young people feel from school, performance pressure may also arise from societal developments or from other young people. According to some employees, this is also due to the busyness of society. Besides school, young people have part-time jobs, want to participate in sports in the evenings, and also need to maintain their social contacts.

Furthermore, it was indicated that young people experience pressure from social media. Their self-esteem can be negatively influenced by the 'perfect' images young people see on social media. This low self-esteem can also arise because young people expose or bully each other on social media. This often happens on anonymous accounts or on platforms where the images are only visible for a short time. This makes it difficult for employees to address these issues. Another consequence of social media use is that young people are constantly "on." One employee compared it to her own youth and partly understood why young people feel pressure from social media. Some young people have difficulty coping with this pressure, resulting in developing depressive symptoms or experiencing stress more quickly.

"I could just call one person and make plans. So, I did not get jealous when I saw my friend doing something else. Besides, so much is demanded of today's youth. Then I compare it to when I was young. Has school become so much harder now? Is it the pressure to perform? I do not really know. Maybe it's everything young people are confronted with." (Respondent 6)

In addition to the performance pressure, employees reported that other types of problems are also present, which are also addressed by the SSW. These problems included issues in the home environment, such as divorced parents, which could lead to problems for young people. Loneliness is also becoming more

common in the secondary schools of Rijssen-Holten. Furthermore, a few employees noted an increase in behavioural issues among young people, including little respect for authority and concentration issues. Additionally, some employees mentioned that they currently saw several girls with eating disorders and self-harm. In some cases, young people with severe depressive symptoms, including suicidal thoughts were assisted by the SSW. For such severe issues, the SSWers refer young people to youth care institutions but continue to support them until their treatment begins.

Furthermore, employees have noticed that young people seem less resilient than in the past. Some employees suggest that young people now seek help immediately for minor issues. Moreover, one employee noted a decline in the independence of young people compared to previous generations.

"I find that they are taken aback very quickly... the resilience, I miss that." (Respondent 4)

"Constantly, you have to give them trust, if you want to move forward, things will go wrong at some point, otherwise you will not learn anything new. Every time, they panic again, I've never experienced it this extreme before." (Respondent 2)

Considerations

Despite the fact that the SSW is well-utilised and young people often experience similar problems, some employees indicate that there are important obstacles that must be taken into account when implementing group therapy. Some indicate that certain problems are often very personal and may not be suitable for group therapy, but the most common obstacle is the number of young people. The problems that young people experience occur at different times, making group therapy difficult to organise. It was suggested that problems which are not acute could possibly be put on a waiting list to see if there were more young people with similar issues.

Another important point to consider when implementing group therapy is the identity of young people and diversity of groups. For example, groups where young people with a Christian background and young people without a Christian background may have different types of questions and have different ways of dealing with these questions. According to employees, it is therefore important to take this into account, because this may help the young people better. In addition, gender, cultural backgrounds, and level of education were also given as examples by some employees. Combining students from practical education with those from pre-university education can present challenges, according to several employees. However, it also provides opportunities for creating more diverse groups that better reflect society.

"It might also be nicer if different students sit together, then you are more in real life, so to speak" (Respondent 2)

3.2.2 The value of group therapy

The chapter value gives an overview of the benefits and drawbacks of group therapy for both young people and employees. It highlights advantages like peer support and learning opportunities, while also discussing challenges such as potential discomfort and the need for individual attention. Additionally, it addresses the personal benefits and drawbacks of employees.

Benefits for youth according to employees

All interviewed employees saw various benefits of using group therapy for young people (see figure 1). Nearly all employees indicated that meeting peers is a significant advantage of offering group therapy. Meeting peers could help young people as they realize they are not alone in their struggles, which could potentially reduce feelings of shame and could contribute to mutual reinforcement. Young people can give each other advice on how to deal with certain situations because they have had similar experiences. Some employees believe that advice from young people might work better than advice from adults because adults may not be in the same social circle and may not always understand this circles completely. Additionally, one employee also mentioned that receiving compliments from other young people works better than complements of adults.

"You learn from each other, more than from adults who tell you how it should be. Many students, from what I see, are also quite sensitive to receiving a compliment from another student, it affects them ... you really see students flourishing." (Respondent 3)

Another advantage often highlighted by employees is the opportunity for young people to practice social interactions during group sessions. Group settings facilitate role-playing and practicing social skills, which can be more challenging in individual sessions where young people must apply tips independently, potentially leading to tensions.

Another advantage mentioned by a few employees is that providing group therapy can lead to making new friends. For some types of issues, group sessions are already offered, including anxiety training and social skills training. Several employees said that they saw the groups from these trainings sitting together more often during breaks or in other places. Whereas these young people used to sit alone before. They also saw that these young people support each other throughout the lessons, which is important for this group of young people.

"There were a few students from different classes in that group, who were really isolated, and they found each other in that training. Those students were very happy with the training. Students who used to stand alone, they now hang out together." (Respondent 5)

