

Child Protection Clients Designing the Services they Receive: An Idea from Practice

By Gary C. Dumbrill and Sarah Maiter

Introduction

Why not ask parents receiving child protection intervention to help design the services they receive? Current practice at Children's Aid Societies is largely based on solution-focused methods which regard parents as having an expert understanding of their own needs (Berg, 1994; Corcoran, 1999; Weakland & Jordan, 1990). If parents are expert evaluators of their own needs, does it not follow that they must also be expert evaluators of services designed to meet those needs? Intrigued by this question, the authors conducted a study at the Ontario Children's Aid Society at which they were employed. This paper details the results of that study, which was intended to test the potential of parents to both evaluate services they receive, as well as assist in the design of such services.

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This paper has two primary purposes. First, it demonstrates the viability of asking clients to help evaluate and design services. The paper details insights from parents about receiving child protection intervention and outlines their recommendations for improving services. Parents' suggestions for improving service are logical, well thought out and realistic. This paper also demonstrates how direct service workers can engage in research processes to develop and test their ideas. It is shown how the authors knew very little about formal research methods when they initiated this project, yet the curiosity and analytical skills employed in everyday practice provided a basis for conducting research and developing knowledge crucial to the field.

Theoretical Foundations: Client Expertise

The 1990s saw a thrust in child protection work becoming more collaborative with clients, particularly in the area of case planning (Burford & Pennell, 1995; Callahan, Field, Hubberstey, & Wharf, 1998; Callahan & Lumb, 1995; Corby, Millar, & Young, 1996). In Ontario, solution focused approaches were the primary means of achieving such collaboration, with one key

technique being the "miracle question". The clients are asked to imagine a miracle to cure the problem that brought them to the attention of the child protection agency. This miracle, however, occurs when everyone is asleep and therefore nobody knows that it has happened. Clients are then asked to imagine waking up, and to describe the first sign that would tell them the miracle has

occurred that caused their problem to disappear overnight. In order to answer this question, clients must visualize life without the problem that brought them to the agency. Once clients begin to describe the "solution picture," the social worker and client can then start to construct ways of making this solution become real. The strength of the miracle question is that it allows clients to identify solutions that make sense

to them in the context of their family, culture and community.

Solution-focused methods in child protection practice have limitations. Parents who have seriously abused their children may envision the miracle of the "disappearing social worker". This would allow them to be left unsupervised with their children—a potentially dangerous situation. Yet collaboration with clients does not mean that workers have to comply with all client wishes. A solution-focused child protection worker who is being wished away by a client's miracle would respond by asking, "...what would be the first small sign I will notice that will tell me a miracle has happened so that I can go away?" Such conversations set the stage for meaningful collaboration between clients and workers in forming goals that both desire.

Although solution focused ideas are currently used with child protection clients, the implications of these ideas has not yet been fully explored. The authors began to recognize that if child protection clients are experts on their own needs, they must also be experts regarding the services presently designed to meet these needs. If child protection clients can collaborate with

workers to co-construct casework solutions to their individual problems, surely they can also collaborate with workers in co-developing programs to address such problems. While there has been no previous theoretical link between solution-focused casework with clients and having clients help evaluate and design programs on a broader level, the idea of clients evaluating and helping design the services they receive is not new. Empowerment literature suggests that clients understand their needs and experiences better than anyone else and should be involved in directly shaping the services they receive (Lord & Hutchison, 1993; Whitmore & Kerans, 1988). Consequently, the authors decided to test the viability of child protection clients evaluating and making suggestions to improve the services they receive.

Design and Methodology

The study took place at a medium size Ontario Children's Aid Society where the authors practiced. The authors asked parents about their experiences of child protection intervention and for recommendations to improve such service.

Only parents whose cases were closed were invited to participate in the research. Parents actively receiving services were not included in the study because of the concerns that they would view any negative feedback they gave to the authors as having the potential to impact their case. Eight parents participated; all were involved with child protection services for alleged or verified physical abuse or neglect. In addition, all eight parents had a child (or children) admitted into care when their files were open. Sampling purposively enabled the authors to recruit parents who had been in conflict with the agency in order to provide a stronger test of

the ability of parents to be constructive in helping to develop services.

