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Getting better? – Interventions to reduce over-indebtedness among individuals and families

The aim of this scoping study review was to investigate interventions, undertaken as part of regular work, aiming to reduce the risk of over-indebtedness among individuals and families. Research questions included describing interventions, target groups and the results of evaluations, as well as investigating the support that the methods used for evaluating the results of the interventions give for determining whether they represent good practice. Eleven articles were found presenting interventions with varying target groups, intensity and duration. The methods used had the following areas of focus: economic and financial knowledge acquisition, economic skills acquisition, and emotional and psychological alleviation and enhancement in relation to economy. The results show that because of shortcomings in the designs and methods used in the evaluations of outcomes of the interventions, the results obtained cannot be considered sufficiently robust to be used to systematize and develop work with indebted individuals and families.

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1. INTRODUCTION

Households with debts exceeding what they can cope with are a substantial problem all over the world (see e.g. Bernadini & Forni, 2017; Dickerson, 2008; European Commission, 2008; Garrido et

al., 2020). There is no complete agreement on how to define the concept of over-indebtedness, but the essence of all definitions used by countries in the EU is *not being able to repay due loans and the problem being persistent* over time (European Commission, 2008). Over-indebtedness has huge monetary and psychological costs, and is related to various social problems. How high national costs are calculated to be depends on the measures used. In Sweden, with a population of 10 million, the costs for over-indebtedness has been calculated to 200 billion SEK, when including the fall in production and costs within the social security system and for health care (Ahlström, 2015). Possible causes of why households in Europe become over-indebted are financial problems such as lack of income caused by macroeconomic crises, persistent low income, poor money management, over-commitment and over-spending (European Commission, 2008, p. 22). Apart from this, health care costs are often a reason for personal bankruptcy in the USA (Emami, 2010). The problem of over-indebtedness overlaps poverty and is commonly encountered in social work (Krumer-Nevo, Gorodzeisky & Saar-Heiman, 2017; Ntsalaze and Ikhide, 2017). Within social work research there has also been an increase in attention to the topic of over-indebtedness in recent years (Callegari, Liedgren & Kullberg, 2019; Callegari, Liedgren & Kullberg, 2020; Liedgren & Kullberg, 2020).

In social work practice, frontline workers like debt counselors, care managers and social welfare officers, work with indebted individuals and families to “develop the knowledge, skills, attitudes and self-awareness needed by the client to take responsibility for decisions concerning his own economy” (Trygged, 2012, p. 248). An interesting question in relation to the work being done is “what should be considered good practice in such work?”

Within the EU this question has been answered as follows: *best practice* comprises *financial education, debt advice* and *prevention of financial exclusion* (European Commission, 2013, pp. 235–238). However, these recommendations are solely based on what stakeholders (e.g. debt advisors, indebted persons and others) consider to

be important, rather than on reviews of the research support that the mentioned interventions have. Apart from the cited report, no reviews of interventions to alleviate debt problems on an individual or family level are to be found. The Reason for this might be that over-indebtedness is a relatively new phenomenon, which in many countries started to evolve on mass scale as late as in the 1990s (Keen, 2009; Roxburgh et al., 2010).

Despite this lack of previous research, it is important to ensure that program interventions with indebted individuals and families show good results and are effective. When trying to do this it is advisable to use robust evaluation methods and adhere to commonly agreed criteria for the design and content of evaluations, regarding for instance whether the evaluation has a pretest-posttest design and uses a control group procedure (see e.g. Grinnell, Gabor & Unrau, 2011; Thyer, 1991).

The *aim* of this study is therefore to make a scoping review of interventions undertaken in ordinary work aiming to reduce indebtedness and over-indebtedness on individual or family level. In order to achieve this the following research questions are posed:

- What kinds of interventions are described in research?
- What target groups are the interventions directed toward?
- What are the results of evaluations of the interventions?
- What support do the methods used for evaluating the results give for determining whether interventions represent good practice?