Group therapy might also help reduce barriers to ask for help, according to two employees. Group therapy could increase awareness of the support available, making more young people feel comfortable asking for help sooner. Another employee mentioned that for some young people, it might be easier to participate in a group session rather than an individual one, as one-on-one might be too intimidating. However, it was also mentioned that this might be the case the other way around.
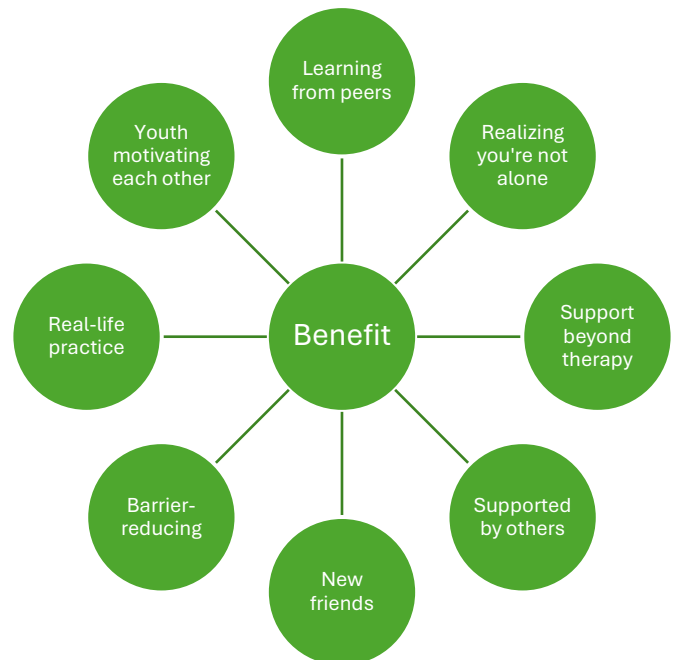
Figure 1: the benefits of group therapy for youth according to employees

An additional benefit that was mentioned by a single employee, is that group therapy can serve a larger group of young people. This could normalizes the use of services, potentially reducing the barrier to contact and accept help from SSW for both young people and their parents.

"In certain municipalities or among certain background, seeking help is still considered taboo. In group settings, your reach (among young people) is greater, allowing us to demonstrate that seeking help is a positive action!" (Respondent 3)

Drawbacks for youth according to employees

While all employees saw the benefits of group therapy, they also acknowledged that there are drawbacks to providing group therapy (see figure 2). The biggest drawback was that group therapy might not meet the personal preferences of the young people. Many young people may need someone they can trust with their thoughts and feelings. Employees mentioned that young people wonder who else is in the group and how they come across to others. Some young people may feel uncomfortable with others knowing what's going on. This also may take more time, delaying young people from addressing their issues.

"Perhaps that the student is first preoccupied with questions like, "Who else is there? Is this safe? What is the group like?" before they can address their grief. And with one-on-one that happens much faster." (Respondent 8)

Figure 2: Drawbacks of group therapy for youth according to employees

According to some employees, in some cases it could lead to young people not telling everything. As a result, other young people may also hold back, causing the whole group to become demotivated. Additionally, during group sessions, it might not be possible to address every issue individually, as it may not benefit all young people. Therefore, employees suggest that additional individual sessions are needed for young people to address the root cause of their problems.

"The group can be very supportive, but it can also be inhibiting, it depends on the skills of the trainer and the openness of others." (Respondent 7)

Another barrier for young people could be that group sessions are less optional, according to some employees. When young people participate in a group, they cannot simply drop out of the group, as they are part of a collective. The downside of this is that some young people may have to attend more sessions than if they were individually assisted. This could lead to demotivation among all young people in the group.

Benefits for employees

Some employees indicated that the benefits applicable to young people also apply to them (see figure 3). For instance, a few employees mentioned that practising together in a group is pleasant, as it is sometimes easier than practising one-on-one. Furthermore, one employee noted that young people can also give each

other advice, which is advantageous not only for the young people but also for the employees, as they do not always have tips themselves, or because they also can learn from these tips.

Employees also indicated that there are benefits for themselves in offering group therapy. An advantage mentioned by two SSWers was the variation between group therapy and individual therapy, which was seen as beneficial. According to them, leading group sessions requires a different approach compared to individual sessions. One SSWer mentioned that the variety among young people and their stories was seen as something positive, contributing to the enjoyment of work for this SSWer.

"The dynamics themselves make it enjoyable. The variety of people and stories adds value, and it contributes to the enjoyment of the job." (Respondent 3)

Figure 3: The benefits and drawback of group therapy for employees. Green indicates a benefit and red indicates a drawback

Drawbacks for employees

In contrast, not every employee was enthusiastic about offering group therapy. One employee expressed a preference for providing individual therapy. Although the employee recognised several benefits of offering group therapy for both, young people and employees, she indicated that offering group therapy was not her preference. She mentioned that her preference lay in providing individual therapy, as she found this more enjoyable. Furthermore, the employee emphasised that having a passion for group therapy is essential; without this passion, a group might not function effectively.

"Even though I could do it and understand how it works, I believe it really has to be your passion. And it's just not my passion." (Respondent 8)

3.2.3 Organisation

In the chapter organisation both the advantages and drawbacks of offering group therapy at an organisational level is highlighted (see figure 4). While the benefits include time and caseload reduction, challenges such as increased planning time and scheduling complexities are also recognized. Additionally, attention was given to the organisational factors that need consideration.

Benefits on organisational level

At an organisational level, there is an advantage to offering more group therapy. The main advantage of group therapy, mentioned by every employee, was saving time or reducing the caseload. By implementing group therapy, employees could assist multiple young people simultaneously, lowering their caseload. Additionally, employees indicated that this saving of time or reduction in caseload could also potentially lead to cost savings.

"It reduces time pressure, as working in a group saves the need for individual sessions for each person" (Respondent 1)

Drawbacks on organisational level

Despite the potential cost savings from helping multiple young people simultaneously through group therapy, employees indicated that implementing group therapy could lead to more organisational hurdles. They mentioned that providing group therapy would require more hours for planning and organising the group. More time would be spent on identifying young people who could join the group. Additionally, scheduling group sessions is more challenging, as employees need to accommodate the students' class schedules to avoid them missing too many lessons. Employees also want to ensure that group sessions are not planned too much during the personal time of students, as this could lower their motivation. These organisational factors are less present for individual therapy, resulting in less time spent on planning sessions and more time on providing assistance.