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interviewed, however, asked the researchers more questions than they were able to ask her. This parent's questions were mainly personal in nature, about the researchers' home life, children, and families. These questions came as a surprise and unmasked the assumptions with which the authors approached the project. The researchers assumed that in order to develop knowledge they would ask the questions and the parents would answer them. Research was not "supposed" to involve

the participant's asking more questions than the researchers, especially questions of a personal nature. This parent's behaviour caused the researchers to begin to wonder what gave them the right to consider their questions more important than the parent's and they recalled feminist arguments that suggest interview guides are problematic because "the person being interviewed has a passive role in adapting to the definition of the situation offered by the person doing the interviewing" (Oakley, 1981, p.35) and that "the goal of finding out about people through interviewing is best achieved when the relationship of interviewer and interviewee is non-hierarchical and when the interviewer is prepared to invest his or her own personal identity in the relationship" (Oakley, 1981. p. 41)

With this feminist perspective in mind, the researchers began to answer the parent's questions. In doing so, they intuitively started to

discover a way of researching with parents based on similar collaboration and co-construction ideals to their solution-focused practice. This approach is known as “co-researching,” a perspective in which knowledge is constructed with, rather than about, those being researched (Moureau & Whitmore, 1995). From this beginning, a non-hierarchical relationship developed with parents participating in the research and each parent was viewed not as a subject, but as a partner who was given the opportunity to become involved in as much or as little of the research process as he or she desired. Parents began to see this project as their own, with one parent in particular spending considerable time assisting in the process. She interviewed other parents, analyzed findings and co-presented conclusions of the research at social work conferences in Canada and the United States.

Findings

Even though workers had regarded each of the parents participating in the project as “resistant” to intervention, each parent told researchers that they had been in need of child protection services. All candidly discussed their experiences and offered constructive advice about the ways services could be more effectively delivered to clients like themselves.

Parents had three suggestions for improving service: they wanted workers to listen more; they wanted to be given opportunities to make choices and be more involved in case planning; and they wanted to be better informed by workers. Parents integrated these recommendations into a model that they proposed be used by workers when bringing children into care.

Listen More

Parents complained that they were not heard or understood by workers. An example is a couple

that called child protection services several times because their son was becoming increasingly out of control. It was not until the father, reacting in

frustration, threatened to harm his son that the agency responded. These parents had ideas about how their son might be helped; yet they felt that the child protection worker did not give them an opportunity

to share these ideas. The parents speculated that their frustration was interpreted as hostility, which may have caused the worker to shy away from collaborating with them. As a result, plans were formulated and acted upon without their input after their son was taken into care.

Even when parent’s opinions were sought and heard by workers, they were not always understood. One mother shared that the only way she could obtain help for her son’s mental health needs was to “abandon” him at the child protection agency, thereby forcing them to admit him into care and eventually into a residential treatment facility. The agency had viewed this mother as callous by removing herself from the necessity of caring for her troubled teen. Yet, rather than a cold and abandoning parent, this mother had acted in desperation to force the child welfare system to help her son.

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Based on these and similar experiences, parents recommended that workers listen more carefully to what each parent had to say. In addition to listening carefully, workers needed to take the time to more fully grasp a parent’s perspectives and motives. The parents emphasized that even though they had made mistakes in the ways they cared for their

children, this did not mean they were not committed to doing the best they could for their children. Consequently, workers needed to not only understand this commitment, but also

fully tap the potential when it was present.

Choice and Participation

During the research interviews, parents spoke of being denied opportunities to make choices in any areas of their children's lives after they were admitted into care. These included, but were not limited to: selecting their children's school courses, having contact with their children's teachers, or purchasing their children's clothing. Parents expressed a deep interest in having these seemingly minor tasks remain their responsibility.

Upon reflection, it was easy to see why workers remove these opportunities from parents; child protection services often deal with hostile and volatile parents who have difficulty in being involved with their children in a constructive way. As a result, "standard operating procedure" denies a parent choice and participation unless circumstances exist that allows such opportunities to occur. These situations, however, are usually exceptions to the rule, as workers with high caseloads often overlook these opportunities. Parents recommended, therefore, that standard operating procedure be reversed to automatically allow full parental participation in these activities unless exceptional circumstances existed to preclude this.