2. METHOD

The literature review is a scoping study (Arksey & O'Malley, 2005). This means that it was designed to, cover and account for what has been reported in scientific publication, covering both qualitative and quantitative methods. Scoping studies are often used to determine the depth and breadth of a new research area in order to investigate the viability of a more critical appraisal of the research, as is done

with a systematic literature review. A scoping study contains five or six stages: *identifying the research question*; *identifying relevant studies*; *selecting studies*; *charting the data*; *collating, summarizing and reporting the results*, and lastly and optionally, the sixth parallel stage which includes *informing and validating the findings* (Arksey & O'Malley, 2005). While the first stage, *identifying the research question*, was based on a lack of knowledge identified by the research group in an ongoing research project, *identifying relevant studies* was done in cooperation with a skilled librarian who found effective search terms in database searches (see Table 1).

Table 1: Overview of search terms used in database searches.

Block 1	Combination	Block 2
(Financial AND (coaching OR empowerment OR teaching OR counseling OR counselling OR dependence OR therapy) OR "debt counselling" OR "debt advisory" OR "education of financial literacy" OR "Financial management")	AND	("Economic literacy" OR "Financial literacy" OR "Financial capability" OR over-indebted OR indebted OR Intervention*)

Three meta-search engines were used: Scopus, Web of Science and Ebsco Host (which includes Academic Search Elite, ERIC, PsycARTICLES, PsychINFO and Teacher Reference Center). The search was done on "title". The time frame spanned from first year published to January 2020, and the articles had to be written in English. Also, a hand-search was done in the two available key journals, *Journal of Financial Counseling and Planning* and *Journal of Financial Therapy* from 2010 (*Journal of Financial Therapy* was founded in 2010 and *Journal of Financial Counseling and Planning* was active from 1995 to November 2019). Retrieved abstracts were analyzed to assess suitability for inclusion based on the study's aim and research questions. When relevant articles were found, the reference lists were also scrutinized for additional articles, using the same search terms and inclusion and exclusion criteria.

The database search process is illustrated in Figure 1 and the final selection of articles is presented in the reference list marked with an asterisk.

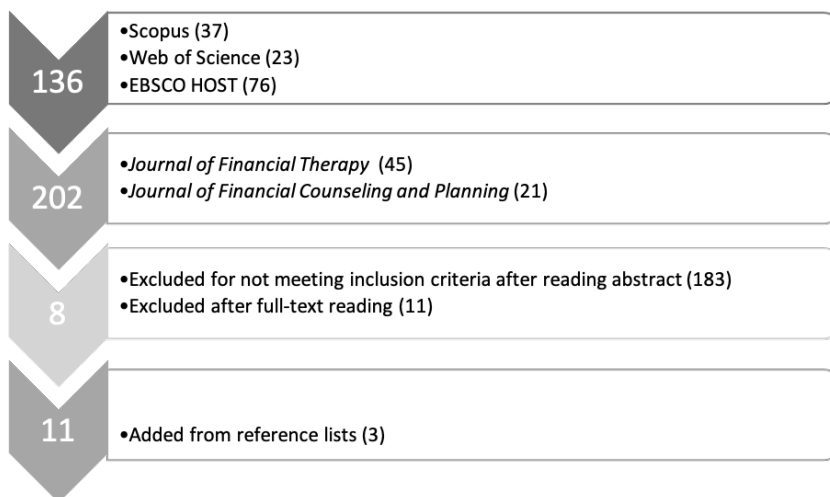


Figure 1: Schematic overview of the literature search for articles and the results for the different steps.

The initial search yielded 136 texts (including articles, conference papers and books). Of the articles found, 37 were found in Scopus, 23 in Web of Science, and 76 in EBSCO HOST. The hand-search in the *Journal of Financial Therapy* and *Journal of Financial Counseling and Planning* resulted in a total of 66 articles (45 and 21 articles respectively). In the third step *choosing the study selection*, the final inclusion criteria were formulated. In contrast to what is done in a systematic review, the criteria were formulated ad hoc as the authors became familiar with the material (Arksey & O'Malley, 2005). The final inclusion criteria were that included publications should report financial counseling techniques, have been undertaken as part of regular work, and aim to reduce over-indebtedness on individual and family level. Further, the studied interventions needed to have been tried out and evaluated. Publications were excluded if they focused on financial education for children or financial counseling and assistance related to medical treatment, and if they were theoretical

contributions or described interventions not tried out in the regular work. Altogether 183 duplicates were excluded. Additionally, after full-text reading eleven articles were found not to meet the inclusion criteria, resulting in eight articles. From the reference lists of the main selection, three further articles were added. To ensure validity regarding inclusion and exclusion, an investigator triangulation was performed, as the selection was checked by the second author (cf. Patton, 2002).

