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**Direct work and Home Supervision Requirements:
A Qualitative Study exploring experiences of direct
work from the perspectives of children,
young people, and social workers**

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Doctor of Philosophy**

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Abstract

There is renewed interest in the role that direct work and relationship-based practice does, should, or could play, in social work practice with children and young people. This study used a qualitative approach to explore day-to-day direct work with children and young people who are 'looked after' at home, from the perspectives of children, social workers and those supervising practice. The thesis explores the meanings ascribed to direct work, and identifies factors which enable direct work, and those which act as barriers. The research was undertaken in Scotland, and although the legislation, policy, and guidance underpinning practice differ from other jurisdictions, the messages to emerge are relevant across the UK and beyond. The study found that despite the existence of barriers, direct work which is characterised as meaningful by children, young people and professionals does happen; and that the relationships formed between children and social workers are both a precursor to and an outcome of direct work. A core theme is that although individual relationships are central, the everyday encounters between children and their social workers need to be understood and situated within the personal, professional and structural contexts in which they take place.

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Chapter One: Introduction

Home Supervision and direct work: research questions

Children and young people may encounter social workers for a variety of reasons, at different times in their lives, and in a range of settings. This research explores experiences of direct social work contact while children and young people are subject to Home Supervision Requirements under s70 Children (Scotland) Act 1995 from the perspectives of children, social workers and those involved in supervising practice. Through in-depth interviews, the research considers what aspects of direct work children and young people experience as meaningful, and what meaning and value are ascribed to direct work by practitioners and managers. The research had three overarching questions:

- What direct work happens with children and young people subject to Home Supervision Requirements?
- What are the purposes and meanings ascribed to direct work?
- What contributes to the amount and quality of direct work undertaken?

In this introductory chapter, I aim to do four things: First, embed the thesis in the current legislative and policy context, and in the process make clear the answer to the question 'Why now?' for this research project; second, start to position the research reflexively in relation to my own practice and academic background within social work; third, sketch out the theoretical and methodological basis for the project; and, finally, introduce the participants and the structure of the thesis as a whole.

Framing the thesis

The legislation and policy underpinning social work intervention with children and young people¹ varies between different parts of the United Kingdom. In Scotland, the roles and responsibilities of social workers were outlined by *Changing Lives: Report of the 21st Century Social Work Review* (Scottish Executive 2006a). This highlighted the need to balance “care” and “control” (p27), and specified that statutory social workers have “reserved functions” to “assess, plan, and manage the delivery of care and safeguard the wellbeing of the most vulnerable adults and children” (2006, p30). The manner in which social workers discharge those responsibilities is, in turn, influenced by legislation defining what social workers “may” or “must” do. At the time of the research, the primary legislation underpinning social work practice with children and their families was the Children (Scotland) Act 1995 which replaced the Social Work Scotland Act (1968).

The Social Work Scotland Act (1968) and the Children (Scotland) Act 1995 set out that where there are concerns that a child’s welfare may be compromised then s//he can be referred to the Reporter to the Children’s Hearing. The Hearing is based on the principle that whether a child has offended or been offended against, his/her welfare is the paramount consideration. Stafford and Vincent (2008), Vincent (2010), and Stafford *et al.* (2012) provide a clear summary of the system and the value base therein.

¹ For brevity, throughout the thesis ‘children and young people’ will generally be shortened to ‘children’.

One option open to a Hearing is to place a child on Home Supervision under s70 of the Children (Scotland) Act 1995 (hereafter referred to as CSA), the primary legislation in place when the research was conducted. This means that social workers have a statutory responsibility to provide a service to the child and his/her family, and although the child remains at home s/he is in effect 'looked after'. The Children's Hearing has to review a supervision requirement at least annually; children can request a review after three months; and social workers can request one where they think it is in a child's interest to terminate or vary the requirement. In addition to the Hearing reviewing the order, the regulations stipulate that a child on Home Supervision should have a care plan and this should be the subject of review by the local authority. Following the introduction in July 2013 of the Children's Hearings (Scotland) Act 2011 (CHSA), the term 'Compulsory Supervision Order' will be applied whether a child is looked after at home or looked after and accommodated in foster care, kinship care, or residential care. As the changes were embedded after my data was collected, I will refer to 'Home Supervision' rather than Compulsory Supervision Order throughout the thesis as this reflects the terminology and legislation in place at the time of the fieldwork. Although there are some alterations to the grounds of referral, the core aspects associated with being 'looked after at home' are largely unaltered. At the time of the research, of 16,231 children who were looked after, 5,476 were subject to Home Supervision Requirements (Looked After Statistics, Scottish Government, 2013).

Running parallel to the Children's Hearing is the Child Protection Register (CPR). All local authorities are responsible for maintaining a central register of children who are the subject of an inter-agency child protection plan. Unlike supervision requirements, the CPR has no legal status but alerts professionals that there are sufficient concerns about a child to warrant a child protection plan. Children who are subject to Home Supervision may also be on the register, while others may be on the register, but not subject to Home Supervision, or vice versa. In addition to the National Guidance provided by the Scottish Government (2010 updated 2014), local authorities have developed their own guidance identifying how often children on the CPR should be seen by professionals. In Chapter Six, I consider how such guidance influences the way practitioners and organisations prioritise time.

There is existing research exploring children's experiences of social work and social work processes. While some focuses on children who have formal social work contact while at home (Murray *et al.* 2002; Gadda 2012; Henderson and Whitehead 2013), this 'group' of children have participated in far less research than children in foster care or residential care. As a consequence, despite the number of children involved, it has been identified that their needs and experiences remain comparatively undocumented (Tarara and Daniel 2007; Holland 2010). This relative gap in research about the experiences of children who are looked after at home influenced the decision to explore children and social workers' experiences in the context of Home Supervision Requirements.

There is a body of work which explores children's experiences of being involved (or not) in decision making, for example Child Protection Case Conferences, Hearings, Looked After Children (LAC) reviews (Thomas and O'Kane 1998, 2000; Leeson 2007; Tarapdar 2009; SCRA 2009; Bruce 2014). However, there is currently far less research on what happens during the day-to-day contact children have with their social workers (Ferguson 2011, 2014). While experiences of decision-making forums emerge in this study, the primary focus is this everyday direct contact. For the Hearing to place a child on Home Supervision s/he must require compulsory measures, and this necessarily indicates that there should be some locus for direct work. This study considers what direct work takes place, where, when, why, how and by whom. Specifically, it explores how children and practitioners view direct work, including what constitutes direct work, and whether particular aspects are experienced as meaningful by participants.

The role of social workers and the skills needed are subject to debate in policy, inquiry reports, and academic literature. One facet of this debate is the part direct work could or should play in statutory social work practice.

Although policy documents include statements which refer directly or obliquely to the notion of direct work, they omit to define what this might include. In Scotland, *Changing Lives: Report of the 21st Century Social Work Review*, (Scottish Executive 2006a) employs the term 'casework' rather than direct work, but does not specify what this might include. In England, the Social Work Task Force (DCSF 2009) was established after the death of Peter Connolly to consider the social work role. In their survey, undertaken for the

Task Force, of how social workers spend their time, Baginsky *et al.* (2010) refer to “face to face direct work”, but identify what this excludes, rather than what it includes. Munro (2011, p.87) makes the statement that “*above all* (my italics) it is important to work directly with children and young people”. Nevertheless, even within the final report, examples of direct work are limited.

Despite this lack of clarity as to what constitutes direct work, the overt policy messages are that direct work is valued. However, inquiry reports and research have identified a dissonance between policy statements valuing direct work, and practice (Laming 2003, 2009; Brandon *et al.* 2008a; Holmes *et al.* 2009). Partly in response to a parallel policy drive for quality assurance and increased accountability, there has been an increase in the role audit and information technology (IT) play in social work. There is some suggestion that as a consequence organisations, and practitioners within organisations, are focusing on more measurable outputs, rather than the less measurable and more ephemeral aspects of practice, including direct work (Bell 2002; Munro 2004; Calder 2008; Turnbull and Fattore 2008; White 2008; Burton and van de Broek 2009). There appears, then, to be a possible tension between different aspects of policy and the role of direct work in practice. By exploring the understandings that different participants have of direct work, the thesis contributes to this debate by illuminating what direct work includes and its place within social work practice with, and on behalf of, children.

One interesting crossover to emerge is that as policy and practice appear to have become more concerned with what is measurable, much of the existing

research on how social workers engage with children has also focused on areas of practice which are more measurable, for instance looking at how children's views are represented in decision-making forums. This means that when practitioners are utilising research to help them engage with children, making links between research and their practice, the implicit and presumably unintended message may be that direct work only takes place at times of decision making. This research refocuses attention on day-to-day direct work where the outcome may be less tangible and, therefore, less easy to measure.

Social workers are usually based within teams and are supervised by senior social workers or team managers (the role and title vary across different local authorities). Before promotion to a supervisory role, practitioners usually have several years post-qualifying experience. The value of supervision has been identified in countless inquiry reports and policy documents (O'Brien 2003; Laming 2003, 2009; SWIA 2005; Scottish Executive 2006a and b; Munro 2011). However, there is currently limited research on what type or style of supervision supports effective intervention and leads to better outcomes for children (Carpenter 2012). By interviewing those in a supervisory role as well as practitioners, this study will help to address this gap by exploring the role they play in influencing if and how social workers engage in direct work.

The thesis considers factors which influence individual social workers to engage in direct work, or militate against this. Specifically, it highlights the significance of pre- and post-qualifying training and experience; alternative

demands on time; the role of audit; the emotional demands of engaging in direct work; and the role of supervision. There are particular factors which influence the manner in which a social worker engages with a child. However, statutory social work is not an individual pursuit; social workers and team managers work within teams, within organisations, and within wider social structures where there are competing discourses about the role and value of direct work, and indeed about the role of social work and concepts of children and childhood. Thus, the research takes an ecological approach (Bronfenbrenner 1979) locating the individual within their organisation, and within wider discourses about the role and value ascribed to children. The part organisational systems play in influencing outcomes for children has been well documented (Laming 2003; Bostock *et al.* 2005; Helm 2010; Munro 2011). In addition to exploring factors which might be pertinent to a particular individual, the research considers how the systems in which practitioners and managers train and work influence their willingness and capacity to engage in direct work. Organisational systems and individuals within them are both influenced by, and influence, discourses about the nature of children and childhood (Shemmings 2000; Brady 2007; Turnbull and Fattore 2008). By locating the individual and the system within wider discourses about the nature of children and childhood, the research will consider how this shapes the nature of direct work.

While the above outlines the context which forms the backdrop to this study, the thesis also has its roots in my experiences in social work practice and academia. As a qualified social work practitioner I worked from 1991-2004

alongside children and their parents/carers in statutory and voluntary settings. My experience in practice was that social workers engaged in differing amounts of direct work which could not simply be explained by differential workloads. Rather, it appeared to be linked to individual workers' views of their role, the value they ascribed to direct work, and the degree they thought children should or could participate. Since 2004 I have been involved in designing and delivering post-qualifying accredited courses in child welfare and protection to practitioners (primarily social work, but also health and education) across Scotland. This includes face-to-face teaching and assessment based on practice-based assignments. When undertaking the study I was acutely aware that I had different roles; researcher, registered social worker, and tutor. Holding and balancing different roles is not unusual; however it influenced my thoughts, feelings and actions, and how participants responded (Cooper 2009). My status and identities as social worker, researcher and tutor were relevant to different aspects of the fieldwork, and will be considered in later chapters.

Theoretically, the thesis is informed by complementary strands, which will be explored more fully in Chapter Two, but here I outline the overarching theoretical ideas which have influenced the thesis. As a social worker and academic my practice rejected the dichotomy between either/or explanations focusing purely on the individual or the structural, but looked at the complex interplay between both. A child's life chances and opportunities are necessarily influenced by his/her socio-economic position. Poverty, social exclusion and inequality have a significant negative impact on the individual

and on the society in which s/he is living (Baldwin 2000; Parton 2007 in Wilson and James; Wilkinson and Pickett 2009). A child's chances and choices are also influenced by the individual characteristics of the child and his/her parents or carers and their relationship. The role of relationships emerged as significant and I draw on attachment theory and the concept of emotional labour to help understand the relationship between children and social workers.

Attachment theory is a conceptual framework to help understand the nature and quality of relationships individuals form throughout life (Howe 2011), and was relevant given that this research explores relationships between children and social workers, and social workers and seniors/team managers.

Additionally, for the duration of the research interview, I formed a 'temporary' relationship with children and professionals. The research employed semi-structured interviews, where the personal characteristics, qualities and experiences of each participant had an impact on the dynamic of the interview, the data which were collected, and how they were interpreted.

However, the interplay between the individual and the structural is complex.

Thus, I draw on theoretical approaches which understand individual experiences to be influenced by wider systems, including discourses about the nature of childhood, as well as by the structural nature of relationships where one person has more power, or is financially recompensed as part of their role. In particular, I found the concept of emotional labour (Hochschild 2012) useful when exploring how direct work is enacted and experienced by participants.

The aim of the research was to explore the subjective understandings children, social workers and team managers had about direct work. When children have participated in research about social work processes, a common theme has been that they have not felt listened to by practitioners (Thomas and O' Kane 2000; McLeod 2007, 2008). As a social worker engaging in research with children about their experiences of direct social work, I wanted an approach where I could listen. Consequently, a qualitative approach using individual interviews was chosen as the most appropriate methodology, and this will be considered in depth in Chapter Three². There are interplays between the research and practice, not least because some of the research methods or techniques I used mirror some of those employed by practitioners in their direct work.

Participants

The majority of the data comes from one local authority within Scotland, and I decided to include children aged between five and eighteen years. The lower end of the age range was chosen based on an assumption that, as by then children are at school and have relationships independent of their parents, practitioners might reasonably be expected to have some individual contact with them. The CSA allows for a child to remain subject to a supervision requirement until s/he is 18, and although in practice this is usually until a

² Three reference groups were held to give feedback on draft questions but then provided group data in their own right. Their composition and role will be explored in Chapter Three.

child is 16, the upper end of the range of 18 was chosen to reflect the legislation.

During the period when reference groups and interviews were conducted (October 2010 - April 2012), of the approximately 170 children aged between five and eighteen in the local authority who were subject to Home Supervision Requirements and could have participated, two children took part in the reference group, and six were interviewed individually. Of those eight children, five were teenagers, while three were nine and under, with the youngest being six. There were four boys and four girls. One teenager indicated that he had Attention Deficit Hyperactivity Disorder (ADHD) and was not in mainstream school; however none of the children was described by their social worker, their parent(s), or themselves as disabled. All were white Scottish, and English was their first language. All children interviewed were subject to Home Supervision Requirements, bar one, who had recently attended a Hearing where his order had been terminated. Several of the children were also or had previously been on the CPR.

Six managers (one man, five women) and eight practitioners (all women) from local authorities outside the research area took part in two reference groups, initially with the aim of providing feedback on questions. Thereafter, 11 professionals from the same authority as the children participated in individual interviews. Of the 11, there were six social workers and two social work assistants (all women), and three team managers (all men). According to information provided by the local authority, at the time of the research

approximately 107 social workers, 48 social work assistants, 35 senior practitioners, and 18 team managers were employed³.

Where permission was given, interviews were taped and transcribed. Extracts from interview transcriptions form an important part of the thesis and a spread of quotes from across the sample are included.

Structure of thesis

The thesis has eight chapters including this, the Introduction.

Chapter Two, the Literature review, touches on changing perspectives on children and childhood, and the relevance of this for social work legislation, policy and practice. It explores existing research on children's experiences of social workers and social work processes, and considers some of the factors which influence how and, indeed, whether children participate. The literature review considers what factors influence the quality and quantity of direct work undertaken with children, and what supports practitioners to engage in direct work. As part of the review, children's experience of being involved in research will be considered, both to inform the methodology chapter, and to ascertain whether there are crossovers between involving children in research and practice.

³ Please see Appendix 1 for details of participants.

In Chapter Three, I explore the methodological framework used within the study. The research employs a qualitative approach, primarily based on semi-structured interviews with children, social workers and team managers.

Throughout the process, a core concern was to conduct the research in a manner which was ethical and limited the potential for participants to be harmed. This influenced decisions made at each stage, including whether to have group or individual interviews, the process of consent, how to involve children, how to recompense participants, and how to disseminate findings. Each of these aspects will be explored within the methodology chapter.

In Chapter Four I consider how direct work is defined by professionals and what appears to influence their accounts, before moving on to explore the different perspectives on, and meanings ascribed to, direct work by children and professionals. As part of this chapter, a typology of direct work is suggested which spans intervention and assessment.

In Chapter Five I draw on attachment theory and emotional labour to explore how direct work is enacted and experienced.

In Chapter Six, I consider the different factors which appear to hinder direct work between children and social work professionals, moving on in Chapter Seven to consider aspects which support direct work. I chose to have two separate chapters, partly because what helps direct work is not necessarily the converse of what hinders the process. I also wanted to ensure that I considered both areas in depth, particularly in the context of a discourse within and about social work which can be dominated by a focus on deficits.

Chapter Eight summarises the key themes, reviews the study's limitations, and identifies areas for future study.

Summary

Recent years have seen an increasing interest in the role 'direct work' and 'relationships' do or should play in social work practice with children.

However, despite this, there has been limited exploration as to what those terms mean in practice. This thesis explores the meanings that children, practitioners and managers ascribe to direct work and identifies how small, but significant gestures of care underpin the development and maintenance of relationships. It therefore makes a contribution to contemporary discussions about the role of direct work in social work, specifically focusing on the everyday contact between children and social workers. In doing so, it engages not only with substantive social work practice but methodological and theoretical developments in relation to social work and children/childhood.

Chapter Two: Literature review

Introduction

In this chapter, I work across different literatures to illuminate the study of direct work. I draw on literature about children and childhood to contextualise the process of conducting research, and to frame some of the findings. I explore existing studies about children's experiences of social work services, to identify gaps in knowledge and dominant themes. I also draw on literature which considers the nature of contemporary social work, including the increase in audit, the changing use of IT, and the nature of pre- and post-qualifying teaching and learning. A thread running through the thesis is the role of relationships: between child and practitioner, between practitioner and supervisor, and the more transient one, between researcher and participant. Here, I found attachment theory (Cairns 2002; Howe 2005, 2011) and the concept of emotional labour (Hochschild 2012) helpful in exploring how relationships are conceptualised and enacted in practice, as well as literature on the role of the supervisor (Morrison 2005; Wonnacott 2012). While communication, care and caring are significant areas of research in their own right, I look at them only in so far as they illuminate relationships.

Debate about the benefits and drawbacks of generic versus specialist social work education is ongoing (Stevenson 2005; DCSF 2009; Narey 2014).

However, despite recommendations in the Laming Report (2009), and the

move towards early specialisation inherent in the development of Frontline⁴ (McAlister *et al.* 2012), pre-qualifying social work education in the UK remains generic. While I draw on general social work literature, as would be expected given my focus, this is from the perspective of contemporary practice with children. The messages from governments about the role and value attached to social work, and social workers vary, with less opprobrium in Scotland (Gove 2012; Warner 2013). However, although there are differences, there are also similarities in the experiences of children who are in contact with social work, and social work professionals. Thus, although the research was conducted in Scotland, the findings are relevant beyond Scotland, and the literature review draws on work from across the UK and beyond.

My search strategy included hand-based library searches and reviewing relevant journals online (trawling). The search engine Stirgate was employed using key terms. The search terms were: direct work with children (78); emotional labour and social work (154); Attachment and social work (3,242); children's participation + social work processes (10); sociology of childhood + social work (111); children as beings + becomings (13,359). By combining both approaches I was able to access relevant material; however there were drawbacks to each approach. As the 13,359 indicates, Stirgate produced comprehensive lists, however these included articles and books which were not relevant, but did not always identify material I located using the more

⁴ Frontline is a 'fast track' graduate programme for children's social work.

laborious 'trawler' method. There were some gaps in the literature in relation to social work intervention, and the NSPCC's library facility was used, but did not identify any additional material.

Children and Childhood

There is a comprehensive body of social science literature which explores children's experiences and meaning of childhood(s). Given the extensive, and at times contested, discussions about the nature of children and childhood, there is a risk of becoming immersed in this field and neglecting other relevant literature. To avoid this I concentrate on two distinct but inter-related areas: the ways children are conceptualised in relevant legislation, policy, and practice, and how the literature on childhood helps to contextualise these; and how this broader work on childhood helps us think through the process of research from the perspectives of researcher, gatekeepers and participants.

Changing concepts of childhood, and differing experiences of children, have been explored in depth (Aries 1996; Mayall 2002; Prout 2005; James and James 2004, 2008). A central thread is that there is not one version of childhood; rather, children's lived experiences vary over time and place, and these differing experiences are of interest to children, parents, researchers, practitioners and policy makers. Although the literature identifies that there is not one childhood but many, professionals in this study recounted examples of direct work where the aim was to compensate for experiences which had been limited or absent for a child, and which the practitioner viewed as normative. Thus, while childhood, and children's lived experience, change

over time and place, influenced by, among other things, gender, disability, and socio-economic position, for professionals who participated in this study there appeared to be some fundamental assumptions as to what childhood 'should' include, and these will be explored in Chapter Four. Theoretical perspectives on childhood can also help us understand how practitioners engage with children, and are discussed in the next section.

Constructions of children as beings and/or becomings - relevance to practice

As perspectives on childhood developed, an earlier perception that children are 'becomings' (Parsons 1951), was challenged. Researchers, practitioners, and theorists who approached childhood from a sociological perspective argued that children should be conceived as 'beings', who have agency, are active participants, and whose differing experiences and interests are valuable in and of themselves rather than merely as part of their journey to adulthood (Qvortrup *et al.* 1994; Jenks 1996; James and Prout 1997).

However, Qvortrup (2003) contends that despite challenges to the concept of children primarily as becomings, perspectives on children remain "outcome oriented" and Alanen's (2014, p.4) view is that the perception that childhood is "a preparatory stage for adulthood is still dominant". Certainly within the Scottish policy context, the aims identified within the Curriculum for Excellence (Scottish Government 2013) appear to be future focused. Some have reasoned that childhood is neither a state of being or becoming, and that children and adults can be viewed simultaneously as beings and becomings as neither are ever finished but continue to change and learn (Prout 2005), and thus could be described as "almost-not-quite" (Gallagher and Gallagher

2008, p.510). Cross's (2011) addition of a third stance of "having been" is interesting in that it reflects the significance of the past. Uprichard's research on children's views of themselves and their environment led her to conclude that discourses which saw children as being or becomings were not necessarily conflicting, and suggest that "understanding the child as both being and becoming increases the agency that the child has in the world" (Uprichard 2008, p.303). Uprichard's stance is helpful to social work practice and research as it challenges a dichotomy whereby children are either in need of adults' support, protection, and care, or able to fully enter into decisions and discussions. Moreover, Uprichard's ability to avoid dichotomy is relevant in contexts where children are, at times, characterised as being either in danger, where their vulnerability and becoming-ness is central; or potentially dangerous, where personal responsibility and being-ness is highlighted (Goldson 2001; Moran-Ellis 2010).

The tensions between a child's right to fully participate, and be an active agent, while also being protected, is reflected in the legislation and policy underpinning social work practice with children, which recognises the duality of their position. The Children (Scotland) Act (1995), The Children's Charter (Scottish Executive 2004a), The Framework for Standards (Scottish Executive 2004b), the Children's Hearing (Scotland) Act (2011), and Getting it right for every child (Girfec) (Scottish Government 2012) are relevant to children who are looked after at home. All recognise children's rights to participate, and express their views, while being clear that this does not mean that professionals are bound to act on a child's views, particularly if, in the adult's

opinion, it would compromise the child's safety or development. The positions taken by organisations and practitioners mediate how legislation and policy is enacted. It is, however, evident that perceptions of children's capacity and agency affect how organisations and the practitioners within them engage with children and enable their participation in processes of assessment and intervention (Shemmings 2000; Turnbull and Fattore 2008; Coyne 2010; Van Bijeveld *et al.* 2015). Views of children as beings or becomings influence the systems which are in place, the ways in which a practitioner communicates with a child, the value they and their organisation place on a child's verbal and written testimonies (Holland 2011), and what information they pass on to children and when (Thomas *et al.* 1999).

Approaching children from a perspective that they are beings, and therefore have as much right as an adult to participate, and to make decisions, can be enabling, and help children develop self-efficacy and self-esteem, but there is some evidence that it can also carry risks. As Holland (2010) cogently argues, it can translate into situations where children make decisions about their present and future which are not in their interests, while professionals justify their inaction by citing a child's right to make his/her own decision, and thereby absolve themselves of their duty of care. Recently, this was evident where a range of professionals framed children as making poor choices about sexual partners, rather than perceiving them as experiencing abuse and sexual exploitation (Berelowitz *et al.* 2012). Smith *et al.* (2013) identified that a narrow focus on rights has contributed to a culture where children who live in

residential care have made the transition to independent accommodation far earlier, apparently based on their right to make this decision.

Conversely, approaching children with an uncritical belief that as becomings they cannot give a well-formed and informed view about their position can also carry risks, and contributes to processes and practices which are restrictive and exclude children. There is a wealth of evidence to indicate that underestimating or failing to recognise a child's agency has meant their views have not always been sought; that they have been absent from, or physically present but not fully involved in, important processes; and have been unaware of and unable to contribute to significant plans and decisions (Thomas and O'Kane 1998; Munro 2001; Aldgate and McIntosh 2006; Happer *et al.* 2006; Alderson 2008; Coyne 2008). As a result, children have, at times, been marginalised within systems which claim to place them at the centre. Moreover, while the negative effects at the time for the child and for the process of assessment and intervention have been identified, longer term consequences have also been noted. As agency develops over time (Mayall 2002; Archard and Skriveness 2009), excluding children and limiting opportunities to participate and influence processes can compromise the development of self-esteem and self-efficacy (Newman and Blackburn 2004). Constructs of children which underestimate their agency and capability also need to be situated and understood within social work practice more generally. One critique of contemporary social work is that it tends to focus on the individual (Jack 2000; Axford 2010), and within this deficit models dominate (Turnell and Edwards 1999). Thus, it can be argued that

practitioners may be more likely to focus on aspects where children are struggling, or on their vulnerabilities, rather than the areas where they are succeeding, or on their strengths.

There is evidence that differing ways of relating to and treating children flow from whatever perspective one takes on children and childhood, and there are potential and actual limitations when positions are taken which are based on a discourse of children as either beings or becomings. Luckock *et al.* (2006 p.109) explored how the views social workers held about children influenced their willingness to engage with children, and found that “effective communication with children is more likely to happen when social workers explore and integrate different perspectives on children (as both vulnerable and capable)” so not beings or becomings, but both simultaneously. However, it would appear that integration is difficult to achieve. Trinder (1997) conducted research with social workers who were involved with children as a consequence of impending divorce, and found they approached individual children based on general constructions of either competence or incompetence. Similarly the professionals who participated in Shemmings’ (2000) research on children’s involvement in case conferences and decision-making tended to fall into two distinct camps, which he described as flowing from a ‘rights’ or a ‘rescuer’ approach. Although neither Trinder nor Shemmings refer to children as beings or becomings, the underpinning assumptions and values which practitioners in their studies held about children and childhood, and the concomitant role of adults to enable or protect, can be connected to these concepts. Just as perceptions of children

and childhood can be seen to influence social work practice, they are equally relevant to understanding research processes and practices, and I will go on to explore this next.

Constructions of children and the research process

The study involved both child and adult participants, and for Christensen and Prout (2002, p.481), “the perspective on children that a researcher works with has important implications for his or her research practice. It influences the choice of methods, the analysis and interpretation of data as well as ethical practice”. Concepts of children as vulnerable and/or capable are relevant to research processes generally, and to this study. Those constructions are relevant to each stage, from the start of research to its dissemination, and application, and this section contextualises the study within wider discourses around children and childhood as they apply to children and research.

Christensen and Prout highlight the significance of the researcher’s perspective; however, whether research with children necessarily requires alternative approaches, including different ethical frameworks, to those employed in research with adults, is contested. Stances range from the contention that research with children should be approached, and conducted, in a manner which is distinct to research with adults in order to minimise harm and maximise participation, to the position that this disempowers children, underestimates their capabilities, and that children and adults should be approached in a similar manner (Christensen and Prout 2002; Clark and Statham 2005; Morrow 2009; Alderson and Morrow 2011; Greig *et al.* 2013). Somewhere in between is a view that to presume research with children is

either the same as or different from research with adults is overly simplistic and makes assumptions and generalisations about the capabilities of both (Punch 2002). As children's agency needs to be recognised, so does their differential status in relation to adults; thus methods used need to vary dependent on the research question and the individual child and adult. The ongoing debate about the place of children in research and the different positions taken by researchers encapsulates and mirrors wider uncertainties, including within social work legislation, guidance and practice, about the nature of childhood, and the role of children. This includes whether children are perceived as becomings and/or beings (Lee 2001); the consequences if children are included or excluded from different processes (Leeson 2007); the balance drawn between child emancipation and participation, and protection (Holland 2010); and whether the role of the adult, be they researcher or practitioner, is to enable and/or protect (Murray 2005; Mudaly 2013). The positions I took, and which were taken by gatekeepers and research participants, influenced the nature and findings of the research and will be explored throughout the thesis.

One of the first decisions was who to include as being a 'child'. The definition of a child can be seen to vary in legislation and policy pertaining to Home Supervision and guidelines which influence the conduct of research. Within the CSA (1995) and the CHSA (2011), a child is described variously as being under 16, or under 18, depending on particular circumstances. The Framework for Standards establishes what children in Scotland can expect from the professionals they may come in to contact with. It defines a child as

“a person under 16 years of age” or “over 16 years of age with special needs who requires help from statutory agencies in order to be protected” (Scottish Executive 2004b, p.23). In research the definitions of ‘child’ appear to be more fluid. When Aubrey and Dahl (2006) considered effective practices for engaging with vulnerable children they reviewed papers referring to children from birth to eleven and interviewed primary-aged children, while Wyness (2006) put an upper limit of 14 years on who he viewed as a child. These choices are interesting given the number of teenagers experiencing neglect and identified as being at risk (Ofsted 2008; Stein *et al.* 2009, 2010). By contrast, Alderson and Morrow (2004, p.9) state “we use the word ‘children’ to mean anyone under 18”. As discussed earlier, in this study the upper age limit was 18 while the lower age limit was five years.

Both the CSA (1995) and the CHSA (2011) are based on the principle that the child’s view should be sought in matters which relate to them, and that by the time a child is aged 12 s/he is presumed to be of sufficient age and maturity to form a view. Importantly, there is no presumption that children under 12 are *unable* to form or express a view, or that they should be afforded less opportunity to do so. The Age of Legal Capacity (Scotland) Act (ALC) (1991) Section 2 (4) states that “a person under the age of 16 shall have the capacity to consent on his own behalf to any surgical, medical or dental procedure or treatment where, in the opinion of a qualified medical practitioner attending him, he is capable of understanding the nature and possible consequences of the procedure or treatment”. Thus, even if it is not always enacted in practice, the premise underpinning primary legislation is that children can form and

express a view, and that expressing this view is not linked to parental consent. Indeed, the ALC is clear that where a child and his/her parent(s) differ over consent, if the child is deemed capable of understanding then his/her decision will override his/her parent(s).

In contrast, much of the research guidance appears to assume that children are less able to consent to research than to medical procedures, as consent from both child and parent/carer is generally deemed necessary until the child is 16. The guidelines produced by Children in Scotland (2001, 4.6) state that “in general it is expected that children under 16 will not be involved in research without parental consent”. The Framework for Ethics Research (FRE) (ESRC 2012, p.24) advises that “it should not be assumed that children are unable to consent because of their age”, however “every effort should be made to deal with consent through dialogue with both child and their parents” (ESRC 2012, p31). The Ethics Handbook used by the School for Applied Social Science (2010) refers researchers to the 2010 FRE guidance (updated 2012). While the guidance to have a “dialogue” with children and parents may have been influenced by perspectives which stress the vulnerability of children and their becoming-ness, by taking this position the FRE recognises the connectedness between a child and his/her parent. However, the FRE is explicit that seeking parental consent is inadvisable if doing so could compromise confidentiality or the child’s safety. In their research with children under 16 who were accessing services without parental knowledge, Balen *et al.* (2006, p.37) concluded that although dispensing with parental consent may be necessary, this decision needs to be a shared one and “must be

processed through research ethics committees". In this study the decision was taken to seek consent from both child and parent, primarily in recognition of their connectedness.

Despite the principle of listening to children embodied in CSA (1995) and CHSA (2011), from the literature, it is evident that there is a dissonance between the intent of legislation and the manner in which it is enacted in social work practice. Although there is no presumption in legislation that children under 12 should by dint of their age be less involved than those over 12, in practice the younger the child, the less likely they are to be offered opportunities to express their views and be involved in decision-making processes, and are more likely to be unclear about plans made on their behalf by professionals (Cossar 2011; Happer *et al.* 2006). In research, a comparable pattern emerges, with the young being deemed to be less than competent and thus less likely to participate in research processes (Wright *et al.* 2006). Assumptions that competence is linked primarily to chronological age or developmental stage have been challenged by Alderson (2008) and Mayall (2002) who argue that it is associated with the provision of clear explanations and opportunities to make decisions. Alderson *et al.* (2006) found that, when provided with explanations, children from three years old were able to understand complex health conditions, be involved in decision-making processes, and manage their health. Place and Barker (2009) added to the debate when they gave questionnaires to 201 children, aged 11-12 years and asked them to define common medical terms, make choices as to which were more problematic, and rank difficulties. The same task was given

to 245 university students (all over 18) and it was established that there were similarities between the answers of the 11 year olds, and those of the university students.

While older children are more likely to be involved, research has been undertaken with younger children (Clark and Statham 2005; Clark in Lewis *et al.* 2006; Winter 2009, 2012) and these studies have contributed to debates about agency, practice with children, and research methods. For instance, Winter's research (2011) demonstrated how despite some professionals' assuming that they were too young to remember, young children were able to recall vivid memories of neglect. The decision to set the lower age limit of this study at five was taken from the position that the focus of the study is direct work, and practitioners are more likely to engage in direct work with older children (Cossar *et al.* 2011; Handy and Doyle 2014). However, it did exclude younger children, in particular one child who might otherwise have participated, the circumstances of which will be considered in Chapter Three.

There are examples where children have been excluded from research, by researchers and/or gatekeepers because of factors other than age. The Scottish Children's Reporters Administration (SCRA) conducted research on experiences of the Children's Hearing system. They surveyed 232 children aged 5 -17 attending Hearings over a two week period, and held 13 interviews with children aged 10-17. The report (2009, p.11) notes that "two children did not speak English and required translators and so were excluded due to resource constraints". There was no critical comment in the report as to why

two children were excluded from research or were apparently attending a Hearing without a translator present to ensure that their views were heard and they understood the proceedings.

The literature indicates that at times disabled children have been excluded from research, or their parents have been used to seek the child's views (Stalker and Connors 2003; Alderson and Morrow 2004; Aubrey and Dahl 2006). Munro *et al.* (2005) found that where children had a disability, gatekeepers often made the decision on a child's behalf that participation could cause distress, or that the child would have difficulty communicating. They concluded that, as a consequence, "gatekeepers sometimes unnecessarily deny children the opportunity to decide for themselves whether they want to be involved in research" (Munro *et al.* 2005, p.1034). Alderson and Morrow (2004, p.47) found that "some social workers refused to pass on information (about research) to children with sensory, learning or language difficulties". Similarly, Aubrey and Dahl (2006, p.27) noted the decision of a head teacher to exclude a child from their research because he had cerebral palsy and used an augmented communication system. Notwithstanding this, there are examples of research with children who have disabilities, including Turner (2003) who conducted research in Wales with 105 children aged between five and 25 about their experience of services. A key message was that the attitudes of professional staff (social work, education, health) made a difference to their lived experience, and inclusion in processes (2003, p.3). In my study, it was only by happenstance that the Children and Disability Team

was contacted, as details of the team were omitted from the information provided to me by the agency at the start of the research.

In addition to being discounted as a consequence of age or disability, there is evidence that children have been excluded because the subject of the research is deemed by adult gatekeepers to be too sensitive and/or because children are viewed as being vulnerable. Gilbertson and Barber (2002) had difficulty accessing children in foster care, partly because gatekeepers were concerned that they might find interviews distressing, or were anxious that interviews might threaten placement stability. Powell and Smith (2009, p.128) conducted email interviews with 19 researchers involved in research with children. They found there were “greater barriers to participation when research is seen to be sensitive”. Leeson (2007) voiced the opinion that gatekeepers viewed teenagers accommodated in residential care as too emotionally damaged to participate in research, and saw their role as protecting children from additional distress. With some notable exceptions (Thomas *et al.* 1999, Morgan 2006, 2013, 2014; Hawkins *et al.* 2007), there has been limited research about children’s experience of adoption and adoption processes, and this mirrors the limited input children have in adoption practice (Minnis and Walker 2012).

In summary, the message which emerges from literature is that despite significant shifts towards children’s inclusion in research, as both subjects and researchers, and an increase in research with children, the dominant discourse appears to be centred on children’s actual or potential vulnerability,

their becoming-ness. In their efforts to 'do no harm', adults involved in research processes exclude children who might want to participate. One consequence is that the 'voices' which emerge from existing research are necessarily partial. The views and experiences of younger children, children with a disability, children whose first language is not English, or who are deemed to be more vulnerable or who are difficult, and/or time consuming to engage, are less likely to be represented. As McNamee and Seymour highlight (2012), this means that some children remain less involved, and their views and experiences are under-represented. With that proviso in mind, the next section goes on to explore the messages about children's experiences of social work services.

Children's experiences of social work services and social workers

There is a body of research on children's experience of social workers and social work systems. Over the years, consistent themes emerge as to what qualities they have found helpful, and conversely unhelpful, in people and systems. Children have said they want social workers to listen to them (Butler and Williamson 1994; Gallagher, 1999; Cleaver and Walker 2004), to treat them with respect (Barry 2001), to take time to get to know them and be reliable (Munro 2001; Thomas and O'Kane 2000; Bell 2002; Cree 2002) and to act on their concerns (McLeod 2008). A number of research studies highlight that what children want is someone who cares about them (Bell 2002; Aubrey and Dahl 2006; Winter 2009; McLeod 2010). This means, among other things, that their social worker has some sense of their

preferences. McNeish *et al.* (2002) found that the personal qualities and characteristics of social workers were important, particularly reliability, consistency, and commitment. They noted that “an essential ingredient was the young person feeling that the adult genuinely cared for them” (McNeish *et al.* 2002, p.276). The existing research also identifies what children have found unhelpful. These include workers who don't listen (McLeod 2008) are difficult to contact and are unreliable (Butler and Williamson 1994; Gallagher 1999; Lishman 2009), who make assumptions or disbelieve the child (Cossar *et al.* 2011; Tucker 2011), and where frequent changes in allocated worker hampers the formation of meaningful relationships (Munro 2001; Winter 2015). Aubrey and Dahl (2006, p.33) interviewed 21 children defined as ‘vulnerable’, including 15 who had current social work contact. Neither of the two children who were ‘looked after’ had seen their social worker recently. One child stated that social workers should be “there for you”, but went on to indicate that this was compromised as they “have so many people to look after”.

As experiences of Hearings were mentioned in this study, it is helpful to also look at what research on formal processes tells us. Some research focused on children’s views of process rather than their experiences of social workers, while, others combined both, and this dual focus is understandable given the apparent link between the worker and the child’s involvement in processes (McLeod 2008; Cossar *et al.* 2011; Van Bijleveld 2015). In reviewing the literature, there are clear parallels between children’s inclusion/exclusion in research, and in social work processes. Just as children who are older, do not

have a disability, do not need additional resources to aid communication, and are deemed to be less vulnerable, are more likely to be participate in research, equally they are more likely to be involved in social work processes. In his review of developments during his 13 years as Children's Rights Director in England, Morgan (2014) comments that there have been improvements in the manner in which children are involved. However, it is not unusual to be excluded from a range of decision-making processes, or to be physically present at formal decision-making forums, but not actively involved (Leeson 2007; Bradwell *et al.* 2008). Morgan (2013) interviewed 11 children aged between nine and 10 about their experience of adoption processes and found that although the majority thought they had been old enough to have a say, they had been assumed to be "too young" to give an opinion, with professionals viewing their role as protecting children from engagement in life-changing processes.

For those children who are present at meetings, it is evident that being in attendance does not necessarily guarantee meaningful participation or engagement. McLeod (2008 p.50) cites the example of Anna who comments, "I was invited to the beginning of the conference but when they actually decided whether you were going to be on the child protection register you had to leave the room, which I found absolutely awful. I thought it was so rude. They were talking about me". Thomas and O'Kane (2000) interviewed 47 children and read social work case files to explore how children were involved in decision-making processes. They concluded that children's involvement was linked to the support they received from their social worker. Similarly,

when exploring experiences of child protection processes, Morgan (2012, p.12) found that a child's experience and inclusion "depended very much on what each individual social worker was like". The same child could have very different experiences of being involved if their social worker changed, and importantly this indicates that capacity therefore does not necessarily rest with the child, but depends on the interplay between child and social worker. Morgan (2012, p.7) highlighted how the widespread belief held by children that social workers "take them away" acted as a barrier and constrained children, and this also emerged as relevant in this study.

Contemporary social work practice

Research with children has, as discussed above, been consistent about what they experience as helpful. However, there seems to be a dissonance between this, and contemporary childcare social work. It would appear that, while children appreciate consistency and care, practice can be fractured and fragmented and, is at times, dominated by that which can be audited (Munro 2011). In Scotland, Daniel (2004, p.254) found that "practitioners were so pre-occupied with meeting the needs of the system that they had little time to offer direct support to children and their families". A concern running through the literature is that where an increase in audit coincides with an increase in procedures, social workers may practise in a "culture of compliance as opposed to a culture of commitment" (Calder 2008, p.124). Here, Calder voices anxiety that the primary aim of practitioners will be compliance with measurable, procedural tasks, rather than, and sometimes at the expense of, commitment to the child. In Chapter Six, I explore whether explicit guidance

and expectations about particular areas of work (generally those which will be audited) but not others, in this instance direct work, contribute to a culture where direct work appears to be less valued.

There is some evidence that practitioners lack confidence in their skills to engage directly with children, and that this is associated with gaps in pre- and post-qualifying social work education (Luckock *et al.* 2006, 2007; Handy and Doyle 2014; Lefevre 2010, 2015). It is argued that the less face-to-face work practitioners do, the less confident they feel, and thus the less they do (Munro 2011). In Scotland, pre- and post-qualifying social work teaching and learning is underpinned by several frameworks including the Standards in Social Work Education (2003), Scottish Credit and Qualification Framework (SCQF) (2012), National Framework for Child Protection Learning and Development (2012), and Key Capabilities in Child Care and Protection (2006). The latter was introduced in response to concerns that students were qualifying without sufficient knowledge and skills to engage with children and their families, and practitioners in adult services did not view child welfare and protection as their responsibility (Triseliotis and Marsh 1996; O'Brien 2003; Bruce and Whincup 2012). Several professionals referred to their pre- and post-qualifying training, as will be discussed in Chapters Six and Seven.