Keep Parents Informed

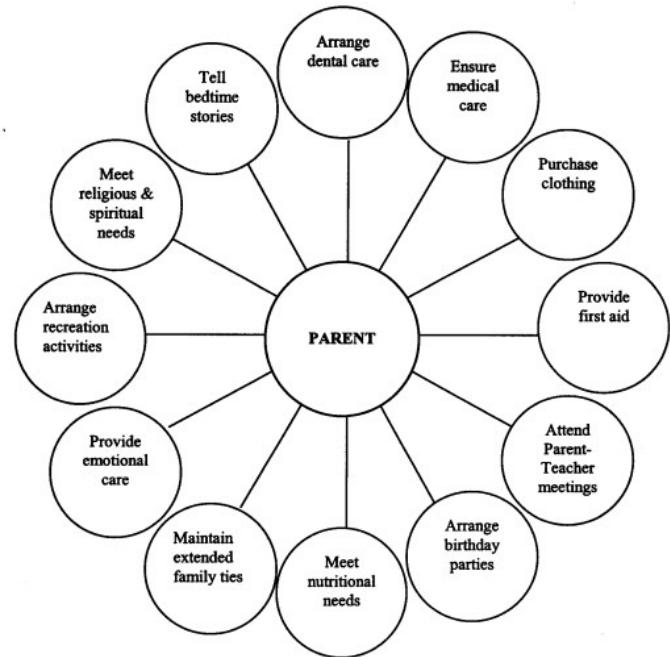
All the parents felt that they were inadequately informed about issues relating to their cases, and therefore recommended that workers make sharing information a priority. For example, a mother explained how a worker gave her copies of court papers that outlined all the mistakes the mother had made. Left alone with this information, she read over the papers every night and cried. The mother suggested it would have been better to give her a written plan detailing how she could work to overcome these problems. This would then allow her to focus on constructive solutions, as opposed to ruminating over mistakes. While it was compulsory to give parents copies of court papers, it was against agency policy to provide them with copies of the plans written in casework files. In this mother's case, such written plans did exist, and would have been very useful in guiding her towards improving her situation. Consequently,

parents recommend that copies of all written information and plans relating to their case be given to them as a matter of course (except for any confidential information in their files regarding third parties).

Services Designed by Parents

Parents developed a way to modify service delivery and pay attention to the above issues when children were admitted into care. The model, shown in Figure 1, centers on the functions of parenting.

Figure 1
Tasks of Parenting
*(for a larger copy, see also attachment
t the end of article)*



Parents stated that to be understood by workers, they needed to be seen as "parents." They needed to be understood, in most respects, as having the same feelings, hopes and worries as any other parent who juggles the tasks shown in Figure 1. In order to develop this understanding, parents suggested that before admitting a child into care, workers create with them a diagram similar to Figure 1. Doing so would allow the parent and worker to map together the specific role they

have been playing as a parent. Although many of the tasks shown in the figure would be the same for any parent, each parent would have their own unique way of managing their responsibilities, resulting in a slightly different map for each client. While this process is designed to help the worker understand the parent, workers might also use this diagram to illustrate to parents their concerns about tasks that have not been fulfilled by the parent.

Once the map is completed, workers should strive to maintain the parent in the center of as many of the existing parenting tasks as possible. Indeed, unless a client has failed in all areas of parenting, it makes sense to allow them to continue to perform those tasks they do well. In fact, doing so might actually reduce the overall stress on workers. In particular, the days immediately following an admission into care involve tasks such as taking the child to a medical exam and registering the child in her/his new school. In addition, the worker also needs to arrange access visits. In many instances, parents who do not require supervised access could perform these and similar instrumental tasks. In the process, parents could potentially have a more meaningful and productive access visit than the traditional office setting, or worse, trips to the local McDonald's

Parents contended that not maintaining their involvement in as many of the above tasks as possible was a counter productive casework strategy. Indeed, it makes little sense to sever healthy connections they have with their children in the process of repairing unhealthy ones; a process parents contended was analogous to a physician amputating a leg to set a broken femur. One mother spoke of how difficult it was for her to have parenting responsibility removed when her children came into care. The consequent lack of "parenting practice" meant that when her children

returned home, she had to re-learn how to be a parent again.

The above model for admission of children into care not only makes clinical sense, but also addresses the concerns parents had about child protection intervention. It ensures that workers gain a better understanding of parents, and it enables parents to be given ways to remain involved with their children in care. It logically follows that parents who are involved in these processes will also remain better informed about what is occurring with their children.

Conclusions

Unless clients have failed in all areas of parenting, it makes sense to allow them to continue to perform those tasks they do well. In fact, doing so might actually reduce the overall stress on workers.