The fourth stage of a scoping study, *charting the data* was performed as a part of the analysis when the articles were read through and mapped in relation to *authors, year of publication, study location, intervention type, control-groups, duration of interventions, target populations, instructors, outcome measures and results*. In the fifth stage the *collating, summarizing and reporting* of the results was made in the results section as well as discussed in relation to research questions and knowledge gaps. In order to fulfill the sixth step, *informing and validating the findings*, the results have been scrutinized by the research group at the authors' university, as well as discussed with social workers actively working with over-indebtedness.

3. RESULTS

The articles found were published between 2008 and 2019 and concern the USA (9), Australia (1) and South Africa (1). Represented journals are *Affilia: Journal of Women and Social Work*; *Contemporary Family Therapy*, *Journal of Financial Counseling and Planning*, *Journal of Financial Therapy*, *Psychological Services*, *Social Work* and *The Journal of Consumer Affairs*. Except for *Journal of Financial Counseling and Planning* and *Journal of Financial Therapy*, which hosted three articles each, the journals were only represented by one article each.

4. TARGET GROUPS

The first of the three target groups consists of women. In Haynes et al. (2011), participants were North American women with chronic

health problems. In Franz (2016), the intervention group was North American single mothers participating in an intervention providing housing and economic and social support. In two studies the target groups were survivors of domestic violence in North America (Postmus et al., 2015) and Australia (Warren et al., 2019).

The second category consists of other groupings commonly encountered in welfare services. It consists of North American at-risk youth enrolled in educational and vocational training (Klontz et al., 2011), low income minority families in the U.S.A. (Xu, 2008), and North American men serving the last part of their prison sentences at a transitional center (Mielitz, 2018).

The third group consists of collections of individuals described as having essentially financial problems. In Klontz et al. (2008), the target group was U.S. and Canadian residents. In Huisamen and Weyers (2008), the target group was South-African police recruits. In Archuleta et al. (2015) the target group was North American university students with financial problems, and in Kim et al. (2011) the target groups was heterosexual couples reporting both relationship and financial stress.

5. INTERVENTIONS

5.1 Methods used and other characteristics

A wide variety of different methods are reported in the interventions found. The intervention in Klontz et al. (2008) consisted of education in financial planning and cash flow management combined with experiential therapy (psychodrama) with a focus on shame reduction. The intervention in Huisamen and Weyers (2008) consisted of a structured personnel capacity-building intervention included in the South African Police Service's basic training. The intervention included workshops including lectures, workbook exercises, discussions in smaller and larger groups, role playing and brainstorming. The intervention in Kim et al. (2011) consisted of a model for integrating couples therapy and financial planning techniques. The intervention in Klontz et al. (2011) consisted of financial

education using an animated story to help at risk teens understand personal economy while practicing life skills. The intervention in Haynes et al. (2011), given to women with chronic illnesses, aimed at teaching participants how to record income and expenses, determine the household's net worth and assess the possibility to receive governmental assistance. The intervention in Postmus et al. (2015), which was defined as a financial education program, aimed at providing participants with a basic vocabulary and knowledge regarding money and knowledge about basic financial processes (loan applications, filing for bankruptcy, etc.), as well as providing information to participants about how to leave an abusive relationship. The modules in the program were given by staff at shelters for domestic violence survivors. The intervention in Archuleta et al. (2015) consisted of solution-focused therapy (SFT) techniques for helping clients utilize their strengths to focus on future-oriented goals and tasks. The intervention was implemented using SFT principles and techniques within the context of five sessions of manual-based financial therapy. Between the sessions the participants were given homework tasks. The intervention in Franz (2016) consisted of a community intervention with the aim to reduce poverty. In the *Family Scholar House*, various kinds of support were given to single parents as they completed a bachelor's degree. The intervention reported in the study consisted of working with budgets and cash-flow analyses. The intervention in Mielitz et al. (2018), called *Money Management* (MM) class, was part of the reentry program for incarcerated men. The intervention had an interactive, lecture-based format that included sharing personal experiences of financial institutions, balancing checking accounts, using a budget, creating savings, and understanding and utilizing credit. The intervention in Xu (2018) consisted of a program designed to help low-income minority families obtain basic financial knowledge and take control of their finances. The program consisted of face-to-face workshops held over a period of time. The curriculum included practical techniques for deciding on spending priorities and managing debt and savings (including un-