One of the criticisms of social work practice is that it can focus on deficits in assessments of children and their families (Turnell and Edwards 1999), and from the literature this deficit approach also applies to research about practice. Although there are some studies which explore how practice is

enacted and what social workers do (Forrester *et al.* 2008; Hall and Slembrouk 2009; Ferguson 2009, 2014; Helm 2013) there are far more studies exploring what professionals think they are not doing. This project aims to help address this imbalance by asking practitioners to think about the everyday direct work they are engaged in. Based on the accounts of participants, it will build on the work of Gilligan (1999) to propose a typology of direct work.

A dominant theme in existing research is that IT has changed social work practice. There are some indications that changes in IT has reduced, rather than increased, the time practitioners spend with children and their families; has privileged computer skills rather than relationship skills; and rather than assessing and responding to children, the focus has shifted to the completion of reports and 'case management' (Davies and Duckett 2008; Cleaver *et al.* 2008; Parton 2008; White *et al.* 2009; Holland 2011). Jones reported that a key theme to emerge from 40 interviews with social workers was a reduction in the time spent with service users by local authority workers. One commented "We have more forms which takes time to complete. But we social workers also do less and less work with clients. Increasingly the agency buys in other people to do direct work and we manage it" (Jones 2001, p.552). Gupta and Blewett (2007, p.174) held focus groups with 46 social workers who identified the negative impact on practice of "inputting of data in to management systems", with some expressing the view that the time devoted to this limited their capacity to build relationships and work directly with children. Similarly, White (2008) looked at the impact of IT systems across

five local authorities in England and concluded that the focus had become the needs of computer systems rather than children, with social workers reporting spending between 60-80% of their time in front of a computer. Holmes *et al.* (2009) conducted their research across two time periods, 2001-2 and 2007-8. Social workers reported that “indirect administrative work took them away from direct work and they had insufficient time for direct work with children” (Holmes *et al.* 2009, p.14).

As time spent on computers rather than direct work appears to be a dominant discourse in relation to contemporary social work practice, I had anticipated it would arise in practitioner interviews. There is, however, a counterview that the influence of technology has been overstated. What emerges from this study is that the balance between face to face contact and IT is nuanced. The thesis explores whether at times, the computer can be utilised to avoid emotionally challenging situations, including direct work with children. This has been highlighted by other studies. Winter conducted 39 interviews with children and their social workers, and found some workers avoided discussing painful areas with children. She concluded that, although there were examples of sensitive, direct work, at times “social workers managed emotional and psychological risks to themselves by reducing the opportunities to be exposed to emotion” (Winter 2009, p.454). Similarly, Rixon (2008, p.114) suggested that to avoid children’s distress, social workers “work around, rather than with children and young people” and that “falling back on procedures and forms facilitates the sidestepping of messy, distressing, emotional issues”. In the US, after interviewing practitioners, Killen (1996,

p.793) came to the conclusion that rather than “face the anxiety, the emptiness, the grief and the aggression that the child expresses in various ways”, workers protected themselves using a variety of techniques, including actively not hearing and seeing children’s pain. She commented that “children know what the adult world does not want to know or what the professionals cannot cope with” (Killen 1996, p.795). Some of the children in Australia who spoke to Mudaly and Goddard (2006) confirmed that they censored accounts of abuse as a consequence of their perception that professionals were unable to hear the truth. Here, the literature on emotional labour is relevant to help understand the mixed emotions practitioners may have about direct work and their difficulty in expressing reluctance to, at times, engage in emotionally demanding work.

Emotional labour and direct work

In her study of flight attendants, Hochschild (1983, 2003, 2012) used the concept of ‘emotional labour’ to highlight the effort involved in managing and manipulating the emotion experienced, and the emotion displayed in the interplay between worker and client, and between different workers.

Hochschild differentiated between ‘surface acting’ and ‘deep acting’ and suggested that if the displayed emotion differs from the felt emotion, the process of managing feelings leads to a degree of inauthenticity which may mean the worker experiences burnout. Hochschild’s concept of emotional labour has, over the years, been applied to professionals within health, education and social work to consider why and how individuals manage their own and others’ emotions in work environments where difficult emotions are

likely to arise. In this study, professionals described complex and ambivalent feelings. As will be explored in Chapter Five, some expressed emotions during the research interview which they had not articulated at the time of the direct work, because then they had been focused on the needs of the child. However, for others they had not expressed emotions at the time because they were difficult to express, and here Hochschild's concept of 'feeling rules' is relevant.

Hochschild (2012) identified that there are unwritten and sometimes unspoken conventions and expectations about how one 'should' feel and express emotion(s) on differing occasions, with different people, and in different contexts. In Hochschild's analysis, these 'feeling rules' are often not explicit, but are tacit, maintained by cultures and conventions. Hochschild drew on weddings, funerals, and the more day-to-day customs surrounding marriage, but it is her description of Sandy which has most relevance for my study. Hochschild used one example of a social worker (Sandy) who expressed complex feelings about a nine year old boy saying: "I spent a long time understanding Raymond. And once I understood him, I hated him, and he's only nine years old. Some cases I love and some cases I hate, and that's all wrong for my work" (Hochschild 2012, p.150). Hochschild goes on to assert that in common with psychiatrists and ministers, social workers are "expected to feel concern, to empathise and yet avoid 'too much' liking or disliking" (ibid), and presumably if they like or dislike someone 'too much' this is not voiced. This is an area which is ripe for further research, and is one of the issues which will be explored in the thesis.

As professionals are bound by feeling rules, Hochschild identified that airline passengers are also expected to respond in particular ways, and this links to the sense from interviews that there are tacit rules about how children, young people and parent's 'should' feel and behave with social workers, and during formal processes. Taylor and White (2000) analysed the means by which service users construct themselves as "appropriate clients", while in the research conducted by Buckley *et al.* (2011) parents described feeling they were "walking on eggshells", and this may be because feeling rules are often tacit. They become more evident if transgressed, when someone steps on an eggshell, or when an individual moves to another setting where patterns of behaviour differ. Again, this is an area for further study and in Chapter Four I consider examples where the aim of direct work was to enable children and parents to express themselves in meetings in ways they could be heard. This may be so a parent and/or child are better able to adhere to rules about how to express emotion.

Hochschild argues that feeling rules are tacit; however, those underpinning social work practice in Scotland are, to some extent, made explicit in the Code of Practice (SSSC 2009). The Changing Lives report (Scottish Executive 2006a, p.11) cites the International Federation of Social Work's Code of Ethics: "Social Work is based on respect for the inherent worth and dignity of all people and the rights that follow from this". Although generalised, it is unequivocal that practice "should" be based on "respect for the inherent worth and dignity of all", and adopting a "whole person approach" (Scottish Executive 2006a, p.11). Thus, it may be difficult for practitioners to

acknowledge instances where there are dissonances between their personal values and beliefs, and how, as social work professionals, they are expected to feel and act. Depending on the culture and customs of the team and organisation, what is deemed to be acceptable and within professional boundaries will vary. Moreover, while some feeling rules are relatively clear, others are more contested. It is likely that there is a key role for supervision, and this is an area the study aims to explore.

Although Hochschild's analysis is relevant to this study, it has been critiqued as insufficiently nuanced. There is not necessarily a clear either/or duality between surface and deep acting, nor does surface acting necessarily lead to emotive dissonance and burnout (Bolton and Boyd 2003; Theodosius 2008). Furthermore, while the costs of emotional labour are identified by Hochschild, as will become evident, practitioners in my study described joy as well as sadness and ambivalence even in very difficult situations. Consequently, the positives which emanate from engaging in, and reflecting on, direct work need to be recognised. The work of Stalker *et al.* (2007) and Mandell *et al.* (2013) is helpful when considering how and why practitioners can be simultaneously "emotionally exhausted and satisfied". In their research with child protection practitioners in Canada, those who were able to ascribe meaning to their work, to recognise and celebrate small improvements, and place boundaries between work and home, were described as "sailing", as opposed to "sinking" or "swimming". Adamson *et al.* (2012) identified that practitioner resilience and capacity to avoid burnout depended on the interaction between personal and professional experiences, practice context, and mediating factors including

supervision. By contrast, Hochschild appears to underestimate what the practitioner brings to an encounter, and tends to focus instead on what s/he takes from it.

Within social work literature and guidance there is explicit recognition that although practitioners necessarily bring, and use 'self' in their work, there are occasions where their personal views will not necessarily be in accord with their professional responsibilities (Beckett 2006; Scottish Executive 2006a), and that their "professional self is not the whole of their self" (Payne 2011, p.90). Research on the concept and enactment of emotional labour as it relates to nursing and social work/social care (Theodosius 2006, 2008; Gray 2009; Leeson 2010; Harvard and Tuckey 2011; Smith 2012) questions whether the process of managing one's emotions necessarily leads to feelings of inauthenticity, and suggests that the emotional labour involved is partly so that the worker can be more effective within their work role, while Morrison (2007) identifies that the ability to recognise, manage and use one's own emotions is crucial within child welfare and protection.

Hochschild's work highlights the relevance of authenticity, or apparent authenticity to an encounter, and whether practitioners' care is of concern to children who have experience of social workers (Gaskell 2010; McLeod 2010; Cossar *et al.* 2011). Reviews of contemporary social work have re-stated the significance of relationship (Scottish Executive 2006a; Munro 2011, 2012), and it is evident from existing research that 'care' contributes to the development and maintenance of relationships. Tronto (1994, p.104) argues

that “care is both a practice and a disposition” expressed in differing ways, including “caring about” or “caring for” (Fink 2004); while Payne (2011, p.157) stresses the relational aspect of care within social work, and for him, “caring involves connectedness with other human beings, demonstrated through practical tasks that develop into a commitment to achieving the cared for persons personal growth”. There is a body of literature exploring the way care is defined, enacted and experienced in different contexts; however it is beyond the scope of this chapter to consider this in detail, other than to identify the contested nature of the way in which care is conceptualised (Gilligan 1993; Meagher and Parton 2004; Forbat 2005; Hughes *et al.* 2005). This study aims to contribute by exploring care from the perspectives of children and professionals.

A core thread running through the above research is the role of relationship, and sociological literature on emotional labour provides a frame to explore how complex emotions are conceptualised and managed within relationships at work, in particular socio-cultural and historical contexts. However, social work typically requires practitioners to operate at different levels simultaneously, understanding the relevance of social structures and culture while also being able to focus in on the details of individual lives and relationships. Thus, literature on attachment theory is also relevant because it focuses on the nature of interpersonal relationships from a different frame, and allows for consideration of the relationship between children and their social workers.

Attachment theory: its relevance to direct work

The work of attachment theorists from Bowlby (1971) to Howe (2005, 2011) has been influential on contemporary practice with children and their parents/carers shaping assessment and intervention (Hughes 2004; Cairns 2002; Cairns and Fursland 2008; Bomber 2007; Lansdown *et al.* 2007). It is a core theory advocated for social work practice, particularly with children and their families (Fahlberg 1994; Walker 2008; Daniel and Wassell 2010; Furnivall 2011) and was referenced explicitly or obliquely by professionals who participated in the study.

Howe (2005, p.27) defines attachment as “the dyadic regulation of emotion. Biologically speaking, attachment is a means of survival and therefore a way of controlling anxiety”. Attachment theory is based on the premise that experiences of threat, discomfort and uncertainty will activate attachment behaviour in infants (including crying, moving towards primary caregiver) in order to seek proximity. An attuned caregiver both predicts and responds to the child’s needs, contains their anxiety, and enables the child to regulate, and build a positive sense of themselves, and the world (internal working model). Attachment is a process, made up of hour-to-hour, day-to-day exchanges wherein the child learns to regulate affect, regulate shame, and build a sense of themselves as loved, and loveable, with adults who are responsive to their changing needs. Dependent on the quality and the consistency of care, early attachment relationships can be described as ‘secure’ or ‘insecure’ (Howe 2005; Pearce 2009). Those children with a secure attachment relationship have experienced care which has been

consistent; their parents are attuned and available, interested in the physical, emotional, and psychological worlds of the child. This does not mean that parents always get it right, but when they make a mistake they are able to rectify this, and enable the child to learn that mistakes are part of life and relationships can withstand misunderstandings. Children whose primary caregiver is neglectful, abusive, and inconsistent, will learn that they are more likely to get their needs met if they modify their attachment strategies, either by dampening down or increasing their attachment behaviour. While this is adaptive in the short term, it can mean the child will have difficulty in other relationships and other contexts. One of the central tenets of attachment theory is that the nature and quality of the relationship with primary attachment figures, usually parent(s), and the strategies children develop in these early encounters, influence and provide a template for their relationships with peers and adults through childhood and in to adulthood (Prior and Glaser 2006; Howe 2011). McLeod (2008) identified that the way in which children relate to adults, be they social workers or researchers, is associated with their previous attachment experiences, while the possibility that social workers and other professionals can be secondary attachment figures in a child's life has been explored by a number of writers (Batmanghelidjh 2007; Bomber 2007; Lemma 2010; Furnivall 2011).

One of the primary tasks of attachment is affect regulation (Howe 2005; Hughes 2004; Cairns and Fursland 2008). Cairns and Stanway (2004) use the acronym STIRS to explain how children with unmet attachment needs have difficulty with stress, trust and empathy, impulse control, rage, and shame

(STIRS), and that those unmet needs 'stirs' the child, who then 'stirs up' other people, including professionals. Cairns' and Stanway's analysis is insightful, and enables a valuable connection to be made between attachment theory and emotional labour given the centrality of affect regulation to both.

Hochschild used the term emotional labour to explore how emotions are managed and displayed in interpersonal encounters at work. Core to her analysis is that this involves the worker managing dissonance between felt and expressed emotion. Managing emotion requires a degree of affect regulation by professionals. In their interpersonal relationships with children, young people and parents, social workers are involved in encounters which are likely to involve and evoke complex emotions which will, at times, 'stir' them, and challenge their capacity to regulate their own feelings and behaviour. One premise of attachment theory is that attachment experiences and strategies are relevant to relationships throughout the life-course (Morrison 2005; Howe 2011), and arguably this includes those between social workers and children. Attachment theory may also be relevant when identifying what practitioners need to enable them to engage with children, including support in regulating their own emotions. One theme to emerge from existing research which has strong resonance with this study is the central role of the supervisor in this process, and in the next section I summarise some of the key messages from the literature on supervision.

Supervision and direct work

Within social work there is a tradition of supervision which is not necessarily present within other professional groups, and while experiences of

supervision may vary, it is helpful to consider what it might encompass. One definition comes from Morrison (2005, p.32) who described supervision as “a process by which one worker is given responsibility by the organisation to work with another worker in order to meet certain organisational, professional and personal objectives. These objectives or functions are: competent, accountable performance/practice; continuing professional development; personal support; engaging the Individual with the organisation”. The role of supervision has been highlighted over a number of years in policy documents and inquiry reports (O’Brien 2003; Laming 2003; Munro 2011). Those in a supervisory position have to balance competing expectations: encouraged by inquiry reports to focus on supervision, they are also required to perform other management tasks on behalf of the organisation in which they are employed. There is evidence that doing so can have the effect of deflecting them from supervision, or can emphasise the managerial aspect of their role, and there is ongoing debate about the functions of supervision, and how these should or could be discharged (Hughes and Pengelly 1997; Morrison 2005; Gordon and Hendry 2010; Baginsky *et al.* 2010).

Despite inquiry reports citing the value of supervision, it is difficult to make an unequivocal link between good supervision and effective practice (Carpenter 2012, 2013). However, it does appear that the supervisor can have a significant role, both in relation to individual practitioners and by contributing to the development and maintenance of team culture (Scragg 2003), including the value accorded to direct work. As noted earlier, practitioners are generally part of teams, which are part of a wider organisation. There is some indication

that, although s/he is a conduit between the team and the wider organisation, at times managers act as a buffer between the organisation and individual team members (Bellman and Ryan 2009). It also appears evident that, despite increased levels of audit and bureaucracy, team managers have considerable discretion about how the team operates (Patterson 2014). As this includes the manner in which resources in the team, financial and personal, are distributed, managerial choices have some bearing on the nature of direct work which occurs.

A core theme identified earlier is the significance of the relationship between social worker and child, and relationships appear to be no less important within supervision. The quality and nature of the relationship between manager and practitioner appears to be a key determinant of the quality and nature of supervision, and influences to what extent the functions of supervision are met (Morrison 2005; Wonnacott 2012; Carpenter 2012; Adamson *et al.* 2014). Of particular relevance is the capacity and ability of the supervisor to provide a reflective space within supervision where complex emotions can be discussed safely (Ruch 2007, 2008; Hawkins and Shoheit 2012). There is a suggestion that, if this aspect of supervision is absent or limited, the practitioner's professional development and their capacity to engage in emotionally difficult work can be compromised (Ferguson 2011; Munro 2011). There is also some indication that in their interactions with children and their parents, practitioners mirror aspects of the supervisory relationship (Ofsted 2012). Although so far the emphasis has been placed on what the supervisor can or should provide, Hughes and Pengelly (1997) use

the device of a triangle within a circle as a visual representation that there are three participants within supervision; the supervisor, supervisee and the 'client', and that supervision has to be contextualised within the organisation in which all are located. Importantly, Hughes and Pengelly's illustration highlights that it is not only the supervisor who influences the nature and quality of supervision, the practitioner also has a significant role. As will emerge in later chapters, at times practitioners make strategic choices as to what aspects of direct work they discuss with their manager.

Summary

This chapter has situated the thesis within relevant literatures, including children's experiences of being involved (or not) in social work processes and research. In Chapter Three, I consider the methodological approach I used and will consider how some of the themes identified in this chapter, including perspectives on children's agency and vulnerability, influenced the process of the research.

Chapter Three: Methodology - dealing with grey

Introduction

After making the initial choice to focus on experiences of direct work in the context of Home Supervision Requirements, decisions were made about where the fieldwork should be conducted, with whom, and how. Some decisions were made over a prolonged period, while others were made 'on the hoof' during research interviews. However, all were influenced by other participants in the research including agency representatives, gatekeepers, parents, children, and professionals who took part, or conversely chose not to. This chapter begins by considering the methodological approach I used and then explores the judgements made during each stage of the research process.

A qualitative approach

Quantitative research has been undertaken with practitioners (Baginsky *et al.* 2010), and children (Dixon and Stein 2002; Madge 2006; Radford *et al.* 2011), with findings influencing policy and practice. This study in part asks "what direct work happens?", and evidently this could be measured using a quantitative approach. However, I was interested in exploring the nuances of how individual practitioners and children conceptualise direct work, including the purposes, values, and meanings ascribed to direct work. Here, I did not assume that the intended purposes, and meanings, would necessarily be synonymous, or that participants in the same encounter would agree on what happened, or share attributions (Milner and O'Byrne 2002; McLeod 2008;

Munro 2008). Rather, I approached the study from the ontological position of subtle realism (Blaikie 2007) in that although there is an external reality, how we each make sense of that reality is socially constructed, there are different 'truths', and experiences and meanings ascribed will vary. Different people can leave the same encounter with differing constructions of what preceded the encounter, what happened during it, and its significance. Subsequently, when recalling an encounter retrospectively to self, to others, and ascribing meaning, versions will also vary depending on context, including the standpoints and status of the teller and the listener (in this case me). Thus the accounts told, and heard, during a research interview will necessarily be partial; however the accounts, and the process of telling and hearing are valuable, and contribute to a knowledge base. Approaching the study from the position that there are different truths, and that I would, as the title of the chapter suggests, be dealing with grey, is a stance which reflects my theoretical positioning, as well as my practice experience with children and their families. As there are different truths, one theoretical framework cannot adequately explain the complexities and uncertainties of life, or one aspect of life, for some people, at some point; in this instance their experiences of direct work as part of Home Supervision.

Starting from this theoretical position, methodologically a qualitative approach appeared best suited to explore the subtleties, the grey of direct work and the subjective and retrospective constructions of meaning from participant's perspectives (Robson 2002; Mason 2007; Bryman 2008; Ritchie *et al.* 2014). As discussed in the last chapter, there is existing research on children's

experiences of social work, much of which focuses on involvement in decision-making processes, whereas I was particularly interested in the everyday direct work between children and professionals, which on the surface might appear unremarkable. As a consequence, individual semi-structured interviews were the method of choice on the grounds that the everyday might go unremarked by participants completing surveys about direct work. Indeed, as will be explored in Chapter Four, for some the process of talking about direct work appeared to change their perspective on the value and amount of work in which they were engaged.

Although a qualitative approach was preferred, I was, and remain, uncertain about some of the claims made in relation to qualitative research. Greig *et al.* (2013, p.174) assert that such an approach can provide “rich descriptions” which “capture experiences and understandings”, a sentiment shared by Hall and Hall (2004, p.150) who argue that qualitative research is “about understanding the world of the subjects”. What we say depends on what we are asked, how we are asked it, and the values and assumptions of the researcher, as well as the researched (Bragg 2007). Each of us constructs a story of self and others, and we present different sides of this story to different people at different times (Hewitt 2000; Charon 2007). This may be based on what we view as strategic at that point, and/or it may be the story we are used to telling, which we take for granted, and which is habitual. While the descriptions of direct work which emerged from interviews were indeed rich, they provide a partial view of their experiences, and one which participants were prepared to share with me. The descriptions given do not necessarily

“capture” or fully reflect their ‘world’, as they experience it outside the interview. Although the content and themes which emerged reflect their experiences of direct work, interviews were influenced by context, including where they took place, when they took place, and what had happened just before. Moreover, the content was shaped, or constructed, by what participants brought in terms of their experiences and expectations, what I brought, and the particular dynamics of the encounter. Here, there are parallels between the research and the practice it explores, and this point will be developed throughout the thesis.

The research process through an ethical lens

As noted in Chapter Two, the degree to which studies ‘should’ involve children, and whether research with children necessarily requires a different approach to adults, are subject to debate, and can be linked to perceptions of children and the nature of childhood. Some have taken the position that having children as co-researchers means the data collected is more authentic or rich (Kellett *et al.* 2004; Tarapdar 2009) and enables a “greater understanding of children’s perspectives” (Coad and Evans 2008, p.41), while Cahill (2011) stresses the significant value of “insider knowledge”. Others dispute the claim that children as co-researchers necessarily makes for better or more valid research, arguing that the drawbacks as well as the positives need to be openly discussed (Gallacher and Gallacher 2008; Holland *et al.* 2010). Franks (2011) questions to what degree children can be fully engaged in participatory research given organisational constraints and timescales for funding. She suggests that aiming for “pockets of participation” might be more

realistic. After reviewing 50 research projects Brownlie *et al.* (2006 p.25) comment that “the key argument presented in the research literature for involving young researchers is that it makes for better research...in the last five years, researchers have also started to explore some of the potential difficulties”. Looking beyond the particular question of whether research which includes child participants should involve child researchers, there are difficulties associated with assigning epistemological privilege to any researcher merely by dint of some commonality with those participating in the research, whether on the basis of gender, disability, or in this instance age. In some sense this is based upon assumptions of a shared truth, and “unity and sameness” (Mason 2007, p.193), rather than on an individualised and subjective understanding of experience.

As there are opposing views about the place of children as co-researchers, there are polarised views about whether different approaches to those employed with adults are necessary. Mason and Falloon (2001) and Mauthner (1997) argue respectively that small group interviews are preferable to individual interviews as within a group the power between adult researcher and child participant is diluted, groups replicate children’s experiences within school, and are familiar and safer for the child. However, Mason and Falloon may be underestimating the extent of power differentials between child and adult researcher, and there is abundant evidence that children do not necessarily experience their peers as safe; bullying is the most frequent reason for calls to ChildLine (NSPCC 2008). There are also disputes as to the manner in which research with children can, or should be conducted, whether

in groups or individually, including a suggestion that semi-structured, talk-based interviews should generally be replaced with activities (Clark and Statham 2005). Coad and Lewis (2004, p.31) question “the suitability of structured and semi-structured individual interviews with young children”. Given the wide age range which childhood encompasses, different methods may need to be used with different children. Drawing parallels between research and practice, Thomas and O’Kane (2000) argue eloquently that if researchers or practitioners interact using only talk or writing, this can have the consequence of rendering children as less capable. Winter (2010, 2011) demonstrated how activities helped children to talk about themselves and their worlds, while Clark’s mosaic approach (in Lewis *et al.* 2006) enabled her to understand that a child’s view of particular spaces in a nursery differed from those of the adults. While I had taken play and drawing materials with me, most of the children chose to either play with their own toys or household objects while talking, or just to talk, possibly as this was familiar to them. It may be that taking polarised positions on how to communicate will exclude practitioners and children. To assume that children will want to participate in activities can be just as restrictive as the view that talk is always a sufficient medium for communication. Rather, practitioners and researchers need to be able to communicate using a variety of methods, of which play is one.

Payment

One means of recognising the time donated by participants, and demonstrating gratitude is by giving some recompense; however the form this should take is subject to debate. The National Children’s Bureau (NCB)

guidelines (2006, p.4) indicate that “it is appropriate to compensate for time and efforts, where the subject (their word, not mine) is a child this will usually be in kind, for example a gift voucher”. In a context where participants have limited incomes, there is a risk that remuneration in cash or kind might persuade or bribe into participating people who might not otherwise do so (Cree *et al.* 2002; Alderson and Morrow 2004). It could also compromise the principle of ongoing consent if someone feels they have to continue in order to receive payment (Curtis *et al.* 2004; Ritchie *et al.* in Hallowell 2005). I decided that as recognition and recompense for their time, a gift token of their choice would be given to children who participated. In one instance, a child could not decide on a gift token, and after discussion with his parents a compromise was reached when I agreed to send them a token for Farm Foods, and they gave him cash. The information sheets included reference to gift tokens, and during my initial visit to one team, I was surprised when one practitioner questioned whether all young people should receive this, or to paraphrase “just those who really need it”. This appeared to suggest gratitude could be ‘means tested’, and some children are more deserving than others. All children at some point discussed how they were going to spend their voucher, and expressed pleasure at being thanked in this manner. Sheppard *et al.* (2000) compensated social workers who participated in their research; however I took the view that as professionals were participating during work a voucher might give an unintended message that research is an adjunct to practice, rather than part of it. In recognition that practitioners were, however, giving up time, I provided fruit or biscuits as a thank you.

Everyday ethics: ethical guidelines and ethical practice

Whether research is with children or adults, some values are consistent in ethical guidelines and research governance (NCB 2006; UKRIO 2009; University of Stirling 2009). These include the principles that participants should be treated respectfully throughout; they should understand the purpose of the research; that ongoing consent, rather than assent, is preferred; and that researchers should endeavour to ameliorate any negative impact of involvement, and aim to do no harm. Bogulbo (2010, p.9) goes beyond this and argues that social work researchers should “bring about good for research respondents”. While this is a laudable aim, I took some care to temper the expectations of participants that the research would necessarily translate into changes in practice within the local authority or beyond. My hope is that all who participated felt that their experiences had been heard, and all were aware that I would disseminate findings. Smith (2009, p.117) found that respondents in his research “welcome the opportunity to discuss an issue...are pleased that someone else has shown an interest”. For some professionals, the process of talking about their practice went beyond that. Several commented that the experience had been affirmative, and enabled them to recognise and value their work, as illustrated in the following extract from Mara’s interview. It came at the end of the interview, immediately after I had thanked her:

I have to say it's rather, you know looking positively on what you are doing with the kids, so, your questions, and after this...you actually feel, at the end; "Yes I'm not that bad" (Mara, social worker).⁵

Throughout, I approached the research from the perspective that rather than being a set of rules, ethics are embodied in the minutiae of research practice, can be contested, and messy, and require thought and reflexivity. Different choices can be made during each part of the process contingent on what one perceives as being ethical at that point in those circumstances (Mason 2007; Gorin *et al.* 2008; Miller *et al.* 2012), and someone else may make different choices. To give an example, the University Ethics Committee approved interviews with children aged 5-18 years, and this age range was included on information sheets for children, parents and professionals. Following the interview with Josie (nine) and Reanne (six), I learnt from their social worker (Caroline) that the noise I had heard from the kitchen had been Cara (aged three) loudly protesting to her mother (Annie) and Caroline that she was not involved in the interview. I decided that, like her sisters, she would receive a voucher as this seemed fairer to both Cara and Annie. I had visited their home and impinged on family time, and if two children had vouchers and one did not this could be problematic. Caroline subsequently informed me that that if I had not taken this decision she would have provided a voucher for Cara. For me,

⁵ Throughout the thesis I use ... to indicate hesitation, or short pauses, longer pauses are indicated by (pause), while elisions are represented by the following notation [...]

even though Cara fell outside the parameters approved by the Ethics Committee, this was the right thing. In this sense, there are parallels with social work practice. Just as research is guided by ethical codes and Ethics Committees, practice relationships and interactions are underpinned by a Code of Practice (SSSC 2009), and Guidance (Scottish Executive 2004 a and b; Scottish Government 2010). However, just as overarching codes do not negate the need for ongoing deliberation within research, in practice complying with procedures and “doing things right”, is not always synonymous with ‘doing the right thing’ for a particular child (Munro 2011). During interviews practitioners recalled instances where they had taken phone calls in their own time, and temporarily stored details about children at home, as they perceived this as being “safer” than the office. Presumably, they made decisions that this was the “right thing”, however they were not necessarily “doing things right” and the question “are you going to tell on me?” made by two practitioners in individual interviews, indicated they were aware of this. By asking the question, each one may also have been testing out my position, both on their actions and what ‘confidentiality’ within the research interview meant.

Accessing participants

There are benefits to conducting research in environments where the researcher has been, or is currently employed, not least because this can allow a new perspective on the familiar. I chose to conduct the interviews in a local authority where I had not previously been employed, and did not regularly teach. My motivation was to reduce the possibility that children or

professionals might feel obliged to speak to me as a consequence of existing or historical relationships. I could have identified child participants through the Reporter to the Children's Hearing as others have done (Gadda 2012).

Although there are benefits to accessing children directly, I made the decision to ask social workers to act as conduits and gatekeepers, both giving out information, and then introducing me to children who were interested in participating, and their parents, and I explore the reasoning behind this in the next section. After gaining ethical approval from the Ethics Committee within the University, the process within the local authority which had agreed to host the research initially appeared refreshingly simple. I met the Service Manager and was given permission to approach all the children and family teams, via team managers, to explain the focus of the research. The names of team managers were provided by a representative I had been linked to by the Service Manager. At the time, I was relieved that there was not also a research committee within the authority to navigate. In retrospect, when viewed in the light of subsequent difficulties in accessing participants, and the limited numbers of professionals who attended dissemination events, the absence may indicate that research is not embedded within the organisation.

Making initial contact

My aim was to visit all the children and family teams to introduce myself, outline the research, and distribute information sheets detailing how professionals and children could be involved. Visiting teams proved more time-consuming than anticipated, and took almost a year. Despite repeated emails, one manager did not respond, so no children or practitioners from that

area were involved. In all other instances, I was invited to the team meeting. Two team managers responded very quickly to my initial email, and, interestingly, both went on to participate in interviews. Generally more than one email or phone call was required to arrange a visit, and as most phone calls went through a central Call Centre, this was a lengthy process. There is much written about children and families who are “hard to reach” (Gorin *et al.* 2008); however this part of the process led me, like others (Daniel *et al.* 2010), to question how easy social work services are to access. Of note, given the limited involvement of children with disabilities in research (Stalker and Connors 2003; Alderson and Morrow 2004; Aubrey and Dahl 2006) information about the Children and Disability Team was not provided, and I erroneously assumed that, as in some local authorities, this work was subsumed within children and families teams. It was only because I met the manager through my teaching role that I became aware the team existed and arranged to meet them.

One information sheet was provided for professionals detailing how they could participate and was distributed at the team meeting, with copies left for any practitioners not present. I left copies of information sheets for parents and children, which practitioners were asked to distribute and contact me if any children were interested, or wanted to find out more from me, before deciding whether to participate. Three different information sheets were produced for children of different ages and stages outlining the purpose of the research and

my role⁶. Asking practitioners to circulate information, rather than sending it via the Reporter to the Children's Hearing was underpinned by a belief that those who knew the child, and his/her circumstances, would be better placed to decide how to introduce the subject of research. It was also based on a supposition that professionals could gauge which of the three information sheets would align with a child's capabilities and this might maximise engagement. In retrospect, rather than increasing the possibility that children might be involved, the decision to use gatekeepers may have diminished the opportunity and disenfranchised some children. It may be that practitioners were more willing to put me in contact with children with whom their relationship was positive. Moreover, just as I was concerned to do no harm, gatekeepers in this study, as elsewhere (Gilbertson and Barber 2002; Leeson 2007; Powell and Smith 2009), may have chosen not to pass on information because they, as opposed to the child, judged that involvement might be destabilising for a child or their family. By conducting the research in a local authority where I had not been employed, the impetus for gatekeepers to gate keep, and protect children rather than enable their engagement, may have been more acute. Of the six practitioners who linked me with children I was known to three of them, and two others were connected to a practitioner who knew me.

⁶ See Appendix 2 for Information Sheets

One practitioner commented that one child would not “have much to say” and was “monosyllabic”, thus they had not planned to pass the information to her. Their apparent motivation was that they wanted to link me with children they perceived as being good or easy to interview, and for them, this involved being articulate. This mirrors previous studies where assumptions were made by gatekeepers, researchers, and parents, about a child’s capacity to participate based on particular characteristics, including disability, age, behaviour, use of non-verbal communication, or where English is not their first language (Alderson and Morrow 2004; Curtis *et al.* 2004; Munro *et al.* 2005; Wright *et al.* 2006; SCRA 2009; Cross 2009; Mitchell 2010). In the context of competing demands on their time, the decision to ask professionals to pass on information, introduce me, and where necessary offer support to the child or young person after the interview may also have acted as a disincentive for practitioners who have other priorities.

Where children expressed an interest in participating, I asked practitioners to provide me with limited verbal information about the family to ensure that, as far as possible, I would not inadvertently cause harm. I also asked professionals to introduce me to the child and his/her parent(s) as I was reluctant to visit without being accompanied by a professional whom they already knew. The decision was influenced by my previous practice experience where children had transient adults coming in and out of their lives in a manner which was, at times, negative. Given my dual role as researcher, and registered social worker, a further objective was to minimise the risk that, if unaccompanied, I might have to respond as a social worker, whereas if

visiting with the allocated worker, the primary responsibility would be theirs. Indeed, during one visit to introduce me, when the social worker enquired why the window was broken, the mother of the child described how her partner had thrown a six-pack of beer through it. As this was the room in which the interview took place, it is likely that had I visited alone, I would have remarked on the broken window, not least as it made the room cold, and this could have shifted the focus of the interview.

Consent

All participants were asked to complete consent forms confirming that they were willing to be interviewed, and indicating whether they were happy to be recorded⁷. The consent form made it explicit that all recordings would be transcribed. In addition to the information sheets provided before each interview I explained the purpose and limitations of the research, including how I would disseminate findings, and checked whether they wanted to continue.

Where the participant was a child, written consent was sought from the child and parent(s). I have sympathy with the view that seeking consent from a parent could potentially exclude or marginalise a child, and recognise that there may be a dissonance between on the one hand recognising children's capabilities, whilst simultaneously seeking parental permission. There will also

⁷ See Appendix 3 for consent forms.

be instances where the nature of the research means that parental consent for participation is not sought (Balen *et al.* 2006). I took the decision to seek consent from both child and parent, and was influenced by several factors. The research explores experiences of Home Supervision, thus children participating in the research necessarily live at home with a parent or parents, for at least part of the week. In this instance, seeking consent from both was important in terms of respecting children and their parent(s). The nature of the child/parent relationship is complex and negotiated, and whereas my association with a child was necessarily transitory, their relationship with a parent is ongoing, and I was reluctant to seek consent only from a child, if that might later lead to difficulties between parent and child. More pragmatically, there is some indication that children are more likely to participate in research where this is supported by the adults in their life (Cree *et al.* 2002; Powell and Smith 2009). In part this is because it may include some modification of usual routines, as happened with this study where parents either brought their child to the social work office, vacated their front room in order that their child(ren) and I could meet with a degree of privacy, or ensured they were available to sit in where the child wanted them present.

Confidentiality

The positions taken on confidentiality in research with children vary. Punch (2002) utilised a “secret box” and offered absolute confidentiality relating to anything in the box. Thomas and O’Kane (1998) initially appeared to offer confidentiality, but later qualified this by indicating there were circumstances where they would pass on information, while some have used consultants to

advise when to pass on information (Gorin 2008). I chose to approach this study from the position of “contingent confidentiality” (Dominelli and Holloway 2008) in relation to all participants. This meant that in my verbal and written communications it was made explicit that if professionals, children, or parents, said or did anything which led me to have concerns about the safety of a child or professional practice, I would pass this information on to the relevant team manager/service manager. In coming to this decision I was influenced by several factors. I have a dual role as a registered social worker and researcher, and the UKRIO Code of Practice (2009, p.7) states that “researchers who are members of a regulated profession must follow the requirements and guidance of the body regulating their profession”. The SSSC Codes of Practice stipulate that those registered must “promote independence (of service users) while protecting them as far as possible from danger or harm” (2009). My previous practice experience was that “protecting them as far as possible” meant information which indicates that a child is, or could be, at risk of harm should be shared. While this was one determinant, another impetus for approaching this study from the stance of contingent confidentiality was that this reflects where I situate myself on the positions set out by Shemmings (2000). He argued that in relation to children, social workers tend to fall in to two camps, those who are “enablers” and those who are “protectors”. While viewing children as active agents, and wanting to hear and represent their experiences and views, this is balanced with a professional and personal responsibility to safeguard, and I situate myself closer to the ‘protectors’. In the event, there were no instances where I felt I needed to pass on information which arose during the research process.

Anonymity

All participants were advised that, as far as possible, I would maintain their anonymity. They were assigned pseudonyms, and some details were amended to make identification of child or professionals less likely. However, because of the limited numbers of children who participated, there are instances where it would be possible to make an educated guess as to who said what. To minimise this, when disseminating the findings, particularly in the local authority which hosted the research, I have used the phrase “one child” or “one social worker” if the provision of any further details could breach anonymity. Despite this, one team manager at a dissemination event, while not naming anyone, indicated he thought he knew which worker had been involved in the practice example I had cited. During the same event, a practitioner was visibly moved when she assumed an extract I read where a child described how his/her social worker would “always be there if needed” related to a child she had introduced me to.

In some studies, as part of a process of engagement, children have suggested their own pseudonyms (Gadda 2012); however I concluded that this could increase the possibility that participants might be identified. I was invited to the review team, and after describing what “one child” had said, those present advised how, during his review one boy had volunteered information about his involvement in the research, and they concluded that he was the “one child” to whom I alluded. Had he chosen his pseudonym, he might have chosen to share this with professionals, and while it is unlikely that

they will read this thesis, doing so would enable them to link statements to a specific child.

Extracts from interview transcriptions are included throughout the chapters, but where the particular manner of speech might identify a child or professional to those who know them, I have made limited modifications which retain the meaning, while making it less possible to identify the individual. Aside from adding grammatical conventions to speech to make it easier to read, these are the only instances where I have altered the content.

Data collection

Individual semi-structured Interviews

Individual semi-structured interviews were initially chosen as the key method for the study as they appeared the most apposite way to access experiences. Trevithick (2005, p.140) describes an interview as “a conversation with a purpose”, while for Kvale (2007, p. xvii) the aim of the interview within research is to “produce knowledge” through a “specific form of conversation”. In this instance, the “knowledge” I was interested in was experiences of direct work as part of Home Supervision from the perspectives of those involved. In choosing semi-structured interviews, I was influenced by the potential of the interview to access subjective perceptions and experiences of participants (Seidman 2006; Punch 2009). I also wanted an approach which would put the testimonies of children and practitioners at the centre of the research. I am somewhat reluctant to use the term ‘voices of children’ as this could imply that there is somehow an authentic voice, which if the researcher possesses

sufficient skill, will be heard, rather than different voices, at different times, and different places (Wyness 2006). There is also some evidence that the drive to 'include' and 'listen' to children embodied in policy, guidance and legislation, has at times, translated into research and practice which is at best tokenistic (Campbell 2008; Lewis 2010). I did, however, want an approach which could enable children and professionals to give voice to their experiences, and the interview appeared, for me, to be the best vehicle for seeking their views. This is in the context of existing research findings that children in contact with social work services can feel marginalised, and their views have at times been misrepresented (Cossar *et al.* 2011; Holland 2011). There are also indications that social work practitioners feel that their views and experiences are under-represented in research and policy (Jones 2001; Walker *et al.* 2004; Stevens *et al.*(2007).

The interview forms a core aspect of social work practice (Kadushin and Kadushin 1997), and one criticism is that it can be the default option for researchers who have previous social work experience (Smith 2009). The risk is that it may not be the right option, and in choosing a method which initially appears familiar, one may underestimate the differences between research and practice. Although there are parallels and commonalities, interviews with children as part of practice have a different quality and dynamic to the research interview. The content of each is influenced by the context, by the purpose, by what each bring in terms of experiences and expectations, and not least by the degree of choice those involved in research have about their involvement. There is also some evidence to indicate that for the researcher

who is, or was, a practitioner, their dual status can be experienced as problematic and can add another layer of complexity (Mitchell 2009; Coles and Mudaly 2010). I was aware on several occasions that my response would have been different had I been the allocated social worker, and that there were conversations which might not have taken place. One example was Jim's candid comment that his "hatred" of social workers contributed to his son Alan's initial anxiety. Although the anxieties and ambivalences associated with social work contact are well documented (Buckley *et al.* 2011), the nature of the relationship, and the inherent power differentials, can act as a disincentive to children or parents expressing particular views. I am unsure whether Jim would have articulated his feelings as clearly had I purely been in role as social worker.

As a consequence of my dual role I had, or was assumed to share, insider knowledge, and this influenced the process and content of interviews. There were occasions where I did not ask practitioners to expand because I assumed, correctly or incorrectly, that I understood what they were saying, and other instances where they did not explain an aspect of practice in depth presumably because they made similar assumptions. To give an example, during her interview, Susan referred to "life story work" with a boy, but did not define what she meant, nor did I ask for clarification, even though there is evidence that life story work can be enacted in very different ways in practice (Baynes 2008; Willis and Holland, 2009).

Notwithstanding the distinctions between research and practice interviews, I wanted to utilise and build on communication skills I already had. Just as the interview format was familiar to me, given the dominance of talk-based assessment (Holland 2011) it was also likely to be familiar to the research participants, and this was the case. Indeed, one interesting aspect of the research was that the primary method of data collection, talk based one-to-one interviews, mirrored the experience of direct work recalled by all participants, that of “talking”. In common with others (Thomas and O’Kane 2000; Hill 2006; McLeod 2008), there was an overlap between the methods I used or considered using, and the ways which practitioners interact with children, and aspects of this parallel process are considered throughout the thesis.

One possibility would have been to interview children and their allocated social workers, and there are benefits to this: For McLeod (2008), it enabled her to identify clear dissonances between how practitioners described their interactions, and how they were experienced. I made the choice that where possible I would interview unconnected social workers and children. Trevithick (2005, p.23) refers to the concept of subjugated knowledge, and argues, “whose knowledge is privileged or given significance is controversial and contested”. I wanted to avoid the position where one person’s account of an encounter could be privileged over another’s; essentially “John says this, but Jean says that”. However, social workers who were willing to contribute also identified children who wanted to be involved, and I did not want to exclude potential participants. Where there was an existing relationship with a child

who was participating/had participated, social workers were asked not to talk about their work with that child. Although not ideal, this was a pragmatic response necessary to maximise research participants.