The above research reveals the potential of involving clients in evaluating and helping design the services they receive. Parent's recommendations were logical, well thought out, made clinical sense, and would clearly improve the way services are delivered. The benefits of parental involvement in program planning became so evident through this research, that the agency where the project was conducted asked a parent who had been involved in the research to sit on a

committee restructuring the agency foster care system. A parent was also invited to become a member of the Program and Services Committee of the agency's Board of Directors.

In addition to showing the viability of clients helping develop services, this project also shows the importance of workers involved in direct service undertaking research. Workers can draw on the same curiosity, imagination, and openness they use in their casework to conduct research and to develop knowledge that has enormous implications for practice. Indeed, research undertaken or initiated by those in direct practice is particularly valuable because as shown above, ideas emerge from the realities of everyday practice, and this allows findings to be seamlessly incorporated into the ways services are delivered.

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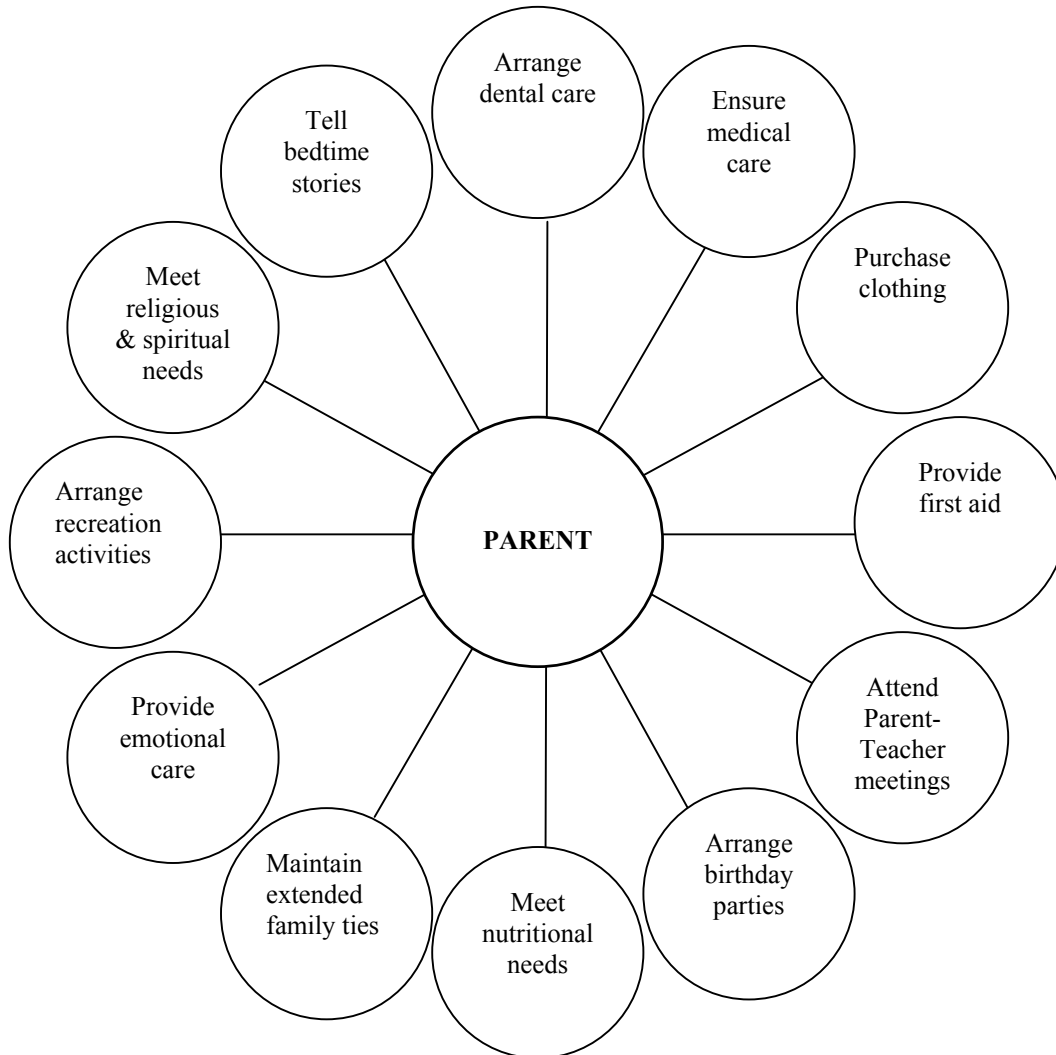
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Figure 1

Select Tasks of Parenting



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