derstanding interest rates, mortgages and credit repair). Workshops included on-site specialists giving attendees the possibility to seek advice. The workshops were given during evenings or weekends, and concurrent financial workshops were offered to participants' school-aged children. The intervention in Warren et al. (2019) consisted of financial literacy training given in a group format to women at three shelters, and included three modules. The first module focused on economic abuse and the participants' relationship to money. The second and third modules focused on developing participants' skills and knowledge about money management. The intervention was specially adapted to accommodate minority groups. A Financial First Aid document was also developed to help the staff identify and respond to economic abuse.

Six of the eleven interventions described were pilot-projects. Two interventions had been "empirically validated", meaning that they had been tested and shown to have significant positive results, were referred to in at least one scientific, peer-reviewed publication. Of the two validated interventions, the first concerns the study by Archuleta et al (2015) on solution-focused financial therapy. This validation had been done of the frame-concept solution-focused therapy. The other article is Mielitz et al. (2018), which had shown significant positive results in a pretest-posttest designed evaluation.

The duration and intensity of the interventions varied significantly. The shortest ones lasted only two hours (Mielitz et al., 2018) or six hours (Huisamen & Weyers, 2008) during one day. Intermediate-length interventions comprised three to five sessions and lasted from 45 minutes to 1 hour 45 minutes (Archuleta et al., 2015; Kim et al., 2011; Klontz et al., 2011). The longest interventions lasted 22 weeks (Haynes et al., 2011) up to four years at Family Scholar House (Franz, 2016). Sample sizes for most studies were small (ranging from 8 to 92). However, three studies had sample sizes exceeding 100 participants.

5.2 Categories of interventions

The found interventions can be divided into three main categories. The first is *economic and financial knowledge acquisition*, the second is *economic skills acquisition*, and the third focus on *emotional and psychological alleviation and enhancement in relation to economy*. The category economic and financial knowledge acquisition includes different kinds of educational programs focusing on theoretical knowledge on financial management. All interventions had aims to cover this aspect and example of this would be teaching on economic planning, parenthood and economy, credits, interest, mortgages, savings and the interconnection between the wellbeing of the relationship and domestic economy.

The category economic skills acquisition focuses on subjects included in traditional financial counseling (Archuleta et al., 2015), learning to record income and expenses (Franz, 2016; Haynes et al., 2011), understanding management behavior (Kim et al., 2011), realizing life skills (Klontz et al., 2011; Warren et al., 2019), mastering credit basics, building financial foundations and creating budget strategies (Mielitz et al., 2018; Postmus et al., 2015), as well as adopting good habits (Xu, 2018). Finally the category emotional and psychological alleviation and enhancement in relation to economy involves being encouraged and empowered to make changes (Archuleta et al., 2015), acquiring knowledge about emotional and psychological aspects of household economy (Franz, 2016), understanding the emotional and psychological aspects of couples' financial and relationship well-being (Kim et al., 2011), working with shame reduction (see e.g. Klontz et al., 2008), sharing experiences on financial issues (Mielitz et al., 2018) and understanding financial abuse (Postmus et al., 2015; Warren et al., 2019).

5.3 Instructors

The instructors leading the implementations differed basically in four ways. First, in three interventions the instructors were not part of the ordinary staff. In Klontz et al. (2008) the program was led by therapists with extensive experience of the described interventions.

In Kim et al. (2011) the intervention was led by teams consisting of two therapists and one financial planner, and in Haynes et al. (2011) the intervention was led by “experts” in their field.