Group interviews have been used in research with children (Butler and Williamson 1994; Stafford *et al.* 2003), and social workers (Gupta and Blewett 2007; Beckett *et al.* 2007) to elicit views. The group offers the possibility that power differentials between researcher and researched are minimised (Alanen and Mayall 2001), and can generate a wider and richer range of views than might emerge in an individual interview (Frosh *et al.* 2002; Punch 2005). A group can enable participants to gauge their position in relation to that of their peers, and in so doing revise their initial position. Conversely, there is the risk that in a group, particular individuals will dominate, and others may be inhibited from expressing their views and experiences, particularly if the subject is sensitive (Coad and Lewis 2004; Hill 2006; Yegidis and Weinbach 2009; Holland *et al.* 2010). Inevitably, what is shared with the researcher in a group is also shared with other group members, and can increase the possibility that personal information is disclosed in a manner which might identify or cause harm (Greene and Hogan 2005). I opted for individual interviews on the basis that, on balance, they were more likely to provide a forum where children and professionals might feel able to articulate what their experiences had been. I did, however, decide to use groups to develop the questions used in the interviews, and the next section considers the initial aim, and eventual role, of the reference groups.

Reference groups

Reference groups have been identified as a valuable part of the research process (Stalker and Connor 2003; Bryman 2008). Originally, the aim in this study was to have three reference groups with, respectively, children, practitioners, and managers, to pilot questions prior to arranging interviews and enable changes to be made based on the feedback. In autumn 2010, a reference group for children was held in the local authority hosting the research, and two children participated, one boy and one girl. Also in autumn 2010, two groups for professionals were held outside the local authority, following teaching days for post-qualifying courses where I was the tutor. Thus, I had an existing relationship with the professionals, but not the children. All who participated in the groups gave consent for the discussions to be taped and transcribed. The groups considered the draft interview questions and suggested amendments which I later incorporated in to the interview schedule; however, all three went beyond their initial remit of considering the questions. Participants in each group reflected on their experiences of direct work, of social work and social work processes, and the discussions were so rich and layered, that I sought and gained permission to include the group transcripts as part of the wider data.

Participants

Eight children, four boys and four girls, ranging in age from 6-15 took part; two formed a reference group, while six were interviewed individually. Eleven professionals from the same local authority participated in individual interviews: six social workers and two social work assistants (all women), and

three team managers (all men). In early 2012 a 'final notice' was sent to all teams. Although this did not lead to further interviews, the review team responded, and I met them and discussed themes emerging from my initial analysis of data. Six professionals from other local authorities participated in the reference group for managers (one man, five women), and eight took part in the reference group for practitioners (all women).

The number of children was smaller than I had originally hoped; however the process of engagement was protracted, and the decision to conclude interviews was reluctantly taken in late spring 2012, almost 18 months after the first individual interview in January 2011. Clearly, only a small percentage who could have taken part, did so. Those who participated were, in the main, positive about their experience of social workers, and direct work. They are not necessarily a representative sample of other children who are looked after at home in the local authority hosting the research, or beyond, and a similar proviso applies to the professionals. Just as social workers may have been more willing to put me in contact with particular children, I may have been directed towards practitioners. For instance, Pete (a social work manager) encouraged me to meet a social work assistant in his team because she does "impressive work with children". Some practitioners were more likely than others to volunteer for a variety of reasons, including the one voiced by Lucy, who expressed her view that some practitioners chose not to participate because they engaged in less direct work than she did. Mason (2007, p.199) highlights that empirical generalisation is "not easy to achieve in qualitative research" and indeed this was not the intention. The findings do, however,

contribute to the knowledge base by offering theoretical insight into subjective experiences.

Location of interviews

Children and professionals were offered a choice about the venue where we would meet. All children who participated in interviews, with the exception of Alan and his father Jim, who came to their local social work office, chose to see me in their home. All professionals interviewed individually met me in their workplace, generally in interview or meeting rooms, though some spoke to me in their offices. The two reference groups for professionals took place in the teaching venues, and the one for young people was held in a resource centre.

The reception and waiting areas of social work offices have been the subject of earlier research (Burchell 1992). The decision to conduct research somewhere I had not previously worked meant that when visiting offices I observed things which I might otherwise have taken for granted. In addition, although I was allowed access to some private areas, like team rooms and the team manager's office, I was, nonetheless, an outsider and had to wait in the reception area to be admitted, rather than using a pass card or code to cross the boundary. In the buildings where practitioners were located there was an absence of official space or place for children, and much direct work occurred away from social work offices. This emerged mainly through practitioners' comments, but also came from my observations, what I saw and heard, or conversely did not see, during interviews and in the periods when I was waiting in public or private spaces. While recognising that my

observations are necessarily snapshots, open to different interpretations, they influenced what I brought to the research process.

At the time of the research, most teams were based in older buildings, where workers had their own desk, with some storing books, pens, and toys underneath or on top. One team had recently moved to an open plan office, and the term “agile working” was used in a couple of interviews to describe changes to working practices which were being introduced. Although meanings vary (Jeyasingham 2014), here agile working includes hot-desking, ‘clean’ work surfaces and walls, and working from home. Since concluding interviews, other teams have relocated, and there appears to be a move towards agile working. In Chapters Six and Seven, the role of the team, and the location of resources on and under desks are considered, and their possible implications for direct work.

Data analysis

Most of the data came from transcriptions, and I used thematic analysis (Braun and Clark 2006; Spencer *et al.* 2014a) to identify patterns, or themes, which emerged from what participants said (and did not say), and from how they talked to me, and to each other in the groups. In addition, as the previous paragraphs indicate, some of the data came from my observations, in waiting rooms, in offices, before and during interviews. Practitioners introduced me to children and their parents, and what they did and said in their interactions with children also constituted data. When analysing I worked across the different

data: from individual interviews, focus groups, and my own observations and field notes.

Table-top rather than computer-assisted analysis software

The reference groups and individual interviews generated rich data, and I considered the potential benefits that software like NVivo could bring to the process of organising, managing and displaying data (Ritchie *et al.* 2014), but decided against this. I was worried that contrary to the assertion that NVivo “keeps you close to your data” (Vallance 2005, p.285) it might, for me, have the opposite effect, and the voices present in the data could feel one step removed, and this would reduce, rather than increase my ability to immerse myself and ‘hear’ what children and professional were saying. Moreover, I was concerned that the time involved in mastering NVivo might have deflected me from data analysis.

The process of thematic analysis is comprised of different stages, including becoming familiar with the data, constructing initial thematic frameworks, indexing and sorting, and reviewing themes and patterns (Braun and Clarke 2006; Spencer *et al.* 2014a). During my study, this process took place over a prolonged period. During interviews I reflected ‘in action’ (Schon 1991) and, where possible, brief notes were made immediately after interviews recording my initial observations and thoughts. During and after transcription, the lengthy process of repeatedly listening to interviews, and reading transcripts, enabled me to familiarise myself with the data, identify, and sort key themes; while writing prompted additional reflection and review. Interestingly, while

elsewhere I draw parallels between research and practice, here the priority and time I devoted to analysing data is at variance with the limited time practitioners sometimes have to interpret and analyse the 'data' they have accrued before completing written assessments, and making decisions (Jones and Gallop 2003; White 2011).

Transcription and coding

Where participants gave consent, interviews were taped then transcribed verbatim, and I completed all transcription. Notes were also made on the transcription relating to non-verbal behaviour I observed, and remembered. While these notes were valuable, it is likely that I was more likely to remember (and note) behaviours which were memorable. One participant (Naomi) did not want to have her interview taped, and in this instance I made contemporaneous notes, and typed these up while the interview was fresh in my mind to ensure that, as far as possible, this was accurate. The primary motive in personally transcribing all interviews, particularly as a slow typist, was that doing so provided a prolonged opportunity to immerse myself in the data. Although there were disadvantages, primarily in terms of the time involved, these were outweighed by the benefits. Bird (2005) argues that transcription can be an important phase of analysis, and listening over and over again to interviews was a core part of my data analysis, and enabled me to identify key themes which were starting to emerge. I made initial notes on the transcripts using different fonts and colours, which were then used as the basis for further coding and sorting of sub-themes using constant comparison (Patton 2002). The process of listening meant that how people talked as well

as what they said was important to a degree that I had not anticipated at the beginning of the study, and which would not necessarily have occurred if someone else had transcribed the interviews. I became more attuned to the significance of cadences in speech; of instances where lengthy pauses, repeated 'false starts', and missing words might indicate that interviewees were struggling to express a particular view. One example would be Carla, whose faltering comments about not "being able to deal with that" (direct work), are explored in Chapter Five. Through repeated listening, I was conscious of instances in reference groups where people spoke at the same time; of turn taking; and the possible significance where a view articulated by one person in a group, was not taken forward by others. In Chapter Six, I explore how exchanges like the one between Jane and Lou, might perpetuate or maintain a culture where direct work is undervalued or marginalised. Listening to recordings I heard the amount of laughter in interviews, and this enabled a more nuanced analysis of the emotional labour involved in direct work. When including extracts from interviews, I chose to retain the pauses, false starts, and laughter, so that the manner in which something was expressed (or not) is transparent.

Although I used the term 'starting to emerge', this could infer that analysis was purely inductive, and that the themes I will explore were entirely grounded in and flowed from the data. Mason argues that 'pure' forms of inductive reasoning are rarely practised, as this appears to assume "research can be begun and undertaken in a theoretical vacuum" (2007, p181). I came with particular experiences (and gaps) from practice and teaching, and from

reading existing research, which influenced how I analysed and interpreted data (Charmaz 2006, in Staller 2013). Thus, there were certain themes I expected to see, and possibly looked for, including the role of audit, and the impact of IT. There were other areas which I had not anticipated would be significant but were, not least the concept of 'compensation' which will be discussed in Chapter Four.

Co-construction of data

One of the findings from this study is that direct work is a process and ranges from the planned to the reactive. Practitioners described instances where planned work changed or was deferred, depending on the needs and priorities of the child, and this is one way in which children's agency is enacted in practice. Although children and practitioners might emerge with similar or different meanings of the time they had spent together, what took place was negotiated, to a greater or lesser degree. In this sense they co-constructed direct work. Similarly, research interviews varied, and I was both responsive and an "active agent" in the process (D'Cruz and Jones 2009, p.63). There were some occasions where the interview went in a direction I had not anticipated, such as when Joe and I stood back-to-back to enable his father to measure who was the taller (Joe). There were instances where I chose not to pursue a topic, even where it might relate to direct work. One worker who described how she explored loss and change with a child had indicated at the beginning of the interview that she had experienced a significant bereavement. On this occasion I did not ask whether she thought there was a connection between the nature of the work she was engaged in, and her own

experiences, as it seemed invasive and may have diverted the interview. There were other instances where I made the choice to pursue a topic in more depth. The following extract is taken from Lucy's (social worker) interview, and comes after she described feeling she had let down a teenage girl. In contrast to the rest of the interview, she looked at the floor, spoke quietly, and ate half a packet of biscuits. She went on to suggest that some practitioners spent time on the computer and avoid direct work because of the personal impact. I then asked whether talking about the girl was linked to her comment:

Lucy: And then a lot of folk maybe they don't want to do direct work because it's too personal for them and they (pause) they're scared of it (pause) dinnae want to get that close to their clients.

Int: Mmm (pause) I wonder (pause) why did you say that (pause) was that just because you'd been thinking about that girl?

Lucy: (Laughs) I dinnae ken (pause) and it would be very easy not to do it, because I could just no bother (inaudible).

Int: Uh huh, 'cos I was just thinking, when you were talking about that (pause) it looked like you were back there (pause) being in that Hearing.

Lucy: I was gutted.

Int: And I guess I was wondering then whether that prompted you to think well doing that stuff (waves at computer in the room) is easier.

Lucy: Aye, some people are excellent at the computer and they like that kind of stuff eh, they can do lots of things on it, and that's a lot easier than dealing with (pause) and people telling you to fuck off all the time, you know 'cos some kids... they dinnae want to do any work because (pause) it's dead easier if you (pause) but then you'd just feel crap.

The decision to name Lucy's apparent distress, and ask whether there was a link between this and her comment that "folk" avoided direct work was complex. As the number of pauses infer, I was unsure how to respond. To say nothing would have left Lucy's changed demeanour unacknowledged, and did not sit comfortably with an ethical stance of minimising harm. I was also concerned that if I did not name something which seemed tangible, Lucy might have reservations about my skills as a social worker, and I wanted to be viewed as a 'good' social worker even while interviewing as a researcher. I was mindful that whatever the response, it could influence the direction of the interview, that someone else may have reached a different decision for equally understandable motives, and that there may, at times, be a fine line between being an "active agent" and leading an interviewee. There were other occasions where decisions made in interviews were less deliberate and more intuitive (Helm 2010), such as standing back-to-back with Joe. Throughout the thesis, where comments are included, I include the question or provide a précis of the preceding discussion, to ensure that my role is as transparent as possible.

Mason (2007, p.149) explores how far the researcher is “inevitably and inextricably implicated in the data generation process” and when considering how interviews are co-constructed, it is necessary to foreground my role other than that as a PhD candidate. As already noted, I am a registered social worker, currently part of a team delivering a suite of post-qualifying child protection courses across Scotland and for some professionals I had been, or was, their course tutor. The timing of reference groups after teaching days may have some bearing on comments about post-qualifying teaching and learning. A theme which has emerged through this research is the significance of relationship, and there are parallels in the research process. Clearly, the nature of previous or current relationships had some bearing on interviews as is evident in the reference group for practitioners. Here, I question why Sophie and Hayley laugh at the idea their managers may know what work they are engaged in. I am uncertain whether I would have asked so directly if I had not known them, or indeed whether they would have laughed so openly:

Int: I was going to ask them (team managers) to talk through an example of a piece of direct work from the team, uhm, to get a sense of what they knew, and the sense they made of it with similar kinds of prompts in terms of is that a typical, untypical piece of work. What do you think?

Mandy: Do you mean ask the team managers about one of the work of the people within the team? Is that what you mean?

Int: So ask them to kind of, so when I'm interviewing team managers ask them to talk me through an example of a piece of direct work from their team.

Mandy: So something that they're aware of some of the case work?

Int: Yeah, yeah.

Sophie: Okay... I like that.

Hayley: So do I.

Sophie: Yeah (laughter between Sophie and Hayley).

Int: Why do you laugh?

Hayley: Because I'm not sure how much they'll know about, uhm,
what's actually done (general laughter in group).

More generally my role may have influenced professionals' comments, including their expressed views on direct work, and the relative merits of pre- and post-qualifying teaching and learning. During Pete's (team manager) interview, he twice mentioned the child protection course I teach, and the beneficial effect he perceived it as having on practice with, and on behalf of, children. On the second occasion, I asked whether my dual role as tutor and researcher had influenced the direction of the interview, and while Pete indicated that it had not, it may have had some bearing.

While the data which emerged was co-constructed, not least because there were always at least "two bodies in the room" (Bell 2013, p.525), aside from conversations with supervisors, a critical friend, and my partner, the process of analysis was solitary. As a singleton researcher, there may have been benefits to utilising a reference group to analyse data, including bringing different perspectives (Coad and Evans 2008). However, reading transcriptions is time-consuming, and given the difficulties in recruiting

participants, I am uncertain how feasible this would have been. Moreover, as the process of reading can be “hard labour” (Hallowell *et al.* 2005, p.16), and could identify participants, I decided the drawbacks outweighed the benefits.

There is a view that research which includes children’s testimonies will produce data which is “authentic” (Grover 2004). This infers that research which does not include the testimonies of children is somehow inauthentic, but may also underestimate the role of the researcher in interpreting the data, and deciding what to include and what to leave out. In this sense, just as other aspects of the research process have parallels with practice, so too does the process of analysis. The encounter between practitioner and child may be co-constructed, and the child’s views should be represented in written documents, such as reports and case notes. However, when summarising, and ascribing meaning, it is generally the social worker’s interpretation and analysis which is recorded rather than the child’s (Holland 2011; Bruce 2014), just as it is my understanding of the data.

Disseminating findings

The last section in this chapter considers how findings are being/will be disseminated, and is situated here to reflect the chronology; however dissemination could equally well have been discussed in the earlier section on ethics. One concern was that in all communication, verbal and written, anonymity for research participants should be maintained (Mudaly 2013). The order of dissemination was also seen as ethically significant, and research participants were provided with leaflets summarising the key themes, in

advance of their wider distribution. For children these were sent via their social workers. The dissemination process mirrored the engagement process as three different leaflets were produced for children; one for parents; and one for professionals⁸. Two events were organised within the local authority to disseminate findings, with information being circulated by the training team. Several professionals who participated intimated that they would like to read the thesis in its entirety, and once my doctoral studies are completed this will be sent to them.

One motivation expressed by those who participated was that their experiences could inform practice. One means of honouring this is to ensure that the themes emerging from the research are disseminated, including within post-qualifying teaching, national and international conferences, and journals. However, although conference presentation and publication in peer-reviewed journals is valued within the academy, these are not always accessed by practitioners, and do not necessarily reflect practice knowledge (Walker *et al.* 2004; Gordon and Cooper 2010). They are also unlikely to be read by children and their parents. D’Cruz and Jones highlight the way research can contribute to knowledge, and effect change, by informing “communities of practice” (2009, p.174), and with this in mind I contacted

⁸ See Appendix 6 for information sheets summarising findings.

WithScotland⁹. WithScotland agreed to host a virtual seminar and to situate the five leaflets summarising key themes on their website. The leaflets were also sent to the Scottish Children's Reporters Administration and are now on their website.

Summary

This chapter considered the methodological approach which underpinned the study, and the different stages involved in the research process in some depth. The individual interviews and groups generated much rich data, and the next chapters explore the themes which emerged. I begin in Chapter Four by exploring what direct work happens when children and social workers are together, and what meanings are ascribed.

⁹ WithScotland (previously Scottish Child Protection Network) was established in response to the Eilean Siar Report (Scottish Executive 2005) to amongst other things, identify and link communities of practice and disseminate research.

Chapter Four: Direct work - who, what, where, and why?

Introduction

This study has three overarching research questions: what direct work happens with children subject to Home Supervision Requirements? What meanings are ascribed? What contributes to the amount and quality of direct work? The focus of this chapter is on two out of the three questions: what direct work happens, and what meanings are ascribed by participants.

Although distinct, they are inextricably linked for, as this and later chapters will discuss, the meanings ascribed necessarily influence the amount and quality of direct work which occurs.

Some themes emerged from interviews with professionals, but not children.

Whilst they may well have different perspectives, these differences may also be methodological: children's perspectives on 'direct work' emerged as part of their observations about particular workers. Professionals, on the other hand, were explicitly asked to describe and reflect on direct work. The chapter starts by briefly considering how Home Supervision is perceived. It moves on to consider how direct work is defined by practitioners, and what appears to influence their accounts, before exploring the different meanings ascribed to direct work.

Although the focus of the study is experiences of direct work, rather than Home Supervision as a disposal per se, several participants referred to the purpose of Home Supervision. As this has been considered elsewhere

(Murray 2002; Henderson *et al.* 2011) I do not intend to explore this aspect in depth. However, I will touch upon the comments, because the way children and practitioners conceptualise Home Supervision may influence what direct work takes place.

Home Supervision: “prevention” or “last resort”?

Practitioners and managers approached Home Supervision from a range of perspectives, and these will have some bearing on how they or the practitioners they supervise perceive its purpose, and associated direct work. Lucy, Rena and Lily presented Home Supervision as preventative, with one aim being to avoid a child being accommodated, as Lily explains:

It's keeping them at home, you need to do that work to keep them at home, you know you're trying to do this direct work with them to keep them at home, to prevent them, because really if they are on home-based the next step is looking at them being accommodated

(Lily, social worker).

Inquiry reports and research have levelled criticism that an emphasis on children remaining in their families of origin can, at times, divert the focus from the needs of the child (Brandon *et al.* 2008b; Laming 2009; Ward and Davies 2012). Although Lily and Lucy viewed Home Supervision as preventative, both also recalled examples where a child had been on Home Supervision, but when this had been insufficient to protect them they had been accommodated. Susan's position differed and she reasons that where the

risks are high, particularly for very young children, she prefers to work towards Home Supervision commenting:

I'm very much a believer, for babies particularly, I would rather start with them in a place of ... a safe place, and work their way back home, than have them at home for something to happen to them and then you bring them into care (*Susan, social worker*).

In the next extract, Pete suggests that the formal processes involved encourage parents to “understand” social work concerns. In contrast to Susan, he argues that Home Supervision should be the “last resort”:

Although as professionals we think we're good at communicating, I don't think that families understand what's been said to them. I think that sometimes you have to take them through painful process of child protection case conference and registration and child's plan [...] Or if that's still not working referral to the Reporter [...] So it's another tool for effecting change and protecting children, but it should only be the last resort (*Pete, team manager*).

One factor which underpins direct work will be beliefs, such as those above, about the purpose of Home Supervision, including whether it is viewed as preventative, as the “last resort” or, like Susan, something to work towards. Following the introduction in June 2013 of the Children's Hearing (Scotland) Act 2011, the term ‘Compulsory Supervision Order’ is applied whether a child is looked after at home (previously Home Supervision Order) or ‘looked after

and accommodated'. Future research might explore whether perceptions have altered following this shift in language.

Gender and Home Supervision

Four girls and four boys participated in either the reference group or interviews. Of the boys, Martin, Joe and Jack mentioned that social workers might become involved because of behaviour which is problematic, including committing offences, or misusing drugs or alcohol. Martin (15) first saw a social worker after being charged with offences, and in the following extract he explains why his supervision requirement was recently discharged:

Martin: I got taken off my supervision order last time I was at a Children's Hearing.

Int: Oh, was that..?

Martin: It wasnae that long ago, a couple of months ago.

Int: And was that because you wanted to be off it or because...?

Martin: Being on a supervision order wouldn't have benefited me.

Int: (Pause) That sounds like something that was written in a report (shared laughter).

Martin: I think it was, just it was pointless me being on it.

Int: Right, because....?

Martin: 'Cos I've no been doing anything wrong and I don't need a social worker.

For Martin, social work contact appears to be associated with doing something "wrong", and presumably, in part, this was linked to the reason he

was originally allocated a social worker. However, Joe and Jack also seemed to assume there was a correlation between having a social worker and their behaviour, with Joe remarking that he didn't think it was fair he had a social worker because he "hadnae done anything wrong". None of the girls who participated suggested that social work contact was linked to their behaviour or actions, even when the information provided by social workers indicated this played a part, and this apparent difference may mean that Martin, Joe and Jack approach encounters with social workers differently to the girls. All the children commented that one way social workers help them is by talking about things that are 'troubling', whereas only the boys also referred to behaviour which was 'troublesome'. In a similar vein, during the reference group for managers, Mary referred to a book written by a criminal justice manager about his childhood, and his contact with social work services (Weaver 2008). One of the main themes is that the primary focus of direct work was his offending, rather than factors, including domestic violence, which might have contributed. Mary's explanation that opportunities were missed because he was defined as a "bad lad" resonates with Martin and Joe's comments about doing (or not) something "wrong", and existing research which highlights assumptions practitioners make, including the relevance of gender (Stein *et al.* 2009; Stein and Hicks 2010; Rees *et al.* 2011; Tucker 2011). Looking beyond the children who participated in this research, the statistics collated by the Scottish Children's Reporters Administration (SCRA 2012) indicate that across Scotland, far more boys than girls are referred to the Reporter to the Children's Hearing due to their alleged involvement in offences

Understandings of direct work

Who does direct work?

The Children (Scotland) Act 1995, and the Children's Hearings (Scotland) Act 2011 refer to the responsibilities of the 'local authority' rather than the 'social worker', while the Girfec practice model (Scottish Government 2012) is based on the premise that the needs of the child should determine which professional takes the key role. Consequently, I expected professionals other than social workers to be mentioned. All three team managers interviewed individually, and some in the reference group, stressed that direct work is not the sole preserve of social work. Gary referred several times to other professionals during his interview, and the following extract is one example:

If we come away from the Hearing and the panel has decided on a Home Supervision Order [...] I don't expect my staff to be doing it all, I expect the network of agencies that are working are quite clear what needs to change and who's the best person to do specific tasks (*Gary, team manager*).

The range of professionals mentioned by other participants included workers from youth justice, drugs and alcohol teams, Women's Aid, teachers, including a guidance teacher, psychologists, and health visitors. Some practitioners only referred to direct work in which they were engaged, but most mentioned working alongside other professionals echoing Gary's comment that who undertakes direct work will depend on the needs of the child and the capacity of the professionals.

What counts as direct work?

From interviews with professionals it is clear that the way direct work is defined by the practitioner necessarily influences the amount they perceive they are doing. Theo (team manager) wondered about how much social workers would identify themselves as doing:

In interviews with social workers the majority of them will probably say to you “I don't do direct work”. Some would say “I've no time for direct work” I mean “I wish I could do more direct work”, because they would define it as (pause). They sometimes see direct work as having a specific, as an hour where you sit with someone, or doing something specific and sometimes don't see that direct work maybe, something, a crisis developed, and you were with a young person and you had to respond to the crisis and you listen to what they tell you, but they would not see this as direct work because it's not planned direct work. It is direct work (*Theo, team manager*).

Theo suggested that “the majority” of practitioners would underestimate the amount of direct work they are involved in because, in his opinion, they equate direct work with something which is planned, discrete, and with a clear focus, rather than with work which is responsive and opportunity-led (Ward 2008a). I purposefully did not pre-define direct work in interviews; rather I acknowledged that there are different views as to what it means, and asked professionals for their thoughts. Understandings of direct work varied from narrow to all-encompassing. As predicted by Theo, some, including Janie,

started by defining direct work as something which was “focused” and “planned”:

A focused piece of work on relationships, or their sense of history, or something like that, but I think in reality that doesn't happen, and a lot of it is just talking [...] If you're talking about direct work, it's probably more on a planned basis kind of thing, as I say more of a task centred kind of approach whereas the other kind of work is more when you're just catching up with someone and issues kind of come into play, just through discussion (*Janie, social worker*).

In their individual interviews, practitioners Susan, Claire, Lucy and Rena indicated that it included “spending time” with a child, and could mean a range of “different things” dependent on the needs of the child and why they were on Home Supervision. For Mara it means “practically every single thing you do with children” as she explains below:

One-to-one work is great but practically every single thing you do with the children on home based supervision is actually direct work with them, even by the way you are addressing issues with parents, you are actually showing the children, here there are difficult issues and you can discuss them, you can do it in the appropriate way (*Mara, social worker*).

Janie started by defining direct work as planned, possibly underestimating the significance of the unplanned; the time she spends “just talking” with children. Later in the interview, Janie appeared to question her earlier distinction between the two:

You know, that went from an unplanned piece of work to a direct piece of work, you know a planned focused piece of work. Does that make sense, or am I just overlapping? (*Janie, social worker*)

Instances of practitioners reviewing and changing what they define as direct work occurred in a couple of interviews and during the reference group for practitioners. Lily initially declared “I don’t do that much direct work” but towards the end of the interview her position is notably different, and she comments that “everything you do with or for a young person is direct work”. I have included comments from the beginning and the end to give a sense of this shift, and my role in querying whether she views something which she had just described as being direct work:

Int: Direct work can mean completely different things to different people, so I just wanted to ask what you’d include as being direct work?

Lily: Uhm, you see I think that is a difficult question because I think that I don’t do that much direct work; we would probably get other people in and they’d do that direct work, I mean obviously they are going through worksheets and that with the young people. I mean I suppose in terms of looking at home supervision, just looking at the young people I’ve had on home supervision, whether it be every two to three weeks, it’s unfortunately addressing issues that have happened in those two to three weeks, because nine times out of ten something’s went on, so its addressing the issues of what’s went on. How

did it lead to this? What happened as a consequence? And what could we do differently the next time to kind of prevent that from happening?

Int: And do you include, or not include that as direct work?

Lily: Yeh, I mean I suppose we have to because it is... I think again, sometimes from the course, you think you're not doing that much, but when you break it down you're doing a lot, you are doing a lot.

Lily then went on to describe in some detail the range of direct work in which she is currently involved, relating examples of work with children, with children and parents, and with parents. My comment summarises the span of work she has just described, and obliquely refers back to her opening remark that she does not “do much direct work”:

Int: So, quite a bit of stuff?

Lily: Yeah, yeah (laughs loudly). When you break it down and start thinking about it, yeah it is a lot... because I think that everything you do with or for a young person is direct work.

It appears that the process of talking to someone else about direct work, in this instance to me, was important in enabling Lily to acknowledge the range and depth of work in which she was engaged, and to be more inclusive as to what direct work might encompass. Lily mentions that a post-qualifying course, on which I tutor, encouraged her to identify direct work by “break(ing) it down”. For Lily, the interview process appears to have mirrored this

experience, and she repeats the phrase “break down”. Consequently, her revision may also have been associated with my presence embodying the course. Within the reference group for practitioners there were initially differing views about what direct work included, and two members of the group, Joan and Eilish, shifted their views about direct work during the conversation as the following extract illustrates:

Joan: So what would we consider to be direct work?

Mandy: Completing worksheets with children, you see that's my interpretation of direct work or play therapy, or art therapy or music. Or some sort of direct interaction with the child but it could also be direct work with the family, and doing gradual work with the family I suppose. But when I think of direct work I just think of one-to-one work with the child, that's my perception of it.

Eilish: I suppose it includes group work. If I was to make it succinct I would say that direct work involves tools. So you know, you would go out with the tool, with whatever it is that you've chosen to approach with whatever you're trying to work with the child. But sometimes direct work is working with the carers. For instance, you know how do we calm the child, how do we know, what do we do, and I've gone out and demonstrated just talking really quietly (here Eilish becomes slower and quieter to illustrate what she means) so the carers can see that happen, and that feels like direct work to me.

Joan: I would agree that was direct work though, because before, that would have been my definition: that direct work was when you were one-to-one doing something with a work sheet, but now I consider direct work to be a lot more than that. If you're with the child, even if you are talking or having a chat, to me that's direct work.

Brigid: I would agree with that, I think it's much broader than just using tools. Specifically with older children where you are, you know in the car with them, or you're maybe out for a walk and it's a relaxed place, because using tools can sometimes feel to older kids like they're in school again, and they don't want to engage with that so it's about social workers having to be creative [...] It's the walk in the park, the driving in the car [...] going to the cafe, going to McDonalds and having a chat, a place where they feel comfortable and they're often making the choice about where you go. And the focus of that work might sometimes be how things are at home and a kind of a relaxed, you know, conversation, rather than structured questions where you're trying to get them to open up to you.

Hayley: I suppose your tool is yourself really isn't it, if you see yourself as a tool.

Brigid: Yeah, exactly (while Hayley is speaking).

Eilish: It's almost like any face-to-face contact with a child involves direct work given that all the other work we do is work for the child.

The extracts above suggest that the process of practitioners talking about direct work influences the amount of direct work they identify they are doing. In their individual interviews and the reference group, practitioners appeared to engage in real time reflexivity (Riach 2009; Brownlie 2011) where talking about direct work led them to re-evaluate their role. On each occasion where talking about direct work acted as a catalyst for a practitioner to review what they were doing, this led to them identifying that they were engaged in more direct work than they initially considered. The process never led them to conclude that they were doing less direct work than initially thought. This is an important finding. It appears to indicate that having the opportunity to talk about direct work with someone else was significant, prompting some practitioners to expand their definitions of direct work, how much they were doing, and its value.

Listening to children

Legislation, policy and guidance highlight the responsibility practitioners have to “listen to children”. The place of listening in direct work was mentioned by children and professionals; however the concept of listening, and the meanings ascribed are not unproblematic. McLeod (2008) found that listening had different meanings for children and practitioners. In her study, professionals saw listening as an act in itself, whereas for children, unless listening was accompanied by action, their assumption was that the social worker had not listened. In this study too, by responding to a child’s concerns, practitioners demonstrated that they had listened. At the beginning of their

interview, Josie (nine) and Reanne (six) describe how they “just talk” with Caroline (social worker):

Int: And when you see her what do you do together? What do you and Caroline do?

Josie: We just talk ... Reanne I think just talks to her as well.

Reanne: Yes.

Int: Do you talk, or do you do drawings or read books, or go to the park or anything like that?

Reanne: No, talk.

Slightly later, in response to a question to Reanne, Josie highlights how Caroline both listened and then intervened:

Int: Reanne, see if there was someone in your class who was getting a social worker and they said “What’s it like having a social worker?” What would you tell them?

Josie: Well really it makes life different a bit, because with mum sometimes she’s not letting us go on holiday with Bob and Sue (carers) and they’re (Reanne and Cara) not getting to go on holiday with their dad, but Caroline’s saying that I am allowed to go on holiday with Bob and Sue, and so are they.

For Josie and her siblings, Caroline’s actions on their behalf “makes life different”. In this instance she was able to persuade their mother to allow them to go on holiday. However, in order to intervene, Caroline first needed to listen and hear Josie and Reanne’s views. All of the children who participated

highlighted that a social worker should be someone “to talk to”, and who would listen. For Naomi (13), it appeared that talking to social workers enabled her to “let out your feelings” in a way which might not otherwise have been possible, as the following extract indicates:

Int: If you were talking to another 13 year old, who was just about to get a social worker, what do you think you'd say to them?

Naomi: I'd tell them it's quite helpful to have a social worker.

Int: What's helpful?

Naomi: You just get to talk to them and let out your feelings.

Int: If you'd not had them who would you have talked to?

Naomi: If I didn't have Maud or Sarah, I wouldn't have talked to anyone about what happened.

Just as children identified the importance of social workers listening and being someone to “talk to”, so, too, did the professionals who participated. The following extract is taken from Lucy's interview and comes just after she has been describing her role with Nancy and Dina. Here she summarises what she believes direct work meant to them, and identifies that listening is a powerful aspect:

Int: So, what do you think Nancy (teenage girl) has got out of the work you've done with her?

Lucy: I think that her situation has changed; I think there's no any imminent risk of her being accommodated, I think she's certainly got a better relationship with her mum, and hopefully she's got a better sense of self. I think hopefully she has. And I

think just for Dina (mother), saying “I’m so glad you came along Lucy because you’re the first person that’s ever listened to me”, and I think that’s probably true. Alright sending her on these parenting courses and stuff like that, but did anyone ever sit down and speak to her? Nah, I don’t think they did.... See ken why I keep saying this and I’m really conscious of it, a lot of my work is working with the parents and changing their behaviour so, like with the kids. I think with the kids it’s about listening to them and I think that’s the most, sitting down and listening to them, and letting them say what they’ve got to say.

From her account, what appears to underpin Lucy’s direct work is a sense that for the children and parents, with whom she is in contact, their past experiences have meant that they have not felt listened to. Consequently, listening and “letting them say what they’ve got to say” is a central to her direct work. The value accorded to being ‘listened to’ emerges from existing research (Grover 2004; Mudaly and Goddard 2006; Tarapdar 2010; Tucker 2011) and underpins legislation (CSA 1995, CHSA 2011) and guidance (Scottish Executive 2004b). However, listening and hearing are not necessarily synonymous. As will be explored in Chapters Five, Six and Seven, factors which help or hinder listening and hearing are multi-layered, and can rest with the agency, the practitioner, the child and/or parent.

So far, this chapter has considered who does direct work, what direct work includes, and how the interview process influenced the amount of direct work

identified by practitioners. The next sections will concentrate in more depth on the meanings ascribed to direct work. As is to be expected, participants assigned different meanings to direct work depending on their experiences and perspective. However, several themes emerged as significant, with crossovers and interplays between them, and these can be usefully conceptualised as a 'typology' of direct work.

Typology of direct work

Typologies have been identified elsewhere as a helpful way of ordering one's thoughts, and clarifying emerging themes (Cohen *et al.* 2007; Tucker 2011), although there is a risk of rigidity given that interventions are interconnected and invariably span different areas at once, or have different meanings for different participants. The following typology of direct work emerged from interviews:

- Direct work to build and sustain the relationship between a child and practitioner, with this relationship being the foundation for assessment and intervention.
- Direct work as part of assessment.
- Direct work as part of intervention. Five interconnected sub-themes are significant here: direct work with child, parent, or child and parent, aimed at maintaining the child's development needs; interventions designed to reduce risk and promote rights for the child, and thus protective; direct work aimed at repairing significant relationships, and the child's view of themselves, thus reparative; direct work which can be described as compensatory as it offers the child or young person

experiences which might otherwise not be available; direct work which is preparatory, including preparing a child for a significant transition, or to enable them to participate in decision making processes. These five sub-themes have commonalities and build on four areas previously identified as central by Gilligan (1999).

Direct work to build and sustain relationships

In common with other research (Cossar *et al.* 2011; Gorin and Jobe 2013), children in this study recalled specific experiences of direct work in the context of their relationship with a particular worker. Although practitioners also recounted instances of direct work with individual children, this was within wider parameters. Despite their different standpoints, a consistent theme was the centrality of the relationship, although as is to be expected the language used varied. When Martin (15) was asked what advice he would offer another young person who was going to have a social worker he focused on the importance of relationship, or as he framed it, “getting to know” each other :

Int: If you were going to talk to someone, a fifteen year old young man who was getting a social worker, what would you say to him about what it's like?

Martin: I don't know I think I'd just say tell them about yourself and ask them questions about himself or herself, just try and get to know them.

Similarly, during the reference group Jack (14) mentioned how valuable it was for children and their social workers to “get to know” each other. As with Martin, who notes that he would “ask them questions about his or herself”,

Jack anticipates that forming a relationship involves some degree of reciprocal information sharing. For instance, Jack was interested in knowing whether his social worker likes sport, what kind of car they drive, and whether they like their job. Martin and Jack's comments about the centrality of relationship resonate with messages about the role of relationship in social work literature (Trevithick 2003; Howe 2005, 2008; Ruch *et al.* 2010; Mitchell 2012; Ruch 2014); existing research with children (McNeish 2002; Aubrey and Dahl 2006; McLeod 2010); policy developments (Scottish Executive 2006a; Scottish Government 2008; Munro 2011, 2012); and the expressed wishes of practitioners (Gupta and Blewett 2007; White 2008; Holmes *et al.* 2009). The significance of the relationship between child and practitioner emerged as a core theme from interviews and reference groups, and professionals identified that direct work was one way they both formed and sustained their relationship with a child. The following extracts are representative of their comments:

I think that's the big thing when you're working with children, you have to build a relationship with them, and you have to... they have to be able to trust you, and that takes time

(Kate, social work assistant).

It's just gradually building up working relationships, and trust

(Gary, team manager).

During her interview Lucy spoke in some depth about her direct work with a teenage girl and her mother. When asked 'how' change had been achieved, she identified the central importance of her relationship with both:

Int: So how did you do that?

Lucy: With?

Int: With Nancy?

Lucy: With the relationship, we did that together the three of us.

Lucy's message about the centrality of relationship as both a vehicle and a catalyst for change is significant. For professionals, their relationship with a child was presented as important if assessment and intervention are to be sensitive to an individual child's particular concerns and needs, and this will be explored next.

Direct work as part of assessment

The role that children play in assessment has been considered and found wanting by inquiry reports and research. Rather than being located at the centre of assessment processes, children have been found to be on the periphery (Laming 2003; Cleaver and Walker 2004; Brandon *et al.* 2008b; Holland 2010). Despite exhortations to involve them in ways which are meaningful, at times the child's 'voice' has been lost or not actively sought, due in part to assumptions practitioners have made about a lack of capacity to participate (Coyne 2008; Winter 2011; Whincup 2011). Professionals in this study identified that direct work is one way to ensure that the child's concerns

are at the centre of assessment. This was expressed candidly by Lucy in response to a question about what direct work included:

First of all building a relationship with them so they get to know me 'cos I've never heard so much rubbish that you can see a child once a month and have a relationship with them, I just think that's nonsense. And sometimes that's expected of us, and I'll say, "You cannot write a report on a kid that you don't know, that you see once a month". How do you get to know that child? So, getting to know them first, building up a relationship, looking at their issues and seeing what their issues are for them [*for them was emphasised by being slightly louder and slower*] and looking at it that way so we can work on that, and issues like low self-esteem, how they relate to their friends, what they're like at school, what the issues are (*Lucy, social worker*).

Lucy identified that the time she spent with a child was important to "get to know them" and "build a relationship" so that she could establish what "their issues are for them". In other words Lucy wanted to ensure that her assessment reflects the child's experiences and concerns. Several practitioners voiced the opinion that if they did not take time to get to know the child, their assessment would be compromised, as it was less likely that the child would communicate their concerns, or be willing to engage in direct work about sensitive areas. The following extract is taken from Susan's interview just after she has described working with a young boy who has experienced significant change and loss:

You can't do that if you don't know the child, the child will not tell you anything if you don't know them [...] getting to know the child so that they feel safe enough to tell you if there's anything going on, or just how they're feeling (*Susan, social worker*).

Chapter Six explores the factors children and professionals identified as hindering direct work. As this includes the impact of the child's feelings on direct work, I will not consider this in depth here other than to include Alan's comment below which confirms Susan's assertion that a child needs to "feel safe enough". The following extract comes after Alan and his father have been contrasting how Alan currently feels about Sally (social work assistant), of whom he is very fond, with his initial anxiety about social work contact:

Aye, it's no as bad as you first thought, and you're no scared halfway through it once you get to ken them (*Alan, nine*).

The message from practitioners including Susan, and children, including Alan, is that the relationship between child and practitioner is central to assessment and intervention, and direct work both contributes to this relationship, and is dependent on it. For Susan, direct work enables her to get to "know the child so they feel safe enough to tell you if there's anything going on, or just how they're feeling" and this is borne out by existing research (Jobe and Gorin 2013). Happer *et al.* (2006) identified that the process of getting to know a young person also allows professionals to assess needs, and in response adapt their interventions. Similarly, practitioners in my study described how details which emerge during direct work as part of a process of assessment

enable them understand a child's lived experiences, and tailor subsequent interventions to reflect a child's concerns and interests. In the following extract, Claire explains how this looks in practice for a boy with whom she is working. She starts off by identifying that he would "sometimes talk to people and then not", and how as a consequence of realising this, she made a "wee book" for him:

The wee boy would talk sometimes to people, and then not. So we came up with a wee book for him that he could keep for himself that he could write down, uh, how he felt [...] He liked Batman and Superman, so I had got stickers and things and put them on [...] You have to make things that are appealing to them *(Claire, social work assistant)*.

Claire's aim was to assist the boy to articulate his feelings. This was based on her understanding that using only talk-based direct work would not enable him to express himself, and would limit her capacity to understand (assess), and respond. Claire did not explicitly state that she personalised the book using stickers as she knew he liked Batman and Superman because she had taken some time to get to know him; however this is implicit in her account. Also implicit and relevant to themes I explore in Chapter Five is that remembering and buying the right sticker sends a message that Claire has listened. Conversely, not remembering important details is just as significant. Here Alan acts out how he would feel if a social worker failed to remember his favourite football club:

Alan: Pretends to take deep breaths and makes a scowling face while holding his chest...

Int: (laughing) So would that be the worst thing they could possibly say?