Figure 4: The benefit and drawbacks of group therapy on organisational level. Green indicates a benefit and red indicates a drawback

"Sometimes the organisational side can be a downside. It is easier for me to just schedule an individual session" (Respondent 1)

Furthermore, employees indicated that organisational factors of group therapy could be more disadvantageous than individual therapy. Individual sessions can be scheduled more easily, accommodating both the employee's and the young person's schedules. This allows for quicker assistance to young people with urgent issues. With group therapy, employees may need a waiting list because a certain number of young people need to be "found" before a group session can start. As a result, the young person may remain with the problem longer, potentially worsen the issues.

Consideration

To offer more group therapy at the SSW, employees were asked about their thoughts on increasing cooperation between the schools to bring together young people from different secondary schools to offer more groups. Most employees responded positively to this. However, there were certain conditions attached to this. Schools indicated that it is more practical for young people to stay at their own school as much as possible, because it can be too intimidating for young people to go to an unknown school. A more neutral location such as the town hall or the Avedan office would be more suitable. When group therapy takes place outside school, the therapy should take place outside school hours as much as possible because otherwise young people may miss too many school subjects. An alternative suggested by an employee was to give the group therapy on alternate days, but most employees found this unpractical and too confusing for both, employees and young people. Furthermore, test weeks and different school schedules could cause problems. A suggested solution was that young people should attend group therapy in their own time, but this might reduce their motivation.

Furthermore, schools also indicated that they do not feel the need to come together to discuss trends or individual cases. These discussions might take too much time and result in too much bureaucracy. In addition, they already have consultations with schools outside the municipality of Rijssen-Holten because they are part of other partnerships. As an alternative, they suggested involving SSWers to discuss school trends internally and then share these insights with other SSWers. SSWers were open to this, but the consultations must remain useful and effective.

Additionally, some SSWers face challenges where Avedan currently offers demand-oriented support. Shifting towards supply-oriented support would be more beneficial. This approach would involve SSWers identifying trends in societal and school problems to offer group training based on these trends. To achieve this, Avedan would need to develop a new organisational vision, possibly in collaboration with the municipality of Rijssen-Holten.

"I would find it very fun and interesting, and it would also be good, but there are concerns about valuable time." (Respondent 8)

Once the trends of the different schools have been discussed by the SSWers, groups can be offered by the SSW. To bring students from different schools together in those groups, there were varying responses from the schools. Some schools indicated that they were prepared to register young people, in consultation with parents, for group therapy, while some other schools did not want this. However, all schools were prepared to promote the SSW and the various trainings to parents when the SSW provides the promotional material.

3.2.4 Technology
To implement more group therapy within the SSW, there are some conditions to consider. This includes the conditions specified by SSWers, as well as those outlined by schools.

The SSWers had some conditions for offering more group therapy. For example, most employees indicated that they would prefer to offer the therapy with two people. This does not have to be specifically an SSWer, but could also be a youth work employee or a SCC. Providing group therapy with two employees was seen as more effective, because one of the two can better pick up the small signals that would not be seen when the group session was given alone. Another condition that some employees indicated was that they found it useful or necessary to receive additional training for offering group therapy. Additionally, the SSWers stated that they would not necessarily require higher salaries. Some of the SSWers, not all, expressed that offering group therapy is part of their job.

3.2.5 Wider system
In the Wider system section, one point is highlighted that may pose obstacles to offering group guidance. A factor that could be an obstacle is the referral pathways and role delineations between schools, SCCs, and SSWers.

At the moment, most young people who are having problems, turn to their tutor. If the tutor cannot help them, they turn to the SCCs, which sometimes refer students to the SSW. It is sometimes unclear when young people go from the SCC to the SSW, in many cases it has been agreed that schools provide help with school-related problems and the SSW with problems related to the home situation. However, it became clear from different interviews that most employees found this to be a grey area. According to school and SSWers, this in itself was not a problem, because mutual contacts are very good. When necessary, young people can quickly be referred to the SSW. One employee did indicate that some teachers or mentors

sometimes help young people in situations where it is questionable whether they should be resolved by a teacher or tutor. It was indicated that in these types of situations it is sometimes better to ask for help from SSWers, because they have more experience with these problems and are also paid for this. The result of this may be that young people are helped better and schools can save costs.

"You are a highly paid person and you do work that is not actually part of your job. In addition, people with a different education may be able to do that job much better. You should not see this in black and white, but do you understand what I mean?" (Respondent 4)

3.3 Research population youth
A total of 347 young people participated in the entire study conducted by the municipality of Rijssen-Holten. Only the young people who used the SSW were included in this study. In total, 15 (4.3%) young people made use of the SSW. Other characteristics of the youth who made use of the SSW can be found in table 2.

Table 2: Characteristics of population youth

Characteristics	Respondents
Gender; n (%)	**15 (100)**
Male	**5** (33)
Female	**10** (66)
Age	
Average (SD)	**14,7** (1,7)
Therapy form; n (%)	
Individual therapy	**9** (60)
Group therapy	**6** (40)
Experience	
Very good – Good	**12** (80)
Not good – Not bad	**1** (7)
Bad – Very bad	**2** (13)
Reason for therapy; n (%)	
Reason not given	**8** (50)
Emotional regulation	**4** (25)
Behavioural challenges	**2** (13)
Personal development	**1** (7)

3.4 Description of results youth
In this study, only a few young people indicated that they made use the SSW. This limited response should be kept in mind when interpreting the results.

Some details emerge from the responses. Of the young people, 20% indicate that they have had a neutral or bad experience with the SSW. The data shows that these young people have all been helped individually. When looking at the experiences of young people who have been helped in a group, 100% indicate that their experience with the SSW was good or very good. Of these young people, 66,7% indicate that they experienced the SSW as good and 33,3% as very good. When young people have been helped individually, 44,4% experienced the SSW as very good and 22,2% as good.