Second, in two of the studies the intervention instructors were ordinary staff and the intervention was part of the ordinary program at the workplace. In Huisamen and Weyers (2008), a capacity-building intervention for police recruits was led by social workers, and in Mielitz et al. (2018), a money-management class for incarcerated men was led (and also evaluated) by the article’s first author, an assistant professor of family finance planning.

Third, in four of the articles the intervention was led by ordinary staff specially trained for the intervention (Franz, 2016; Klontz et al., 2011; Postmus et al., 2015; Warren et al., 2019).

Fourth, in two of the articles the interventions were led by trained students (Archuleta et al.; 2015; Xu, 2018).

6. DESIGNS OF, METHODS USED AND RESULTS OF THE EVALUATIONS

6.1 Instruments

A pretest-posttest design for the evaluation of the intervention is reported in nine articles (Klontz et al., 2008; Kim et al., 2011; Klontz et al., 2011; Haynes et al., 2011; Archuleta et al., 2015; Mielitz et al., 2018; Xu, 2018; Warren et al., 2019; and Postmus et al., 2015). Of these nine interventions, four also included a second posttest two or three month after the first posttest (Archuleta et al., 2015; Klontz et al., 2008; and Mielitz et al., 2018; Postmus et al., 2015). Postmus et al. (2015) included a third posttest as well. A control group procedure was included in four of the interventions (Haynes et al., 2011; Huisamen & Weyers, 2008; Klontz et al., 2011; Postmus et al., 2015), of which only three had a pretest-posttest design.

Evaluation instruments used, varied in scope and complexity (see table 3). Haynes et al. (2011) used an instrument that only contained five multiple-choice questions on financial concepts. Franz (2016) included a quality-of-life survey combined with asking “financial

empowerment questions” (p. 44) in focus-group discussions. Four studies do not report the use of any validated evaluation instrument (Haynes et al., 2011; Klontz et al., 2011; Mielitz et al., 2018; Xu, 2018). Haynes et al. (2011), Klontz et al., (2011) and Xu (2018) report having used a non-validated instrument.

Interestingly, only one of the instruments used was used in more than one intervention (the InCharge Financial Distress / Financial Well-Being Scale, IFDFW). The instruments can be divided into those measuring *health aspects*, *financial stress* and *financial knowledge* respectively. The instruments used are not in total coherence with the interventions’ foci, which might be a concession taken when using validated evaluation instruments.

Table 2: Validated instruments used when evaluating results.

Instrument	Used in
Brief Symptom Inventory (BSI)	Klontz et al. (2008)
Health-related quality of life questions	Franz (2016)
Facilitation Assessment Scale	Huisamen & Weyers (2009)
OQ45.2 Outcome Questionnaire.	Archuleta et al. (2015)
Patient Health Questionnaire (PHQ-9).	Archuleta et al. (2015)
InCharge Financial Distress/Financial Wellness Scale (IFDFW)	Kim et al. (2011)
Financial Strain Survey	Postmus et al. (2015)
SEA-12	Warren et al. (2019)
InCharge Financial Distress/ Financial Well-Being (IFDFW) Scale	Archuleta et al. (2015)
Financial Behaviors	Archuleta et al. (2015)
Money Attitude Scale (MAS)	Klontz et al. (2008)
Financial Knowledge	Archuleta et al. (2015)
Measuring financial strain	Warren et al. (2019)

6.2 Treatment fidelity and user involvement/perspective

The quality of the implementation of the interventions is sparsely discussed. Only in two articles is, for instance, treatment fidelity discussed. In the study by Kim et al. (2011), a protocol was used as

a guideline for the instructors to ensure treatment fidelity, and in Archuleta et al. (2015) a treatment manual was used, and the treatment fidelity was confirmed by an independent observer. None of the articles refer to or discuss user involvement or a user perspective.

6.3 Results of the interventions

All the outcomes accounted for in the articles are classified as belonging to one or more of three overarching areas (see Table 3 for an overview): The first area, *economic and financial knowledge acquisition*, includes improving attitudes towards money and spending as well as increased financial knowledge (Archuleta et al., 2015; Franz, 2016; Haynes et al., 2011; Huisamen & Weyers, 2008; Kim et al., 2011; Klontz et al., 2011; Mielitz et al., 2018; Postmus et al., 2015; Xu, 2018).