Jim: It is... calm down

Alan: I'm having a panic attack!

Jim: Having a panic attack (laughing)

Although Alan was joking, his message is a serious one, and links to Susan's earlier point that in order for a child to talk about sensitive areas, they first need to feel safe and valued. One way practitioners help children to feel valued is by remembering details which are important to a child, and demonstrating this in their actions. Communication plays a core role in social work practice, and the forming and maintaining of relationships. It is an interactive process involving verbal and non-verbal exchanges (Luckock *et al.* 2006, 2007; Lishman 2009) which are interpreted by those involved.

Participants in this study identified direct work as a process, not a one-off, and Claire's personalisation of the "wee book" can be viewed as a tangible act of communication which contributed to the process of assessment.

Practitioners gave particular examples where direct work had contributed towards assessment, whereas children tended not to. In part this may have been because I specifically asked practitioners to 'talk me through' an example of direct work, whereas I chose not to ask anything similar in interviews with children in case it was experienced as intrusive. It may also be because, as Theo and Pete highlight, assessment is seen as a core social work task, and therefore likely to be explicitly mentioned:

So the first primary job of a social worker is to assess, right, and I consider that direct work (*Theo, team manager*).

Pete identified that any assessment needs to be based on individual time spent with the child:

Part of the assessment is having individual contact with the child and seeing the child on their own [...] Social workers and social work assistants have various kinds of worksheets that they use to communicate with children in an indirect way in terms of helping them to articulate what kind of is going on at home, what's going on at school, what's happening within the community (*Pete, team manager*).

Pete noted how worksheets can be a way to “communicate with children in an indirect way”. In contrast, as Brigid from the practitioner reference group mentioned earlier, some purposefully chose not to use worksheets, particularly with teenagers, as they might be redolent of school. Several professionals indicated that direct work might include some form of activity. Dependent on the weather and the location, golf, football, sledging and going for a walk were all mentioned to enable practitioners to get to know a child in a way which several participants, including Mara in the extract below, described as being more “natural”:

The thing that all the kids love is going to play golf, a great activity because you are just taking two clubs and paying three pounds for fifty balls, and you are just standing on the range [...] That's really a great thing because you are having a laugh. And you are having those

moments where you don't have to talk, or you can start the topic and it can sort of break when it feels uncomfortable. And it's more natural, you are doing something and talking about everything else (*Mara, social worker*).

Where direct work was inside (here I include cars) professionals recounted how they utilised books, toys, or worksheets to enable children to talk about their experiences and feelings. Several professionals mentioned that direct work could help them differentiate between how a child presents externally, and is seen by others, and how they view themselves (Winter 2012; Tait and Wosu 2013). Rena highlights this in the following extract:

Another young lad, it was actually part of my assessment, we did some work. He was a ten year old boy, and it's had a lot to do with recommending that he go for supervision, just because he was very, very descriptive about how he felt. With that age group I've got, usually sheets and things that we do, they kind of reflect how they feel about their life, who the young person feels is important [...] He was reflecting that he would like to feel better about himself basically, but on the outside. He feels okay about himself on the inside, but he knows that other people don't always see that, the way he goes about things and that kind of fits with a lot of things, to do with physical neglect (*Rena, social worker*).

For Rena, the primary purpose of direct work was to help her understand the boy's perspective: what his experiences mean for him and what his concerns

are. In this instance, this included the way chronic neglect has influenced how other people view him. Other professionals gave examples of how they use direct work to help them assess particular risks and strengths within the child's environment, including (for Claire and Lily) the danger a child may pose to others as a consequence of their own sexualised behaviour. As a consequence, in terms of assessment, they were more able to comprehend some of the child's experiences and intervene to reduce risk. Susan and Kate each described how they used the idea of a "bag of worries" (Ironsides 2004), the weight of which can be reduced if worries are shared with someone who can help, to enable children to talk about their concerns. Kate explained that she used this approach to help one ten year old girl name her concern that as a consequence of alcohol use, her mother would "not wake up", as well as a reluctance to bring friends home.

In the extract below Claire describes how she used drawings to assess the potential risks an eight year old girl was exposed to when she visited extended family. Claire's sensitive approach using an imaginary shop also enabled the same girl to talk about the impact of neglect, in a way which a more direct question might not necessarily have done:

There was one girl, and we needed to know whether she was visiting her grandparents and what she was doing when she visited [...] because

there were two schedule one offenders¹⁰ within the family [...] When the child visited the mother was always there and the mother went where the child went. This was what the mother was telling us. But we needed to find out whether, uh, that was happening from the child. And the child sat with a worksheet about the house and we worked through, this is gran's house, and we started to draw. I had the same as what the child had and I would say, "Oh I've got this bedroom", and the child said "Oh this is my uncle's room", she said, "But I'm not allowed to go in there". But in saying that she knew what was in the room (laughs) [...] The same child, we were trying to find out how she felt, and how she felt about herself, and again we sort of, we had a worksheet and it was like an imaginary shop. Uhm, what would you buy? And it was "I would buy blonde hair", she wanted long hair. But she had a problem with uh, nits, so she wanted new hair, and she wanted it to be long (*Claire, social work assistant*).

For Claire, using these activities helped her to build a picture which was different to that presented by family members, namely that although the girl was not supposed to have access to her uncle's room, she was able to recall and draw what was in there. Similar to Rena's example, direct work was also one way of enabling the girl to express feelings about aspects of herself and

¹⁰ Schedule 1 of the Criminal Procedures (Scotland) Act 1995 sets out offences against a child including, as in this instance, sexual offences.

her experience of neglect. Other practitioners, including Mara, gave examples of how direct work contributes to assessment more generally; including giving her a sense of the boundaries a child may, or may not, have experienced:

Taking them out speaking about how the things are, uhm, sort of removing them from the environment to see if they behave in the same way, all the observations which are going on in the house and out of the house in the different settings [...] With a lot of kids you have to have quite clear rules about what you are doing, we are going together, you are not leaving the car without me, we are crossing the road together, all those little bits and pieces (*Mara, social worker*).

Like Mara, Claire and Rena, professionals who participated cited a variety of examples which illustrated how direct work underpinned their assessment. As the extracts indicate, although talk was central, this was often in conjunction with other activities designed to enable a child to express their experiences. As noted earlier, children in the study tended not to comment on the link between direct work and assessment; however Martin's comments are cautionary:

Int: One of the things I'm interested in is what people do when they're with their social worker?

Martin: Ask questions.

Int: So you'd ask him (Don) questions and he'd ask you questions?

Martin: Nah, he'd ask me questions... he'd use big words, and then he'd ask me questions.

Slightly later, Martin (15) talks about how his previous social worker “asked questions” to establish his drug and alcohol use, before then confirming that his current worker took a similar approach to seeking his views:

Int: Okay... And what about you and Mary, what do you guys do?

Martin: She just asks me questions, just asks how I am, and about the house and stuff like that.

McLeod (2008) identified a dissonance between social workers’ accounts of the ways they listened, and how this was experienced by children. I wonder if there was a similar process here. It is possible that Don and Mary were endeavouring to place Martin at the centre of the assessment process; however this was experienced by Martin as “asking questions” using “big words”. Earlier in this chapter Martin and Jack both identified that relationships with social workers ideally involved a degree of reciprocity, and it may have been that Martin’s comments stemmed from experiencing “questions” as one-way, rather than as a mutual process. With Don this was compounded by his use of language which excluded, rather than included, Martin.

Direct work as intervention

Davies and Ward (2012) propose that effective interventions include four different domains: child focused; parent focused; child and parent focused; family focused. Children gave examples of all four, but tended to concentrate on interventions with them or their parents. Professionals cited instances of direct work across all four domains. Given that the focus of this study is direct

work with children, this domain will be my primary emphasis; however I will include examples of work with child and parent, and with family.

Heron contends that there are two broad categories which can be applied to interventions: those he defines as primarily 'authoritative'; and those which are 'facilitative'. Within the two categories Heron further identifies six sub-categories. Authoritative interventions include those which prescribe behaviour; confront behaviour; or give information. Facilitative interventions include those which are cathartic; catalytic (facilitating self-discovery, self-actualisation and empowerment); or are supportive (Heron 2001; Heron in Adams, Dominelli and Payne 2009 p55). In interviews professionals and children cited interventions which fell within one or other of the main categories, and on occasion both at once. Heron's work is helpful in that it illustrates the multi-layered nature of intervention, evident in the accounts of those who participated. However, the premise that interventions are primarily authoritative or facilitative, rather than at times being both is limiting.

Moreover, Heron's typology was originally conceptualised for medics, and while it has been extended to others in the helping professions, I found it more helpful to draw upon the four functions of care Gilligan (1999) identified.

Gilligan's model was developed initially in relation to children who are looked after and accommodated. While children subject to Home Supervision are not accommodated, they are looked after at home. Furthermore, Gilligan's four strands have the benefit of simplicity, do not separate interventions which are simultaneously authoritative and facilitative, and, from my perspective, speak

to four of the five themes which emerged from interviews. I was already familiar with the model, and have utilised it in the post-qualifying child welfare and protection course I teach. As several of the professionals interviewed have completed this course, they are, therefore, also likely to have been aware of the model. Although no-one explicitly referred to Gilligan, in addition to influencing the perspective I brought to interviews, there may have been a similar, if tacit, influence on how some participants framed their interventions.

Gilligan argued that interventions with children should include four areas: Interventions which will maintain their developmental needs; protect them from abuse and neglect and promote rights; compensate for deficits they have experienced; and prepare them for the next stage in their life. Gilligan does not refer to my fifth theme, reparative interventions; however it could be argued that the concept is implicit in his description of compensation. At times, as is to be expected given the interconnected nature of the five, interventions spanned several different strands. Where this is the case I have been guided by how the child or practitioner appeared to present the purpose or outcome of direct work.

Interventions which maintain development

Children or their parents described instances where direct work could be seen as maintaining a range of developmental needs, be those educational, social, or emotional, as the following extract from Alan's interview illustrates:

At the Hearing I actually requested that they keep Alan on the supervision order so that he could be around Sally a bit longer and that

gives me time to get my act in order, and he hasn't been off the school, just once when they sent him home, and he's handing his homework in. He seems to be a far happier boy than he was before (*Jim, Alan's father*).

Jim highlights how Sally's contact has made a difference to the place education plays in Alan's life. He identifies that Sally has helped him to "get my act in order", and his comment that "he seems to be a far happier boy" appears to indicate that interventions have contributed to a change in Alan's overall sense of well-being. During his interview Joe (13) and his parents described how Joe's social worker had been instrumental in arranging educational support outside mainstream school, which helped his development, both educational and social. Interestingly, and in contrast to the experiences described by Joe and Jim, there is evidence to indicate that educational outcomes for children who are looked after at home are poorer than for other children, and that Home Supervision may not be effective where there are educational difficulties (McLung and Gayle 2010; Henderson and Whitehead 2013; Gadda 2012). Some children highlighted how their social worker enabled them to access activities which their peers enjoy, and which can be viewed as maintaining developmental needs. Alan mentioned that Sally had arranged for him to attend a summer play scheme. Although the play scheme was close to home, Alan had not previously attended. Thus, in addition to accessing a resource which contributed to his development by enabling him to try new activities, and make friends, Sally's action can also be viewed as compensatory.

In Chapter Two, I outlined the principles of attachment theory and the relevance it has to the theoretical underpinning of this research, and will return to this in later chapters. In common with other studies (Osmond and O'Connor 2004; Osmond 2005) it was unusual for professionals to mention theory in any depth. However, attachment theory appeared to influence assessment and intervention and was referenced sometimes explicitly, but more often obliquely, to explain difficulties children were experiencing and what underpinned direct work. In the following account, while Mara does not explicitly reference the central significance of a 'coherent story' (Fahlberg 1994; Howe 2005) to development, this could be read as the purpose of Mara's direct work with a 12 year old boy who, amongst other things, is negotiating a path between different people in his life and "boxes things":

I think the most important part in his case is actually, uhm, he sort of boxes things in his life. It's like the foster placement is separate from mum, is a separate issue from school, dad is a separate issue, and it's really like little cubes for him, and he wouldn't for example talk about his foster placement when he's with mum, or talking about his mum when he's in the foster placement. Usually the travel is the transition period, we are moving from one to another, so it's really about telling him that, you know, it's, it's really okay to mix those and even though your mum in the past didn't want you to speak about your dad, it's really okay to speak about him. It's really okay to tell your mum that you feel upset about your grandpa dying. It's okay and your mum will understand and she's also upset about this. It's not easy for her to talk about this, but she feels the same way as you feel and she understands why you are upset.

So, it's like linking those little cubes for him in his head and I think that's the most important part for him (*Mara, social worker*).

The car as an important locus of direct work has been identified in literature and existing research (Ferguson 2010, 2011) and was mentioned in several interviews. Mara described how she used the “transition period” in the car to make links between different aspects of the boy's life: to talk about grief and loss; to consider the legal principles of parental rights and responsibilities and how these translate into day-to-day parenting; to enable him to express his feelings within the context of complex, and at times conflictual, relationships between the adults around him. For Mara, although each of these aspects were important in maintaining development, the principal meaning she ascribed to her work was that it would help the boy by “linking those cubes for him in his head”, or in other words, help him to develop a coherent and integrated story.

Interventions to protect

Earlier Claire described how using play and drawing enabled her to get a clearer sense of the kind of close contact a child had with an uncle who posed a risk. As is to be expected given their role, most professionals described how one aim of direct work with a child, with a child and parent(s), or with parent(s) was to protect. Similarly, for children, protection also emerged as an important facet of direct work as can be seen in the following extract from the interview with Josie (nine) and Reanne (six):

Int: What do you think you two get from seeing Caroline, what difference do you think it has made?

Josie: Well my mum (pause). Caroline helping my mum has made, maybe this a safer place, it feels safer to be in.

Int: Right, Caroline helping your mum has made home safer?

Josie: Uh huh, feels safer.

Int: And can I ask you both, if you didn't feel safe at home, who would you tell?

Josie: Caroline.

Reanne: Caroline.

For Josie and Reanne, what emerges here and elsewhere in their interview is that feeling "safer" appears to be linked to several factors. It includes the direct work Caroline has undertaken with their mother, including encouraging their mother to employ less rigid disciplinary measures. Caroline's presence as someone to whom they can contact and speak to if they do not feel safe also appears to contribute to their sense of being protected, as Josie summarises in her comment "If you're ever worried there's someone there for you".

Practitioners cited a number of examples where one purpose of their intervention was to protect children from their parent(s), another adult, a sibling, or peers. For instance, Lucy described how as part of her efforts to bolster the self-esteem of a 14 year old girl who was being threatened by her extended family, she encouraged the teenager to "take a step back and think about what are they wanting from me". Lucy related that in addition to her direct work with the girl and her mother she visited those making the threats to

advise them of the legal repercussions if this continued. Schofield and Beek (2009) use the term “felt security” to identify how actual safety and “feeling” safe may not always be aligned. Several professionals mentioned the part they, or their colleagues, play in supervising contact, generally with a parent who is no longer at home, to minimise risk and ensure that this feels safer for children. Here, Gary describes the role a worker in his team has with three children and their mother who, as a consequence of poor mental health is no longer living with them:

Gary: The social worker’s task was to supervise contact. That was the biggest task that we had. The work with the kids was about reassuring them, so when they did the visit it was about reassuring them [...] “How are you today?” “Do you want this to go ahead?” “Remember I’ll be there, don’t be worried”, “If your mum says anything, you say to me”.

Int: So what do you think that the children got out of the social work contact?

Gary: I think they got a degree of security and the fact that the two girls consistently said at the Hearing, I don’t want to be with my mum on my own (Gary, team manager).

Gary highlighted that having a worker present indicated to the children that their view that they did not want to be alone with their mother had been taken into account. He repeatedly uses “reassurance”, to stress how important this aspect of direct work is for the children. There is a sense that part of the social worker’s protective role is to establish boundaries around the contact; that

there is a before, a during, and an after. Other professionals, and some children, cited examples where direct work with parent(s) and children in relation to boundaries and rules was aimed at protection, but also appeared to be reparative in the sense that current conflicts were linked to fractures or long-standing tensions in the parent/child relationship and some of these examples will be explored in the next section.

Direct work as reparative

Direct work aimed at repairing relationships within a child's family emerged as a key theme. The three managers Gary, Pete and Theo, identified this as a core aspect of direct work, with Theo citing the skills that particular individuals brought to their work with teenagers and parents. Janie, Lily, Mara, Claire, Susan and Lucy (all practitioners) gave examples where working with parents and children to resolve difficulties and repair relationships was part of their direct work:

I like working with the... especially when it's a teenager, getting the teenager and the parent together, and sometimes they are needing to let off a bit of steam to each other, so it's trying to, for me, to be there so it's done in a controlled way and I can say, well I can see where you're coming from and I can see where you're coming from, meeting in the middle (*Lily, social worker*).

Similarly, Lucy talked in depth about her work with a teenage girl and her mother, whose other children were in foster care or residential care. At the point where Lucy started working alongside Nancy and her mother Dina, there

was a distinct possibility that as a consequence of their difficult relationship and the lack of boundaries in the home, Nancy too would be accommodated. Here Lucy summarises some of the concerns she initially had, and how she worked with them both to start to repair their relationship, including how they spoke to each other:

She had a very low self-esteem when I first met her, her relationship with her mum was okay, but it wasnae great. They shouted at each other a lot, used obscene language towards each other; I mean that's how they spoke to each other. And I done a bit of work with Nancy and Dina about how they relate to each other. So we sat down and I used a bit of role play in that and said this is what it sounds like, and Dina was like, right [...] So, we're all sat down and I said this is what it looks like to me. I'm new to the case, but look at this, me coming in calling someone else names and stuff like that, what would you think? And then obviously they're going to think what kind of mother are you? Why are your children still there? And all this kind of stuff. So she listened, and I said to Nancy, and you coming in and calling your mum a fucking cow, or this and that, and I'm wanting this and demanding stuff. Well that's really saying to professionals we cannae really live together cos it's not working, and both of them were saying very clearly, "Yes this is where I want to be, we want to stay together as a family" (*Lucy, social worker*).

Joe (13) chose to be interviewed with his parents Audrey and Neil present, and all mentioned that direct work on "rules" and "discipline" had been

important to them as a family. The following conversation was in response to my question about what Joe had “got” from social work contact:

Audrey: More discipline.

Joe: There wasnae any.

Audrey: For me to put more discipline in place.

Neil: More structure.

Joe: Like if I got brung home by the police.

Audrey: It was the whole family.

Int: Did you draw up rules as a family?

Joe: You get rewards.

Int: What rewards?

Joe: Money.

Int: So, what did you have to do to get rewards?

Joe: (mumble)

Int: Sorry, I didn't catch that.

Joe: Chores.

Int: Ah, chores, like what?

Joe: Dishes, bin, Hoover, kitchen. You have to do something every day, and if you get grounded then you don't get the money but you still have to do the chores.

For Joe, Audrey and Neil, the process of agreeing boundaries, and introducing new rules with their social worker helped repair relationships within their family, and reduced the level of conflict within the home. In

addition to looking at routines and rules in the home, professionals' accounts included encouraging children and parent(s) to read, play, or cook together to repair or re-build relationships by enjoying the time they spent together.

Earlier I noted that, as is often the case (Gordon and Cooper 2010), when Mara described her direct work with a 12 year old boy, the theory which underpinned her intervention remained tacit. In the following, while Claire does not explore her understanding of attachment theory in any depth, she does make reference to it, when she explains that “there wasn’t really an attachment” to preface why she was involved with two boys and their mother. As the excerpt illustrates, although Claire employs the adverb “simply”, her intervention was anything but simple, and was designed to be reparative on different levels:

I had one family (laughs) and there were two boys, and there was a lot of, there were behaviour problems with both boys. One was really quite bright, but had a lot of behavioural problems too. We kind of thought it was to do with the attachment, there wasn’t really an attachment with mum and both the boys. And I can remember going there and just simply cooking with mum and the boys. They enjoyed that. They really wanted to do something with mum, and one of the boys, the oldest one, he sort of had a... food was a sort of survival for him. When he was stressed he would eat, and you could notice that with him, but doing the cooking was just relaxing and he was able to... The other thing we did with them I took photographs. So we did that and we got prints made for the boys and for mum. And it was giving them something happy in their life that we did this with mum (*Claire, social work assistant*).

Claire mentioned that a range of other professionals, including a child psychiatrist, were involved with the boys and their mother, and within this her direct work was an important facet of interventions designed to repair relationships within the family using activities and play (Furnivall 2011). There is existing research on the role food plays both in building and maintaining relationships at home and within residential child care (Punch *et al.* 2010, 2011; Emond *et al.* 2014). Crucially, by Claire encouraging them to cook together, food, which for this family had become both an indicator of trauma and an area of conflict, could start to be viewed as something which might be utilised positively to repair relationships.

In addition to direct work as one means of repairing relationships a child might have with parents, peers, or siblings, some professionals identified that the aim of direct work was to counter the impact of the child's experience of social work processes, and thus was also reparative. There is evidence that exclusion from decision-making can have the effect of placing children at the periphery, rather than the centre, and can be detrimental to the development of self-efficacy and the capacity to participate (Leeson 2007; Bradwell *et al.* 2009). However, being present does not guarantee meaningful participation, and the child's right to attend does not necessarily mean that it is in their interest to do so (Holland 2010). Professionals in this study identified that for some children who attended decision-making forums, not only had they not participated, but they had emerged with an inaccurate, and in some instances damaging, version of where the responsibility for change lay. For some practitioners, their role after meetings was to undo the impact on a child of

attending. Lily, Lucy, Janie and Mara all related examples where this had formed part of their direct work. Mara (social worker) described how, subsequent to a Children's Hearing she had to sit and spend time with an 11 year old boy to unravel the message he had taken from it. He was experiencing chronic neglect, including of his health needs, and he came from the Hearing viewing "himself as responsible". Lily relates something similar when she began direct work following a child protection case conference:

Lily: He was at the case conference, and it was interesting for me to pick the case up after that had taken place because his interpretation of being on the register was really quite interesting and what that meant for him.

Int: So what did he think it was?

Lily: Well he thought, kind of, well obviously he was on the register for three months, and then he was going in to care, that's what he felt. And in terms of you know, at risk and being neglected, he didn't know what that was. And I felt like that should have been explained to him in a lot more depth. And I think, sitting, it was a big meeting, two hours, and to hear what all these professionals said and him sitting there was just a lot, a lot to ask of him, 'cos it was about the parent's capacity, it wasn't about him.

Lily, Mara and Lucy all described reparative work subsequent to decision-making processes. Social work processes necessarily involve people, and while Lily's comment "I felt like that should have been explained to him" infers

criticism of previous workers, Janie was perhaps the most explicit in identifying how her aim was to repair or “redress” the negative legacy of a particular worker:

The other part for the young person is that her history is that she made a couple of allegations that her dad sexually abused her and unfortunately the previous worker didn't believe her and wrote quite judgemental things about her and her behaviours and I felt quite responsible to redress a lot of that. And I started by re-writing, because what we do when we get a report and it's come from a different team normally you would just add to the chronology add your current update and assessment. But I went from scratch with this young person's report and re-worded things so that it had a different slant and explanations for behaviours, uhm, and made a point of allowing the young person to see the report which had been written previously and to see the report that I had written to redress that kind of thing (*Janie, social worker*).

Janie's decision to re-write the report, and read it through with the girl to demonstrate that she had attached a “different slant and explanation” for behaviours is significant, particularly given research on how reports have been experienced by children. There is evidence to indicate that, contrary to guidance, children are not always provided with opportunities to read reports (Cossar *et al.* 2011). When they do, the language used can exclude them, and there are indications that similar to the young person with whom Janie was working, children's accounts are disbelieved or devalued, and they may internalise negative descriptions and incorporate these into their view of

themselves in a way which is not helpful (Tucker 2011; Cossar *et al.* 2011). Thomas and Holland (2010) found that a child's identity is often presented in written material somewhat one-dimensionally with a focus on deficits. For Janie, re-writing the report and sharing this was reparative, and was part of building a trusting relationship. She later described how at her request she helped the teenage girl contact her mother after a gap of 13 years. Janie's view was that she would not have asked her to help had she not initially done this re-writing. For Janie, an important part of direct work in relation to re-establishing contact was helping the girl prepare for the meeting with her mother, and in the next section I explore the way direct work was framed as preparatory by participants.

Direct work as preparatory

Professionals recalled instances of direct work which could be described as preparatory, with two strands dominating: direct work to prepare a child for transition, including prior to major life changes; or direct work with a child and or parents to prepare for formal meetings, partly to facilitate their participation. Susan recalled how she initially had contact with a boy while he was in his birth family, but after accommodating him the focus of direct work changed. Here, she explains how direct work was central in preparing him for the move to his permanent alternative family:

Every week I spent an afternoon with him, looking at moving on from his old family, what kind of families were out there, like maybe a mum and a dad, or a single mum, or a dad, or two mums or two dads, and just you know, and just getting him to a stage that when it came that we had

found an adoptive family for him, that he was ready then to move on and just to help him deal with... unhappy memories from the past and just to give him a space to talk [...] It was really just about trying to get things right for him for the rest of his life 'cos you were, in actual fact you were changing everything about his life [...] So it is important that you spend time with children just for getting that part of it right (*Susan, social worker*).

Susan focuses on direct work as part of the process of preparing the boy to move to a permanent placement, to help him to be “ready” to move and later expresses the view that unless “that part of it is right”, there is a danger that the placement would not be successful. Other professionals recalled how they used direct work to prepare children and their parents to participate in decision-making forums. This included reading through reports, or giving information about processes, and what was likely to happen. However, as noted earlier, Lily, Mara, and Lucy all cited examples where direct work was designed to be reparative by ameliorating the impact of attending particular meetings, and presumably this is uppermost in Lily’s mind when she states:

You can prepare them as much as you can for a Hearing but sometimes when you get there they are not prepared even though you have put that time in with them. I think it can still be a very daunting process for any child or young person to go along to a Hearing (*Lily, social worker*).

Attending decision-making forums such as Children’s Hearings can be daunting, as confirmed by children and parents (Buckley *et al.* 2011). One

way Lily uses direct work to help prepare children and parents is by practising what they want to say using role play, or by writing out their views. Other practitioners who participated, including Mara, Lucy, and Gary, recounted the value of similar approaches to enable children and parents to express themselves in ways they could be heard. This may be so that a parent and/or child is able to adhere to the tacit rules (Hochschild 2012) about how to communicate emotion that were discussed in Chapter Two:

I've done a lot of work about presentation when they are in meetings and stuff like that, 'cos a lot... One recently uhm, just doesn't know what to do when they are in a meeting, so they shout and swear and do things like this and I say "it's no appropriate, it's no happening" and then say to them "right, try this" and then, I've got to say that every case I work in, we dinnae have they issues any more (*Lucy, social worker*).

There is a body of work exploring children's experiences of being involved (or not) in decision-making forums which indicates that the presence or absence of preparation is significant, affecting amongst other things their capacity to participate (Cashmore 2002; Bradwell *et al.* 2009; Bruce 2014). Interestingly, while practitioners identified that they spent time with children and parents to prepare for formal meetings, including Hearings, none of the children mentioned this. It may be because the focus of the interview was their day-to-day interactions with social workers, rather than their experiences of decision-making processes, and thus there were no specific questions about how well prepared they felt. Alan's comment that he liked going to the Hearing "because I got to see what had caused me with social workers" could infer a

lack of preparation. However, there was nothing else Alan, or his father Jim, said which indicated that either felt unprepared. Indeed, both Alan and Jim were very positive about their social work assistant and social worker, with Jim describing the former as “an absolute diamond”.

Direct work as compensatory

From the literature review I anticipated that particular themes would emerge during interviews, including the importance of protection and the centrality of relationship. The idea that direct work might compensate for areas which practitioners viewed as missing from a child's life was not something I had anticipated would emerge to the extent it did. The sense that direct work was compensatory was present to a greater or lesser degree in seven out of the eleven interviews with professionals, and the managers' reference group.

Although references to compensation were usually tacit, practitioners appeared to conceptualise compensation in interconnected but distinct ways.

Direct work was presented as providing access to discrete activities or experiences a child might not have had; it was also presented as compensating for deficits which a child had experienced, particularly in their relationships with parent(s).

The literature review identified that while views of children and childhood are malleable, changing over time and place, there are dominant discourses as to what children ‘should’ experience. Several professionals mentioned their own experiences of parenting or being parented; however their assumptions may also be shaped by policy drivers such as *Getting it right for every child* (Girfec) (Scottish Government 2012). The eight well-being indicators therein are that

children should be Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible, and Included (known by the acronym Shanarri). These form an intrinsic part of assessment and evaluation and signpost what childhood in Scotland should include. Although the way policy is translated and enacted by organisations and individuals varies (Sherwood-Johnson 2013), a range of initiatives including the Well-Being Web (Angus Council 2012), and the paper by Stradling and McNeill (Scottish Government 2012) detail how the indicators might be applied, and contribute to a sense of what, within a continuum, is perceived as a normative childhood. Interestingly, none of the professionals used the acronym 'Shanarri', even where the purpose of direct work aligned with various indicators. While not referring to the well-being indicators, professionals' accounts implicitly and explicitly identified what childhood should comprise, including the need for dependable and nurturing relationships with parents, access to education, and friendships. Several mentioned the value of having access to leisure pursuits and there are indications that children benefit from opportunities to explore their wider community and access activities (Jack 2010; Kelly 2011). In the following extract Rena summarises her rationale in driving two children to a play area some distance away with the comment "it was about broadening their horizons":

We went to a play area and had a wee drive round. I don't think they'd been out of their village. We went to the waterfront, it was a new experience. I think their world existed between one street and another (pause). It was about broadening their horizons (*Rena, social worker*).

Although Rena does not explicitly express that her work was compensatory, this could be viewed as implicit in her comments. Rena does not speculate why those particular children had, as far as she was aware, not been “out of their village”. However, it is evident that some children are excluded from activities, and access is mediated by a range of factors including the perceptions others have of them, access to transport, parental income and/or motivation (Cairns and Stanway 2004; Hill *et al.* 2010). One critique of social work practice is that it focuses on the individual, rather than situating a child and his/her parents within their community, and fails to adequately explore and challenge the impact of poverty and social exclusion (Winter and Connolly 2005; Ferguson and Woodward 2009; Jack and Gill 2010; Treanor 2012). As the emphasis of the study was direct work with children, professionals understandably focused on the inter-personal; however in his interview Pete highlighted the significance of “poverty and deprivation” and in the extract below Mara touches upon differing explanations including poverty and neglect to explain a perceived paucity of experience. She goes on to express the view that direct work involving activities enables children to “join in” discussions with school friends, and so feel better about school, learn how to behave in different settings, and “be part of society”:

The kids who are on home-based supervision requirement, most of those cases are families on benefits, kids which never went to the cinema, never went to the restaurant and they just don't have this experience, and because of this in a lot of cases they feel worse in the school and they cannot join in the groups [...] In a lot of cases, especially if it's about emotional neglect when the kids are not doing anything with

the parents, even a treat to the cinema, and we are going step by step, you have to go buy the tickets, you can go buy popcorn and you know all of this is triggering all the discussions. So every single place like this is actually giving you the opportunity to discuss something else. So with the kids which I have on home based supervision which I know that the parents cannot actually do this, it's a great way of sort of combining the time on the one-to-one basis, with actually learning how to be a part of the society, which activities you can do, giving them something. In a lot of cases giving them something they can tell to the kids next day at school "I've been to the cinema" (*Mara, social worker*).

Similar to Rena, Mara argues that "they just don't have this experience", and describes how, through her direct work, she is providing opportunities which otherwise would be absent. Mara's explanatory framework as to why children may not "have this experience" includes emotional neglect and low income. Kate and Lucy both appear to identify how direct work which can be understood as compensatory is in response to parental neglect. The following extract is from Kate's interview. She has just described how she and Tara (10) read books, coloured in pictures and used modelling clay. Her comment is in response to my question about to what Tara 'got' from this:

I think that's important for Tara because I don't think she, with either her mum or her dad... I don't think they do a lot with her. She's there, but they don't do a lot with her, they don't spend quality time, you need to spend quality time with a child, giving a bit of yourself
(Kate, social work assistant).

During her interview Lucy recalled how as part of her work with a teenage boy who had been accommodated after experiencing abuse and neglect at home, she had taken him shopping. In the following extract Lucy describes how he had “never done that before”. Similar to Kate, although the term is implicit, there is a sense that the time she spent with him is compensating for day-to-day experiences which she would ordinarily expect to have been provided by his “mum and dad”:

One of the bits of direct work that I used to do with him was on a Friday; I used to go shopping with him. And I remember... we would go shopping and we went and we bought wee... like you would do with your mum and dad, like you would do with somebody, anybody, he's never done that before, ever in his life (*Lucy, social worker*).

Although practitioners talked warmly about the time they spent with children going shopping, reading books, driving to a play park or going to the cinema, from their tone of voice, and facial expressions, it was evident that Lucy, Kate, Mara and Rena shared a sense of regret and sadness that children had missed out on experiences which they constructed as normative. Some practitioners expressed a degree of ambivalence about how effective this aspect of direct work was, particularly when deficits in the parent/child relationship remained. This was most candidly articulated by Sara in the reference group for managers:

Sara: I suppose it's something I've thought about is when I've spent time with a child, playing with a child, whatever and then it's... kind of giving them something and then taking that away...

Int: Uh huh?

Sara: 'Cos I'm not going to be there to play with them every week forever, and it's been a good time, whatever, and then it's like, well that's over... now your parent doesn't play with you and I've not managed to change that (Sara, team manager).

The sense that while direct work was compensatory, she could not expect to fully meet a child's needs was also acknowledged by Mara. At the end of her interview Mara expressed regret that she and other practitioners were not able to give children "100% of all you think they could get", but that to do so she would "need to have twenty four hours a day with every single one of them". Some of the direct work which Mara, Kate and Lucy mentioned, including visiting the cinema and going shopping, involved financial outlay as well as time. The influential role of the team manager in developing and sustaining a culture of direct work is explored throughout the thesis, particularly in Chapter Seven. The one person who actually employed the term compensatory was Pete, when he identified how he used 'his' budget to enable practitioners to engage with children in activities:

I always spend quite a lot of my budget on activities that we can involve the young person in [...] because a lot of the young people at risk don't get those compensatory opportunities (*Pete, team manager*).

Interestingly, none of the children appeared to identify that their contact with social workers was, or could be, compensatory, although the closest were Naomi, and Martin. Naomi's earlier comment that if she "didn't have Maud or

Sarah, I wouldn't have talked to anyone about what happened” appears to infer that social work professionals fulfilled an important role, which would otherwise have been absent. Martin identified that his aunt was his confidante of choice, but that if that option had not existed he might have chosen to speak to his social worker.

One critique of social work practice, particularly in relation to assessment, is that by focusing on deficits and risks, it underestimates the strengths and capacities which children, their parents and networks bring (Turnell and Edwards 1999; Ghaffar *et al.* 2012). It may be that when practitioners framed their interventions, albeit tacitly, as compensatory, this can be contextualised within an approach which focuses on deficits, rather than strengths. It may also be that while practitioners had a clear sense of the rationale of direct work, they had not necessarily made this explicit to children, and consequently compensation did not emerge within children's interviews as a theme. Additionally, it may be that practitioners were willing to identify deficits in a child's experience, whereas children may not have done so in the context of a research interview, particularly as they were not asked the reason why they had social work contact.

This chapter has explored the meanings children and social workers appear to ascribe to direct work based on their accounts, exploring the way in which direct work is utilised to form and maintain relationships, relationships which then enable assessment and intervention. The above analysis makes it clear that the relationship between child and professional is both a catalyst and a

vehicle for change, and given this an interesting question is whether or not participants viewed direct work as 'therapeutic', and I will briefly consider this before concluding this chapter.

Direct work: is it therapeutic?

Within the social work literature there is ambivalence about employing the term 'therapeutic' in relation to direct work. Although Ferguson (2010) describes "therapeutic car journeys" and Lefevre (2008, p31) considers how processes "more associated with therapeutic work will arise between children and their social workers", Crompton (2007, p.394) argues practitioners "need to be clear between therapeutically informed interventions by social workers and long term therapeutic work which requires more skills". While participants outlined direct work, which among other things, was designed to be protective, to repair significant relationships, or help children make sense of their experiences, the uncertainty found within the literature appears to be mirrored within interviews. Here, Rena describes what she includes as direct work and explicitly uses the term:

By direct work I was meaning, uhm, actually spending time with a child, playing, helping identify issues, you know, apart from what you might be doing with their parent in terms of, uh, plans and child protection sort of, with parents, but just actually spend time with the child, building up a relationship with them, getting something back from them [...] I mean that varies obviously with the age of the child. I mean I think of that as being quite direct with a therapeutic component, you know (*Rena, social worker*).

By contrast, Susan, after describing the sensitive direct work she completed with one boy to prepare him to move to a permanent alternative family, summed this up by saying:

That type of thing to me is direct work, not doing therapy or anything like that. Because obviously there are therapists and that out there
(Susan, social worker).

Theo re-visited the concept several times in his interview:

People come to social work and think of doing therapy, right, and I would suggest that people don't do therapy in social work *(Theo, team manager).*

Later, partly in response to my somewhat clumsy question he develops this further. After recalling work which a practitioner in his team had completed with a teenager and her parents, he argues that while we “do some elements of therapeutic work” he would not use the word “therapy”:

Theo: She has worked with a number of teenage girls and that's always been her strength, getting... relating to them, getting the perspective from the young person first of all, and then in some way, if you have a joint session, then you... I'm very kind of careful about using words like therapy; I wouldn't say that when we do those family sessions that we were using a family therapy.

Int: Is there a difference between big T therapy and little t therapy?

Theo: Yes, some of it is using different kinds of methods. I think I would kind of leave the words like therapy, we can do some elements of therapeutic work, right, but I would use the word therapy for people who, who have it in the title of their jobs.

For direct work to be perceived as therapeutic, the meanings one ascribes to direct work presumably need to accord with the meanings attributed to the term therapeutic, and it is evident from interviews that understandings vary and are contested. The examples of work in this chapter included helping a child to “unbox” different aspects of his life in order to develop a coherent narrative; repairing and rebuilding family relationships; and preparing a child to move to an alternative family. However, most of the practitioners did not label these as ‘therapeutic’ and unsurprisingly, nor did children. They did, however use other terms which could infer that for them contact had been, in some measure therapeutic, with a common phrase being that social workers “helped” them.

Summary

This chapter has considered in some depth what direct work happens as part of Home Supervision, and the different meanings ascribed. Chapters Five, Six and Seven will now consider what influences the nature and amount of direct work which takes place between children and their social workers, including factors which appear to facilitate or conversely act as barriers to direct work.

Chapter Five: “Do they really care?”

Introduction

In the previous chapter I explored the meanings ascribed to direct work, and suggested a possible typology. The relationship between a child and his/her social worker emerged as central, and when thinking about how relationships are formed and maintained, existing research helps by identifying that children value practitioners who are accessible, reliable, consistent, honest, warm, who get to know them, and genuinely care about them (Butler and Williamson 1994; McNeish *et al.* 2002; Sherbert Research 2009; McLeod 2010). It is this notion of ‘genuine’ care which is the particular focus of this chapter. I begin by exploring the perspectives of children, and go on to explore practitioners’ and managers’ perceptions, drawing on attachment theory and the concept of emotional labour. Although from different theoretical perspectives, both offer insight as to how care is enacted and experienced, including what children and practitioners bring to their encounters and what they take away. I also draw on my observations, what I saw and heard, during interviews and introductory visits.

Perspectives on care

Children: Is it just his job?

The Vision for Social Services in Scotland (2015, p.11) specifically highlights the centrality of care in the statement “social service workers must treat people with compassion, empathy and care”. It is less directive as to what ‘care’ might look or feel like, and this may be because how care is theorised

and enacted is complex and contested, encompassing both caring about and caring for (Fink 2004), with a focus on the inter-relatedness and the affective nature of relationship. Barnes (2007) and Holland (2010) explore how ethics of care and/or justice underpin practice. They identify that an ethic of justice focuses on rights and measurable outcomes, while for Held (2006) an ethic of care includes being attentive and responsive to the individual's particular circumstances, and behaving in a manner which recognises relationships, and is likely to build trust. Barnes and Holland questioned whether an ethic of care has been compromised in efforts to ensure that children who are looked after or accommodated experience justice, and suggest that ethics of care and justice need to sit together.

Gaskell (2010) interviewed ten young people who had lived or were living in residential or foster care, and found a dissonance between the language of care used by professionals, and young people's experiences. She found that "while on a semantic level 'care' is central to social care", caring about did not necessarily translate into day-to-day caring for as "the young people were concerned that those in positions of care, those providing services, did not really care for them" (Gaskell 2010, p.140). In Gaskell's study, and for the children I interviewed, care is associated with emotional warmth, kindness, and concern. There are differences between the participants in Gaskell's research, and the children in this study who were living with their parent(s) (bar one girl who was at home part of the week and with carers for the remainder). However, their aspiration that professionals should genuinely care is shared. In the extract below, Martin (15) indicates that care is important to

him. Here he is responding to my question about what qualities a “good social worker” should possess:

Martin: All social workers talk to you as if they do care but you don't know if that's just their job, or if they actually do care about you.

Int: Well, when you saw Don, what did you think?

Martin: I don't know (pause). Like he always spoke like he cared about me, but the way I think about it, it's just his job.

What Martin appears to be contemplating is how genuine his social worker's concern was; essentially he is wondering whether Don “actually cared” or just “spoke like he cared”, and authenticity of professionals' care is relevant to children (Gaskell 2010), and adults (Malloch and McIvor 2011; Brownlie 2014). Hochschild (1983, 2012) proposed that notions of authenticity and inauthenticity are central to emotional labour and focused on the impact on workers of this labour. This chapter explores what direct work, and the emotional labour social workers perform, feels like for children and social workers. In doing so it questions Hochschild's assumption that inauthentic expressions of emotions are necessarily negative for the worker, and suggests that at times suppressing, or shelving a particular emotion is based on authentic care for a child. The chapter also draws on attachment theory, as this may help in both understanding and responding to Martin's query. If children's early experiences were that responses from adults were not contingent on their needs, were inconsistent or disrupted, then this may mean they are more likely to be concerned about whether the professional sitting

across from them is consistent, reliable, attuned, and cares. Moreover, attachment theory may also offer insight into the capacity of practitioners to form caring relationships with children, and to engage in and sustain direct work involving complex emotions.

The nature and quality of care emerged as a theme in interviews with other children who participated. Alan and Josie (both 9) identified tangible ways that they knew that their social workers cared about them, including accessing resources and spending time with them. Alan, who was interviewed with his father Jim, had met several workers from one team, but his main relationships were with a social worker (Rosie) and a social work assistant (Sally). Alan and Jim both mentioned that Rosie had taken Alan bowling, and for Jim that this took place after five o'clock and "in her own time" was important and contributed to his changing view of social workers:

I didn't want my kids involved with social work; I don't think anyone does want their kids involved with social workers. But since we met Rosie and Sally my opinion has totally changed big time [...] I never thought a social worker would take my kid bowling. You know what I mean?