Another notable result that emerges is when considering whether they would prefer to receive help in a group next time. Of the 9 young people who were helped individually, only 1 (11,1%) young person indicated that it would like to participate in a group next time. Of the 6 young people who were helped in a group, 100% indicated that they would also like to be helped in a group next time.

Furthermore, it emerged that only 3 (20%) young people knew why they would want to be helped in a group and provided an answer to this question. Of these young people, 2 were assisted in a group. One young person provided multiple reasons for preferring group therapy, mentioning that it is faster and more enjoyable.

"You get to know others and how they experience it" (Respondent 145)
"It's nicer and it goes faster" (Respondent 238)

More responses were received to the question of why young people would not want group therapy. 9 young people responded to this question. Of these young people, 8 (88,8%) received individual help. Some young people did not provide a clear reason why they did not want group therapy; they simply expressed a preference for individual therapy.

"One-on-one is nicer" (Respondent 141)
"Because I find talking one-on-one nicer" (Respondent 288)

A reason why young people did not want to participate in a group, was that they did not feel comfortable sharing their problem with others. Two young people also indicated that they did not like the fact that everyone knew about their problems. It was also indicated once that a young person was too shy to speak in a group.

"Then everyone knows what is going on with you" (Respondent 81)
"I do not like to speak when I'm in a group because I'm shy" (Respondent 158)

A similar response came from the young person who had been helped in a group. This young person indicated that a threshold had to be crossed before being able to say something in a group. Nevertheless, this young person did indicated that she would like to be helped in a group next time.

"You have to overcome a barrier to share something" (Respondent 145)

4. Discussion

This study indicates that almost all employees have a positive attitude towards group therapy within SSW, because it benefits both young people and employees. However, employees highlight challenges that need to be addressed for a successful implementation. A complexity arises from the conditions, as there are not always enough young people with similar problems. This complexity could potentially be reduced by an increased collaboration between secondary schools. However this increased collaborations lead to complexity at the organisational level. The collaboration between different secondary schools and how they can work together to help facilitate group therapy at the SSW could lead to an increase in bureaucracy. The increase in bureaucracy may hinder successful implementation.

4.2 Interpretation of the results
Condition
The results indicate that the SSWers and SCCs observe many young people experiencing issues related to performance pressure originating from schools, family, social media, and their own expectations. Similar findings were reported in the GGD youth monitor of 2023 (36). The GGD monitor also showed that more young people feel stressed than before the COVID-19 pandemic. According to the employees and other studies, not all types of issues are suitable for group therapy (37,38). For example, one study indicates that

issues such as changes in how young people handle aggressive behaviour, both physical and verbal, are less suitable for group therapy. (39). Another study suggests that acute problems and personality disorders are also not suitable for group therapy (40). Behavioural problems like oppositional defiant disorder (ODD), burnout, and chronic stress are more suitable (39). Social anxiety and depression could also benefit from the social support and feedback that group therapy offers (40). Therefore, when implementing group therapy, it is essential to consider the diverse needs and problems of young people, and whether they are suitable for group therapy. Additionally, the employees emphasise the importance of considering the various educational levels and cultural or religious backgrounds of the young people (41). Furthermore, according to employees, the personal preferences of the young people should take into account (42). However, based on the survey among youth and a study by Waumans et al (43), young people prefer individual therapy. This could lead to less group therapy being offered, potentially resulting in no cost savings. Therefore, a balance should be found.

An disadvantage of offering group therapy, according to employees, is that there may not be enough young people with similar problems at the same time. This can make organising a group difficult. One possible way to still offer a group is to use a waiting list. However, the drawback of a waiting list is that young people's problems may worsen (44). Furthermore, another study suggests that implementing a waiting list may lead to higher costs for offering group therapy, potentially making group therapy less cost-effective than individual therapy (45). Another option suggested by another study is to allow young people to join the group at different times (46). This could be a possible option for the SSW, although it has not been discussed with the SSWers.

Value

Furthermore, the results of the study show that almost all employees view the implementation of more group therapy in SSW positively. Most employees saw significant benefits for the young people who would participate in group therapy. In particular, meeting peers and practising in real-life scenarios were seen as major advantages. Additionally, it was noted that young people could learn from each other and give each other tips, which was also considered a significant benefit. Similar findings have emerged from other studies (42,47), conducted among various therapists. These results are not only reflected in the feedback from therapists but also from young people aged 16 to 24 (43). The studies also highlight that social interaction within the group is important and provides advantages for young people in managing their issues. Additionally, group therapy was seen to potentially normalise problems, according to Vlasto's study (42).

While offering group therapy can indeed provide benefits for young people, both employees and young people indicate that there are drawbacks to offering groups. The most commonly cited disadvantage of group therapy is that it may not align with the young person's problem or because young people prefer one-on-one conversations, which was also notable from the responses to the survey among youth. Stige et al (47) and Waumans et al (43) draw similar conclusions based on the opinions of professionals and young people. Especially, individual attention remains important for young people. Furthermore, the studies by Stige et al and Waumans et al also indicate that group dynamics can have a negative impact; dominant individuals may overshadow other young people, thereby depriving them of the right support. Again, these concerns were reflected by the young people participating in this study, who reported speaking in groups as a barrier because of their shyness.

Another potential drawback of group therapy is the barrier that young people face when joining the group. The results and other studies indicate that taking the first step to join a group can be challenging (48). However, both SSWers and SCCs report that this barrier quickly diminishes, making young people much more open with each other. This resonates with findings from the survey. Although the number of young people participating in this study was small, and potentially not representative of all youth, those who had never taken part in a group session prefer not to participate. In contrast, those who had participated in a group session were willing to do so again. Similar findings are reported in the study by Arias et al, which indicates that over time, young people interact more naturally and spontaneously with one another (48).