The second area *improvement in economic skills*, includes changing money behavior (Archuleta et al., 2015; Franz, 2016; Haynes et al., 2011; Huisamen & Weyers, 2008; Kim et al., 2011; Klontz et al., 2011; 2018; Postmus et al., 2015; Xu, 2018), improving money management skills (Klontz et al., 2011), increasing locus of control (Kim et al., 2011), and increasing saving (Franz, 2016; Xu, 2018).

The third area *emotional and psychological alleviation and enhancement in relation to economy*, includes mental stress reduction (Archuleta et al.; 2015; Franz, 2016; Klontz et al., 2008; Postmus et al., 2015; Warren et al., 2019), improvement in couples relationships (Kim et al., 2011), and increased confidence in dealing with financial matters (Klontz et al., 2011).

Table 3: Areas of focus of the implemented interventions and their outcomes.

	Economic knowledge		Economic skills		Emotional alleviation	
	Inter-vention	Out-come	Inter-vention	Out-come	Inter-vention	Out-come
Klontz et al. (2008)	X	-	X	X	X	X
Huisamen & Weyers (2008)	X	X	-	X	-	-
Kim et al. (2011)	X	X	X	X	X	X
Klontz et al. (2011)	X	X	X	X	-	X
Haynes et al. (2011)	X	X	X	-	-	-
Postmus et al. (2015)	X	X	X	X	X	X
Archuleta et al. (2015)	X	X	X	X	X	X
Franz (2016)	X	X	X	X	X	X
Mielitz (2018)	X	X	X	-	X	-
Xu (2018)	X	X	X	X	-	-
Warren et al. (2019)	X	-	X	-	X	X
Sum	11	9	10	8	7	7

All interventions focused on increasing the participants' knowledge, and all but two (Klontz et al., 2008; Warren et al., 2019) showed improvement among the participants in this respect. All but one of the interventions (Huisamen & Weyers, 2008) focused on increasing economic skills. All but three (Haynes et al., 2011; Mielitz et al., 2018; Warren et al., 2019) demonstrate positive results in this respect. However also Huisamen and Weyers (2008) report positive results in this respect without having intended to improve this aspect. Finally, seven of the interventions aimed at supporting the

participants emotionally and psychologically in relation to economy. Six of these showed positive results (Archuleta et al., 2015; Frantz, 2016; Kim et al., 2011; Klontz et al., 2008; Postmus et al., 2015; Warren et al., 2019), while Mielitz et al. (2018) did not show any positive results in this regards, and Klontz et al. (2011) did show positive results without having intended to improve this aspect.

6.4 The quality of the evaluations of the interventions

In this study we have limited the analysis of what support the evaluations give for suggesting that the interventions represent good practice to some of the most important criteria that are commonly suggested and referred to when evaluating quality and outcomes of social work interventions (see e.g. Grinnell; Gabor & Unrau, 2011; Thyer, 1991). These criteria are: 1. Whether treatment fidelity was sought to be secured and is discussed; 2. If validated instruments were used to evaluate the intervention; 3. If a pretest-posttest design was done; 4. If a control-group procedure was used; 5. If possible changes were proven to last over time (in multiple posttests); and finally 6. If the intervention showed any significant change among the participants (see Table 4).

Table 4: Overview of the support the evaluations give for indicating that the interventions represent good practice.

	Treat-ment fidelity	Validated evaluation instruments	Pretest-posttest	Control group	Changes proven over time	Significant results	Sum
Klontz et al. (2008)	-	X	X **	-	X	X	4
Archuleta et al. (2015)	X	X	X **	-	-	X	4
Huisamen & Weyers (2008)	-	X	-	X	X	-	3
Kim et al. (2011)	-	X	X	-	-	-	2
Postmus et al. (2015)	-	X	X ***	X	X	X	5
Warren et al. (2019)	-	X	X	-	-	X	3
Haynes et al. (2011)	-	-	X	X	-	-	2
Klontz et al. (2011)	-	-	X	X	-	-	2
Franz (2016)	-	X	-	-	-	-	1
Mielitz et al. (2018)	-	-	X	-	-	-	1
Xu (2018)	-	-	X *	-	-	-	1
Sum	1	7	9	4	3	4	-

* Posttest data were collected at the end of the intervention and two months after.