(Jim, Alan's father)

Alan described how Sally listened to him and was "kind". When asked about the ideal social worker Alan's physical description matched Sally, and it was evident from the way Alan spoke about her that she had become an important person in his life:

- Int: If you could come up with the ideal social worker (pause). If you were going to draw the ideal social worker, what would they look like?
- Alan: What does ideal mean?
- Int: The best social worker, thank you for asking when I'd not been clear.
- Alan: Brown hair.
- Int: Right, brown hair.
- Alan: Glasses, quite wee.
- Int: Do you know who that looks like?
- Jim: I think I know where this is going?
- Int: Laughs.
- Jim: Dinnae say the rest, you've done enough (laughing).
- Int: So, you'd draw Sally then?
- Alan: Nods (Grinning).

Tronto (1994) categorises caring as an activity - the doing aspect - and as a disposition, being caring. The sense that care needs to be enacted in some way emerged from young people who participated in earlier research, one of whom said "love is a doing word" (Burgess *et al.* 2013, p.16). For Alan and Jim, Sally and Rosie appeared to demonstrate care by what they did, including going bowling, as well as the manner in which they interacted. Other children and professionals involved in this study also identified that care encompassed doing as well as being. For Josie (nine), while being "kind" is an

important part of being a social worker, visiting, spending time, and helping are tangible expressions of kindness, in other words of care. Josie describes how she can rely on Caroline, and that “she won’t ever say she doesn’t have time”, before going on to say that she knows she will “get what I need” from Caroline:

Int: What is it important for them (social workers) to be like?

Josie: They’ve got to be kind.

Int: How do you know Caroline’s kind?

Josie: She helps us out, and if we ever need anything, she won’t, she won’t ever say she doesn’t have time. She’ll never say she doesn’t have time to come out and see us , she’ll always say she’ll fit in a bit of time to come out and see us as soon as possible if there’s ever something wrong [...] I know that I’m going to get what I need.

Naomi had contact with a social worker (Sarah), a social work assistant (Maud), and attended a weekly group organised by Women's Aid. In response to my question about what, in two years, she thinks she will remember about Sarah and Maud she said:

Probably going out for a meal. Them helping me with what I've been through, and just listening to me (*Naomi, 13*).

At the time of the interview, the meal to which Naomi referred was in the planning stages, and was being arranged to mark the ending of Naomi and her mother's contact with Sarah and Maud. Within social work literature and

research there is much written about the importance of beginnings, including how initial impressions influence the subsequent relationship (Forrester 2008; Holland 2011). Although some (Seden 2005; Zilberstein and Spencer 2014; Spencer *et al.* 2014b) highlight the significance of endings in recognising and consolidating what has been achieved, saying goodbye, and setting the tone for any future re-engagement, there is less written within social work literature about endings than beginnings. This is noteworthy given that children may have experienced unplanned and/or traumatic endings in other relationships, thus the manner in which their relationship with a social worker concludes may be particularly relevant. In the previous extract, Naomi raises the importance of marking and honouring endings as part of the way care is enacted. This is so significant, that even though the meal is yet to happen, she thinks she will remember it two years hence.

Observing care

In addition to children highlighting the importance of care and social workers being “kind”, because I accessed children via their social worker, who introduced me to them and their parents, I observed professionals with children and parents. This meant that I saw and heard workers interacting with children in ways which appeared to demonstrate care. In this section I consider my observations, and the meanings I ascribed to them. These include instances where the social worker/social work assistant remembered information which appeared to me to be significant to the child and I include several of these below.

Caroline (social worker) took me to meet Josie, Reanne, their mother Annie, and younger sibling Cara at their home. When Josie and Reanne opened the front door, Caroline greeted them warmly, remarking that Reanne had on her “favourite purple dress” and Reanne nodded yes.

Before Naomi’s interview, after Sarah (social worker) had introduced me, Naomi outlined what she would spend her voucher on, and her plan to go shopping with her boyfriend Jo- Jo. Sarah commented that she thought this was a different name to the one mentioned in a previous visit, and asked if this was a different boy, or had she mistaken his name. Naomi then updated her on her new boyfriend and the circumstances surrounding the demise of the previous relationship.

The interview with Alan and Jim was held within the social work office, and Sally (social work assistant) booked a room and arranged refreshments. Sally brought in a plate of biscuits and gestured to Alan by a nod and a smile that she had included a couple of his favourite biscuits. This told Alan that she had not forgotten what he liked, and also ensured that I did not inadvertently eat those particular biscuits.

Julie (14), chose not to be interviewed, but did want to take part in a reference group to help me frame my questions. Karen (social worker) had been in contact with Julie and her mother Pat for several months. On our visit she referred to Julie's pet guinea pig by name, and noted that a certificate she knew Julie had recently been awarded at school was on the wall.

While the above examples appear relatively minor, they indicate that the worker has held the child in mind, and remembers and values their preferences and experiences. They have resonance with other research as to how care is enacted and experienced on a day-to-day basis, such as residential care workers remembering how a young person likes their toast (Punch *et al.* 2011). There were also instances during interviews when social workers mentioned a detail, almost as an aside, which indicated that they were interested, and had taken account of events which were important for the child. For instance, Janie mentioned that the timing of the first meeting between a teenager and her birth mother was influenced by the dates of exams. Lily commented that quite a few of the teenagers she was in contact with were waiting for exam results, and for me her use of the word “we’re” is noteworthy:

I’ve got quite a few teenagers at the moment so we’re waiting on standard grade results coming through, and I feel quite anxious for them as well waiting, because I’ve seen them going through their exams and studying (*Lily, social worker*).

Martin wondered whether his social worker “really cared”, and in her interview when she was reflecting on the qualities practitioners need, this was something Kate highlighted:

To be able to make a child feel (pause) important, feel, well, to get to feel listened to, to feel... Yeah, make them feel important, that you care, that

you're interested in what's going on for them. Yeah, I think you need to be able to do that (*Kate, social work assistant*).

Kate's comments could be seen as being ambiguous, given an ability to "make them feel important, that you care" is not necessarily "really" caring, and may merely indicate that a social worker is highly effective at 'surface acting' (Hochschild 2012). However, this is not how I interpreted them. Rather, Kate appears to summarise the value of the gestures which I observed and heard. By remembering the name of a boyfriend Sarah enacted her interest in "what's going on" for Naomi, as did Janie and Lily with regard to the timing and significance of exams. Although not necessarily life-changing, passing references to favourite biscuits, dresses, or the name of a boyfriend can be viewed as performing, or making care tangible, and are important signifiers of care. In Caroline's comment to Reanne, and Sally's gesture about the biscuit, the message for both children (as I read it) was that their preferences are important, and are remembered.

Kate expressed a wish that children should feel "you care" and similar to other professionals noted that practitioners needed to be dependable, and reliable. Although they did not explicitly reference attachment theory, or use the term "secure base" (Howe 2005) to identify why being reliable was important, in their interactions with children practitioners appeared to behave in a manner which could be read as being informed by attachment theory (Furnivall 2011). During interviews some practitioners gave examples of the ways in which

children demonstrated how important the relationship was to them, and this will be explored next.

Children care about professionals who care

One of the themes to emerge from this study is how, at times of uncertainty, children sought out those individuals whom they experienced as caring and reliable. In some instances and in common with previous findings (Winter 2015), workers underestimated how important they were to the child. As a consequence, the depth of the child's feelings initially came as a surprise until they contextualised this within the child's experiences of parents or carers, and contrasted it with the stability of the relationship they had forged with the child. Here, Claire (social work assistant) recalls two occasions where this became clear to her, one where two young boys she was working with made their own way to her home, and another where her presence at contact was important:

I can remember them appearing at my door and I was, "Oh what can we do for you?" And I was just, "I'll take these boys home" and I took them home, and then they appeared again [...] And I never really thought there was an attachment at that stage, but I thought that was (pause).

And it was quite strange; I hadn't had that before and... You tend to think sometimes you're doing a job, and you don't realise the impact that you have on the children... And the three children that I was talking about two boys and the girl where there was the neglect, when they were in foster care there was issues, the girl didn't want to have contact. And, uhm... there was, uhm (pause) she disclosed some really quite

horrifying things about what she had seen and, uhm, the older boy, when his sister was taken out, he was saying to his foster carer, “Claire’s going to there isn’t she (pause) Claire’s going to be there during contact isn’t she?” (pause). And that was another bit that I hadn’t really taken on board

(Claire social work assistant).

Lily made reference to the significance a young girl placed on her relationship with a social work assistant who has been a constant in her life throughout periods of change, trauma and loss. Here she recognises the importance of this relationship, whilst also tentatively questioning the level of dependence:

Another young girl I’ve got. I’ve not been her social worker for long, but there’s a social work assistant, Sam, in the team who worked with her for years and years and years [...] She’s now accommodated, and I had her placement agreement meeting with her on Monday. And I went through with her who she wants to see, who she wants to have contact with, and she wants to have contact with her aunt and her siblings, and I said “Is there anyone else you want to see?” and she said “Sam”, and I said to him and he kind of laughed. But I said to him “It’s sad, but it’s really nice, she doesn’t want to see her mum and dad but she wants to see you”. So she’s obviously thought a lot of Sam over the years so she’s requesting that contact with him. But at times that’s what does worry me. That you’re kind of (pause) that they do rely on you that little bit too much.

(Lily social worker).

At another point Lily described how a teenage girl phoned her in the middle of an argument with her mother, and asked her to come quickly. Lily and a worker from the voluntary agency involved then went to the home. As the following extract illustrates, this was a complex situation, where Lily had to respond to the immediate situation, whilst trying to arrange a placement for the girl. In our interview, she reflected on the visit, the preceding phone call, the trust the girl had placed in her to respond, and how this was based on the relationship she had previously established. Lily notes that she has “thought about that situation quite a lot since”; however, this seems to be from the perspective of “how could we have done things differently”. As noted in Chapter Three, when considering the co-construction of data, and the role of interviewer as “active agent” (D’Cruz and Jones 2009) I indicated that I made decisions about what areas to pursue and what to leave, and participants also made decisions about their narratives. These choices necessarily influenced the direction of the interviews. Here I chose to tease out the significance of the phone call, and in response Lily contrasted her position with that of the girl, and the role she had played:

Lily: I got a phone call from the young person to say “My mum's gone out to buy drink, and I've locked her in the house I'm not letting her go, she's not choosing drink over me again”, this, that and the next thing. And then the phone got hung up, and they stay like a half an hour drive away from here [...] I'm phoning back, phoning back, no answer and I'm thinking right if they're arguing and the phone's ring, ring, ringing, is that making the situation worse [...] They did have at that time have

support from Includem¹¹ and they were in six days a week. So I phoned that worker who was ten minutes away, and off she went. But then I did phone them and get the young person and the mum had allegedly assaulted her, and so the police were on their way then. So I headed down [...] And things were very heated between the two of them, uhm, and I phoned to get a placement, and I was told where I had a placement, but then ten minutes later I got a phone call to say that placement had fallen through [...] I was trying to hold off breaking that news to her because I wanted her out of the house [...] The young person was saying that she wasn't leaving the house until she had slapped her mum across the face, and obviously we were trying to calm that situation down to get her out [...] I've thought about that situation quite a lot since, as you can imagine (half laugh) and how could we have done things differently, and uhm, I don't know if we could [...] I was so glad to be at my desk (when the phone rang) I really was [...] At least I got that minute with each of them to hopefully put a few thoughts in either, each of their heads.

Int: Yeah (pause) and that bit about how significant it was that she phoned you.

¹¹ Intensive support service which some local authorities use.

Lily: Yeah, I never really thought about it much, but yeah.

Int: 'Cos I guess, thinking about if you were in a really difficult situation, who would you phone?

Lily: It would be a family member or a friend, but for it to be me...

Susan recalled her work with Gail, a teenage girl who she has known for several years. Initially Gail had been looked after at home but is currently in foster care. During her interview, Susan highlighted the part she has played in the lives of Gail and her mother. Similar to Lily, Susan goes on to contrast this with her own life and how she would draw on immediate family and friends, as opposed to professionals, if she were in difficulties:

A couple of weeks ago she was talking and she said "I hate my mum", and I said "No you don't hate your mum, you maybe don't like all the things she's done, but I know that you love your mum because you are always worried about her, and you only get one mum". And she said "Well I've got two". And I said "What do you mean you've got two?" And she said "Well you"... And I think because I've known her for so long you know, but then the mum thinks like that about me as well... When the mum took an overdose a couple of weeks ago she put me down as her next of kin because she's got nobody (*Susan social worker*).

Later, Susan refers back to this and asks:

Susan: If you have a problem in your life, who do you turn to? I mean me personally I wouldn't talk to a social worker.

Int: You've got other options?

Susan: That's right, but these (pause) they don't have anybody I suppose that they can rely on.

When reflecting on the roles they played, Susan and Lily contextualised this in relation to attachment experiences, and the absence of an alternative in the form of reliable family support. The possibility that social workers and other professionals can be secondary attachment figures in a child's life has been explored by practitioners and writers in social work, social care and education (Howe 2005; Batmanghelidjh 2007; Bomber 2007; Lemma 2010). In her research, Bell (2002) interviewed 27 children aged between 8-16 years, and argued that attachment theory can help practitioners to understand how a child's capacity to form relationships will be influenced by previous experiences, and can act as a guide to enable practitioners to intervene through the development of a secure relationship. In the next section, I explore the relevance of attachment theory to direct work, and to children's expectations of their social worker.

Attachment theory and its relevance to direct work

Despite criticism that social work education focuses on the theoretical and philosophical, leaving practical knowledge and skills underdeveloped (Narey 2014), most practitioners did not explicitly mention theory in their interviews, with the exception of attachment theory. As Osmond and O'Connor (2004) and Brandon (2011) previously found, any references to theory also tended to be relatively superficial; however, this may have been because I did not specifically ask practitioners what theories underpinned their direct work. Had I done so, they may have made links to a range of theoretical approaches.

Professionals referenced attachment theory in a range of ways. Prior to introducing me to children practitioners provided a brief verbal 'pen picture', invariably this included some mention of their primary attachments, including losses and separations. At times attachment theory was used loosely as an explanatory framework when considering what experiences a child brought to their current relationships, including with professionals, and was referenced directly or obliquely by practitioners when describing the purpose of their interventions. Claire referred to "attachment" to explain why she undertook direct work with a mother and her two children involving cooking (detailed in the previous chapter). During her interview Lucy described the work she completed with a teenage girl, her siblings and parents. Here, she refers to "their attachments" when recalling the complex and conflictual family relationships:

They've been pushed back and forward, when they're with mum, dad's the worst person in the world, when they're with dad, mum's the worst person in the world. When they are with each other, and you can see it in the kids now, whenever two of them get together the rest of them are this or that, and I mean, their attachments are all over the place, completely all over the place (*Lucy, social worker*).

Later in the interview, after describing her work with a child who is now accommodated with foster carers, Lucy again references attachment theory to demonstrate how she explained to the carers why the girl might not form close relationships with them:

The foster carers said it was good initially, but she never really gave a lot. But she's not going to do that, she's got a mum, who she disnae speak to and she's got a dad. I think the foster carers they were wanting more back, and I said "You're no going to get it", I mean there's definitely attachment problems here (*Lucy, social worker*).

In addition to using attachment theory to frame the child's relationships, and their rationale for particular interventions, some professionals mentioned the bonds they had with particular children, in some instances drawing parallels with primary attachment relationships. For instance, earlier, Susan told how a teenage girl described her as a "second mother", and Lucy described how she had taken a boy shopping "like you would do with your mum and dad". It was evident that several children had formed relationships with practitioners which were important to them. As Jim noted, his son Alan "likes Rosie and Sally big time". However, while several practitioners used familial analogies, among the children only Josie (nine) used similar terms when she summarised the nature of the relationship saying "with me and Caroline it feels like Caroline's part of my family".

During the reference group for managers, Lou recalled her contact with three siblings, initially as their social worker, and now as team manager. Lou referred to them as her "mantelpiece children", in that they had become children whose school photographs she could envisage being on her own mantelpiece. In part this was due to the longevity of the relationship, but also appeared to be due to the bond which she had formed, the place they now

had in her life, and how those bonds are represented and displayed (Finch 2007). Earlier in the chapter, when Lily outlined the importance of a social work assistant to a young girl, there was a degree of ambivalence in her comment about children relying “on you that little bit too much”. Similarly, in the following extract Lou says there are “two schools of thought about whether I should have maintained that level of involvement”:

Lou: I worked with three kids as a fairly new social worker [...] I was their social worker for a lot of years and then I left (pause) and I've now allocated it to one of my workers and we still have that contact. And some people feel I shouldn't have given it to one of my workers, you're too involved and you know the story back, and, and...

Jane: I think that's a good thing though.

Lou: I think it is, and I've come back and I've picked up the kids after placement break downs when they've been unallocated. And I just think (pause) “Phew, not another stranger, you just can't do it to kids”. But there's definitely two schools of thought about whether I should have maintained that involvement with these kids.

Furnivall (2007) and Bomber (2007) stress the value of building close trusting relationships with children and explicitly locate practice within an attachment framework. However, Lou mentioned “two schools of thought” and some practitioners expressed a sense of uncertainty about how close they should be to children with whom they are working. Hochschild's concept of 'feeling

rules' might help explain some of the ambivalence to which Lou and Lily appear to be giving voice. Hochschild identified that there are unwritten and sometimes unspoken conventions and expectations about how one should feel and express emotion(s). She argues that these feeling rules act as a guide, and that in their "relations with clients", social workers are "expected to feel concern, to empathise and yet avoid 'too much' liking or disliking" (Hochschild 2012, p.150). Martin asked whether social workers "really cared". What was evident from the accounts of practitioners who participated was that they tussled at times because they were uncertain whether, in the words of Hochschild, they cared, "too much".

"That's where my heart is"

The review of literature in Chapter Two highlighted that the amount of time spent on administrative processes and IT was seen as a barrier to direct work, and a source of frustration and regret for practitioners and managers (Gupta and Blewett 2007; White 2008; White *et al.* 2009). As will be discussed in Chapter Six, all professionals mentioned the impact of IT; however, the feeling expressed was overwhelmingly one of irritation, with the tone of descriptions generally shaped by frustration or wry humour in relation to the volume, monotony, and repetition involved, rather than a heartfelt pre-occupation. This was in contrast to the feelings practitioners communicated when talking about their direct work with children, which one worker located in her "heart".

Emotions of joy, distress, and regret were present, evident in the tone, the volume and flow of the stories (with barely a breath taken), in the language practitioners used when recounting what they did, why and where they did it,

and in their physical presentation. As is to be expected given their different roles, and the distance from practice they necessarily have, managers appeared to tussle less with the emotions generated by direct work than the practitioners.

The role of emotion is an area which is of interest to practitioners and theorists alike (Turney and Stets 2005; Morrison 2007; Howe 2008). Miller has argued that “emotion is an integral part of the workplace” (in Hayward and Tuckey 2001, p.1502). In social work, practitioners encounter service users and carers, in this case children and their parents, who are struggling because of poverty and exclusion, loss and change, neglect and abuse. As Obholzer and Roberts (1994, p.177) note, “within the helping professions, pain, anxiety and distress are as much a part of the atmosphere and as widespread as is coal dust in a mine”. The emotional temperature involved in the encounters social workers have with children and their families is likely to be high for a range of reasons, including the complexity of the task, personal motivation, and views of children and childhood.

In his report in to the death of Victoria Climbié, Lord Laming (2003, p.105) was critical of social work practitioners for failing to “do simple things properly”. The perspective that social work is essentially simple has in turn been critiqued (Cooper 2005; Ferguson 2011; Ruch 2012) and recent policy initiatives recognise the complexity of the task and the skills involved (Scottish Executive 2006a; Munro 2011, 2012; Scottish Government 2015). What was evident from interviews was the complex nature of direct work. Children

brought a range of experiences, emotions, and expectations which influenced the nature of the work and the relationships they developed. These included their experiences of loss and neglect, anxieties around the role and remit of social work, previous experiences of professionals, and behaviour which could at times be very challenging for adults around them (Cairns and Stanway 2004; Rees *et al.* 2011). Social workers also brought their own personal and professional experiences and expectations.

The significance of personal motivation and how this influenced priorities emerged as important in interviews with professionals. In his study of what drew practitioners to different areas of social work practice, Burns (2011) used the terms “career preference, transients and converts” to denote the different categories he identified. One of the themes in my study was the way many of the practitioners described their choice of children and families social work as something akin to a vocation; including Mara who indicated “it’s not just work”. This appears to be situated within their sense of what children and childhood ‘should’ look like, which in turns needs to be contextualised within wider discourses on childhood. Janie (social worker) detailed how she had planned to specialise in another sphere of social work, but had gained a post in a children and families team after qualifying. She went on to say:

Janie: I wouldn’t move from childcare now.

Int: Why?

Janie: I just find it very rewarding the relationships you build up with the children and young people. *That’s where my heart is* (my italics).

Janie employed the phrase “That’s where my heart is” to indicate her emotional connection to her work and how central it is to her identity.

Similarly, Pete, an experienced team manager of some years, uses the word “love” to give a sense of the depth and quality of the commitment he had made:

Int: Has all your work been in children and families?

Pete: Yes [...] My love is children and families, and I still think we make a difference to children.

In contrast, Theo had initially been drawn to adult mental health services but had always worked within a children and families team. He viewed his interest in adult services as a bonus and said it enabled him to think about the needs of different people within the family. He went on to contrast his position with other practitioners:

I wasn't actually thinking of myself as working with children, I think that's maybe the point I was making. I suppose, like sometimes you meet people in children and families social work and you know that's what they want to do, they want to work with children...That's what draws them... that influences quite a lot of people... and I did not necessarily see that as something that I naturally wanted to do (*Theo, team manager*).

Several professionals indicated that their decision to work with children and their families was associated with their aspiration to improve children's lives and facilitate change, and Lucy and Gary's comments are characteristic:

I just think I wanted to work with kids, to work with kids because of their vulnerabilities and being in houses where they are not being looked after properly, and I think I just thought, nah I want to work with kids and I want to be involved in that (*Lucy, social worker*).

I like the contact with the families. That's why I came into this work to help people to change (*Gary, team manager*).

For Lily, her career choice was also linked to her own positive experiences of childhood:

I did want children and families, and when I went for my interview I said that I'd been very lucky, I feel that I've had a good upbringing, my mum and dad are still together, I've got a sister, we've had a very stable upbringing, and I suppose wanting to pass on what I've experienced to try and help with other children and young people, that was the idea anyway (laughs). It wasn't quite what I expected though (*Lily, social worker*).

Understandings of children and childhood, and the existence of different and potentially conflicting discourses were explored in the literature review. One discourse is that childhood is a protected space, where children's vulnerabilities and their concomitant needs and rights to protection are the focus, as in Lucy's description of children "not being looked after properly". In Lily's final comment and wry laughter there is a hint that where there is a dissonance between primary motivation and their actual experience, this can elicit a negative emotional response. One possible explanation why feelings of

anxiety and distress are as present as “coal dust” (Obholzer and Roberts 1994) is that practitioners’ experiences of the contexts in which some children live conflict with one of the aims of social work, to offer care and protection (Shemmings 2000). Several described scenarios where not only was childhood not a protected space but where their interventions might have precipitated a crisis or made a child’s situation more precarious. I explore two of these here.

In the first case, Claire recalls an occasion where she had seen a young boy on his doorstep, and her feelings of guilt and regret when later on that day he witnessed his mother being seriously assaulted by his father:

I can remember going for a visit and knocking on the door and the wee boy answering it and saying “My mum’s not here”. I says “Oh I wanted to see her”. He said “My dad’s here but he’s in bed”. And I said “Oh don’t disturb him”, and I said “How are you?” “I’m fine”. He had a cold, and I said “I can hear your dad”. And his dad was shouting, and I said “I’ll just leave you”. And I came back to the office and I passed on the information to (pause). By that time there was another worker involved. So I passed on the information, and we tried to get in contact with the family and then (pause) uh (pause) that night there was an incident (pause) and the baby was involved in a domestic incident. The mother was (pause) and I think the charge was attempted murder, basically because she’d been beaten up so severely. And that’s when I reflected back and I thought “Oh no.” And I just thought, “Could I have done anything else?” And I couldn’t have. I’d told everybody I was supposed

to tell, everyone had tried to get in contact with them, and unfortunately this incident happened (pause). And I can still picture the wee boy in the hallway (pause). And I think should I have said (pause) [...] It was because we had been trying to contact mum, uh (pause) that (pause) argument fuelled by alcohol (pause) because he didn't like social work being involved (pause). And that was quite (pause). And from when that happened it was quick (pause). The children were taken away, the children were taken to their grandparents
(Claire social work assistant).

For some workers, like Claire, from the flow of their speech, I had a sense that this was the first time they had recalled difficult events in depth, and that within the research interview they were processing the event and their response. As is clear in the extract above, the pauses increase as Claire expresses her understanding that the violence was associated with her visit. For some practitioners, the feelings they demonstrated outwardly at the time were different to the ones they were feeling inside, and Claire is an example of this. At the time she focused on the practical, ensuring that she had passed the information on to the social worker and team manager, and had recorded what she had seen. However, retrospectively, when recalling the doorstep visit and the subsequent violence, it was the child's face that seemed significant, with associated feelings of distress that she had been unable to prevent the assault he witnessed and her sense that she may have precipitated this by her visit. It is possible that the feelings of regret she

alluded to in the comment “I think I should have said” were compounded by the fact that this was the last time she saw the boy.

Lucy (social worker) recalled how in her report to a Children's Hearing, on the basis of information a young girl had provided in their one-to-one work, she detailed how the girl sexually abused a sibling. The girl was in kinship care with her grandmother who, after reading the report, terminated the placement with immediate effect. Lucy described sitting with the child to explain what would happen next, and how the child was very angry with her. At the time, her focus was on the needs of the child and the practical task of locating another resource, but within our interview, Lucy's own distress was palpable:

It was crap for her (reaches for another biscuit). And then her gran, they didnae need any more ammunition, and I just felt (pause) shit (pause). 'Cos a lot of the work I'd done with her (pause). And then afterwards she thought that I'd just let her down (*Lucy, social worker*).

Throughout this part of the interview Lucy was looking down to the floor and was very quiet, almost whispering. She ate half a packet of biscuits as she recalled the experience. This contrasted with Lucy's presentation during the rest of the interview where she appeared positive and enthusiastic, with her conversation punctuated by regular laughter, lots of arm gestures, and direct eye contact.

A third case is drawn from the group for practitioners. Towards the end, Eilish related her ambivalent feelings when a young girl she had been working with

for some time disclosed she had been abused. Eilish was concerned that as a consequence of her mixed feelings, there might be a negative impact on the way she intervenes in future with other children:

I absolutely knew was that somewhere... that something horrible had been going on... And it took such a long time to get there (pause) and when I did get there (pause) and she disclosed to me (pause). I was absolutely crushed, and it was because I knew (pause) but I couldn't push her any harder (pause). And it was so difficult to get in (pause) and (pause) every time I went out to see that child, I would think (pause) will it be today? (pause) Is it today that she will say? (pause) And I was crushed, absolutely crushed, and I think that (pause) that will impact on how I do work in future... 'Cos I was angry, I was sad; I cried buckets (pause). And the bit that I was crying about was because I knew (pause) and I couldn't make her tell me (pause) and she'd taken it all this time (pause). And I think what happens the next time when I know? (pause). And I'm going to start doing pieces of work again (pause) you know and to be really careful about that. My instinct will be to speed it up (pause) to get it over and done with and to be more direct (pause) and maybe push the child beyond what he or she wants to be (pause) uhm (pause). It's very close though... so... I get a bit emotional about that (pause) Yeah... I think it does have a massive impact (*Eilish, social worker*).

Martin asked whether social workers "really care", and from the narratives above it is evident that practitioners experience real feelings in their direct work, or, at the very least, when they talk about it they show strong feelings.

From their accounts, it appears that Claire, Lucy and Eilish took pains to regulate their emotions, not reveal them, and not focus on them, presumably in case this diverted them from what they all saw as their primary focus, which was meeting the child's needs. Thus, their inauthentic displays of emotion (at the time), could be read as being linked to authentic feelings of care for the child, and in the next section I consider how their experiences might contribute to a re- evaluation of Hochschild's concept of emotional labour

Emotional labour revisited

Central to Hochschild's concept of emotional labour is the difference between the emotion experienced by the worker, and how s/he chooses to manage and display (or not) that emotion. Hochschild (2003) suggested that if the displayed emotion differs from the felt emotion, the process of managing feelings leads to a sense of inauthenticity, and eventually may mean the worker experiences 'burnout'. More recent research on emotional labour in nursing and social work/social care (Gray 2009; Leeson 2010; Hayward and Tuckey 2011) questions whether the process of managing one's feelings necessarily leads to inauthenticity. Theodosius suggests that emotional labour includes far more than suppressing or managing emotions (including irritation, disgust, and fear) which, if expressed openly at the time might be unhelpful. She argues that it also involves a high degree of reflexivity where emotions need to be internally acknowledged "even though in the act of emotional labour they may (outwardly) suppress them" (Theodosius 2008, p.218). What some of the practitioners appeared to be doing within the interview process was acknowledging and processing their emotions, and this too is emotional

labour. When listening to Claire's description of the doorstep visit, or Lucy's experience, there was a sense that each one felt personally responsible, that they felt they had let the child down, and had failed to protect them (from experiencing or witnessing abuse) or had precipitated a crisis (the violent assault, the severance of the relationship). At the time, Claire's focus was to ensure that she passed the information on to others, and Lucy's was to support the child and to arrange another placement. For Eilish, she had been balancing a desire to proceed at the child's pace whilst wanting to intervene to protect her from the abuse she believed the child was experiencing. Moreover, it was also apparent that all three were continuing to try and reconcile the complex emotions generated in practice.

Earlier in the chapter, I highlighted Lou's and Lily's ambivalence which seemed to centre on whether some practitioners and children cared "too much", and linked this to the idea of feeling rules, and the suggestion that social workers should avoid too much or too little liking (Hochschild 2012). Hochschild argued that feeling rules are often tacit; however they are, to some extent, made explicit in the stated values and guidelines which underpin practice. Values play a central role within social work, although how they are conceptualised and operationalised is contested and debated (Woodward and Mackay 2010; Wilson *et al.* 2011). One of the espoused values is that service users and carers can expect to be treated with respect, and this is reflected in the standards underpinning practice (NOSW 2002; SSSC 2009). A feeling rule associated with this value is that practitioners need to identify what it is appropriate to feel, and how to display it.

Flowing from the explicit value of treating all with respect is the sense that where a practitioner's personal views or emotions are influencing or distorting working relationships they need to be aware of this and counter any bias (Milner and O'Byrne 2009; Kirkman and Melrose 2014). Janie used the phrase "That's where my heart is", and the examples Claire, Lucy, Eilish chose to relate, where emotional labour was central, were instances where they were clearly involved at a personal level, and practitioners described a range of feelings including elation, sadness, anxiety, and regret. Their accounts (and the practice described therein) might therefore be characterised as being beyond, or in breach of, the feeling rules that social workers "avoid too much liking or disliking". However, their accounts might also be seen as indications that, in Martin's words they "really care", even if this was evidently at some personal cost.

Does cost to workers mean costs for children?

Hochschild (1983, 2003, 2012) focused on the cost to workers of emotional labour and this cost was evident in the way in which practitioners recalled their role; in what they said, the manner of their speech, and their behaviour. Killen (1996), Stanley and Goddard (2002), and Mudaly and Goddard (2006) consider how this might affect the way practitioners engage with children. One of the themes from reference groups with professionals, and a couple of individual interviews, was how the potential personal cost of direct work with children might translate in to costs for children, if as a consequence, practitioners avoided particular aspects of work in order to protect themselves. In her interview Lucy recalled the emotional cost to herself of engaging in

difficult areas of work, and how the memories of particular children and aspects of work remained with her. She wondered whether some practitioners might avoid these aspects commenting:

And then a lot of folk maybe they don't want to do direct work because it's too personal for them and they (pause) they're scared of it, dinnae want to get that close to their clients as well (*Lucy, social worker*).

In individual and group interviews, the possibility that practitioners might avoid difficult areas of work to protect themselves was clearly hard to articulate, and appeared to conflict with an unwritten value or feeling rule of social work practice. Here, Carla is speaking in a group of practitioners she knows well but the number of pauses in her speech indicates how difficult it was to express the following:

Carla: Sometimes you hear people say (pause) oh, I can't go on a visit to that family today.

Int: Uh huh.

Carla: I can't (pause) you know (pause) emotionally deal with it (pause). I'll do it tomorrow (pause) or I'll have to find another way to do that... sometimes (pause). It's quite a hard thing to say (pause) even to say you feel like you can't deal with that one day (pause). You might have to do it another day (pause). You feel like you've got a responsibility there and that's (pause) hard to say (pause). I don't know what (pause) if everyone is as honest (*Carla, reference group for practitioners*).

During his interview Theo also raised the possibility that there may be occasions when practitioners are less able to respond. As with Carla, the number of pauses, the repetition of “maybe” and what remained unsaid, are indicators that this is a difficult topic to discuss:

Int: Is there anything else that you think affects either the quality or the quantity of the work? That could be a range of things: it might be training; it might be confidence; it might be any number of things?

Theo: Right, I think sometimes (pause) if a particular worker is burnt out, then yes and certainly I've (pause) seen the situation that certain workers perhaps (pause) [...] Maybe burnt out is too strong a word. I mean sometimes people who maybe with being overloaded and things like that are maybe not as tuned as they could be maybe not to the point of being (pause). I mean it usually kind of comes across as (pause) [...] Part of the reason for supervision is sometimes you find out, sometimes you find out that, it just kind of went by and by a little bit, 'cos other things happened, so you get a sense from workers why it happened and see if we can go back to a level that...

At a later point Theo returned to the emotional effect of practice on workers and on their need for support. He also commented that due to the nature of the social work role, “certain things should never be easy”. As we see below, in the group for managers, although initially the question whether practitioners

might sometimes, consciously or unconsciously, avoid emotionally complex areas of practice was dismissed out of hand, after further musing they identified occasions where this happened. Some of the practitioners who participated in Winter's study (2011) explained that they had been reluctant to ask young children about their experiences as they were afraid that this would traumatise the child, and Sara mentions that this reasoning can be utilised to explain avoidance. Although not a focus in the literature, Lou suggests that for some workers the spectre of having to give evidence in court acts as a disincentive. As with Carla and Theo, the more difficult something is to acknowledge and express, in this instance that workers might not ask in order not to know, the more pauses and gaps there are:

Lou: I think most of my workers who are doing direct work would be trying to get a child to talk (laughter) that would be the goal, it would be a very... I'm going to do direct work because I have huge worries, I've got a hunch, so I'm going to do six sessions with this child, and what do you like, what do you not like.

Jo: That's true actually, that is what you're trying to find out. Well, I can't think of anyone that wouldn't want the child to answer the questions.

Sara: But it could (pause). Do you mean people who don't do that, who avoid that?

Int: Yes.

Sara: So they don't have to hear.

Lou: I think it's a really common thing that happens and I think having been involved in cases since I qualified, where I remember removing a thirteen year old and you look back at the case history and actually all the signs were there, about what was happening, but nobody actually stopped and said let's ask these kids if they are okay [...] And you think what's that about? And I've seen that on a number of occasions (pause). I think there is sometimes a fear of asking, getting details, particularly when children are deemed to be safe already, and what we do with that and (pause). It's an area that I really struggle with, particularly with children where there's child sexual abuse, about the fear of asking detail about that, I think it's very real for workers. I think it's not a common area of practice, and I think what that provokes in people.

Sara: I think we can hold onto that by saying, well I don't want to re-traumatise the child.

Lou: You hear a lot of that... And the other thing that's around for workers that I've picked up on is huge anxieties that they'll have to go to court (pause). And I think the recent press about workers being slated; getting very hard times from sheriffs, and now it's like (pause). If I don't have (pause), If I don't (pause), If I don't know it (pause) then I don't have to repeat it, and I don't have to give evidence.

When considering what factors might influence whether professionals avoid potentially emotionally difficult subjects, the gendered nature of emotional labour may be of significance (Hochschild 1983, 2012; Theodosious 2008). In his research with practitioners engaged in group work with male perpetrators of domestic violence about the impact of the work, Morran (2008) found distinct differences according to the gender of the worker. Those differences were contextualised in relation to wider discourses on domestic violence, the nature in which domestic violence was theorised within the groups, and how individual male and female practitioners viewed themselves in relation to the male participants. In my study, the nature of the sample may have influenced the nature and direction of discussions. All the practitioners who participated were female, there was one male in the manager's reference group, and three male managers were individually interviewed, with no female managers from the local authority which hosted the research participating. Gender is of relevance to practice, research, and to the nature of care (Milner 2001; Scourfield 2003; Gillingham 2006; Fawcett *et al.* 2000). However, aside from the finding that only the boys associated having a social worker with being "in trouble", and Naomi's comments that as a consequence of her experiences of domestic violence she would have found it difficult to talk to a male social worker, gender was not explicitly highlighted in accounts. This may be because the gendered nature of interaction and experience is so taken for granted, that it goes unnoticed or unremarked.

Another factor which might influence a practitioner's willingness or capacity to engage with emotionally difficult subjects is their own experience of

relationships. Although practitioners referenced attachment theory in relation to children, they tended not to explicitly consider how their own attachment experiences might have some bearing on their practice. If attachment is relevant throughout the lifespan, those experiences may influence the manner in which adults, including the practitioners and managers interviewed, relate to others throughout life (Morrison 2005; Howe 2011). Consequently, attachment theory can help in part to explain what professionals bring to their encounters with children and their families.

A primary task of attachment is affect regulation whereby children learn to recognise, name, and regulate both their emotions and behaviour (Howe 2005; Hughes 2004; Cairns and Fursland 2008). For practitioners this was a core aspect of reparative intervention, as for many children and parents, regulating their behaviour particularly at times of anxiety was a struggle. In Chapter Two, I referred to Cairns and Stanway (2004) who explore how children with unmet attachment needs have difficulty with stress, trust and empathy, impulse control, rage, and shame. Those needs “stir” the child, who then “stirs up” other people, including professionals. Cairns and Stanway’s analysis can help explain why, at times, social workers may avoid aspects of direct work; it feels difficult and stirs them up. It also enables a valuable connection to be made between attachment theory and emotional labour. Kinsman and Grant (2011, p.264) identify that “the capacity to manage the emotions of oneself and others effectively frequently in complex care settings, is central to the role of a social worker”. Hochschild’s concept of emotional labour depends on workers being able to regulate their affect; however

presumably one's capacity to regulate is shaped by what participants bring to an encounter. Children will bring their experiences, which will at times mean that they "stir" up professionals, but practitioners also bring their own attachment experiences. Although several used familial analogies to highlight the bonds they had with some children, and some identified that their experiences of being parented, or parenting, was relevant to their motivation, none of the practitioners made a link to this aspect of attachment theory when describing instances where they avoided direct work, or conversely when they went the extra mile. An area which warrants further exploration is the degree to which the capacity to engage in emotionally demanding direct work is influenced by a practitioner's own attachment experiences.

Positive labour

In this chapter, I have explored the emotional labour involved in direct work, and the cost of caring. One of the potential drawbacks when thinking about emotional labour in relation to direct work is that the focus can be on the difficulties, the 'coal dust', rather than the positive emotions involved. Indeed, one critique (Gilligan 2009; Turnell and Edwards 1999) of social work practice more generally is that it is based on a deficit model. Leeson (2010) argues that emotional labour is not always about cost, and when listening to the interview recordings, and analysing transcriptions one striking factor is the amount of laughter in the interviews with practitioners and children, and the positive emotions expressed. During their interview Alan and his father were both laughing when Alan described the ideal social worker (Sally) and Alan was triumphant as he recalled beating Rosie at bowling. Practitioners

described scenarios which evoked in them visible and audible emotions of joy and happiness, as well as anxiety and distress, and they seemed to draw satisfaction from the work they had been involved in. As Collins (2008) and Mandell *et al.* (2013) found, this satisfaction appeared to contribute to their continued motivation and commitment, and their sense of self-efficacy and self-esteem. Janie had helped a teenage girl search for her birth mother, and recalled her feelings following a phone call from the mother to confirm she wanted to meet her daughter:

We agreed that we would send the letter but that I would do a covering letter saying that I was involved with this young person, and if mum decided either way to have contact or not have contact, to please contact me either at the office or my mobile phone . So we sent the letter, and then a week past Friday mum phoned to say that she wanted contact, and I phoned the young person (pause). I know, I got quite upset about it, and I phoned the young person to say to her and she was bubbling on the phone, and I was bubbling and it was just quite emotional, a really nice piece of work (*Janie, social worker*).

Janie described “bubbling”¹² while on the phone to the young person, and recognised that this was “a really nice piece of work”, while Mara used the word “fun” in relation to her direct work with a child. During her interview Lily was clear that what gave her most satisfaction was “working with the families,

¹² “Bubbling” means crying.

with the children and the families”, saying “I enjoy going and out and seeing people and spending time”. She revisited this at the end of her interview and commented that:

I don't always just look at it as a job, and I'd hate to think that my families look at me coming out because it's just a ticky-box job, and that I'm coming to visit because I have to. Yes, that is right, but it is because I genuinely, I want to make changes for them; I want to help them improve the situation that they're living in. And I do feel genuine in that, yes it is a job, but you do need to care more than it just being a job

(Lily, social worker).

This chapter started with Martin's question as to how authentic expressions of care are. In the last extract Lily twice used the word “genuine”, and referred to social work being “more than just a job”. All the professionals opted into interviews, and therefore do not necessarily reflect the views and perspectives of individuals within the local authority who chose not to speak to me.

However, those who did participate appeared to share Lily's sense of personal responsibility and commitment. This meant that they drew satisfaction from particular aspects of their work, and I observed and heard examples of how this commitment translated in to tangible examples of care. It also meant there were instances where the impact of direct work was keenly felt, and where workers viewed themselves as more responsible than they necessarily were. Claire did not perpetrate the violence the boy witnessed after her doorstep visit, nor did Lucy terminate the placement and withdraw her affection following the Hearing.

Summary

One critique of social work is that in response to an increase in audit, practice has become more process-driven, to the detriment of relationship-based social work (Parton 2008; Pithouse *et al.* 2009). Over recent years, relationship-based social work has undergone a revival of fortune within policy and literature (Scottish Executive 2006b; Ruch *et al.* 2010; Munro 2011; Ofsted 2012; Ruch 2014). While there may be a dissonance between the messages in policy, and experience in practice, this chapter has shown that relationship is a key concern for both children and professionals. It has also explored the potential implications and complexities involved in building and sustaining relationships, and the place of direct work, drawing on attachment theory and the concept of emotional labour. Both offer insight into how direct work is enacted and experienced. The re-emergence of relationship-based practice seen in recent policy needs to sit within an ecological framework which attends to the factors in children's lives which have contributed to difficulties. Otherwise, the sense of personal responsibility and care demonstrated by practitioners in this study could translate into expectations, by individual social workers and their organisations, of change solely through relationship-based practice, change which is unlikely unless other areas of the child's life also change. In such an environment, it is possible to envisage that the emotional labour involved in complex direct work may become unsustainable. It is also evident that organisational demands and priorities influence individual practice. The organisations in which practitioners are educated and employed contribute to the type and nature of direct work which occurs. The next chapters consider factors which emerged from interviews as

helping or hindering direct work, and further explore organisational and individual factors.