Technology

For offering group therapy, employees indicated a preference to conduct sessions with two colleagues. Utilising two colleagues could be advantageous because one of them can focus on the details while the other guides the group, as indicated in the study by Kivlighan et al (49). This research also suggests that two therapists can establish a better relationship with the group, leading to less avoidance behaviour, such as passive participation or suppressing emotions. However, it remains uncertain whether the groups at the SSW are large enough for this approach. Nonetheless, employing two colleagues could provide benefits in uncovering details. However, it is important to note that conducting sessions with two employees will result in higher costs, potentially preventing any cost savings at the SSW.

Opinions among SSWers and SCCs regarding a suitable location for offering group therapy varied. Some suggested that it would be better to have it at a neutral location, while others did not express a preference. However, they did mention that for some young people, it might be better to receive therapy at a familiar location. This could be related to an added sense of safety, potentially aiding in better assistance for young people (50).

Wider system

On the regulatory front there appear to be almost no hindrances. However, a potential obstacle may lie in the division of roles between the SSW and schools. Due to current grey areas regarding task allocation, young people may not always be directed to the right place for help. A clearer division of roles could potentially address this issue (51). With a clearer division of roles, it would become evident who is responsible for addressing specific issues, enabling young people to receive assistance sooner and from the appropriate person. This could result in more young people being referred to the SSW, making it easier to offer groups. However, a disadvantage of a too-clear division of roles is that it can lead to demotivation among employees, negatively impacting their performance.

4.3 Strengths and limitations

A strong point within the research among youth was that the questionnaire was reviewed by multiple young people and youth workers. An employee of the SSW was asked if the questions were clear for young people. The questionnaires were also reviewed by a youth worker and by a young person themselves. Questions were adapted if they were unclear.

Another strong point of this research is the method used for data collection. The use of qualitative semi-structured interviews was conducted based on an interview schedule that is grounded in the NASSS framework. This interview schedule allowed for similar questions to be posed to different employees. Additionally, a semi-structured interview provides the opportunity to delve further into certain responses.

By deviating from the planned interview questions, additional information could be obtained that has not been taken into account in the interview schema. Another possible strength of the research was the pre-provided information. Employees were informed that the interview would focus on offering group therapy. Some employees said that they had prepared for the interview in advance, resulting in more detailed information being provided. Another strong point within this research is the diversity of employees interviewed. For each secondary school, a SSW and a SCC were interviewed. This allowed for a comprehensive understanding of the requirements for group therapy.

Furthermore, it should be noted that some interviews took place with two employees simultaneously, which may have either helped or obstructed the process (52). It is challenging to determine whether any obstruction occurred. Observing the speaking time during the interviews revealed potential obstruction in one interview where one employee spoke less, while in the other interview, both employees spoke equally. Nevertheless, in both cases, the interviews were requested to be conducted with two people instead of one by the employees themselves. This may suggest that they did not feel obstructed participating together. Additionally, participants in these interviews often asked for confirmation or additional input from each other.

A potential limitation of this study is the reliability of the data analysis. Because the analysis was conducted by only one researcher, and the coding was performed by a single researcher. Therefore, it is unknown whether there would be consensus on the interview codings. Comparing the codings with another researcher could potentially increase the reliability of the data (53).

Another limitation of this research is the low response rate to the survey among youth. This may have been because the survey was sent by letter during the week of Ascension Day, when people may have been on vacation. Additionally, there have been issues with the postal service, as the letters were received at households at different times, with some arriving up to 1 or 2 weeks after May 7th. It is also possible that some households did not receive the letter at all. Young people may also have been unmotivated to complete the survey. Due to this limited response, no useful statistical tests could be conducted to determine the difference between youth who had and who had not experienced group therapy. However, some first insights into reasons why young people would or would not want group therapy, were obtained.

4.4 Follow-up Research

For further research, a deeper and possibly qualitative study could be conducted among young people who have used the SSW. This study could explore how these young people view the application of group therapy at the SSW. A qualitative approach might gather more detailed information than the survey previously conducted among the youth. Additionally, the number of young people using the SSW might be too low for a survey to provide meaningful results, making interviews a potentially more representative method.

Furthermore, it could be explored how secondary schools and SSWers can collaborate more effectively to bring together young people facing similar issues. One possible solution could be a technological application where SCCs and SSWs can report the current issues they observe among young people. When multiple young people have similar problems, they can be brought together. It will be necessary to investigate whether an application is desirable and what its requirements should be. Additionally, it's important that this application does not lead to increased bureaucracy for schools.

Another option could be to focus more on preventive work, this could reduce the need for collaboration between secondary schools. If the SSW focuses more on prevention, it might be able to offer more groups because more young people from the same school could participate. This approach could not only increase the number of groups offered but also provide early support to young people, potentially reducing the need for more intensive care later on.

If it is desirable to work more preventively, research can be conducted on how best to achieve this. This could involve forming groups focused on preventing common problems or those problems which show a noticeable increase. These problems and trends can be identified through discussions between SSWs and schools. Follow-up research could explore effective and useful ways to conduct these discussions and how often they should occur to remain up-to-date but still relevant. For offering these preventive groups, increased collaboration with youth work within the municipality of Rijssen-Holten could also be considered. The SSW and youth organisations might be able to further strengthen each other. However, it is important to consider that preventive measures are not always cost-saving (54). The costs of prevention can sometimes be cost-saving. Nevertheless, preventive measures may improve the well-being of young people.

5. Conclusion

The results show that almost all employees are positive about implementing group therapy within the SSW. They see benefits for the young people, such as support from peers with similar issues, development of social skills, and a sense of recognition. Additionally, employees see benefits for themselves, such as more variety in their work and potential time savings and reduction in caseloads, as long as there are enough young people to form a group. Employees do not perceive significant barriers in terms of laws and regulations.