** Posttest data were collected at the end of the intervention and three months after.

*** Posttest data were collected on four occasions, at the end of the intervention and over a period of 14 months after.

Table 4 shows that treatment fidelity was checked in only one of the studies (Archuleta et al., 2015). In one more (Kim et al., 2011), treatment fidelity is mentioned without any further account of how it was checked. Validated instruments (for the evaluation of the interven-

tions) were used in seven of the interventions (Archuleta et al., 2015; Franz, 2016; Huisamen & Weyers, 2008; Kim et al., 2011; Klontz et al., 2008; Postmus et al., 2015; Warren et al., 2019). Furthermore, a pretest-posttest design was used for the evaluation in nine of the eleven cases. Three of the evaluations that used a pretest-posttest design (Haynes et al., 2011; Klontz et al., 2011; Postmus et al., 2015) and one of the others (Huisamen & Weyers, 2008) used a control-group approach. The results concerning whether the possible changes among participants were tracked over time, show that multiple posttests were done in four of the studies. Archuleta et al. (2015), Klontz et al. (2008), Postmus et al. (2015), and Xu (2018) report two posttest measurements being made, while Postmus et al. (2015) also carried out a third posttest. Long-term effect are reported in three articles (Huisamen & Weyers, 2008; Klontz et al., 2008; Postmus et al., 2015), however the reported long-term effect in Huisamen and Weyers (2008) was not estimated through a test, but was obtained from focus-group interviews. Finally, Table 4 also shows that significant results are only presented in four of the studies (Archuleta et al., 2015; Klontz et al., 2008; Postmus et al. 2015, and Warren et al., 2019).

7. DISCUSSION

This scoping study review of interventions undertaken in regular work that aim to reduce over-indebtedness on individual or family level has focused on describing the interventions that were done and the results of subsequent evaluations, and what support the evaluations offer for determining whether the interventions represent good practice.

The results show that the target groups for gender (male and female), social status (single and married) and age (19–60+ years) varied significantly. Target groups represented both potentially less vulnerable individual and families (such as married couples without any known personal problems) and people affected by different types

of social problems including economic problems (such as female survivors of domestic violence and incarcerated men).

The results also show that more than half (6) of the studied interventions were pilot-projects and that just a few (2) of the interventions had been empirically validated (e.g. tested in other circumstances and shown to contribute to significant positive change for participants in important variables) and reported in peer-reviewed scientific publications before the implementation of the study. The studied interventions varied in intensity and duration, from lasting for 2–6 hours on a single day to continuing on a periodical basis for up to four years.

The interventions were categorized as *economic and financial knowledge acquisition*, *economic skills acquisition*, and *emotional and psychological alleviation and enhancement in relation to economy*. The review shows that in most cases the intended outcomes were reached, which would indicate that the interventions were successful. However, in as many as five cases, the evaluation of outcomes was carried out with non-validated evaluation instrument.

The examination of whether the evaluations of the interventions provide support for determining whether the interventions represent good practice shows that only one of the evaluations fulfilled more than five of the six quality criteria used to describe the design and methods used to evaluate the results of interventions, and the rest fulfilled four or fewer. We therefore suggest that the designs and methods used for evaluating the results do not give any strong scientific support in favor of the interventions representing good practice, but rather the opposite.

Furthermore, few of the interventions were empirically validated; some of them consisted of brief interventions of short duration, and non-validated instruments were used to validate outcomes in a significant number of the evaluations of outcomes. When taking all these aspects in consideration it becomes apparent that the studies hardly contribute particularly robust results that can be used to systematize and develop the work with indebted individuals and families.

The conclusion of the study is therefore that when it comes to good practice in work with indebted individuals and families, the existing scientific support for frontline workers seems to be quite weak. The overview thus highlights an existing knowledge gap and a need for quality development in implementing and evaluating the work done in the area.

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