Chapter Six: What hinders direct work?

Introduction

So far in this thesis I have considered the meanings ascribed to direct work, and the significance of care within the child/practitioner relationship. This chapter explores factors which contribute to the quality and quantity of direct work, specifically those which hinder the process. It uses data from participant interviews and observational notes of interviews and visits to offices.

Practitioners discussed this theme in more depth than children. In part, this was because I asked professionals what affected the quality and the quantity of direct work, whereas children's thoughts on the subject emerged when talking about particular social workers, although some positioned their experience and expectations within a wider context where social workers are perceived negatively. The quality and quantity of direct work was an area that exercised practitioners, and was something they visited and re-visited. When professionals recalled experiences of direct work, they situated these within a wider framework. This included organisational culture and expectations of practice and how these are mediated through supervisory relationships; the individual characteristics of children, parents or professionals; and the role of pre and post-qualifying training and learning. This chapter will consider how each of these hinder or prevent meaningful direct work.

Organisational expectations

“It’s not expected of you”

Individual professionals form relationships with children and their families; however social work is not an individual pursuit. All the professionals who participated are located in teams, within organisations, so it is not surprising, perhaps, that a dominant theme to emerge during their interviews was how organisational culture influences the nature of practice. Understandably, children did not generally mention the culture of the organisation. However, two of the boys had lived in another area and both contrasted their current level of contact with their previous experiences.

The influence organisations have on how practitioners view their role and deliver services is recognised in literature, policy, research and guidance (Glisson and Hemmelgarn 1998; Nutley *et al.* 2004; SCIE 2004; Glisson and Green 2011; Whittaker 2011; Munro 2012). In recognition, The Code of Practice (SSSC 2009) which applies to social care workers in Scotland is in two sections, for employee and employer, as is the Continuous Learning Framework (CLF) (SSSC 2008, 2014). The latter (2014, p.8) states employees will “understand and work in according to the vision, values, and aims of the organisation”. It goes on to note that although practitioners may be committed to their jobs, “unless they are part of an organisations which helps them to learn it can be difficult to make the most of their capabilities” (SSSC 2014, p.10).

The CLF refers to the vision, values and aims of an organisation, and one place local authorities articulate their 'vision' is in their Children's Services Plan. The current plan in the authority which hosted the research states that children should be involved "at all levels", but omits to identify how this is to be achieved or the role direct work might play. The professionals interviewed offered interesting insights as to the extent organisations value and prioritise direct work with children. Their comments illustrate some of the ways organisational cultures influence practice with children. In the first extract Rena contrasts the "reams" written in agency guidance about other areas of work with the relative silence in relation to direct work, while Susan, in the second extract, questions whether her priorities are shared by the organisation.

Rena: It's (direct work) never a thing that's said that's explicitly expected of you (laughs).

Int: Right, that's interesting.

Rena: But how do you listen to children unless you do that? You certainly (pause) you're expected to listen to children, uhm.

Int: What other things are explicitly said that are expected of you?

Rena: Listening to children, making sure they are aware of reports, families are aware of reports ahead of meetings. All the admin systems, I've got loads of, reams about that. It's written down.

Later on Rena returns to this theme with a slightly different slant, having moved from "listening" to "physically seeing" children, and distinguishing between "seeing" and "doing":

As I say it's not something we kind of, that seems explicit to what we're supposed to be doing, doing direct work with children. Uhm, I mean bits and pieces of it get done, but you know. Actually physically seeing the child, that's an emphasis, but actually doing...

(Rena, social worker).

Similarly, Susan contrasts her priorities with those of the organisation:

For me it's a high priority seeing a child on its own and giving them the time, but I don't think for the service it is *(Susan, social worker).*

Rena's comment that "It's never a thing that's said that's explicitly expected of you" was echoed by several practitioners. This raises the question whether direct work is perceived as contributing to the 'vision, values and aims' of organisations, and core to a practitioners' role. In the reference group for practitioners, there was a rich discussion about what might affect the amount of direct work with children. In the following excerpt they highlight the relevance of organisational culture (participants represent three local authorities and one voluntary agency) including a perceived degree of ambivalence about the role of direct work; the emotions of guilt and loss associated with not engaging in the level of direct work to which they aspire; the balance between areas of practice which are observable and measurable, and those, including direct work, which are less visible or measurable. They also highlight the significance of pre- and post-qualifying training:

Int: I was going to ask them both, social workers and team managers, just more generally what do they think affects the

amount of direct work that happens with children and young people who are on Home Supervision?

Brigid: You might just get some people who don't have, you know, depending on what training, you know, from my own experience of doing the course at university there was no input at all on direct work with children, no input about tools.

Mandy: In a sense it doesn't seem like an expectation, managers... because you're so caught up in... because they are very clear about some expectations. It's never one that, we're looking at outcomes, but we never focus on direct work [...]

Carla: No-one asks you how you get to the outcome; they just expect you to get to the outcome.

Mandy: Sometimes we look at a case and say we got a good outcome but I don't know that we focus on direct work and it's something that's maybe not highlighted as an expectation either in university or in the workplace.

Eilish: Certainly not in university but it's something that I would take to my supervisor to say I was thinking about doing this piece of work, but no... you're right, I've never been directed to do direct work.

Nancy: I think there's an expectation that in... in my local authority, that we contact other agencies to do it, rather than doing it yourself [...]

Mandy: And even when I went on that course, and we came back to the office (pause), a few of us went, and we said “Oh God we feel awful why aren't we doing this?” And then we were told “Yeah but the workloads are different and she's a specialist worker, so she won't have the cases you've got”. So it was almost like... you know, um.

Joan: Giving you permission, giving you an excuse not to be doing it.

Mandy: And not to have the tools or a space to do it, or the resources or...

Eilish: Do you need to be asking is there a culture of direct work? Is there a culture or an expectation?

Joan: It's funny how there's no real thing, it wasn't at university, there's no expectation from your team leader or whatever that you should be doing direct work, and yet for some reason we all feel very disadvantaged and that we're not doing social work because we're not doing direct work.

Rena indicates that direct work is not expected by organisations which employ social workers, and the comments from the reference group indicate a similar absence in social work education. Joan comments that “it wasn't at university”, and existing research questions whether qualifying programmes adequately prepare emerging practitioners to work directly with children (Triseliotis and Marsh 1996; Stevenson 2005; Handley and Doyle 2014). In Scotland, social work qualifying education is underpinned by several frameworks including Key Capabilities (Scottish Executive 2006b), which was

developed in response to concerns that students were qualifying without sufficient knowledge and skills to engage with children and their families. In their review of qualifying education in England, Luckock *et al.* (2007, p.182) found that there was no guarantee that social work students “will have been taught or assessed in communication skills with children and young people” or that they will “undertake direct practice with children during training” (Luckock *et al.* 2007, p.195). In response, Lefevre (2010) constructed a ‘taxonomy of core capabilities’ which social work students need to communicate effectively with children. The premise that social work skills can be broken down in to constituent parts or ‘capabilities’ which can be taught or assessed, is one which is contested (Taylor and Bogo 2014). It is beyond the remit of this thesis to explore this debate in any depth other than to acknowledge that it exists, is enduring, and will influence how social work educators incorporate and integrate capability frameworks into teaching and learning.

Lefevre’s taxonomy separated ‘core capabilities’ into three distinct, but interconnected areas; ‘knowing’, ‘being’, ‘doing’, and a comprehensive description can be found in her work (2008, 2010, 2015). Knowing includes knowledge and understanding about child development including how adverse circumstances may affect children; the purpose of communication; how role and responsibilities will affect communication. Being refers to one’s value base including being respectful, reliable, and treating children as competent with a right to participate. Being also includes having the emotional and personal capacity to recognise and use one’s own feelings, show humanity, and be empathic. Doing includes skills and techniques involved in

being child centred, such as going at the child's pace, and using play as a medium to communicate. In Chapter Five 'being' emerged as central, although one way this was expressed was the way in which direct work was 'done'. The consensus in the reference group for practitioners was that their qualifying social work courses had tended to focus on the 'knowing'.

From the managers' reference group there was a similar sense that most had experienced limited input on direct work with children during their pre-qualifying courses. For Sara, her learning had been during a practice placement and consequently she ensures students in her team visit a children and family centre. Lou had very distinct memories of a particular contribution and her perception of its value appears to have changed over time, and this might reflect a sense that particular aspects of knowledge are ascribed more worth during pre-qualifying training than others:

Sara: One of my greatest learning for me was part of my placement going to work in a children and family centre. Because I don't have children, I haven't played since I was a child, and I was a bit self-conscious and embarrassed at first, and then kind of lost myself and it became something I really enjoyed. But it was as an adult learning to play again, and they don't teach you that on your training. And I always send people I have over the children and family centre because I think it's a really good thing, to spend some time playing.

Int: Yeah ?

Lou: It's funny, it's the one lesson I remember, doing my course. It was somebody coming in from a child and family centre to do a session, and he came in and taught us like we were a group in the child and family centre, and he dressed up and he put on voices and he was, and at the time we all kind of went, "Phew, well what's the score here?" But actually the fact that years down the line I can vividly remember that lesson, it's something that sticks in my head. But in general I don't think it's something that you're taught very well on the course.

During the discussion below, Sara contrasts the organisation in which she is currently employed with her previous employer (both local authority settings). Sara recalls the explicit message she received that direct work was not valued, and was "play", with play being derided and perceived as "not real work", rather than an important facet of work with children:

Lou: I think there's cultural issues as well; I think it's very much a case management culture, rather than doing direct work with children and young people. I think there's almost an expectation now that you refer on for the direct work [...] I think a lot of social workers see themselves as case managers now.

Sara: Also maybe... the local authority that I used to work in, direct work was more part of the culture to the one I'm in now, and I remember here someone saying "Oh is that you away out to play again"? And that was the comment...

Jane: Uhm.

Int: And that not being a positive?

Sara: No absolutely, and then that became (pause). I felt embarrassed, I kind of kept my tool box in the back of my car after that... 'cos I felt... It was kind of snidey, "Oh you out to play again", 'cos that's not real work.

Slightly later, Sara returns to the culture of the organisation, and how this is made tangible through the space, tools, and time accorded to direct work:

Int: Anything else that you think I ought to ask, that if you were doing it, and you were asking these questions...

Sara: Maybe something about how does your organisation view direct work with children? Because as I say in some places I've worked it's not at all, or very little. They may pay lip service, but actually they don't give you the time and space and tools to do it... buying coloured pens, basic things.

There was a fascinating interaction between Lou and Jane which resonates with Sara's observation about peers discouraging direct work. Here, the focus is how supervision might shape direct work, but their exchange gives a sense of the part individuals play in defining and perpetuating organisational culture. Jane describes how and why she uses role play in supervision to help workers "prepare" before they engage in direct work. Lou, by stating "I just physically" and "in an ideal world" infers that she has more pressing priorities, presumably including the "real work" Sara previously mentioned. In response,

Jane retreats by commenting “Not routinely”, thereby confirming that this degree of preparation is an exception, as she and her team are also busy:

Jane: I would use role play to support a worker to prepare for having direct contact [...] I use role play quite a lot. I think workers need to test out, and feel confident using whatever approach they're using, before they go out and do it, 'cos kids can see right through that. And a lot of it is about self-talk skills, so trying to teach young people self-talk skills that they need to think positively out of a situation rather than negatively, and unless the worker has positive self-talk skills themselves they aren't going to be able to teach someone else. So one of the examples we use is: you get up in the morning and you go to the shower and the shower is cold, and one worker would say to me, “Well that's shit, it's everybody's fault, the whole day is ruined”. And you don't then want that worker then going out having that attitude (shared laughter). Whereas another worker might say, “Oh well the showers broken, but it'll wake me up and I'll have a good start to the day because of the cold shower” (shared laughter).

Lou: I'd be going home.

Jane: But I think it's about the positive, and unless you practice that.

Lou: I have to be honest, I would never ever do anything like that with any of my workers in supervision, I just physically...

Jane: Not routinely...

Lou: It's just not something that I feel's on the agenda in practice teams for doing that level. I think in an ideal world it would be lovely to do that kind of work with workers but I don't think we're at that point.

Sara's experience and Joan's remark in the earlier extract from the practitioners' group about "giving you an excuse" not to do direct work both indicate a degree of ambivalence associated with direct work. In the comment "Is that you out to play again?" Sara raises the possibility that peers perform an important role and can actively discourage some forms of direct work, as the exchange between Lou and Jane in the last extract demonstrates. This is noteworthy in that it contradicts the overt message generally presented about direct work - which is that professionals want to do more. It hints at the far more complex feelings about direct work, including the emotional labour involved which emerged in Lucy and Theo's individual interviews, previously explored in Chapter Five.

Rena earlier referred to the "reams" regarding certain aspects of practice compared to a relative silence about direct work; the physical space available to see children also sends a message to practitioners, and indeed children, about their location or place in the organisation, and the next section explores this spatial dimension.

Organisational: space and place

Ferguson (2011, p128) explores the different spaces where direct work might take place including the child's home, the practitioner's car, cafés, and the

office. He argues that all social work offices should have “well stocked play/interview rooms with toys and other communication aids routinely at hand for workers to use with children”, while Tait and Wosu (2013) explore how this can be achieved. In this study, several professionals noted the limited physical space set aside for direct work in the workplace, and this may contribute to a sense of dissonance or a degree of ambivalence about direct work. The explicit message might be that the needs of children are central to the organisation, but if there is no tangible physical space to see children, then their centrality or place in the organisation is questionable. In the earlier extracts taken from the reference groups Mandy and Sara both mentioned a dearth of “tools” and “space”, and in individual interviews too, the limited space in office buildings for seeing children was noted.

In the following extract Susan has just finished describing life story work she has undertaken with a young boy, mainly using her car as the venue. She contrasts a previous office building with her current one, and alludes to the difficulties we had during our interview when despite having booked the room we were interrupted, and had to move. Anderson and Jones (2009) consider the importance of physical place to research, highlighting that although in everyday conversation the terms place and space are used interchangeably, there is a distinction between the two. They argue that “spaces are scientific, open and detached whilst places are intimate, peopled and emotive. Place is the counterpoint of space: places are political and cultured, they are humanised version of space” (Anderson and Jones 2009, p293). While Susan differentiates between space and place, there is a sense that for her “space”

was more than just a physical location, but was also used metaphorically to refer to time, organisational permission, and emotional capacity:

I think sometimes it's about being given the space, and sometimes a place to do it. Although children do sometimes talk in the car, it's nice to have a place to go. I mean a few years ago when I did a similar thing (life story work), but with a much younger boy, the Team Leader then went and bought bean bags [...] We did our bit of work with puppets and a variety of things, and we had a room in the office and we were never disturbed. Now there's nowhere to take children like that, well you've seen yourself what it's like trying to get a room here (both laugh) and they're not child friendly (*Susan, social worker*).

Rena echoes Susan's comment when she mentions the paucity of physical space set aside, and questions whether this will change during a period of resource constraints:

There's no facility that's ours to use; there's nowhere that you feel a child could go that would feel like a space that was set aside for that, you know, I think if we had something like a family centre [...] But there's no hope of ... you know with the cutbacks we're working with what we've got

(*Rena, social worker*).

The home visit is a core location for practice (Ferguson 2014) and for Jack and Julie (both 14) who participated in the reference group, home was where they generally met their social workers, though Julie and her worker also went

to the beach and for drives. Jack had recently visited a garden centre with his social worker, and said that he would like to go for a walk or something to eat with her, as well as seeing her at home. In their individual interviews, home was the place most children mentioned as the location for seeing social workers, although occasionally for Josie (nine) school was the venue. For Naomi (13), since moving home from foster care, her social worker Sarah usually visited her there, sometimes going for a walk together. Martin (15) had experience of social workers within two different local authorities and a specialist drugs worker; all three generally visited him at home. Martin goes on to say that he would have liked to go somewhere other than home:

Int: Where would you like to have gone?

Martin: Just anywhere, somewhere other than just sat in the house asking you questions. Like go on a drive and ask questions when you're driving, or just go to a café, just talk in a café or something?

Int: Did that never happen? (Martin shook head no). Yeah, cos sometimes it's nice just to go somewhere else.

Martin: Yeah, 'cos if you're like sitting in a café, you're like, just casual, sitting in a café with people you don't know.

Int: So it's more (pause) is it more of a big deal if you do it at home?

Martin: It kind of feels like it's more serious when it's in the house.

Joe (13) was critical that his social worker only visited him at home, and similar to Martin and Jack, expressed a desire to go for something to eat,

which he had experienced in another local authority noting “I hardly ever go out with Lisa”. Naomi was looking forward to having a meal with her social worker, and as explored previously, sharing food appeared to be a symbol of care, while for Martin, Jack and Joe the absence of this experience was equally noteworthy. For Alan (nine), who was in contact with a social work assistant and a social worker, although home was the place most used for social work visits, as noted in Chapter Five, he had been ten-pin bowling with his social worker and this was memorable for Alan:

Int: And is it always in the house or do you sometimes go out places?

Alan: We’ve come up here (office) a few times.

Jim: But Rosie took you out one day didn’t she?

Alan: Yes, she took me up to the old social work office.

Jim: No but she also took you...

Alan: Bowling.

Int: Oh, did you go bowling with Rosie?

Alan: Yes, I won (smiles).

Int/Jim: (laughter).

Jim: Aye he never forgets that.

Martin highlighted the centrality of the home visit, and all practitioners mentioned seeing children at home. Martin also indicated that for him “it feels more serious when it’s at home”, and this contrasts with one rationale presented by professionals, which is that children and/or parents feel more

comfortable in their own home. Jane suggested that where time is limited, home might be chosen over other, more imaginative options, but she and Lou concurred that this choice then has consequences for the quality and the nature of engagement:

Jane: I'm always surprised that workers don't make more use of the great outdoors and free things, there are lots of free museums that you can go to, and lots of children have probably never been to, so make the most of it. When I worked in another local authority, I kept roller blades, a football, and in the winter time a sledge in the back [...] they got the sledge and I got the black bag, off you go. But that's the best contact that you're going to get with a young person, you're going to actually engage them and get to know what's going on at home, cos you're not going to get that sitting in a living room.

Lou: No definitely not.

Jane: But you get so much pressure on workers to get so much done in such a short period of time, that all they can really do is go in to the house, see them, check that everything is okay and then come away again (reference group, team managers).

Some professionals indicated that the home visit enables them to observe parents and children separately and together as part of their assessment, including Lucy who identified this as her location of choice when there are concerns about neglect:

Working with children and families in their own home, and being able to work with a family and make some kind of change so that the child can stay living with the family members, or someone they should be living with. If I'm going in and there are hygiene issues or something like that, something where you can see that they can make change and you can see the progress happening (*Lucy, social worker*).

Rena mentioned her office as a possible venue for direct work and linked this to young people acquiring a degree of clarity about her position and role:

It just depends on where the young person lives or where they'd like to go, um, in that instance it was at our old office [...] They could see me, and they knew I was, you know, what it was about, I wasn't, I was quite open with them about why I was involved and they saw me in my kind of territory (*Rena, social worker*).

However, from other interviews, it was clear that the office, while used occasionally, was not perceived by professionals as an ideal location and this may be because of the deficits identified in the office space, which Susan summarised as "not child friendly". From their accounts, the discrepancy between the vision in the Children's Services Plan of including children "at all levels", and the buildings in which practitioners are based, is apparent. Although there are positives in direct work taking place in parks, a golf range and a ceramic workshop (all of which were mentioned), if the office building is not also somewhere practitioners see children this positions direct work as something which happens outside the physical boundaries of the

organisation, rather than being situated within and central to its functioning.

The physical resources send a message to practitioners located within organisations, and to those outside, including children and their families.

Aside from Alan, children did not mention office spaces, and one explanation may be that offices are not perceived as places they can comment on.

As a social worker I was used to inhabiting social work offices, but as a visitor I was required to wait in the public areas, rather than going straight through to team rooms, and met practitioners in interview rooms which were new to me.

However, I also had access to areas including team rooms, which if I had been a complete 'outsider' would have been denied to me. Johnson and Scholes (2001) posit that there are different layers of organisational culture, including physical symbols representing the way an organisation 'does things'.

These may go unnoticed by those inside the organisation because they become taken for granted. Examples include furniture, books, and decorations. The experience of sitting in waiting rooms, and moving through to team rooms and interview spaces, gave me an opportunity to observe physical representations of the organisation's culture and to consider the implicit and explicit messages conveyed about direct work. I visited all bar one of the children and families teams in the authority, and revisited some offices in order to conduct interviews. In total I was in seven waiting rooms, three interview rooms, five meeting rooms, seven team rooms, three team managers' offices and one community resource. I did not see all the rooms which could potentially be utilised to see children, so my perception of the office space is necessarily partial. However, none of the participants

volunteered that there was a space within the office building which they perceived as being equipped for work with children.

The reception areas were generally staffed by women, usually situated behind a Perspex window. In some, to gain access to the lavatory, a key was required from the receptionist. Aside from one waiting room which had paintings by the Impressionists, the consistent form of decoration was posters advising of services. In some reception areas, in addition to seating, there were a couple of toys or books; however these were limited. In most waiting rooms there were no toys, books, or pens/paper. The exceptions were two buildings shared with other council services. Here, lavatories were accessible, receptionists were not behind Perspex, and there were water coolers, and art prints. The sense I had of waiting rooms was that these were spaces for adults, and the posters and information leaflets inferred that these were adults who either perpetrated and/or experienced some form of abuse. In the interview rooms, aside from one which had a box of play materials, there were generally no toys. In contrast, in the team rooms, in addition to desks, computers and files, there were photographs of children, drawings completed by children (practitioners' own children as well as children they were working alongside), car seats, and in some team rooms there were colouring pens, books, and toys for children of different ages, on or under workers' desks. In a couple of team rooms there were social work texts on shelves.

I observed a clear difference between the space inhabited by practitioners and other areas in the office buildings, and this is noteworthy. The spaces

inhabited by workers had tangible evidence that this was a service in contact with children in contrast to other spaces in the building. If practitioners are in an organisation where the message about seeing children and direct work is far less than the “reams” about other areas of practice, and they work in a physical space where the place of children is either peripheral or only evident at the worker’s desk, there is a risk that direct work is then located with individual practitioners, rather than being central to the organisation. This is important; not least because while practitioners are usually responsible for managing their diary, how they manage their time will be linked to the messages or directives they receive from the organisation as to which aspects of practice are valued. The next section will explore how professionals framed and prioritised time and made space for direct work in the context of their overall workload.

Organisational: time allocation

Although some of the children alluded to time, understandably this was in relation to the time ‘their’ worker spent with them, rather than in the context of other demands on time. The literature (Morgan 2006; Winter 2009; McLeod 2010; Cossar *et al.* 2011) highlights how time can impact on the capacity of practitioners to establish meaningful relationships, and the willingness of children to trust their workers, and this appears to be reflected in Jack’s comments in the reference group:

Int: I was going to ask people whether they saw social workers on certain days at certain times.

Jack: I see mine every two month; I see mine every two month [...]
Aye, she's awfy lazy.

Int: Oh (pause) would you like to see her more or less, or the same?

Jack: A bit more.

Int: A bit more.

Jack: We dinnae get to ken each other that good, we've only ken each other six months, maybe longer.

Martin noted that he saw his current worker weekly or fortnightly and that this was far more than his previous social worker:

Int: And the social worker, the chap that you had, how often did you see him?

Martin: I don't know, not that much...

Int: Okay, so once a month? Once every two months? Once a year?

Martin: Once every two or three months, maybe once every month.

In contrast, Josie highlighted that Caroline (social worker) saw her whenever she needed, and as previously explored, for Josie this was a key indicator of care and reliability. Most practitioners and managers referred to time and indicated that workload and alternative organisational priorities hindered their capacity to engage in direct work with children on Home Supervision. In particular, four key factors emerged: practical considerations, including journey time and the difficulties involved in seeing children during the school

term; other aspects of work having greater priority; the amount of time spent on recording and report writing; all of which were compounded by workloads. I will explore each of these in turn.

Practical considerations

The authority hosting the research comprises towns and rural areas.

Particularly for teams in rural areas journey times were identified as limiting capacity to engage in direct work with children, and the place in which work took place - which invariably tended to be the car. Here, Gary contrasts the role of practitioners within the third sector with those in his team, and cites the dual impact workload and travel times have on the amount and quality of direct work undertaken:

The ones from our team that's left to go to a voluntary agency, Barnardo's or whatever, they've vowed never to come back because they get the time and the space to do the work [...] whereas here staff are carrying over 20 cases, we cover a large geographical area, so logistically we spend much more time in our cars than other people
(Gary, team manager).

Practitioners and managers also identified difficulties involved in seeing school age children when the service is primarily delivered between 9am and 5pm, but as Sara observed "Kids get home from school half three, four o'clock". In their individual interviews Lucy, Mara and Janie all indicated that one of the factors which helped them engage in direct work, particularly during

school term, was the organisation offering flexible working hours as this enabled them to work later.

Recording

The observations professionals made about recording and IT resonated with the existing literature about administrative processes discussed in Chapter Two. All those interviewed (individually and in groups) mentioned the negative influence the changing use of IT had on their capacity to engage in direct work. In the following extract Janie highlights the impact of the change from handwritten to computerised case notes which has taken place since she qualified:

You used to be able to hand write them and you could kind of do bits of those wherever you could grab time [...] by doing that wherever you were I think you had more contact with families. Whereas the requirement to be at the desk to actually physically type them in yourself because our admin aren't allowed to do that for you, I think it's very tying and that as a consequence it's reduced the direct contact with families
(Janie, social worker).

Pete made a similar observation:

Sometimes I go into my team room and it's like a typing pool, and I think we have been wasting a huge amount of qualified time just on recording and writing assessments *(Pete, team manager).*

Gary also commented on the amount of time workers in his team were spending at their desks completing case recordings, before going on to question the IT systems in use within the local authority, and concludes with a powerful simile:

I've no time for the amount of time that my staff have to spend sitting at a computer to keep everything right, so I would like that changed. All the sort of programmes that are on there have just been dumped upon social work and half of them are... the more you look at them, like say the assessment framework, it's just not fit for purpose [...] Somebody suggests something at a higher level, it goes to IT, they send out the work, and they have not a clue how it impacts on the workers' ability to meet all these standards that they're judged by and at the same time get out and do all the work that's necessary to help this family effect change. Instead of being a tool for the staff to use, it's almost like it's a yoke sometimes round their necks

(Gary, team manager).

Lily mentioned the computer system, and the boxes she literally had to tick as one of the least satisfying areas of her work, as she saw it as removed from the needs of the child:

The most frustrating thing is not so much the paperwork, more the computer work that we have to do, and uhm, the boxes that we have to tick at times and you think, what difference is that going to make to the child? On our computer system we have to tick their age, their religion,

their ethnicity, what their language is, are they fluent, or are they not, how often are they fluent, we have to do all that and you just think, and you do spend time click, click, clicking on the computer system, which is time consuming (*Lily, social worker*).

During her interview Lucy (social worker) was highly critical of the impact of IT. As her comments below indicate she viewed the priority this was given as contributing to a dearth in meaningful direct work with children, and to the perception amongst some practitioners that this was not a core part of their role:

Int: What do you think affects the amount of direct work social workers do with children?

Lucy: Some people don't see it as their job.

Int: What, to do direct work?

Lucy: Uh hum, some people don't do any at all.

Int: Social workers?

Lucy: Uh huh, if I say to people, "How often you see your client?"... "Every six weeks". What's that about, how could you possibly see?

Int: What do you think it's about?

Lucy: I think it's because they are sitting on that computer trying to get everything done on that.

In the context of changes more generally in the use of IT, White *et al.* (2009) specifically comment on the impact of assessment frameworks on practice,

and similar to Gary, Mara was critical of the framework employed within the authority using sarcasm to make her point:

It's just such an amount of unnecessary paperwork and doubling the work. For example we have these gorgeous child plans [...] The problem is the same things that you are putting there in the plan, you are still putting in to the report so practically for the last year we are doing the same bit in two different places (*Mara, social worker*).

In response to my question about what aspects of practice give her least satisfaction, Rena identified that changes in the range of administrative tasks practitioners are responsible for hinders her capacity to engage in direct work. Whereas previously organising case conferences had been the role of administrative staff, this is now completed by social workers. For Rena this is onerous and time consuming. In the following extract Rena expresses her concern that it diverts her from the work she would like to do, namely direct work with children. She makes an interesting observation that administrative tasks are accorded value by the organisation, "doing your job, meeting your targets", and I had a sense that these tasks might fall into the category of "real work" which Sara alluded to in the managers' reference group:

The admin system stuff, because that interferes with the stuff that you'd rather be doing, you know, direct work with children [...] And if you're not doing that you're definitely not doing your job and meeting your targets in terms of what management wants (*Rena, social worker*).

Several professionals made a distinction between an increase in recording and changing use of IT, and their responsibility to ensure that children's experiences are documented. Although there were reservations about how assessments were recorded, and the framework used, reports were also presented as valuable, as they form a record which children can access in future, and may be utilised to obtain resources. The general remarks of participants in this study echo others who have commented on the impact of changes in IT on practice, not just in terms of time, important though this is, but also on professional confidence and competence to undertake direct work (Gupta and Blewett 2007), and the skills which are accorded value in the organisation (Parton 2008). There has also been a critique that an increase in audit and procedures has led to organisations being increasingly prescriptive about how to prioritise work (Munro 2011; Burton *et al.* 2009). This was cited by several participants as influencing the amount and quality of direct work and will be explored further below.

Home Supervision vs child protection

Most professionals reflected on the priority accorded to children on Home Supervision relative to those children who are looked after and accommodated. Mara, Lily and Lucy all expressed the opinion that because children at home do not have residential staff or foster carers, they prioritised work with them, as Lily's comment indicates:

We do probably more work with children and young people that are on home based because if they are in care, then they've got carers that can

do that work, whereas if they are at home then we're needing to do that
(*Lily, social worker*).

Slightly later Lily noted that if a child is accommodated, foster carers would have more contact with other professionals, whereas if a child is at home, she would communicate regularly, sometimes daily, with the different professionals involved. The assessment of carers – and literature on the role of foster carers and residential staff – is predicated on an assumption that they will be involved in direct work with children, either in a manner which is responsive to the child's needs at a particular point in time (Ward 2008b) or in a more planned way, for instance in relation to life story work (Willis and Holland 2009; Clapton and Hoggan 2012), and this assumption may have underpinned Mara's, Lily's and Lucy's expectations. In contrast, Janie's opinion was that children in foster care were more likely to have carers who could advocate for them to ensure that direct work by their social worker took place.

Although the time accorded to children at home compared to those in foster care or residential care was perceived differently by Janie, all professionals who expressed an opinion suggested that children purely on Home Supervision are accorded lower organisational priority than children whose names are also, or purely, on the Child Protection Register, despite the fact that there is a statutory basis for intervention in the former. The authority hosting the research has child protection procedures stating that children on the register "must be visited at least on a weekly basis and every child who is

registered must be seen at each visit". This goes beyond the National Child Protection Guidance (Scottish Government 2010) in place at the time of interviews (updated 2014) which recommends timescales for case conferences and reviews, but not how often a child should be visited. The national guidance on Home Supervision at the time of the study notes that the overall aim is to "promote beneficial changes" and in order to do this children will "receive the supervision they need", including "one-to-one work" (Scottish Government 2011, part 8). It recommends that children who have entered the Hearing system as a consequence of offending should be seen fortnightly in the first three months, but makes no other recommendations about the timing of visits. In the excerpt below Theo raises the possibility that guidelines which stipulate levels of contact for children who are on the register might be counter-productive insofar as they don't necessarily ensure that the contact is meaningful, and moreover, place restrictions on workers' time and capacity to engage in other work:

We sometimes end up in social work doing certain things because we have to do certain things, like we have a child on the Child Protection Register and we stipulate that they have to be seen once a week, and that it can become... It's kind of important to be checking on their safety, but we can tick a box (laughs), right? [...] Sometimes, with all the demands that we have, you get contact (with children on Home Supervision) that's three weekly or four weekly, and sometimes it doesn't take place that often. So the quantity in terms of the frequency can be sometimes affected by the workload (*Theo, team manager*).

Similarly, towards the end of her interview Janie (social worker) questions the priority accorded to children on Home Supervision in contrast with those on the Child Protection Register. She also uses the idea of a “tick box” to question how meaningful some of this contact is, and makes the point that it undermines her capacity to engage in direct work with children who are not on the register:

Janie: I think where young people are on supervision requirements at home, I think they maybe don't get (pause) as higher priority (said quieter) as other cases so they're missed.

Int: Why do you think that is?

Janie: (Half laugh/half sigh) (pause) I think sometimes (pause) it depends on the mixture of the case, caseload that you've got. Sometimes it can be being bogged down by the child p... which is an atrocious way of putting it, but being bogged down by the child protection visits and having to do the tick box. I've seen five children in a house, and it's bogged down because it's not meaningful in any way doing that kind of stuff.

Janie's reference to being “bogged down” and the question whether some visits are meaningful is representative of other professionals who participated, and indicated frustration that increased procedures had led to inflexibility, thus compromising their capacity to prioritise areas of work they viewed as equally important, including direct work.

Rena's earlier observation about "physically seeing" a child being the priority resonates with the distinction Janie and Theo make between seeing and actually engaging in meaningful direct work, and the repercussion that seeing children on the Child Protection Register weekly has for other work. There is a danger that if organisations specify their expectations in relation to one component of work with children, in this instance "seeing", then this is what will occur, particularly where this is easier to evidence than less tangible aspects. Munro (2010, 2011) referred to the dangers of a culture of compliance, where practitioners comply with guidelines at the expense of thoughtful practice. The practitioners who participated in this study were complying with guidelines, however their comments indicate thoughtfulness in that they were well aware, and frustrated by the implications this had on their ability to engage in work they perceived as more meaningful than merely seeing.

The analysis so far has been infused with practitioners' concerns about the time they have (or not) for direct work with children on Home Supervision, given other demands including recording, travelling and "seeing" children on the Child Protection Register. A theme which emerged from interviews with all professionals as influencing the amount and quality of direct work was workload generally, and this was seen as fundamental to available time.

Workload

All professionals commented on the difficulty of engaging in meaningful direct work in the context of "caseloads" (children and their families) which they described as "heavy" or "high". Although used interchangeably, "heavy" might

mean complex as well as high numbers. Caseloads and associated administrative tasks, and responding to crises, were mentioned as having an impact on motivation, on time to plan, on ability to honour arrangements, and on the time available to undertake direct work. Here Lily contrasts her expectations with her experience, before going on to identify what this means for the quality of her practice:

I thought there'd be a lot more hands-on work, I didn't realise that there'd be near as much paperwork [...] It's busy, I feel like I chase my tail all of the time, the 'to do' list never quite gets to the end. But, uhm, I do enjoy it, but I do get frustrated at times as well because I feel I could, I could do more. I would like to give a better service but that would mean me having a much smaller caseload (*Lily, social worker*).

Later on she returns to this theme:

You don't want to rush things but you maybe are because you've got somewhere else to be after that, you've got another family to get out and see that you need to do the same with as well. So it is that, its caseload and time that always affect the quality (*Lily, social worker*).

Previously, I explored Janie's role with a teenage girl who she supported to make contact with her birth mother. After recalling the depth of emotion, and the satisfaction involved in this piece of work Janie went on to identify that the time it took had consequences for other aspects of work:

That was quite time consuming [...] Other people had to obviously lose out because I spent so much time with this young person. But I think on balance it's worth it and I'll catch up with the others (laughs)

(Janie, social worker).

Janie is a very experienced worker, who commented that her “heart” is in “the relationships you build up with the children and young people”. There was a sense that despite the impact on other work, she would continue to be involved in direct work. For other workers, however, the “balance” which Janie mentions might be different, particularly given the messages workers receive about the place of direct work. Perhaps Gary sums up the comments professionals made about workload most succinctly, when he states:

Well we're never ever going to get away from the fact that the staff carry too many cases, that... we would argue with senior managers, directly affects their ability to do quality work *(Gary, team manager).*

Gary is one step removed from practice but it is clear from the next extract that workload influences a practitioner's capacity to remain motivated and his/her ability to engage in meaningful direct work. After exploring why she came to social work and her strong motivation to engage in direct work, Lucy vividly described a time earlier in her career. At that point, the combination of a “massive” caseload and the demands of her own children led Lucy to take a break of several years from the area team. She was concerned that, as Gary identified, her capacity to “do quality work” was being compromised, in her

terms “kicked out of you”, by the number of children and families allocated to her:

And that gets kicked out of you sometimes, doesn't it because you're doing so much like, and you're running about like an idiot [...] I had a massive caseload, and you couldnae do anything and it was just like “Nah I'm no doing anything here, I'm stopping I'm no”. I can remember, you know when you're first qualified and you see these people that just shouldn't be in the job, I thought I'm no getting burnt out, being like that, so I thought a move was right (*Lucy, social worker*).

Lucy's description graphically conveys the sense of being swamped by competing demands, and the emotions associated with being unable to practice at a level she viewed as acceptable. Lucy was then, and is now, part of a team, but the impression I had was that she came to this decision on her own. Lucy did not mention, and at that point I did not ask about the role supervision could or should have played, and in retrospect this was an omission. Later in his interview Gary went on to explore his role when practitioners felt “overwhelmed”, either by the amount or complexity of work, and the next section considers the role managers play in facilitating (or not) direct work.

Team Manager

I came to the research with a perspective on the value and role of supervision which had been influenced by the messages from policy, literature and, to a lesser degree research (Laming 2003; Hughes and Pengelly 2002; Kadushin

2002; Davys and Beddoe 2010). I use the term 'lesser' because despite an Ofsted report (2012) identifying that effective supervision contributes to good practice and better outcomes for children, it is difficult to make unequivocal links between good practice and good supervision, and there is debate about what supervision can and should encompass (Bradley and Hjer 2009; Carpenter *et al.* 2012 and 2013; Hawkins and Shohet 2012). I was also influenced by my practice experiences of supervision, which had been variable, and from teaching post-qualifying courses. During teaching, the significance of the supervisory relationship to practice has emerged across different groups and geographical areas. As a consequence, in addition to asking practitioners about the role they perceived their manager as having in relation to direct work, I interviewed managers who had responsibility for supervising practice.

Out of the children who participated, Alan (nine) alone mentioned the team manager when recalling who had visited him. This absence may have been because I did not specifically ask about the team manager, and consequently influenced the data; it may, however, reflect the limited direct contact managers have with children.

Practitioners and managers mentioned the role managers play in workload allocation and time management, with some practitioners commenting that as a consequence they were unable to engage in the amount or level of direct work they would have liked. In the following extracts from their individual interviews, Pete and Claire refer to workload management from their different

positions, where Pete “gives” time, while Claire refers to what her manager will “let” her do. Both observations are in response to a question about what influences the amount of direct work:

Pete: It’s the resources within the team, the time factor, uhm, how much time can you actually give workers to do that and the competing demands (team manager).

Claire: Uhm. It really depends on what my team manager will let me do (both laugh) [...] And if you can (pause) if you can get, if you can say to him, “I’m really concerned, I need half a day here”, and he would see where you were coming from, I have to say he’s good, he’s a good manager (social work assistant).

Claire’s comment has a number of layers: the first is in relation to the overt power dynamics and role difference between her and her manager, indicated by the term “let me do”, and how this might be at variance with the amount of direct work she would like to do. Claire then hints at the more subtle dynamics at play and illustrates how she manages her manager, by framing her requests using particular terminology, here her use of the word “concern” to elicit the preferred response. Several practitioners, including Lucy, commented that one of the ways their managers supported them to engage in direct work was by not specifically asking what they are doing. This suggested that by operating a policy of don’t ask, don’t tell, practitioners engage in direct work which they perceive as necessary, but which might not be allocated time if it were made explicit to their manager:

Jo (team manager) is really good, she is really good, I dinnae think she realises and I dinnae tell, and if I'm doing a piece... and I say I'm doing this, this and this in this case, if I need time to do that, then she's quite good. But I've no doubt if I was saying to Jo the time I'm spending with clients, she'd be saying you're spending too much time with them. I have no doubt (*Lucy, social worker*).

Two of the three managers who participated in individual interviews mentioned that as they were removed from direct practice, they were dependent on the information provided by practitioners, and linked this to the idea of trust. Gary used the term “second hand assessment”, while Theo referred to “borrowed knowledge”. Pithouse (1987) argues that social work is an ‘invisible trade’, and supervision is where practitioners make their work visible. Much of the literature argues that supervision has become increasingly managerial and bureaucratic, and as a consequence the potential for supervision to provide a reflective space for practitioners and managers to jointly explore practice has been compromised (Jones and Gallop 2003). One finding of this study is that for some practitioners, aspects of direct work may be purposefully kept ‘under the radar’, and so may well remain invisible within supervision. This has a number of potential consequences for children, practitioners, managers, and for the organisation. The literature and research on the role of supervision identify support, maintaining focus on child, and quality assurance as core tasks, and in individual interviews all three team managers indicated that these functions are central to their role. Here Gary foregrounds the role he plays:

It's about actually just saying to your staff stay focused. There's so much happens in that case, and it has so much potential to get lost, stay on the social work task (*Gary, team manager*).

In the managers' reference group, differences emerged as to whether individuals would specifically enquire about direct work with the child in order to fulfil their supervisory responsibilities:

Sara: I don't think I've ever said to anyone in supervision "what direct work are you doing with children?" I don't think that's ever entered my head that's something I should ask [...]

Mary: I do, I have done it quite a lot actually, especially if I feel there's not enough direct work going on.

Int: So...

Mary: So why are they focusing too much on the parents? I want to know about this child, I want to know what they are thinking, what is going on for this child. If I'm not hearing enough about the child, I'm thinking that worker isn't doing the direct work.

Sara: I've asked when they last saw the child on their own.

Mary: Yeah

Sara: But that is a different thing, but not what they did.

Sara's comment that she asks whether the child has been seen, as opposed to what was 'done' resonates with the earlier discussion, and in the group for practitioners there was an exchange about the role of the team manager centring specifically on the degree of detail they hold about direct work, and

laughter as practitioners questioned whether managers would be aware of their work. This highlights an interesting conundrum. Practitioners in the reference group expressed ambivalence about managers who they perceive as unaware of the details of their direct work, yet it was clear from individual interviews that some practitioners omit to inform managers about the direct work in which they are engaged, in part due to their anxiety that it may not be sanctioned

If direct work remains invisible, this may compromise the quality assurance role played by managers, and limit the opportunity for practitioners to use supervision as a reflective space where the emotional impact of direct work can be unpacked, and restrict the potential value of supervision. If, as the literature (Morrison 2005; Ofsted 2012; Wonnacott 2012) suggests, the dynamics of the supervisory relationship are mirrored in the practitioner/client relationship, then this gap will also have consequences for the ways practitioners engage with children and their families. Furthermore, it can mean that there is a dissonance between what the organisation appears to do and what is visible and measurable, including to inspectors, and what some in the organisation actually do. If direct work is not made visible, tangibly in the space in buildings, or in supervision, this contributes to a culture where other areas of practice are valued and accorded prominence, and direct work appears marginalised.