The number of young people with similar issues is probably the biggest challenge for implementing group therapy within SSW in Rijssen-Holten. Without enough young people with similar problems, it will be difficult to offer a group. Furthermore, not every young person is willing to participate in group therapy as they may prefer individual therapy. Therefore, even if group therapy is offered, it remains important to offer individual therapy, as not every issue is suitable for group therapy.

In conclusion, this study shows that there is a positive attitude among employees towards implementing group therapy within SSW. However, for successful implementation, it is important to address the challenges of finding enough young people with similar problems at the same time, the willingness of young people to participate, and the personal preferences of employees.

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Appendix 1: Informed consent

Doel van het onderzoek

Dit onderzoek wordt geleid door Peter ten Hove.

Jeugdzorg staat op dit moment sterk onder druk. Zo zijn er lange wachtlijsten, en worden er op korte termijn grote bezuinigingen op de gemeentelijke budgetten voorzien. Eén mogelijke oplossing die door gemeentes is benoemd, is het aanbieden van meer groepsinterventies in plaats van individuele interventies bij het schoolmaatschappelijk werk.

Het doel van dit onderzoek is om uit te zoeken of het mogelijk en wenselijk is om meer groepstherapie te bieden bij het schoolmaatschappelijk werk in de gemeente Rijssen-Holten, en wat daarvoor nodig is volgens de schoolmaatschappelijk werkers en intern begeleiders. Door dit inzichtelijk te krijgen, kan het schoolmaatschappelijk werk mogelijk worden verbeterd. De gegevens worden gebruikt voor onderzoeksverslag.

Hoe gaan we te werk?

U neemt deel aan een onderzoek waarbij we informatie zullen verzamelen door u te interviewen en uw antwoorden op te nemen via een audio-opname. Deze audio-opname wordt gebruikt om alle informatie accuraat vast te leggen, zonder dat belangrijke details verloren gaan of verkeerd worden geïnterpreteerd.

Interviewinhoud

In het interview krijgt u vragen over hoe u denkt over het aanbieden van groepsinterventies bij het schoolmaatschappelijke werk. Ook zullen er praktische vragen gesteld worden over het aanbieden van groepsinterventies en over de voor- en nadelen van groepsinterventies. Uw deelname aan dit onderzoek is vrijwillig, u kunt op ieder moment stoppen. Daarnaast hoeft u geen vragen te beantwoorden die u niet wilt beantwoorden.

Interviewduur en Locatie

Het interview zal ongeveer 30-60 minuten duren en zal plaatsvinden op één van de volgende locaties: De middelbare school waar u werkzaam bent, het gemeentehuis in Rijssen of in een online vergadering via teams. Afhankelijk van uw voorkeur.

Gegevensdeling en Vertrouwelijkheid

Uitsluitend ten behoeve van het onderzoek zullen de verzamelde onderzoeksgegevens worden gedeeld met de gemeente Rijssen-Holten. Uw persoonlijke gegevens en worden hierbij niet gedeeld.

Vertrouwelijkheid van gegevens

De geluidsopname van de interviews zal worden omgezet naar tekst. Daarbij worden alle persoonlijke gegevens waaraan u herkent kunt worden, verwijderd. Deze tekst zal worden opgeslagen onder een code en niet onder uw naam. Alleen de onderzoekers hebben toegang tot deze teksten. Deze teksten zullen gebruikt worden voor een onderzoeksverslag en mogelijk voor andere onderzoeken. Hierin zal niemand u kunnen herkennen. Deze ver Wij doen er alles aan uw privacy zo goed mogelijk te beschermen. Er wordt op geen enkele wijze vertrouwelijke informatie of persoonsgegevens van of over u naar buiten gebracht, waardoor iemand u zal kunnen herkennen. Deze verslagen worden openbaar gemaakt. De onderzoeksgegevens worden 10 jaar bewaard op een veilige omgeving binnen de Universiteit Twente en worden daarna vernietigd.

Onderzoeksgoedkeuring

U kunt op elk moment tijdens het interview zonder opgaaf van redenen besluiten om niet meer deel te willen nemen. In dat geval worden de gegevens direct verwijderd en niet meegenomen in het onderzoek.

Dit onderzoek is goedgekeurd door de ethische commissie van de faculteit BMS van de Universiteit Twente (nr 240341).

Wilt u stoppen met het onderzoek, of heeft u vragen en/of klachten?

Neem dan contact op met de onderzoeksleider:
Peter ten Hove
Student Health Science – Public Health
Emailadres: (Verwijderd wegens privacy redenen)
Telefoonnummer: (Verwijderd wegens privacy redenen)

Voor bezwaren met betrekking tot de opzet en of uitvoering van het onderzoek kunt u zich ook wenden tot de Secretaris van de Ethische Commissie / domein Humanities & Social Sciences van de faculteit Behavioural, Management and Social Sciences op de Universiteit Twente via ethicscommittee-hss@utwente.nl. Dit onderzoek wordt uitgevoerd vanuit de Universiteit Twente, faculteit Behavioural, Management and Social Sciences. Indien u specifieke vragen hebt over de omgang met persoonsgegevens kun u deze ook richten aan de Functionaris Gegevensbescherming van de UT door een mail te sturen naar dpo@utwente.nl.

Tot slot heeft u het recht een verzoek tot inzage, wijziging, verwijdering of aanpassing van uw gegevens te doen bij de Onderzoeksleider.

Door dit toestemmingsformulier te ondertekenen erken ik het volgende:

1.   Ik ben voldoende geïnformeerd over het onderzoek door middel van een separaat informatieblad. Ik heb het informatieblad gelezen en heb daarna de mogelijkheid gehad vragen te kunnen stellen. Deze vragen zijn voldoende beantwoord.
2.   Ik neem vrijwillig deel aan dit onderzoek. Er is geen expliciete of impliciete dwang voor mij om aan dit onderzoek deel te nemen. Het is mij duidelijk dat ik deelname aan het onderzoek op elk moment, zonder opgaaf van reden, kan beëindigen. Ik hoef een vraag niet te beantwoorden als ik dat niet wil.