Individual characteristics

Thus far, this chapter has explored how organisations in which practitioners are employed influence direct work, and the role individuals play in perpetuating particular cultures and ways of working. A thread running through the thesis is the role of relationships. Children and professionals all mentioned the personal qualities of practitioners, indicating these could be a help or hindrance to the process of forming relationships and engaging in meaningful direct work. All practitioners, and some children and their parents, noted how the characteristics of the child or family also influenced the nature and type of relationship, and the amount of direct work. Generally, practitioners focused on the positive attributes they and other practitioners brought which enabled them to form and sustain relationships with children, and engage in direct work, rather than traits which might make this more difficult. However, there were characteristics which children and professionals identified which acted as barriers, and these will be discussed here.

Social worker

The literature identifies what children have consistently found unhelpful. This includes social workers who fail to listen, or make assumptions (McLeod 2007, 2010b; Aubrey and Dahl 2008; Cossar *et al.* 2011), are difficult to contact and unreliable (Butler and Williamson 1994; Gallagher 1999; Morgan 2006), and where frequent changes in worker hampers the formation of meaningful relationships (Munro 2001; Winter 2009, 2015). Of the children who participated in this research Martin, Joe and Jack had experienced changes in their social workers over the previous year while Naomi, Alan,

Julie, Josie and Reanne had not. Consequently, although Jack identified that he would like more time so he and his new social worker could “get to ken” each other, frequent changes of worker did not emerge as a key theme.

Hallett *et al.* (2003) identified that practitioners can, at times, be difficult to access. The authority hosting the research had moved to a central switchboard, and when I telephoned, there was invariably a lengthy wait to be connected, although none of the children said their social worker was difficult to contact. However, it is noteworthy that, while Jack and Julie (reference group) said they phoned or texted their workers to arrange, or re-arrange visits, all children interviewed individually mentioned that the timing of visits was generally arranged between their parents and the worker, rather than with them directly, as explained by Naomi:

Int: If you wanted to contact Sarah how would you get in contact with her?

Naomi: My mum's got her phone number and she would just phone her or text her (Naomi, 13).

A number of the young people interviewed by Cossar *et al.* (2011) and McLeod (2008) said social workers did not listen. None of the children in this study explicitly identified that their social workers failed to listen, indeed, as Chapters Four and Seven indicate, several commented that they valued their experiences of being listened to. The literature on effective verbal communication within social work practice identifies key components, such as reciprocity and interaction (Luckock *et al.* 2006; Lishman 2009). This requires

clarity of language, and in Martin's experience this was sometimes missing. During his interview Martin (15) twice stated that his previous social worker used words he did not understand. Given he raised this twice I took this to indicate that he experienced this as significant, and that I had not fully grasped this the first time he mentioned it. Martin did not explicitly say that his social worker did not listen. However, I would argue that by continuing to use terms Martin did not understand, he was not responding to Martin's cues, and so in effect, was not listening. This extract is the second occasion Martin references "big words":

Int: If you think forwards, so let's say you're not 15, you're 17 and you were thinking about having a social worker, do you think that there'd be anything that you'd remember, that would stick out, either as being good or not so good?

Martin: Social worker using really big words [...] Aye, it was really quite funny cos he'd say a sentence, and in a sentence I'd have asked about three questions asking what the word means (laughs).

The particular words practitioners use in verbal and written communications with children are important and can be inclusive or, as Martin experienced, can exclude and act as a barrier (Holland 2011). The words used also contribute to children's understanding of why they are in contact with social workers. In their individual interviews, Lily, Mara and Janie all referred to the importance of the written or spoken word, and identified that part of their direct work was reparative, and was linked to negative or inaccurate messages

about themselves children had gleaned from reports or meetings. The examples they gave were discussed in depth in Chapter Four, and so will not be re-visited here, aside from noting the impact on children of how practitioners speak to them and write about them. Particularly in a context where children generally receive less written information than adults (Clever and Walker 2004; Happer *et al.* 2006) specific words assume real significance. Cossar *et al.* (2011) found that children started to define themselves by the descriptions in written reports concerning them, and in this study there was an element of this in Alan's comment about why he was assigned a social worker. Alan (nine) was referred to social workers as a consequence of neglect, but the term 'inappropriate clothing' was used, and this is what Alan remembered:

Alan: Uhm, I like, I liked going to the Children's Panel because I got to hear, all the sort of things [...] I got to see what had caused me with social workers. Supposedly Miss Smith (teacher) said that we were going about dressed inapprop...

Jim: Dressed inappropriately, aye, and your attendance wasn't good and things like that.

Alan said he liked the Children's Hearing because he felt more informed. By contrast, Josie (nine) reported feeling excluded and bored in what appears from her description to be essentially a discussion between adults:

Int: Do you go to Children's Hearings, the big meetings?

Josie: Sometimes, yes.

Int: And what are they like, what do you think about them?

Josie: Boring [...] You just have to sit there and say things, and sit there some more and say some more, and sit there some more and say some more, and it gets extremely boring because you end up saying nothing, and it's all the adults chattering away (makes hand gestures to show two people chatting to each other). And sometimes I feel like going to sleep in them. Phew !

The Children Scotland Act (1995), Children's Charter (Scottish Executive 2004a) and National Guidance (Scottish Government 2010, 2014) all highlight the importance of including children. Much has been written about how children have been involved (or not) in decision making processes (Thomas and O' Kane 2000; Bradwell *et al.* 2008; Whincup 2011). The aim of this study was to explore day-to-day contact between children and social workers, rather than focusing on decision-making arenas such as Hearings. Nevertheless these form one part of children's experiences, and some children and practitioners mentioned them. Formal meetings can be one of the occasions when information is shared with and by children (Aldgate and McIntosh 2006; Bruce 2014). However, information can, as Lily, Mara and Janie found, be presented in a way which is unclear or inaccurate. This can have a range of consequences, including influencing the subsequent focus or nature of the contact between worker and child. There is also some evidence to indicate that Josie's experience of being bored and excluded is far from unusual (Aubrey and Dahl 2006; McLeod 2008). Josie represented her day-to-day contact with Caroline (social worker) very positively, identifying that Caroline cared about her, listened to her, and as a consequence she felt safer.

Consequently, her comments about the Hearing are in the context of a generally good experience.

The manner and form of communication which professionals utilise is one determinant of the nature and tenor of the relationships which are subsequently formed (Forrester *et al.* 2008). In this study, the clarity and manner of communication was highlighted by professionals, as well as by Martin. In the following extract Lily identifies a method of engagement and communication to which she does not ascribe:

I don't feel like I'm a worker that goes in and lays down the law, that's not how I work, I want to get them on side and I want to work with them, but obviously there's some situations where you have to be extremely firm with laying down what's expected, and if this doesn't then this will happen [...] I don't feel going in guns blazing is the way forward, I feel you have to, you work alongside with them (*Lily, social worker*).

Similarly, Gary expresses his opinion that an approach which is overly directive and authoritarian is liable to be counter-productive in terms of effecting lasting change, and moreover is likely to alienate children:

You come across workers from time to time and you go out and they are trying to tell someone what to do, and you're like, "That's not why you're here". The reason the teenager is rebelling against the mother and step dad is because he's trying to tell the youngster what to do [...] Telling them what to do continually is not going to bring about any change (*Gary, team manager*).

Like Lily and Gary, when identifying approaches which might act as a barrier to direct work, professionals positioned themselves in the context of what they would not do, rather than what they had actually done and found to be unhelpful, possibly as this may be more difficult to acknowledge.

Child or parent

Professionals, parents and some children mentioned how a child or parent's previous experiences or beliefs about social work can act as a barrier to direct work. It was evident that the feelings parents or children hold about social workers and social work involvement influence their willingness to form relationships and engage in direct work. Joe's parents, and Alan's father, were present during interviews, and all three mentioned the stigma associated with having a social worker, particularly in relation to their parenting. Their comments mirror those of parents who were interviewed by Buckley *et al.* (2011) who described how they felt as though they were "walking on eggshells". Closely connected with stigma was the fear that social work involvement might ultimately lead to the removal of their children, and the following extract sums this up. Here, Alan talks about "social workers taking kids away" and Jim explains how his feelings may have contributed to Alan's anxieties. Both go on to note that since forming relationships with particular workers their positions changed:

Int: Did you have any idea of what social workers might be like?

Alan: I'd watched this programme about social workers taking kids away, so...

Int: Right, so is that what you thought they might...?

Alan: Uh huh.

Int: Uhm.

Jim: I think I need to say something. I had a (pause). I wouldnae say a hatred, I had a general dislike for social workers.

Int: Right...

Jim: And I think that could possibly have come across on them.

Professionals noted that parental anxiety, fear, or anger, about social work involvement understandably influenced children's willingness or capacity to engage. Several examples cited involved work they were undertaking where the adults did not want social work involvement in their family. In the extract below the manager's reference group are discussing factors which affect the amount or quality of direct work and Jane uses the term "involuntary client" to highlight how a level of compulsion influences the nature of the relationship and the direct work which occurs:

Bob: Lack of engagement.

Lou: Yeah that's a huge...

Jane: Work with involuntary clients is I think a difficult job.

Mary: Yeah, that's a biggy actually, and also what parents have said to the child about working with social work, you know, what message have they been given?

Mary highlighted the significance of the "message" children have received about social work. In individual interviews some practitioners expressed the opinion that children had been directed by their parents not to disclose

particular details or had received a message, implicitly or explicitly, that if they did do so, they might be accommodated. In the earlier extract Alan talked about his fear of removal, and Jim linked this to his feelings. Slightly later in the interview Alan mentioned that the “jokes” people told about social workers also contributed to his fear:

Alan: I felt scared, aye, I just thought they were going to take me away because people do joke about that....

Int: Yeah, yeah they do.

Jim: And it's no joke is it.

Previous research confirms that Alan's anxiety is not unusual, and that children's “greatest fear is that they would be removed from home” (Bell 2002, p.4). In his interview, Pete cited a well-known joke to identify how fear of social work involvement goes beyond the individual and is part of contemporary culture:

There's lots of stereotypes about social workers and what we do, and I think through us being involved people realise that we're here to help, that we're not that bad, that we're, what's that old joke? You know “What's the difference between a social worker and a Rottweiler? You get your child back from a Rottweiler”. You know that we're not like that
(Pete, team manager).

Pete, who is a team manager, highlighted the anxieties children and their parents may have by referencing a joke. Social workers and social work assistants, perhaps because they are in closer contact with children and their

families, concentrated on the intensity and depth of the feelings children like Alan brought to the encounter, and what this then meant for their relationship with the child. Susan vividly describes the powerful barriers which, for some time, prevented a girl and her three year old sibling speaking about their experiences. At one point she expresses a degree of self-doubt and regret in the comment “perhaps I didn’t ask the right questions”. However, underlying this was an appreciation that the fear experienced by the children was so potent that there would have been no “right question”:

There was another adult that was being hidden in the house that these children weren't allowed to speak about, weren't allowed to mention. I mean, he was in cupboards and that when I was going in, and checking. I did individual work with the girl, and the three year old didn't speak at all, she had no language at all. She must have been terrified. Well I now know because I've spoken to her since then, uhm, and they were just so worried. They were threatened that they would be put in a home and things like that, you know, if they told that this man was in the house you see. And in that case I think, perhaps I didn't ask the right questions. But I think the threats from the parents were so great that they couldn't tell
(Susan, social worker).

Susan used the term “terrified” to try and convey how frightened the children were, both of being “put in a home” and their mother’s partner. While other practitioners described situations which were, objectively, less severe, they employed similar phrases to reflect children’s fear that they would be “put in a home”. Rena described how two young children were initially “terrified” that

she would accommodate them, while Lily used the term “petrified” in relation to feelings a teenage boy had about her role. Lucy described how she was currently “trying to build up a relationship” with one teenage girl who, according to Lucy, viewed her as “the bad one” for previously accommodating her when her parents were misusing alcohol. Several professionals indicated that the fear and anxiety children experience had an appreciable influence on the nature of direct work, their communication with a child, and the length of time it took to establish a relationship. Kate picks up on these themes in the following extract when describing her role with Tara. Kate has previously described how Tara (10) experienced neglect as a consequence of her mother’s long term alcohol misuse:

I pick her up from home, I drop her off at home, and then obviously I have a chat with mum, you know, so I don’t know whether she’s maybe wary of saying anything to me, because she thinks I’m going to go in and say what she’s said to me to her mum. Yes, she’s very guarded in what she says you know and bits and pieces like that, it’s very difficult to tease things out of Tara [...] It’s (sighs loudly), it’s difficult. I find it quite hard with her, but as I say she’s still quite new to me. And although she’s comfortable with me, I find it quite difficult to tease things out. I don’t really want to ask her direct questions, although I have, uhm, you know, and she’s so wise and so loyal to her mum that she skips; she won’t answer the question

(Kate, social work assistant).

Social workers have a complex role encompassing both care and control (Beckett 2006; Calder 2008) and the nature of Home Supervision necessarily means that their involvement is a statutory one. As several professionals noted, they might intervene in ways children or their parents may not necessarily appreciate or agree with. Consequently, the anxieties children and parents bring to the encounter have a real foundation. Kate mentioned “teasing things out” of Tara by utilising methods other than direct questions, including storytelling, play, and drawings. Approaches which involve play are more effective in enabling Kate to acquire some appreciation of Tara’s experiences (Davie *et al.* 1996; Tait and Wosu 2013; O’Reilly and Dolan 2015). However, I had a sense from Kate, indicated by her use of the words “hard” and “difficult”, that she is not entirely comfortable with an approach which involves “teasing out” information which may have profound consequences for Tara’s care; information which because Tara is “so wise and so loyal to her mum” she would not necessarily give if asked directly. Earlier in the chapter, Sara highlighted a level of ambivalence associated with play and a sense that it was not “real work”, and here Kate appears to be hinting at another possible barrier to using play as part of direct work: that it is somehow duplicitous.

Following the death of Peter Connolly, and the subsequent inquiry report (Laming 2009) and review of child protection (Munro 2011) there has been an increasing interest in how practitioners engage with parents who are variously described as ‘non-compliant’, ‘hostile’, or ‘resistant’ (Fauth *et al.* 2011; Shemmings *et al.* 2012; Tuck 2013). In this study, one of the barriers to direct

work with children identified by several professionals was parental hostility. At the beginning of her interview Mara defined direct work as being any time she spends with a child and with their parents. Here, she notes how parental hostility and aggression shapes children's perceptions of practitioners, before going on to describe how it influences the location, the nature of direct work, and the number of workers involved in each visit:

One of the biggest issues is where families are involved with the social work department for a long period of time and the parents are actually telling the children "Oh the social workers they are f... this, and they are liars and they are...everything else". And the kids are building this very negative picture (*Mara, social worker*).

She returns to this theme slightly later:

I have one boy, where because of all the family setting, uh, he's just basically not discussing anything with the social work department, it's just like "Everything's fine" and though we know that it's not. It's also quite difficult when you have quite aggressive parents, doesn't matter if it's a verbal thing or the physical thing, because you have to physically go to the house, and if you don't feel comfortable in the house, and you know that anything can blow up if you mention anything. It's really difficult to be kind of relaxed and give the relaxed environment to the children. So then it's thinking about should I do it in the house, or should I take it out, so it's really trying to find this balance [...] When they are like this, we would always have the social work assistant with us, or two

social workers, that's what you are really going into. But then it's really about concentrating the work with parents in the house when the kids are at school. And if you want to do something with the children, it's about finding the time to take them out, which in a lot of cases means that you are going to spend more time organising all of this, and it is more time consuming

(Mara, social worker).

Forrester (2012) argues that parental hostility is linked to three interconnecting strands. First, features associated with the parent including shame and ambivalence about the purpose of social work involvement, or a lack of confidence that anything will change. Second, the context of the encounter including the power dynamics and the parent's previous or current experiences of discrimination. Third, the interaction between worker and parent, in particular whether the worker's behaviour is authoritative, or authoritarian. The comments in individual and group interviews indicate that practitioners recognise that the nature and tone of their encounter with parents influence their capacity to form 'working alliances' (Howe 2010) with parents, and their opportunities to engage in direct work with children. Gary's and Lily's earlier comments that the aim is to "assist them to effect change" rather than "going in guns blazing", differentiate between interventions which are authoritative, as opposed to authoritarian, while Mara observed that "first you have to have a working relationship with the family to be in a position to do the work with the children" and this was echoed by most other professionals in the study, including Rena who noted:

It takes time as well to sort of get on, quite often for a parent to accept, to feel comfortable letting you see a child on their own, uhm, building that, so they have some trust in you as well (*Rena, social worker*).

One critique of social work practice is that the focus on the child has, at times, been lost in efforts to engage parents (Brandon *et al.* 2008a and b). Indeed, several practitioners commented that responding to the needs of parents sometimes diverted them from direct work with the child:

Although we are social workers for the children, I would say that most of the discussions we have are with parents, so even though you are there in the house, so for example being there one and a half hours to discuss all the issues and get their views and everything else, really maybe fifteen, twenty per cent of that time is spent with the children and the rest is really time with parents, work with parents, discussions with parents (*Mara, social worker*).

Mara's comments reflect the complex balance. Earlier, she emphasises the need to form effective relationships with parents in order to work with children, here she highlights the practical implications where time is limited. Part of the challenge which Mara and others (Ruch 2014) identify is that practitioners need to work alongside parents in order to effect change, but in the process parental needs can eclipse those of the child.

As noted, Forrester (2012) found that the context of the encounter, including prior experiences of social work, and previous or current experiences of

discrimination, contribute to hostility or ambivalence. Audrey and Neil (Joe's parents), Jim (Alan's father), Lesley (Naomi's mother) and Pat (Julie's mother) all referred to earlier encounters with social work practitioners and managers. Audrey and Neil compared Joe's current social worker and the level of contact, with their previous negative experience in another local authority. Lesley was very complimentary about the social work assistant and social worker whom she and Naomi currently see, but was critical about others she had encountered, whereas Jim spoke positively about all the social work professionals he and Alan had seen. Pat and Julie had an extensive history of social work involvement and Pat indicated that until recently no worker had put themselves in her shoes, and this had compromised their capacity to offer her, or her children, meaningful and effective support. Despite assurances of confidentiality, it may be that parents felt more able to proffer criticism about social workers with whom they or their children were no longer involved; however it was clear that previous experiences shaped their current expectations. Context also shapes parents' expectations and includes the location where encounters take place. While most mentioned workers visiting them at home, my earlier observations about the public areas within offices bear repeating. If parents visit offices, with or without their children, where there is limited access to the lavatory, no refreshments, where the receptionist sits behind a glass panel, and where the posters display differing types of abuse, this confers a message about the presumed characteristics of the adults who visit.

Shame, stigma, and ambivalence about the reasons for social work involvement or the potential for change, also contribute to parental hostility (Forrester 2012). In the extract below, Jim refers to himself as “Dad” rather than “I”. Holland (2011) highlights how social workers objectify parents, referring to them by their parental role, rather than their name, for example “Dad says...” and Jim’s language might mirror how he was referred to. However, I understood Jim’s choice of words as signifying that it was still very difficult for him to discuss Alan’s neglect and his role in it, and that he was distancing himself by his use of the third person:

Jim: Dad was working a lot leaving it to one of his daughters to do it, and they were obviously doing the best they can but...

Int: Uh huh.

Jim: So Dad stopped working, and Dad’s took over now and that’s it, and everything’s braw¹³, you know what I mean.

Shame is complex and uncomfortable, and this discomfort can translate into anger or hostility (Stets and Turner 2005; Walker 2011; Gibson 2013). If shame lies underneath hostility then presumably a parent’s capacity or willingness to acknowledge shame as part of a process of change will be influenced by the context and manner of the encounter, including the communication skills, supports offered, and the level of courtesy displayed by practitioners (Spratt and Callan 2004; Buckley *et al.* 2011).

¹³ Braw means fine/good.

Most practitioners identified that the most rewarding aspect of social work was when they were able to see positive change in a child's life. The converse is also the case and several professionals highlighted how an apparent lack of motivation on the part of parents or children, or lack of any appreciable change, can affect their own enthusiasm to engage in direct work, and this can become a self-perpetuating cycle. Gary explores this in the extract below:

You get some kids who just drift on Home Supervision orders, for such a long time and you think we're not effecting change here, I just despair of that [...] Why are they on an order if we've went this year and nothing's changed, there's no motivation from the family to do it. Hence directly or indirectly they go down the tariff scale in the worker's caseload, you know, you'll always work harder with people who are motivated to change because you'll get something out of it (*Gary, team manager*).

Gary suggests that "you'll always work harder with people who are motivated to change because you'll get something out of it". Similarly, Rena identifies the link between parental change and her own feelings:

Int: Any other things that give you the least satisfaction that you don't particularly...?

Rena: Don't particularly like? (lengthy pause). In terms of lack of satisfaction, I think um, particularly I think for myself, substance misusing parents. The amount of time you've got to spend reinforcing, and there's no, there's no... Quite often there's not a satisfying result, you know as well. You can feel like you're banging your head (*Rena, social worker*).

Claire and Kate also noted that that they experienced particular challenges when there is chronic parental substance misuse, and this appears to be linked to the enduring nature of difficulties which might mean there is not necessarily a “satisfying result”. In Chapter Five, practitioners identified they were more likely to expend the emotional labour involved in direct work with children if they believed their efforts were making a difference (Stalker *et al.* 2007). Consequently, Gary’s and Rena’s comments about practitioner motivation being linked to perceived change are noteworthy.

Earlier in the thesis I included an extract from the practitioner reference group where Carla describes how “people say (pause) oh I can’t go on a visit to that family today”, before acknowledging this is “hard to say” and questioning whether “everyone is as honest”. Carla initially referred to “people” before using “I”. She also employed the term “family”, rather than “child”, while Rena noted how “you can feel like you’re banging your head”, in relation to parents. I have previously drawn on Cairns and Stanway (2004) to explore how the feelings children elicit in workers has a bearing on the relationships formed. Hackett (2001) identified that children who have engaged in harmful sexual behaviour can activate negative feelings and responses, while Stein (2009) and Rees *et al.* (2011) argued that teenagers can be categorised as ‘troublesome’, and this acts as a barrier to engagement. None of the professionals who participated indicated they avoided direct work because of negative feelings about a child, or his/her behaviour. It may be because this was not relevant, and was not something they experienced. However, it may be that if it is difficult to acknowledge negative feelings about adults, it is even

more problematic in relation to a child; in the words of Carla it is too “hard to say”. Carla was with peers, with whom she had established relationships, but her speech was faltering with lots of pauses. In individual interviews, where the focus is direct work with children, it may have been even harder to say. In Chapter Five, I drew on the work of Hochschild (2012) and the feeling rules which influence the expression of emotion; disliking or avoiding a child may be “hard to say” because it breaks this feeling rule.

Summary

This chapter explored barriers to direct work. These were located with children, parents, professionals, and organisations. Depending on one’s position, the significance ascribed to organisations varied, with professionals understandably according this more influence than did children and their parents. Interestingly, when professionals identified barriers, they tended to locate these as being external to them, resting with parents, children, and organisations. The next chapter will explore those factors which emerged from interviews as helping or facilitating direct work. While similar themes to this chapter are mirrored there, the relative import accorded to each differs, and, as will become evident, practitioners accorded far more significance to their own motivation to prioritise direct work than to factors external to them.

Chapter Seven: What helps direct work?

Introduction

Direct work is a process, rather than an event, and where the previous chapter considered barriers to direct work, this one explores aspects which support it. Generally, professionals identified far more barriers. It may be that this reflects a discourse which focuses on deficits; it may be that barriers are greater or more tangible than aspects which support direct work; it may also be that some direct work is 'under the radar', and so goes unrecognised.

Whatever the explanation it is noteworthy that this chapter is shorter than the previous one and this reflects the data, particularly from practitioner interviews

For children, the qualities of the practitioner with whom they were in contact, and how these were expressed, emerged as significant, rather than elements associated with the organisation. Similarly, professionals emphasised that the quantity and quality of direct work depends on qualities associated with the individual practitioner. However, they also understood those characteristics and behaviours to be influenced by the organisations in which individuals are situated. Of particular import is the team manager who appears instrumental in creating and maintaining a culture in which direct work is encouraged, sustained, and valued. The decisions team managers make about allocating resources, both human and financial, and offering support and guidance through informal and formal supervision, influence the capacity of practitioners to engage in direct work. As the characteristics of the individual practitioner were emphasised by both children and adults; this chapter begins here before moving on to consider the role of the organisation.

Characteristics of social worker

As noted throughout, children find it easier to work alongside social workers who have particular qualities, including empathy, warmth, honesty, humour when used appropriately, and an ability to listen and communicate clearly using different methods including play (Butler and Williamson 1994; Thomas and O’Kane 2000; Tait and Wosu 2013). All of these qualities were mentioned by participants in this study. A number of studies have highlighted that children value workers who genuinely care about them (Bell 2002; Aubrey and Dahl 2006; Gaskell 2010; McLeod 2010). This emerged as core, and has been explored in depth in Chapter Five but will be revisited briefly here.

Caring

When children identified practitioner qualities or skills, although some mentioned general characteristics, understandably most tended to approach this from the perspective of their own experiences. So, although Josie (nine) noted that it was important for social workers to “understand children”, she then advised that “you’ve got to be like Caroline”. For Martin (15), a reliance on his own experience appeared more problematic. Although he viewed “caring for children and getting the best for children” as qualities he had assumed social workers would aspire to, his previous experiences in another local authority left him slightly unsure as to whether all social workers did in fact care:

Int: I’m going to be interviewing social workers and their bosses, is there anything that you think I should ask them?

Martin: What do they think is the most important thing about being a social worker, like the key thing?

Int: I wonder what they would say... what do you think they'd say?

Martin: I don't know, I think, just like, caring for children, getting the best for children, something like that...

For Martin, there appeared to be a dissonance between the qualities he anticipated workers would bring, and his actual experiences, which meant that he was uncertain about how authentic expressions of care really were. Josie, Alan, Naomi and Joe all referred to the positive qualities particular workers displayed. The words “kind” and “caring” emerged in interviews with children and professionals, and have been explored previously, so will not be revisited here other than to note their ubiquity.

Balance the needs of children and parents

The ability to hold child and parent in mind simultaneously and not allow the needs of parents to obscure those of the child is a core message from inquiry reports and research (Brandon *et al.* 2008b, 2011; Ward and Davies 2012) and is a quality valued by children and professionals. For professionals this was more nuanced, given the practical constraints on their time and the complexities of parents' lives; however Josie, Joe and Naomi all mentioned that social workers should balance the needs of children and parents. Josie (nine) expressed a view that where these are at variance, social workers should represent the child. Josie gave the example of how their social worker Caroline advocated on behalf of her and her sisters to enable them to go on holiday with carers despite their mother's reservations, and commented that:

You (social workers) need to be able to speak to other adults who might not really be happy with... like the situation I'm in... like my mum... you've got to be able to deal with that... Like just basically what Caroline's doing really (*Josie*).

Joe (13) chose to be interviewed with his parents. The three listed the range of professionals who had been or were currently involved with the family and all noted that although social workers at times saw the family together, they also need to spend time with the child. Joe commented that:

They (social workers) should spend more time with the person they are actually seeing.

Naomi (13) previously identified that it is important practitioners "listen", so that a child can "let out their feelings". Here, she revisits this and notes that professionals should "talk to" parents and children together and separately:

Int: And what would you tell a social worker about what they need to do?

Naomi: Listen to them, help them get through it. I think I'd make a good social worker.

Int: Uh huh (nods)

Naomi: Talk to their parents as well and talk to the person who's going through it.

Able to listen

Listening emerged as an important facet of direct work for Naomi and other participants. The presence or absence of listening was identified in previous research exploring children's views of social workers (Butler and Williamson 1994; Barry 2001; McLeod 2008; Cossar *et al.* 2011) and is seen as a core aspect of communication (Luckock *et al.* 2006; Lishman 2009). Consequently, it would have been surprising if it were not mentioned by practitioners and children in this study. The capacity to listen to verbal and non-verbal communication was cited as an important skill and a prerequisite for direct work by all the professionals. Listening enabled them to tailor their contact with the child, and reflect the child's preferences and concerns. For instance, the book Claire made for a young boy used stickers of his favourite superhero, while Janie noted that it was important to listen "to a young person's view" so that "they (the young person) really set the agenda". Several others mentioned that although they might have specific plans for their time with a child, they needed to be flexible and responsive to the child's needs and concerns, as the following extract illustrates:

You have to be able to listen to what the children are saying, because, I think I was saying earlier, you can plan what you're going out to do, but you're not necessarily going to follow that plan, because you might start off, but something's happened to them at school that day and that's what they want to talk about. I mean sometimes there are things that you have to do, uhm, but you've got to be prepared to kind of go with the flow, and if you do that you're listening to what they're saying and you have to go with what's important for them at that moment. So something that you've

planned to do, it could take you a month to do it, because that's not important to them on that day (*Susan, social worker*).

Susan notes that listening helps her to focus on what is important to the child "at that moment", which might be at variance with what is significant to the practitioner. She gave an example where she might have planned to visit to prepare a report but, depending on the child's needs, this may have to be put to one side. By listening and changing plans, Susan enables the child's concerns and interests to take precedence, a tangible way of demonstrating care. It does, however, require a degree of flexibility and confidence to "go with the flow", which may be difficult where there are pressures to complete particular pieces of work within limited timescales. Susan's example highlights how children can feel listened to during the process of work. Some children and practitioners also identified that this is an important outcome of direct work. During his interview, Theo described the work Stella, a social worker he supervises, had undertaken with a teenage girl and her parents. Here, in response to my question about what he thought the girl would have "got" out of the work, he identifies that "being listened to" is in itself an outcome:

Int: If you were thinking about the direct work that Stella might have done with the girl, and her parents, what do you think the girl would have got from that?

Theo: Well the girl would have, the first kind of important thing here is that a child needs to know that she or he is being listened to (laughs) that's the kind of basic thing, right (Theo, team manager).

Previously I touched upon research by McLeod (2008) which found that children and young people ascribed value where listening was associated with action, for instance when Susan changed her plans. Where it was not, they expressed the view that the worker had not listened to them. In this study Rena's comment resonates with McLeod's findings:

I think the danger is if a child does tells the social worker what they are feeling and nobody seems to be bothered about doing anything, then that's not, that's poor for the child (*Rena, social worker*).

Although the weight accorded to "listening" and "feeling listened to" varied, one, the other, or both, were identified as a foundation, constituent, or outcome of direct work by all who participated, and are linked to the communication skills of the practitioner.

Playfulness

Another quality identified by several children and professionals was that in order for social workers to engage in direct work they needed to have "a sense of humour" and a capacity for playfulness. During their interview, at one point Jim (father) said to Alan (9) "You like Sally eh... you think she's funny?" Alan agreed that she was. Martin (15) also identified that an ability to use humour was important but qualified that this should be employed with a degree of judgement:

Int: If you had been able to come up with a social worker who would have been ideal for you, what would they have been like?

Martin: I don't know, just like sometimes funny, just able to have a joke.

Int: So not too serious?

Martin: Aye, serious but like can joke, and have a laugh half way through the serious bit.

Martin referred to the ability to have a joke but contextualises this within an encounter where there is a “serious bit”. Similarly, Mara also situates the capacity to use humour and laugh at oneself within a relationship which has boundaries and where, as part of her role and responsibilities, she may make decisions with which a child disagrees:

Int: I was going to ask you about what qualities you think are important in a social worker when it comes to working with children and young people?

Mara: Being childish, uhm, you know being in the position where you can laugh at yourself, uhm. Take them seriously but also show them that life can be fun [...] I'm still your social worker, I'm going to be the one who has to make the tough decisions, I'm the one who unfortunately will make decisions which you may not like. It's not like you will say I want this to happen and I will make it, because I have to make sure that you are safe, you are okay, because that's my job. So that is kind of tricky because this line between friends and getting to know them and being really able to speak about everything is really

blending with, you know, I'm your social worker (Mara, social worker).

Mara's comments highlight the complexity and the tensions involved in balancing the dual responsibility to care and control (Beckett and Maynard 2012). She refers to the "tricky" nature of the line "between friends" and "I'm your social worker" and indicates that it is not just possible, but desirable, to forge a relationship with children which encompasses both aspects. Ruch (2014) contends that "helping children is a human process" and for Mara, there is a sense that part of being human involves humour and being able to laugh at oneself, without relinquishing the authority necessary to make difficult decisions. Given the role humour plays, it is interesting to note that interviews with practitioners and children were regularly punctuated by laughter, and for professionals this was particularly evident when they were describing examples of direct work, as in Claire's account:

He wanted to make a chocolate sundae (laughs). So he's sitting on the couch (laughs) and he's got his chocolate sundae and a big smile (laughs). And I think that, when I gave him the photos, they were just thrilled to bits because it was them that was in the photos [...] He took a photograph of me from below, and I just went "Aah!" (pulls funny face) (laughs). And I printed that off for them, and he was like "I took that of you". And he was quite pleased that it was something that he had taken, and also that it was an adult not being sort of shouting, but maybe making a funny face (*Claire, social work assistant*).

Claire demonstrated how she made a “funny face”, and there was a palpable sense of delight and playfulness when she recalled her work with children, as there was in Mara’s interview when she talked about using her laptop to enable children to complete part of written reports and noted that it was “fun”, because, “you are on the floor and goofing around, so it’s more relaxed”. In the next extract, Kate refers to an ability to “be a child yourself” and “get down to ground level”. Here, I gained the impression that for Kate this included the literal, in terms of a willingness to physically engage in play, as well as an ability to connect empathically with a child’s concerns:

To be able to work with children, uhm, I think you need to be able to listen, to listen to what they’re saying, to be... But to also, you know, understand their body language and you need time, you need time to spend with them, uhm, and to a certain extent you still need to be able to be a child yourself (laughs.) You know, because you need to be able to play with kids and, uhm, I think, there are some people who are not willing to play with kids. They’re not willing to get down to ground level and do that, you know get down and play with kids, those are the most important things (*Kate, social work assistant*).

Hughes (2006) highlights the importance of “playfulness”, as part of a general approach to direct work with children. In my study, humour, flexibility, and a willingness to use play as part of being playful emerged as qualities which help practitioners engage in direct work. The examples of play which children and professionals gave varied, but included bowling, sledging, snooker, golf, football, computer games, drawing, and reading books. Despite its role in

children's lives (Mayall 2003; Fearn and Howard 2012), play is generally marginalised within social work education and practice (Ayling 2012) and so it is noteworthy that one aspect identified as enabling direct work was a capacity and willingness to play. There appears to be a dissonance between the importance attached to play and playfulness, both as a precursor to, and as part of, direct work, and the value it is accorded by institutions which prepare social workers for practice, and organisations which employ them.

Patient and persistent

The previous chapter explored how parental resistance can hinder direct work, and a willingness to persist with direct work in the face of hostility, cancelled meetings, or apparent disinterest from the child or parent has emerged as significant (Tait and Wosu 2013). Patience and persistence on the part of social workers were presented as underpinning direct work by professionals including Lily when she was describing the qualities she saw as necessary:

Patience (laughs). Yeah I would say that as well; you need to be patient
(*Lily, social worker*).

Interestingly, patience and persistence were not qualities which were identified by children or parents. It may be that practitioners are more aware of the alternative demands on their time, and of the persistence required to build relationships. It may also be that children and their parents do not necessarily view themselves as either requiring or being the beneficiaries of patience or persistence. When reflecting on their ability to persist in building

relationships with particular children some practitioners also made a link to the important role their manager plays by encouraging them to keep trying and continuing to allocate time. Persistence in engaging in direct work also requires the practitioner to believe that there is a value in this for the child or young person. This in turn affects how motivated the practitioner is to prioritise this aspect of practice.

Motivated

A key finding of this study is that engaging in direct work is presented by professionals as being inextricably linked to intrinsic motivation, and for some this appears to include a vocation narrative. In response to my question about what helps practitioners to engage in direct work, Mara makes a link to the importance of relationships, and being “attached to these children”, before highlighting that, for her, personal motivation is core:

Int: What more generally, not just for you but for other social workers, do you think helps or hinders direct work?

Mara: I think it's not about what helps because every single one of the people that I'm working with in my team, they would happily spend 90% of the time with children and do this direct work, so it's really what people want to do. It's something, because somehow, because you are getting attached to these children there is no way that you can treat it as work, I don't think anybody is doing it in this way, you actually want to do it, so it's your personality which is actually helping the most, you want to do it, and you will find a way to do it. Doesn't matter if

everything else, all the stupid paperwork, and all the meetings and everything else, if you want to do it you will find a way to do it. I think that that's really the biggest thing (Mara, social worker).

Mara's comments contextualise direct work within other organisational demands and responsibilities, including paperwork and meetings; however she argues that despite these demands "if you want to do it you will find a way to do it". Similarly, Janie notes that despite the ever-present administrative requirements, including updating computer records, "It's individuals prioritising it". Within the reference group practitioners also placed direct work in the context of other demands; for example Mandy commented that "It kind of makes the other work meaningful". Although direct work is presented by Mandy and other professionals as giving meaning to other aspects of work, as well as having meaning in its own right, the effort it takes on the part of the individual to prioritise it, particularly when there are other claims on their time, is evident in Susan's choice of the words "force" and "interfere" in the following extract:

You have to force yourself to say "this is my every Tuesday or Wednesday afternoon, and this is what I'm doing and nothing else is going to interfere with that" you know, because I think the child needs to know that you're coming and that's what you're going to be doing
(Susan, social worker).

A belief that, despite the challenges, space will be created for direct work where it is viewed as a priority by a worker emerged as a central finding from individual interviews with practitioners, and to a lesser extent group discussions. It is also evident that some of this space is in the worker's time, rather than in work time. In the manager's reference group Sara indicated that as children are at school during much of the working day, direct work happens "after five", and Mary then linked this to practitioner motivation:

Sara: For me, it was about acceptance that that happened in overtime [...] Kids get home from school half three, four o'clock and if you're doing a home supervision, you're going to be after five... and you had to do it after five, or it went on after five to get it done [...]

Mary: I think it's true actually, you do hear people saying "Oh I've got a visit" and it's nearly the end of the day and other people are packing up to go, and you hear that "I've got a half five visit", and you know it can be an issue of motivation I think.

Sara used the word "acceptance" that some work occurs "after five"; however, what this acceptance might encompass is not necessarily clear. Previously, I included an extract where Janie described a phone call from a mother indicating she wanted contact with her daughter. This was made to Janie's work mobile phone at home on a day she was not working. Lucy also described several occasions when she answered work calls at weekends, and for her this was preferable for both her and children to the alternative:

The amount of times that they've phoned me at the weekend and it takes two minutes to go on the phone and say “de da de da de da”, without getting the police involved [...] It's my works number so they're supposed to have that number (laughs). But I shouldn't answer it at the weekend, but I do at certain times, and Jane's foster carer would have broke down in five days if I didnae (*Lucy, social worker*).

Although some practitioners commented on the boundary between home and work, several mentioned working in their own time. Claire told me that she prepared worksheets and stickers in the evening. Similarly, Susan volunteered that she planned direct work at home, accessing books and activities when she was undertaking life story work with a young boy. In the extract above, Lucy comments that “I shouldn't answer it at the weekend”, and it was interesting that both Lucy and Janie asked whether I was going to “tell on me” in relation to the telephone calls. This seems to suggest that there is some uncertainty as to how permeable boundaries between work and home are, or should be.

Some children alluded to practitioner motivation, but much less explicitly than professionals. Josie mentioned that Caroline (social worker) will always “fit in” time to see her, and while being aware that Caroline has other responsibilities, she appeared confident Caroline will prioritise her, particularly where there is “something wrong”. For Mara, Susan, and other professionals, motivation is important, presumably in part because they are aware of how this influences their choices, whereas for Josie whether Caroline wants to

engage in direct work does not emerge as an issue because her experience is that Caroline “will never say she doesn’t have time”. In contrast, Jack described seeing his social worker every two months and commented that “she’s awfy lazy”. Josie appeared to have a sense that Caroline would always make space, whereas underlying Jack’s comments there appeared to be uncertainty about his social worker’s motivation and he described her as “lazy”, because she is not with him.

Central to practitioner motivation is a belief that direct work makes a difference to children. Other studies have found that this is associated with practitioner resilience, particularly in relation to self-esteem and self-efficacy (Collins 2007; Stalker *et al.* 2007; Mandell *et al.* 2013). What emerged from interviews with practitioners is that this sense of making a difference is connected to the priority they accord to this area of practice. Chapter Five explored the emotional labour involved in working alongside children who have experienced, and are experiencing loss, trauma, or neglect. Chapter Six explored the factors which professionals identified as barriers to direct work, including the value ascribed to other areas of practice and the marginalisation of direct work within institutions and organisations which train and employ them. In the face of personal and professional barriers to direct work, professionals in this study identified that they are motivated to engage in direct work, despite these factors, because they think it makes a difference to children and is meaningful. Lily’s comments perhaps best sum this up:

Int: What do you think has helped you to do direct work?

Lily: Uhm, cos it is making a difference. I think that's a hard question to answer, because whether it is making a difference or not, you want to do it in the hope that it is going to improve the situation for the young person or the child. So yeah, in the hope that it is going to make that difference, whether it be even just a small difference (Lily, social worker).

At some point Pete, Mara, Lucy, Janie, Susan and Claire also mentioned how direct work “made a difference” to children. In the reference group for managers, one factor identified as contributing to this difference is where children are able to form a consistent relationship with a worker over time. Similarly, in the practitioners' reference group, when reflecting on what helps practitioners engage in direct work, Joan focused on the importance of relationship and the value for the child, noting that:

It is about the relationship you have with the child and the family. If you know the direct work is going to be valuable, I suppose, or meaningful (Joan, social worker).

The hope expressed by professionals that direct work is “valuable”, “meaningful” and “makes a difference” appeared to be borne out by most of the children in this study. As the meanings of direct work have been explored in previous chapters, this will not be revisited in depth, other than to mention a couple of examples. Joe and his parents indicated that as a consequence of his social worker's intervention Joe receives additional help with school work, while for Josie having a social worker “makes life different”, and she feels

“safer at home”. The children and parents who participated were, in the main, positive about their experience of social workers, and direct work. There were some exceptions: Naomi’s mother, Lesley, was critical of a team manager; Julie’s mother Pat indicated that in the past social workers had not listened to her; Martin’s former social worker used “big words”. The following took place in the reference group for children:

Int: So if you were going to tell me what it’s like to have a social worker, what would you say?

Julie: Uhm, they're kind?

Int: All of them?

Julie: Half of them.

Jack: Not all of them are helpful.

Int: So, half of them are helpful and kind? And what do they do?

Julie: Sort out your family stuff, stopping your family from (not fully audible, sounds like arguing).

Int: What about the ones who aren’t so helpful?

Jack and Julie together: Dinnae know.

Int: Is it more difficult to talk about the not-so-good bits of social work, than it is to talk about okay bits of social work?

Julie: Nods

(Jack and Julie, both 14).

The exchange indicates that it may be more difficult to express views which are critical or ambivalent, particularly of current workers, and as previously

explored in Chapter Three, this will influence what children and parents choose to discuss in research interviews, and in practice encounters.

Characteristics of child or parent

It is noteworthy that while professionals identified that parental fear, ambivalence, or aggression, made it more difficult to establish relationships with children and engage in direct work, they were less forthcoming about factors associated with children and parents which facilitate direct work.