Naast het bovenstaande is het hieronder mogelijk voor verschillende onderdelen van
het onderzoek specifiek toestemming te geven. U kunt er per onderdeel voor kiezen wel of geen toestemming te geven. Indien u voor alles toestemming wil geven, is dat mogelijk via de aanvinkbox onderaan de stellingen.

	JA	NEE
3. Ik geef toestemming om de gegevens die gedurende het onderzoek bij mij worden verzameld te verwerken zoals is opgenomen in het bijgevoegde informatieblad. Deze toestemming ziet dus ook op het verwerken van gegevens betreffende mijn werkzaamheden.	☐	☐
4. Ik geef toestemming om tijdens het interview opnames (geluid) te maken en mijn antwoorden uit te werken in een transcript.	☐	☐
5. Ik geef toestemming om mijn antwoorden te gebruiken voor quotes in de onderzoekspublicaties.	☐	☐
6. Ik geef toestemming om de bij mij verzamelde onderzoeksdata te bewaren en te gebruiken voor toekomstig onderzoek en voor onderwijsdoeleinden.	☐	☐
Ik geef toestemming voor alles dat hierboven beschreven staat.	☐	

Naam Deelnemer: Naam Onderzoeker:

Handtekening: Handtekening:

Datum: Datum:

32

Appendix 2: Interview schema

Hoe zien schoolmaatschappelijk werkers en schoolcoördinatoren de haalbaarheid van het integreren van groepsbegeleiding binnen het schoolmaatschappelijk werk, en welke factoren dragen bij aan een succesvolle implementatie?

Instructies en toestemming

1. Controleer vooraf of opnameapparatuur werkt.
2. Gebruik tijdens het interview de volgende open aanmoedigingsvragen:
   - Kunt u daar iets meer over zeggen?
   - Wat bedoelt u daar precies mee?
   - Kunt u dat toelichten?
   - Kunt u voorbeelden noemen?
3. Bedank de medewerker voor de bereidheid om deel te nemen aan het interview.
4. Stel jezelf voor en beschrijf kort het doel, de inhoud en de tijdsduur van het interview:
   - Het doel van het onderzoek is om te kijken of het haalbaar is om meer groepsbegeleiding aan te bieden bij het Schoolmaatschappelijk Werk en hoe medewerkers hier tegen aankijken
   - Tijdens het interview worden vragen gesteld over de mening en verwachtingen van Schoolmaatschappelijk Werkers.
   - Het interview duurt ongeveer 30 tot 60 minuten
   - De medewerker mag altijd weigeren om een vraag te beantwoorden. Daarnaast zijn er geen antwoorden fout.
5. Vraag toestemming voor de opname van het gesprek.
6. Vragen om aantal jaren werkervaring.
7. Vraag of ze de resultaten van het onderzoek willen ontvangen.
8. Heeft de medewerker nog vragen? Zo niet, start het interview.
9. Vraag om de toestemming tot audio-opname te herhalen nadat de opname is gestart.
10. Tijdens het interview, zorg ervoor dat alle hoofdvragen worden gesteld. Probeer het gesprek zo natuurlijk mogelijk te laten verlopen en waar mogelijk de onderwerpen onder de hoofd vragen aan bod te laten komen.

DE AANDOENING OF ZIEKTE

1. Waar bestaan uw werkzaamheden als schoolmaatschappelijk werker uit?
   - *Hoeveel leerlingen schat u dat gebruik maken van het schoolmaatschappelijke werk?*
   - *Waar komen deze leerlingen vandaan (welke gemeente)?*
   - *Hoe lang duurt over het algemeen een begeleidingstraject?*
   - *Op welke manier komen deze leerlingen binnen bij het schoolmaatschappelijk werk? (IB'ers of zelf?)*
   - *Welke problematiek ziet u veel voorbij komen op school?*

DE TECHNOLOGIE

1. Bent u bekend met het aanbieden van groepsbegeleiding?
   - *Biedt u zelf al vormen van groepsbegeleiding aan? Voor welke problematiek voornamelijk?*
   - *Hoe ervaart u deze vorm van begeleiding? Hoe kijkt u naar deze vorm van begeleiding?*
   - *Hoe nuttig denkt u dat groepsbegeleiding is?*
2. Zijn er al plannen om (meer) groepsbegeleiding aan te bieden op scholen?
   - *Waar wordt op dit moment tegenaan gelopen?*
   - *Wat is er volgens u nodig om meer groepsbegeleiding aan te kunnen bieden?*

DE WAARDEPROPOSITIE (kosten en baten van de technologie)

1. Denkt u dat groepsbegeleiding een toegevoegde waarde heeft voor u? (Werkplezier)
   - *Wat zijn volgens u de voordelen van het aanbieden van groepsbegeleiding voor uzelf?*
   - *Wat zijn volgens u de nadelen van het aanbieden van groepsbegeleiding voor uzelf?*
   - *Denkt u dat het aanbieden van groepsbegeleiding leidt tot meer/minder werk(druk) voor uzelf?*
   - *Denkt u dat het aanbieden van groepsbegeleiding kan zorgen voor een besparing van uren/kosten?*
2. Denkt u dat groepsbegeleiding een toegevoegde waarde heeft voor leerlingen?
   - *Wat zijn de voordelen van het aanbieden van groepsbegeleiding voor leerlingen volgens u?*
   - *Wat zijn de nadelen van het aanbieden van groepsbegeleiding voor leerlingen volgens u?*

DE BEOOGDE GEBRUIKERS VAN DE TECHNOLOGIE

1. Hoe zou volgens u de meest ideale vorm van groepsbegeleiding eruit zien? (Bijvoorbeeld twee medewerkers, combinatie van individueel en groepsgericht?)

2. In hoeverre denkt u dat het bieden van groepsbegeleiding praktisch haalbaar en acceptabel is voor u als zorgverlener?
   - *In hoeverre denkt u dat uw werk zal veranderen als er meer groepsbegeleiding zou worden aangeboden?*
   - *Zou u bereidt zijn om groepsbegeleiding aan te bieden?*
   - *Welke vaardigheden denkt u dat belangrijk zijn voor het aanbieden van groepsbegeleiding?*
   - *Denkt u hiervoor aanvullende training(en) nodig te hebben om groepsbegeleiding aan te kunnen bieden en zou u bereid zijn deze te volgen?*
   - *Moet er nieuw of andere processen worden ontwikkeld, bijvoorbeeld in de samenwerking met scholen?*
   - *Heeft u aanvullende voorwaarden om groepsbegeleiding aan te bieden? (Extra vergoeding)*
   - *Wat zijn volgens u belangrijke uitdagingen bij het toepassen van groepsbegeleiding bij het SMW?*

3. In hoeverre denkt u dat het bieden van groepsbegeleiding praktisch haalbaar en acceptabel is voor leerlingen?
   - *Denkt u dat leerlingen bereidt zijn om deel te nemen aan groepsbegeleiding?*
   - *Wat zijn volgens u redenen waarom leerlingen wel/niet mee willen doen met groepsbegeleiding?*
   - *Denkt u dat de privacy van de leerlingen een probleem kan zijn bij het aanbieden van groepsbegeleiding?*
   - *Hoe denkt u dat bij groepsbegeleiding de aandacht voor alle leerlingen gewaarborgd kan worden?*
4. Hebben leerlingen bepaalde problematiek waarmee rekening gehouden moet worden bij het aanbieden van groepsbegeleiding?
   - *Zijn er bepaalde problemen waarvan u denkt die geschikt zouden zijn voor groepsbegeleiding?*
   - *Zijn er bepaalde problemen waarvan u denkt die niet geschikt zouden zijn voor groepsbegeleiding?*
   - *Zijn sommige leerlingen mogelijk op sociaal gebied achtergesteld om mee te kunnen doen met groepsbegeleiding?*
   - *Hebben sommigen misschien religieuze redenen die van invloed kunnen zijn op het toepassen van groepsbegeleiding?*

DE ORGANISATIE(S)

1. In hoeverre denkt u dat uw organisatie klaar is voor het toepassen van groepsbegeleiding?
   - *Werkt u volgens een vastgestelde werkwijze, of heeft u de vrijheid om uw werkwijze zelf te bepalen? (en wat heeft uw voorkeur?)*
   - *Zijn er bepaalde personen in uw organisatie die overtuigd moeten worden om groepsbegeleiding door te voeren?*
   - *Worden medewerkers bijvoorbeeld aangemoedigd om nieuwe ideeën te bedenken?*
   - *Heeft u het wel eens met uw collega's over het aanbieden van groepsbegeleiding?*
   - *Worden medewerkers aangemoedigd om elkaar te ontmoeten en te praten over nieuwe innovaties?*
   - *Hoe ervaart u de samenwerking met de IB'er/SMW van deze school? En hoe zou u deze samenwerking het liefst zien?*
   - *Zijn er voldoende leerlingen om groepsbegeleiding aan te bieden?*
   - *(Wanneer te weinig) Hoe denkt u dat dit probleem kan worden opgelost?*

DE EXTERNE CONTEXT VOOR INNOVATIE

1. Denkt u dat het mogelijk is om binnen het huidige beleid groepsbegeleiding (op grotere schaal) aan te kunnen bieden, en wat zou u (aanvullend) nodig hebben om dit te kunnen?
2. Denkt u dat het mogelijk is om leerlingen onder te brengen bij een andere locatie wanneer er op school niet voldoende leerlingen zijn om groepsbegeleiding aan te bieden?
   - *Bijvoorbeeld een andere school of een andere instelling?*
   - *Denkt u dat leerlingen hiertoe bereidt zijn?*
3. Zijn er punten waarvan u denkt dat (mogelijk) bevorderend of juist belemmerend zijn voor het aanbieden van groepsbegeleiding?

Wilt u zelf nog iets toevoegen over de mogelijke inzet van groepsbegeleiding binnen het schoolmaatschappelijk werk?

Appendix 3: Questionnaire

1. Heb je wel eens gebruik gemaakt van het (school)maatschappelijk werk van Avedan?
   - o Ja
   - o Nee
2. Waarvoor werd je begeleid bij het (school)maatschappelijk werk van Avedan?
   - o Open vraag*
3. Hoe werd je begeleid
   - o In een groep
   - o Alleen
4. Hoe heb je dit ervaren?
   - o Heel goed
   - o Goed
   - o Niet goed, niet slecht
   - o Slecht
   - o Heel slecht
5. Wat vond je goed of slecht?
   - o Open vraag*
6. Zou je een volgende keer in een groep begeleid willen worden?
   - o Ja
   - o Nee
7. Waarom zou je **wel** mee willen doen aan groepsbegeleiding?
   Je kunt hierbij denken aan:
   - ➢ Ik leer hierdoor anderen kennen die dezelfde ervaring hebben
   - ➢ Ik leer hierdoor hoe anderen omgaan met hun ervaring
   - o Open vraag*
8. Waarom zou je NIET mee willen doen groepsbegeleiding?
   Je kunt hierbij denken aan:
   - ➢ Ik zou me niet op mijn gemak voelen om mijn ervaring te delen met anderen
   - ➢ Ik zou me in een groep niet veilig voelen
   - o Open vraag*

*Geen verplicht veld