Presumably if there are characteristics which hinder direct work, there must also be those which help. Professionals described how they work alongside parents practising how they can express their views in meetings in a more effective manner. Although none overtly indicated that this is dependent on parental engagement and a degree of trust, this seems implicit.

As there was limited discussion of how parents might facilitate direct work, so there was little consideration of how the child's qualities and behaviour affects direct work. Susan, Mara, Rena and Lily mentioned that particular children were "ready" to engage in direct work, and as a consequence this helped the process. However, this was as far as they went. My perception when listening to their descriptions of direct work was that workers had fond feelings, that they generally liked the children they were discussing. However, as noted earlier, while some professionals talked about their "love" for children and families work generally, and that this was where their "heart" was, it appeared difficult to acknowledge that the feelings they held about a particular child contributed to their motivation to engage in direct work with him/her. The

closest a professional came was Lucy when discussing Dan, a teenager she saw every week for several years:

I can see him now [...] He was just, you know when you've just got somebody [...] He was lovely (*Lucy, social worker*).

Munro (2011) and Ruch (2014) emphasise the human processes involved in helping children and part of this process is identifying that humans have a range of emotions which influence how they interact, and their motivation to engage. Lucy's comments "you know when you've just got somebody", and "he was lovely", inferred that Dan elicited different feelings from some other children. My sense is that Lucy's evident affection for Dan contributed to the commitment she made to see him weekly and undertake work she viewed as meaningful. Liking, or conversely disliking, a child may have an influence on the level and quality of engagement, including a practitioner's willingness to engage in direct work (Laming 2003), and they need to have permission to reflect on this within supervision in a way which feels safe (Ruch 2008; Ingram 2015).

All who participated identified that the personal qualities of practitioners contributed to the nature and quality of direct work. As noted earlier, professionals situated personal qualities within the organisations which train and employ them, and the next section will explore organisational aspects which were presented as facilitating direct work, including the role of supervision.

Organisational factors

Although organisational features were more often highlighted as creating or maintaining barriers to direct work with children, professionals did, nevertheless, identify some elements associated with the organisation which helped them to engage in direct work. These include the culture of the team and the support provided by peers and supervisor, including provision of resources, flexible working hours, and participation in post-qualifying courses. As all areas identified are contingent to a greater or lesser degree on their manager, the role of the manager emerged as fundamental. Predictably, given their positions, children or their parents were less likely to proffer views on features associated with the organisation, so this section draws on professionals' comments.

The team manager

The key role the team manager plays in creating a culture which enables and sustains direct work emerged in the comments of practitioners and managers alike. There were instances when practitioners identified explicitly that their manager acted in a manner which helped them to engage in direct work. There were other instances where they did not, but where it was implicit in their accounts that, without their manager's encouragement, they would have been less able to develop particular skills or be afforded time to engage in direct work. Three sub-themes emerged as particularly relevant: the value the manager accorded to direct work, and the consequences this had for the way they allocated time and resources, including access to training; the role of formal and informal supervision to offer emotional support and review

practice; and the degree to which the manager buffered the team from organisational demands which might otherwise reduce the priority practitioners placed on engaging with children.

The value the manager accords to direct work

Several managers made comments which indicated either tacitly or explicitly that they attributed value to direct work. For instance Pete remarked that “part of the assessment is having individual contact with the child and seeing the child on their own”. Pete encouraged me to speak to several workers in his team about direct work. I have included some of his comments below as, for me, they indicated that he had a sense of the direct work being undertaken; possibly this was linked to the value he placed on it:

Pete: I think what I would be better doing is maybe afterwards after you’ve seen a few other people is taking you up to see Polly. She’s got a few worksheets which she uses with children.

Int: Polly?

Pete: Polly Smith, she’s the social work assistant within the team and uhm, she does a lot of impressive work with children and she could show you some of them
(Pete, team manager).

There is evidence to indicate that despite increasing bureaucracy, first-line managers exert considerable discretion about how they interpret organisational directives (Aaronson and Smith 2010), and how they allocate resources (Evans and Harris 2004; Evans 2011), and this was true in this study. Pete identified that he ensured practitioners in his team had access to

post-qualifying training. He also noted how he allocated finances from the team budget to enable practitioners and children to access a local resource, and parents and children to participate in activities which otherwise could be outside their income. During her interview, a practitioner whom Pete supervises indicated that as part of their direct work with four children, she and a colleague had visited this resource. Claire and Rena commented that their team managers both apportioned the money the teams received for hosting student placements on books and activities for use with children, and this appeared to be an important symbol of the value accorded to direct work. Claire's remark, "Yeah, we've got this money" gives some indication of how significant this was to her:

As a team we got money for having students, and so we were able to get more resources, more books that we can use, uhm, and more hands-on toys, different things for the kids that we can use. So, that was a good outcome because I think the team thought: "Yeah, we've got this money we can do something with it, we can get resources with it!"

(Claire, social work assistant).

As we have seen, professionals, parents, and, to a lesser degree, children, identified that direct work was shaped by the views and attitudes of parents, and consequently the relationships practitioners form with parents could help or hinder direct work with children. Here again the manager emerged as influential in establishing the nature of relationships professionals form with parents, including setting the tone. In the extract below Gary clarifies how he

tries to ensure that social workers in the team do not overstep their role and compromise relationships with parents:

School will sometimes phone you and go, "I'm phoning to tell you about Jonny". For instance, "I'm phoning to tell you he's assaulted another pupil today". And you stop them and you say "Have you phoned the parent"? "No, we're phoning you". And you end up saying to them, "Would you like someone to phone social work about your child"? You've got to try and form a good working relationship with the parent. You're not going to do that if the social worker goes out and says "By the way I've had a phone call from school", and they're sitting there half the time going, "Well no-one said anything to me" (*Gary, team manager*).

Elsewhere he expressed his view on the core elements of the social work role, including maintaining a focus on the child and the importance of "honesty", with honesty defined as being clear about concerns and the potential outcomes of intervention. Being honest and direct are qualities which emerge from this study and others (Buckley *et al.* 2011; Davies and Ward 2012) as appreciated by both parents and children. Consequently, the role the manager has in establishing how this translates in practice is important. Here, Gary explores how being honest is central to the development of relationships:

You don't have to be in constant adversity, but it's important that you bring that up, and you can say to them "If you don't bring that up I will say at the meeting, paragraph six, mum doesn't agree with that, you'll

have to seek mum's views on that but I know she doesn't agree", you know if you think the person's not going to say it at the meeting. So, again, it's just gradually building up working relationships, and trust. There are lots of families out there that acknowledge we will never be on the same wavelength, but there's lots of things you can do to build up a trusting relationship
(Gary, team manager).

Gary's comments mirror the findings of Cossar *et al.* (2011) who established that where children disagree with the views expressed in written assessments, and their social worker acknowledges and notes areas of difference, this contributes to the child's subsequent engagement. One of the practitioners from Gary's team participated and expressed very similar views on the need to share reports, to be open and honest, to enable parents and children to express differing views, and to establish clear boundaries in relation to the social work role. Gary described building "a trusting relationship" with families. Another part of establishing and maintaining a culture within a team where direct work is possible is the trust between practitioners and manager. After recounting a complex piece of direct work she had undertaken, Janie identified that she believed her manager would have agreed with allocating the time necessary because he "would trust my judgement":

If I explained to him that I considered this a really important valuable piece of work with this young person he would trust my judgement with

that and respect that and allow me to do that, there's no question
(*Janie, social worker*).

Previously I identified that some practitioners were able to engage in direct work because it was 'under the radar', and explored the drawbacks for the individual, the organisation, and the child. It is noteworthy that Janie did not confirm she had sought her manager's opinion before starting this piece of work, moreover her choice of words infers she did not. While not explicitly discussing direct work initially seems at variance with the idea of "trust" to which Janie refers, it may actually be evidence of it. What Janie appears to be implying is that her manager does not need to know because he "trusts her judgement" and therefore would "allow" her to do it. In the reference group, Bob describes how he expects, and so presumably requests, less information from experienced practitioners, and his comment "that's unspoken that they know what to do" may help explain the "trust" to which Janie refers.

I get that knowledge (about direct work) from the planning process where we're planning what to do. Then that's normally where we would say, well you've to go in and do this specific piece of work, and then you get the discussion about how to do that. Unless it's a very experienced worker who knows (pause) you know that's unspoken that they know what to do, less experienced workers you're a bit more explicit about what you'd be expecting them to do (*Bob, team manager, reference group*).

Janie works part-time and some of the contact she described took place outside her usual working hours. One of the very practical measures which Rena, Lucy, Mara and Lily mentioned as helping direct work was flexible working hours. This was particularly important during term-time and enabled them to see more than one child after school. It also emerged as significant for children and their parents. As we have seen, for Jim, that Rosie took Alan bowling “after five o’clock” was a symbol that Alan was important. Although all practitioners mentioned that they managed their own diaries, flexible working hours customarily need to be sanctioned by one’s manager, and consequently are one way managers can create a culture where direct work is encouraged.

Reviewing direct work and providing support

Professionals identified that within formal and informal supervision, managers have an active role in facilitating direct work, particularly when practitioners are encountering difficulties. Rena identified how, when she was trying to form a relationship with two children who were initially “terrified” she would accommodate them, her manager encouraged her to persist in her efforts. Eventually both children accompanied her on an outing and started to talk about some of their experiences. During individual interviews Janie, Claire, and Lily all mentioned the role their team managers played, particularly when they were unsure about an aspect of direct work. Here, Lily identifies how peers and her team manager provide distinct sources of support:

Int: If you were stuck with something you were doing, either you planned to do a piece of direct work, or you’d done it and it’d completely bombed, who would you talk to about it?

Lily: My colleagues and my manager, because it's not the first time that you come in and you're like, "Oh my God, you'll never guess what's happened, oh my God, I shouldn't have done it like that, I need to do it like this", or "What do you think?", and they can talk you through that. I do feel that with my manager there are very few situations that he's never had to deal with. He's very experienced and sometimes you go in to speak to him about something and you're very anxious, and he's quite good at saying, "Look this can be resolved, this is where we go from here". So definitely I feel more than comfortable going to my manager to discuss things (Lily, social worker).

For Lily, peers "talk you through" situations, whereas her manager plays a different role, one which incorporates direction and decision making as well as support, as illustrated in her comment, "He's quite good at saying, 'look this can be resolved, this is where we go from here'". Her team manager occupies a separate room to Lily and the rest of the team, and Lily hints at the power differential when she says, "You go in to speak to him" and "I feel more than comfortable going to my manager". In addition to citing their manager as a source of support, several practitioners also mentioned their role in reviewing direct work as part of supervision, or as part of formal processes, including case conferences, reviews, or Children's Hearings. Their comments resonate with previous research (Ofsted 2012) which found that the managerial role is particularly important at three points: where plans for children are being established; where plans require to change; and at decision-making times.

For Claire (social work assistant), direct work with young children from one family led her to conclude that the chronic neglect they were experiencing had worsened. She described passing information to her team manager, so they could jointly make decisions. Claire and other practitioners recounted examples where managers sanctioned resources (time and money), provided guidance, offered direct support, and undertook joint home visits when there were particular complexities.

Two aspects of the supervisory role are to review what practitioners have done, and what they plan to do (Hughes and Pengelly 2002; Gordon and Hendry 2011; Wonnacott 2012). In the reference group, managers expressed different perspectives as to how this looked in practice, including the detail they hold about direct work, and their role in reviewing it. As noted in Chapter Six, Sara commented that she has “never asked a worker about the direct work s/he is engaged in, whereas Mary does when she feels she is “not hearing enough about the child”. Earlier in this chapter I drew on Bob, who indicated that the level of detail he seeks depends on the experience and competence of the practitioner. During individual interviews, several practitioners and all three managers identified planned and unplanned supervision as important in relation to direct work. In the next extract, Theo discusses how he sees supervision as contributing to and complementing formal reviews:

Int: One of the things I'm interested in terms of work that happens with children, is the role of the manager...

Theo: Okay, my role is predominantly, in terms of getting a sense of how the work is progressing, right. I think it's reviewing the work. It's being reviewed anyway in terms of LAC reviews, but I need to be kind of clear from my point of view, be clear that we are achieving something [...] It's about where we heading with this, so to avoid being in kind of stagnant positions, and so when we go to the review, whatever the social worker's assessment and recommendations, it's kind of informed by our consultations (Theo, team manager).

Theo recalls how he uses "consultations" to monitor and evaluate direct work and enable practitioners to prepare for reviews, stressing the importance of knowing how "work is progressing". Implicit in his choice of words is that this will involve an active account from the practitioner outlining who is doing what, why, and with whom, to "avoid being in kind of stagnant positions" and make progress. Gary pointed to the filing cabinet in his office and indicated that it contained paper copies of children's plans to which he refers during supervision, and commented that part of his role was to help practitioners "stay focused". Similarly, in her interview, in response to my question about the role her manager played, Mara identified that she helped her to "keep on track":

Int: I was going to ask you about your team manager and about their role in supporting, or not, direct work?

Mara: Our team leader is really good, we have our monthly supervision where we go through case by case by case, so

that's pretty good to keep you on track about what should be done and whether you are sort of letting yourself down and something which you said would be done in a week is still not done (Mara, social worker).

Notably, practitioners in the reference group were less forthcoming than those interviewed individually about how their managers help them to engage in direct work. The general impression they gave was that their managers are either unaware of what they are doing, or are more concerned with the outcome of work than its content. They did however suggest that I ask those in a supervisory role how they supported practitioners with the emotional demands of direct work:

Hayley: Maybe you should ask them how, how they think the work impacted on the worker?

Int: Uh huh.

Eilish: And the child.

Hayley: Uh huh.

Int: And how do they think the work impacted on the worker and child? Yeah.

Sophie: You'll have to keep in mind the discussion we've just had about kind of not wanting to test [...]

Heather: But (pause). They are managers (general laughter).

The impact on worker, as well as child, was an area to which they attributed importance, possibly, as their laughter hints, because in their experience,

support with the emotional demands of direct work was not always forthcoming. By contrast, in individual interviews, Lily, Mara and Claire identified how their managers supported them with the emotional impact of direct work, and Theo's comments in the extract below indicates the value he places on this aspect of his role. Elsewhere in the interview Theo observed that he had relinquished particular areas of his work to enable him to be more available for workers:

Int: What things do people bring to you about direct work...? Is it where they've been uncertain; where something is not going well; or where something has gone well; or where it's something new that they've never dealt with before, just to get a sense of what they bring?

Theo: I think probably all of that. I think usually people in social work would want to speak to you immediately if they are concerned about something, something that's kind of immediate, they've gone into a situation where there has been an immediate concern, and sometimes they have to [...] And I think it's very important that they, and it's a thing that I want to instil in people, I don't want them to hesitate, I don't want people to carry things unnecessarily, just for themselves, and I don't, I don't think it's ever over-used because people develop their own kind of judgement about these things, but there's no point carrying uncertainty and if you really think that something cannot wait and you want to kind of discuss that. And it's

sometimes about being stuck in the work (Theo, team manager).

The difference between the views expressed by the reference group and individual practitioners about the degree to which they felt supported by their manager in relation to direct work is noteworthy. The reference group included practitioners from several different authorities, all of whom had an established relationship with me as a consequence of my role as tutor. Consequently, they may have been more confident about expressing views critical of their manager than those individually interviewed, despite assurances of confidentiality. Other studies (Gilmore 2010) identify ambivalence associated with the transition from practitioner to manager, and perhaps this is more likely to be expressed in groups rather than individually. Of course, it is also possible that experiences of supervision within the reference group differed from those of the individuals in the authority hosting the research.

The manager as “buffer”

Chapter Six considered how organisational culture and practice influence the nature and amount of direct work, and found that for professionals in this study, direct work was not seen as a priority by the organisations in which they were employed. The messages practitioners receive about organisational imperatives are, however, mediated through the team manager, in part because of their key position in relation to the flow of information between the team and other parts of the organisation (Kadushin 2002; Davys and Beddoe 2005). Morrison (2005) labels this as the “mediation function” of supervision. How individual managers enact this function varies. Aaronson and Smith

(2010) and Patterson (2014) found that managers perform a complex balancing act as they endeavour to retain the values which underpinned their practice, while being part of a management structure responsible for introducing changes which as a practitioner they may not have agreed with. During the reference group for managers, Jane hints at this in the comment that she “needs to have more political sensitivity and be aware of what’s going on” than the members of her team. As part of this balancing act some managers identified that they act as a buffer (Bellman and Ryan, 2009) enabling practitioners to concentrate on direct work rather than being diverted by organisational pressures, particularly at times of organisational change. In his individual interview, Gary contends that he acts as a “barrier” between the team and “management”:

Families are in charge of their own lives; they will not go to the dictat of a senior manager. They operate on all the pressures that are around them at particular times that dictates how they behave in certain ways, you know, which then impacts on the work which requires to be done with them, which is the frustrating thing for the staff when you’re getting the dictat from above [...] I always try and put myself as a barrier between my senior manager and my team. It’s like we’re together as a unit, we’ll stand and fall together as a unit (*Gary, team manager*).

Beckett (2003) identified a dissonance between the ‘official’ language of social work and the ‘colloquial’ to argue that employing military metaphors such as ‘front line’ and ‘under siege’ in speech is associated with a level of ambivalence towards service users. Gary employs similar imagery when he

comments that “we’ll stand and fall together as a unit”. However, it is those “above” who are positioned as a threat to meaningful direct work. As a team manager, Gary is part of the management team; however he appears to distance himself from the “senior manager” and situates himself with the practice team when exploring how his role links to direct work. As is to be expected, the role of ‘buffer’ occupied managers more than practitioners, or indeed children, and so generally did not emerge as a theme in the latter’s interviews. An exception was Janie who, in response to my question about what influences the quality of direct work she undertakes, seems to infer that her manager takes responsibility for some administrative tasks to enable her to prioritise direct work:

I know that my computer records aren’t that great and I’m today trying to do some of that, catching up with it, and we’ve got a really good team leader that does a lot of computer stuff at the back of us to make sure that we’re up to date (*Janie, social worker*).

When identifying what supported them to engage in direct work, in addition to the team manager, peers emerged from practitioner interviews as key, and it is the latter which the next section will go on to explore.

The role of the team

Two linked areas emerged as significant concerning the part peers played in encouraging direct work; the role team members played as mentors; and their role as a source of support, particularly at times of uncertainty. The contribution mentoring can and does make to developing a practitioner’s

capacities and building relationships within social work teams has been identified elsewhere (Collins 2013). Several practitioners commented that team members acted as formal or informal mentors, and indicated that accompanying others on home visits, observing peers, and discussing direct work within team rooms, helped them to engage with children. Lucy explains how mentoring was important to her, before questioning to what extent this still occurs:

What is really good if you're mentoring someone and they're coming out with you and stuff, because that's how I learned a lot of stuff, so, but if people aren't doing it, how do newly qualified workers...? I mean I was lucky as well when I started in children and families all the workers were really qualified, you learned loads from them. I don't think you get that nowadays because people get fed up (*Lucy, social worker*).

Although Lucy questioned how common informal mentoring is “nowadays”, Mara, Lily and Claire all gave examples of how peers help them in their work with particular children, and there was a sense that they contextualised the direct work in which they are engaged in relation to other team members. For instance, Mara compared her practice to that of other team members stating she has:

The privilege to work in a very established team with all the social workers having years of experience and they are all really amazing, they are great and I feel guilty sometimes because sometimes I feel I don't spend enough time with my families and they are all doing so much

more

(Mara, social worker).

In Chapter Six, the difference between the public space within office buildings, and the private space of the team room was identified, and several practitioners commented on the room in which they were based, and the individuals within it. As I was early for several interviews I waited in team rooms, and briefly observed the interactions which occurred. In one instance I had arranged to interview a social worker. However, she was detained at a Children's Hearing where she had been threatened by the father of the child. When she arrived, other team members listened as she recounted what had happened; one person made her a cup of tea, while another provided biscuits. In Chapter Five, I explored the significance of "care" in the relationship between child and practitioner, and here it seemed to me that practitioners were enacting care with peers.

In the following extract in response to my inquiry about what helps her to engage in direct work, Lily clearly identifies how team members offer support and reassurance, while also referencing the physical space of the "desk" and the "office":

Int: Anything else that you think, this helps me, that might be previous experiences, might be other members of the team, might be stuff that you've read, stuff that you've done, anything?

Lily: Uh huh, well I suppose looking at other members of the team, because they are looking at us doing a lot of lone working, and working from home and hot desking and that. And that's not something I want to do because I feel in the office here, that if you've dealt with a difficult situation you can come in and let off steam, or if there's something and you're thinking "Uhm, is this right", you can "What else could I be doing?" Sometimes you know what you're doing is right, but just sharing that with someone else and getting that reassurance, so I certainly feel like team work and being a member of a team is hugely important (Lily, social worker).

Similar to other practitioners, Lily mentioned that "being a member of a team is hugely important". The literature on what supports resilient practitioners is unequivocal about how peers can reduce the sense of isolation inherent where much of social work practice is conducted alone, offer support, and provide a sense of belonging (Collins 2007; Stalker *et al.* 2007; Kearns and McArdle 2012). Lily refers to changes in the authority as it moves to a position where practitioners share desks, and work from home, but "this is not something I want to do". In his research Jeyasingham (2014) found that the introduction of "agile working" altered the nature of practice. Given the value accorded to being a "member of a team" by professionals, and my observations that the space within team rooms contained evidence that this was a service in contact with children in a way which other public spaces in

the office did not, this change may have profound and presumably unintended consequences for the amount and quality of direct work which takes place.

Most practitioners who mentioned “team” referred to peers in the team in which they worked. However, as the concept of the helping team is integral to Girfec (Scottish Government 2012), it is unsurprising that for some practitioners, those identified as collaborating in joint pieces of work, or offering support, were other professionals. In Chapter Five an extract from Lily’s visit to a family in crisis was included. This was a joint visit which Lily undertook with a specialist project worker, with whom she had “almost daily” contact. For Claire, the psychologist involved with one particular family was credited with having “loads of ideas, different ways of working, and was good to bounce things off”.

Professionals reflected on the manner in which the organisations in which they are employed facilitate direct work; they also suggested that their capacity to engage in direct work was influenced by pre- and post-qualifying teaching and learning opportunities, and the next section will explore this in some depth. As is to be expected, children did not spontaneously mention pre- or post-qualifying courses, and thus the next section will draw on accounts from professionals.

Pre- and post- qualifying teaching and learning

As discussed previously, all professionals who mentioned pre-qualifying teaching and learning identified that there had been limited input on direct work with children, with this presented as a barrier to engagement. In

contrast, while there are reservations about the level of evaluation and effectiveness of current provision (Kelly and Jackson 2011; Pearce *et al.* 2015), particular post-qualifying courses were generally credited by the professionals in this study as helping them to engage in direct work. While this finding is significant, my role as tutor on one of the courses mentioned, and the fact that reference groups for professionals were held immediately after a teaching day has some influence on my perspective, on participants, and on the data. Practitioners' comments and my interpretation of their comments need to be situated within this context. Seven of the professionals interviewed individually had no previous relationship with me; however, they knew I was a tutor on post-qualifying courses, which some had completed. For others, when framing their view of direct work, this will have been constructed in the context of their previous experience of me, and consequently the data was influenced by our interactions both before and during interviews. Given my role, it may have been difficult to articulate deficits in post-qualifying training.

During the reference group for practitioners, after identifying the gaps in her pre-qualifying course, Brigid commented how a post-qualifying short course on direct work with children had given her the impetus to engage in direct work. However, for Mandy the impact of the same post-qualifying training was limited; she argued that existing constraints prevailed and prevented her from making changes. As Mandy indicated, there are barriers to incorporating new learning into practice, and post-qualifying training and learning needs to be contextualised within the particular culture of the organisation. Previously I considered the role the manager plays; they are also influential in enabling

practitioners to access post-qualifying training and integrate learning into practice (Horwath and Morrison 1999; Morrison 2005; Wonnacott 2012). Of the three managers interviewed, Pete was the strongest advocate of post-qualifying training:

In terms of training one of my other boasts as well is that I've nearly got a team who've all done or nearly done the post-qualifying child protection course. Now that's a fairly expensive course in terms of the money it costs the department, but also in terms of the time while they are away, but I've seen a real improvement in the quality of practice, and the child is, after them doing the course, more so at the centre (*Pete, team manager*).

Slightly later he returned to this theme, and as it was the second time he touched upon this, I made the decision to explicitly name a question I had the first time he raised it; whether my dual role as tutor and researcher had influenced the direction of the interview and Pete indicated that it had not:

Pete: Following the course there's been a real improvement in the quality of assessment reports as well and, uhm, one of the things I now see in reports is social workers not just describing what's happened in their assessment reports but actually bringing theory in to it and, uhm, I think that's particularly helpful for children's panel members who aren't highly trained if they can get a theoretical explanation of what kind of impact neglect has on children...

Int: That's really interesting to hear (pause). It's interesting for me on two levels. Because I teach the course, so we can evaluate how we think it's impacting but you're in a much better place to actually evaluate it, so it's interesting for me because of that (pause). But it's also interesting because one of the things I'm thinking of when you're talking is "I wonder if Pete would be talking about that if it was someone else who'd be interviewing him?" Do you know what I mean?

Pete: No, I would because I'm unique in the authority. I've nearly got a team, of everybody who had done the post-qualifying course, and that has had a huge impact in terms of service delivery and the kind of pressure its put on other team members to cover while people are away, but I see real benefits in terms of improving practice and it's not just because it's Helen (Pete, team manager).

Pete identified the strengths as he saw them of a particular post-qualifying course. For practitioners, one of the benefits they identified was the opportunity to reflect on their practice, to make links between theory and practice, and, very significantly in relation to this thesis, to recognise the amount of work they had undertaken with children and their families. Towards the end of the reference group, after Joan highlighted how assessed course work helped her to recognise the amount and value of the work she had undertaken, Sophie suggested that the opportunity to discuss practice with peers had also contributed:

Joan: You don't realise how much work you're doing with and for a child and family, because for instance I didn't realise how much work I'd done for a child and his family until I was doing the assignment, for instance, and that brought home to me "God I can't believe I've done all this work". You know for this child that when you're in the middle of it you don't realise how much you're actually doing.

Int: So what would have helped you, other than doing a 3000 word assignment, (shared laughter in group) uhm, to think about the direct work you were doing?

Joan: Probably the time to sit and reflect and discuss it more in depth in supervision instead of just going over things.

Sophie: I think it's really hard to talk about that one-to-one though, where when you're in a group, when you're in a peer group scenario, then you think, "Oh yeah I do do that". Because you might not know to bring it to the table, because as you were saying earlier, it's just the work that you do, you don't think about discussing it. It's just when you hear other people talk then you're like "Oh yeah, yeah, I do do that".

Similar to Joan and Sophie, during their individual interviews, Rena, Mara and Lily highlighted the value of discussing practice with peers and completing written assessments. At the end of their individual interviews, several practitioners commented that the process of talking about direct work as part of this study had helped them to identify both the amount of work they had

engaged in and its value. As discussed in Chapter Three, Mara indicated that the research interview bolstered her feelings of confidence, and the sense that she was engaged in meaningful work, and her comments are echoed by

Lily:

Int: Thank you, that's been really interesting.

Lily: No, thank you, even for me, talking through things, it's been interesting getting me thinking about things as well. It gives you that little bit of motivation again as well actually, you know you do make a difference at times. Because sometimes it can be a wee bit demoralising, you do have days, and you do have weeks where you think "What actually am I achieving here?" But then when you sit and unpick it you're achieving loads of stuff, you really are (Lily, social worker).

Previously, practitioners identified that two core determinants of whether they engaged in direct work were the priority they accorded it, in other words their motivation, and if they felt it "made a difference". What emerged from interviews is that sometimes it is difficult to identify not just the difference one is making, but the extent of direct work undertaken, without first making this explicit to self and others. Practitioners highlighted that participation in post-qualifying courses helped, as did the act of talking about their work with someone else.

Summary

This chapter explored factors which emerged as facilitating direct work. A persistent theme was that the characteristics and motivation of the practitioner is central. Dependent on one's position - child, practitioner, or manager - the influence accorded to organisational context and expectations, including supervision and pre-and post-qualifying education and training, and the degree to which these were seen to mediate the qualities of the individual practitioner, varied. In Chapter Five, the drawbacks associated with a perspective which fails to situate relationship-based practice and direct work within an ecological framework were identified. Chapters Six and Seven explored the barriers to and enablers of direct work, and it is clear that while the qualities individual practitioners bring help or hinder direct work, those qualities need to be understood within wider personal, educational, professional, and socio-cultural contexts which shape encounters with a child.

Chapter Eight: Conclusions

Throughout the thesis, I have considered how direct work is enacted and experienced, and when thinking about the research process, and my place in it, both are relevant. I am reluctant to use the term 'journey', for fear of sounding trite but some of the alternatives (expedition, voyage, and trip) do not quite reflect the different experiences and layers of learning. Some have been more onerous than a voyage or trip suggests but not involving the stiff boots and anorak I associate with an expedition. My journey, for want of a better word, includes becoming more aware of the processes and complexities in research involving children, including the role of gatekeepers, and how perceptions of children and childhood influence each aspect of the research process. Some experiences mirror the themes which emerged in the study, including the value of listening, and the significance of relationships – including my own with research participants and my supervisors. Tied in with relationship is the degree to which practitioners “really care”. This influences how children experience direct work, and practitioners' motivation to engage in meaningful direct work, particularly when there are alternative, and less emotionally demanding, claims on time. Similarly, the value I ascribed to listening to participants, and cared about their experiences, influenced how I engaged, and reinforced my commitment to complete and disseminate the findings in the context of competing personal and professional demands.

The aim of the research was to consider what direct work happens with children looked after at home, what meanings are ascribed to direct work, and

what contributes to the amount and quality – in other words what helps and hinders. In this last chapter my intention is to briefly reprise the key themes and messages for practice. I will identify some of the strengths and limitations of the study, and areas which, with hindsight, I might have approached differently, or which may benefit from further consideration.

The research process

The process of engaging in research has been interesting and demanding. It has taken far longer than initially anticipated, and I have questioned the choices I made, including my decisions to conduct the fieldwork in a local authority where I had not been employed and transcribe all interviews personally, as both influenced the timespan. My sense is that it may have been easier to recruit participants had I worked in the area, and had established relationships with gatekeepers. However, as an outsider I became aware of the office spaces in a way which I might not have been if they were familiar to me. While transcribing was time consuming, it influenced the process of analysis, as I attended to the manner of speech, as well as the content.

The study was a small scale, qualitative one, where all participants opted-in, with children recruited through their social workers. The experiences they chose to share are not necessarily representative of other children in the local authority, or more generally, and a similar qualification applies to the professionals. Notwithstanding assurances of confidentiality, it may be difficult for children to express views which are critical of social workers, or for social

workers to voice criticism of the systems in which they operate, although the latter did not appear to be the case.

Underpinning the process was a concern to engage with participants in a way which I viewed as ethical, with the proviso that my perspective may not be shared by another researcher. For me, this included visiting teams in order to meet professionals, social workers introducing me to children, and disseminating findings to participants as soon as possible. All involved time and effort and had I been working within more limited timescales might not have been possible. There are parallels here with practice, where flexibility to tailor direct work was identified as important, but was inhibited by timescales and other commitments.

The study explored understandings of everyday social work contact, with a focus on the subjective meanings ascribed to direct work, mainly utilising semi-structured interviews. This format brought benefits and yielded much data; but also has limitations. Interviews are retrospective accounts which participants choose to relate at a particular time and place. In Chapter Three, I consider how I approached the study from an ontological position that there are different 'truths', that experiences and meanings ascribed to encounters will vary, and thus the pictures which emerge from interviews will be partial and might have been different had I used an alternative approach. However, the accounts are rich, are valuable, and contribute to a knowledge base.

Social workers introduced me to children, and what I saw and heard during those relatively brief periods also formed part of my analysis. Rather than

using interviews, another option would have been to use an ethnographic approach, observing practitioners and children together. While there are examples of this in residential care (Emond 2000; Punch *et al.* 2011), it has, to date, been less used with children who are on home-based supervision (Ferguson 2014). Interestingly, given the assumptions some practitioners made about the work foster carers are doing with children, it has also been underused in research about foster care. Using such an approach could have brought benefits, not least as it offers more opportunity to see and hear what practitioners and children do, or at least what they do when there is an observer present, as this will have some influence on the content and dynamic of the encounter. Without also having interviews with children and social workers, it is possible that data could then be weighted towards my interpretation of what I saw and heard, rather than their retrospective accounts. It may also be that it is within the relatively brief period of introductions and goodbyes where day-to-day care is spontaneously enacted.

It's all about relationships

A former colleague, when considering why children and their families have contact with social work services suggested, "It's all about poverty". Whilst this hypothesis knowingly underplays the complex interplay between individual factors and societal constraints, it articulates the link between deprivation, social exclusion and social work involvement (Jack 2000; Winter and Connolly 2005; Bywaters *et al.* 2014). In Chapter 4, I included an extract from Lucy's interview, who when asked how, in her work with a teenage girl, she effected change, said "With the relationship". Lucy was not alone in stressing the

centrality of relationship; rather this runs through the thesis like a thread. The message from all participants is that the relationship between a child and practitioner is fundamental. Direct work contributes to this relationship, and is dependent on it, and if I were to paraphrase my colleague, “It’s all about relationships”. This finding is not new; it echoes existing research and policy which see relationships as central to effective practice (Bell 2002; Happer *et al.* 2006; Scottish Executive 2006a; Munro 2011, 2012; Van Bijleveld *et al.* 2015). A contribution this study makes is to identify the value of small but significant gestures which are part of the construction and maintenance of relationships; gestures which are performed through direct work and which convey a message to the child that their concerns and preferences are remembered and important.

The relationship between a child and practitioner is core to direct work; however as is evident from this study, the process of forming and maintaining relationships is anything but simple. Relationships are indeed central. However, just as “It’s all about poverty” underplays the complexity of people’s lives, relationship-based direct work needs to be located and understood within wider ecological frameworks in relation to the child and practitioner. The thesis explores the links between two different theoretical perspectives – emotional labour, and attachment theory – and suggests that both can offer valuable insights into the way child/practitioner relationships are enacted and experienced.

The child's experiences and expectations of relationships influence encounters, as does the context, and this includes the complexities, expectations, and anxieties associated with the social work role. Here, what emerged from accounts was the way anxiety, fear, or shame act as barriers to direct work, and to children forming relationships with professionals. It is noteworthy that for some, such as Alan and Jim, direct work, and tangible demonstrations of care, helped reduce their anxiety and change their perception of social workers. It is clear that children attribute value to the time practitioners spend with them and appreciate relationships with social workers who "really care" and are "kind". For practitioners, direct work is part of the way they demonstrate care; it is "where my (their) heart is". However, it is also evident that direct work can be hard for children, parents and professionals. Engaging in meaningful direct work with children about their past, their present, and their future precipitates a range of emotions; managing those emotions involves emotional labour. How practitioners do this, and indeed whether they are willing or able to engage in complex interventions, and form relationships, is influenced by what they bring, including their perspectives on children and childhood, their own attachment experiences, and the support they receive. Although practitioners alluded to attachment theory, and to the emotional labour involved in direct work, there was little exploration of how their own experiences might shape or influence their work with children, and this is an area which warrants further study.

For practitioners, obstacles to relationship-based practice and direct work are located with the individual, and in the environments in which they are trained

and employed. As is evident from even a cursory glance at the relative length of Chapters Six and Seven, more barriers to direct work were identified than factors which enable or facilitate it. It appears that while, on the one hand relationship-based practice and direct work are extolled, simultaneously there is ambivalence about the place of both. There was uncertainty about the nature of relationships, and the role practitioners might play in children's lives. When recalling the consistent role she had played in the lives of siblings, this uncertainty was summarised by one manager who noted that there are "two schools of thought about whether I should have maintained that level of involvement". Thus, while some drew on familial analogies to describe their relationships with children, others voiced anxiety that children might "rely on you too much".

There also appears to be ambiguity about the place of direct work. Contrary to the proposition that direct work with children is important "above all" (Munro 2011, p.87), the experience of professionals is that "It's just not expected of you". While there are "reams" of guidance about other aspects of practice, there is limited guidance on direct work. The spaces within buildings also discourage, rather than encourage direct work, and one professional related how direct work was dismissed as "play", with play being a derisory word, rather than a core part of a service which engages with children. While cultures, systems, and procedures are relevant, they are interpreted, executed and perpetuated by individual practitioners; thus children's experience of processes is currently largely dependent on their social worker, as is evident from the accounts of children who participated. Similarly, for

professionals, the role of peers and one's manager is particularly important, and contributes to an environment where direct work and relationships are valued and sustained, through formal and informal mentoring, supervision, and allocation of resources, or alternatively not. This study does not pretend to offer the link between good supervision and good practice, which has proved elusive (Carpenter 2012, 2013). It does, however, highlight the fundamental role managers have in relation to direct work.

For professionals, the meanings attached to direct work vary, and are influenced by a range of factors including what areas of practice are subject to prescription and audit, the changing use of IT, and the manner in which services are delivered, including a move to "agile working". There also appears to be a link to the place of direct work in pre- and post-qualifying teaching and learning, including the degree to which the "doing" aspects of practice are taught and assessed.

Is direct work taught?

Practitioners questioned to what extent pre-qualifying programmes adequately prepared them for direct work with children, and their comments need to be located within ongoing debate about social work education and curriculum content (Munro 2011; Taylor and Bogo 2014; Lefevre 2014, 2015; Higgins and Goodyer 2015). In Scotland, in response to inconsistencies in qualifying courses, and evidence that some social workers did not view child welfare and protection as their responsibility (Scottish Executive 2002; O'Brien 2003), Key Capabilities in Child Care and Protection (Scottish Executive 2006b) were

introduced. Of the 11 practitioners interviewed individually, two completed their degrees after they were embedded, whereas in both reference groups for professionals, most would have graduated before their introduction. Key Capabilities ensure it is no longer possible to qualify without having undertaken an assessment of a child or of parenting capacity (IRISS 2008; Bruce and Whincup 2012); however, their impact on direct work is less clear, and this is an area which would benefit from study.

Practitioners clearly indicated that limited pre-qualifying input on direct work with children decreased their confidence about engaging in direct work, and contributed to a culture in social work education and employment where it is accorded less value than other aspects of practice. Several highlighted how, in contrast, particular post-qualifying courses had enabled them to recognise the amount and value of direct work in which they were involved, and for some, but not all, this increased their motivation to engage in direct work. As noted previously, their comments and my analysis both need to be situated within the context of my role as tutor on one of the post-qualifying programs mentioned.

Interestingly, two of the professionals who described thoughtful examples of direct work, Claire and Kate, are social work assistants; while for Alan his relationship with Sally (social work assistant) was significant. Practitioners in these posts do not possess a social work degree, and would not generally attend the post-qualifying course which some social workers mentioned. Consequently, while the extent to which pre-and post-qualifying social work

education includes input on direct work does appear to be related to the quality and the quantity of work in which practitioners engage, this indicates that it is not the only determinant.

Meaningful direct work happens

There are studies which explore how practice is enacted and what social workers do (Hall and Slembrouk 2009; Ferguson 2009, 2014; Helm 2013) However, there is far more written about what social workers are prevented from doing, or are not doing (Warner 2014). In a discourse which tends to focus on deficits, it can be difficult for practitioners to acknowledge that direct work happens, as was seen in the discussion between managers in the reference group. In part, this may be in case this implies the practitioner's caseload is not sufficiently taxing. An important contribution of this research is that it challenges the view that social workers cannot, and/or do not engage in meaningful direct work, as it is evident that some very clearly can and do.

The study shines a light on the everyday exchanges between children and social workers, and looks at what children and social workers are doing together - in homes, cars, garden centres, cinemas, parks, and to a lesser extent social work offices. It explores the explicit and tacit meanings ascribed to direct work by children and professionals, and builds on the work of Gilligan (1999) to suggest a typology of direct work which encompasses intervention and assessment. Throughout the thesis I have drawn on examples told to me by research participants to illustrate the range of direct work mentioned. From the accounts of children, it was evident that the time they spent with social

workers was important, although there were reservations about the communication skills of particular workers, and difficulties where social workers used “big words”, or just asked lots of “questions”. Doubts were also expressed about whether some social workers “really cared”, and there were requests from children for social workers to spend more time with them, and “do” more things. In the main, children were positive about and appeared to value the time they spent with their social workers. For some, it enabled them to feel safer; for others it was an opportunity to talk about experiences they would not otherwise have shared. Practitioners and managers also ascribed value to direct work and recalled examples where direct work had made a difference to children. This included preparing children for transitions, increasing feelings of security, “linking the cubes” in a child’s life, repairing relationships with family members, and compensating for deficits. Professionals identified that direct work also made a difference to them, and connected direct work to their satisfaction and motivation. There appeared to be a virtuous circle with practitioners being motivated to engage in direct work because they are engaged in direct work.

It is of interest that, on occasion, practitioners appeared to obscure direct work, at least from their manager. This has potential implications for a child and the transparency and accuracy of his/her care plans. Importantly, in relation to the emotional labour involved, it limits the support workers can access; while for the organisation, it means direct work is less visible, and arguably remains less valued. Professionals initially tended to underestimate the amount and value of work in which they were involved. Having an

opportunity to talk about direct work, in post-qualifying training and research interviews, prompted some to expand their definitions of what it included, how much they were doing, and its value. This is an important finding in relation to the role that training and supervision does or could play. Unless both offer opportunities to explore direct work, the amount and value of direct work can go unnoticed or unrecognised. Furthermore, if, as part of research, practitioners are asked to consider how their time is allocated, without also talking this through, they may underestimate both the amount and quality of work in which they are engaged.

Information technology is invariably presented as a barrier to direct work. Although the changing nature of IT was mentioned as significant, the association between IT and direct work is not simple. The practitioners in this study were not based in a mythical place where they have no administrative responsibilities, rather the systems in place were characterised as “problematic”, “not fit for purpose” and “time consuming”. However, practitioners still managed to engage in direct work which they and children experienced as meaningful. While systems could be simplified, changing the nature of IT is not necessarily going to create environments where practitioners consistently engage in direct work. What is noteworthy from this study is that the balance between face-to-face contact and IT is nuanced, and at times, the computer may be utilised to avoid emotionally challenging situations, including direct work with children.

Professionals identified organisational factors which enable direct work, including peers, flexible hours, post-qualifying training, and their manager. However, most indicated that organisations marginalise direct work, and a recurrent theme is that where direct work happens, this is associated with the intrinsic motivation and commitment of the practitioner, rather than being built in to the organisation. Some professionals drew on a vocation narrative to explore their motivation, and to an extent employers rely on practitioners going ‘the extra mile’. However, this narrative is not unproblematic, and can be associated with negative consequences for the practitioner, for the organisation, and for the child, not least where children have social workers who do not share this narrative. A core finding of previous research with children is that their experience is largely dependent on the particular worker, and this was borne out in this study. For some, including Josie, Alan and Naomi, their experience was positive, and as a consequence they were “safer”, “happier”, and had “someone to talk to”. For others, their experience of social workers will not be as helpful. If children are to be consistently at the centre of services, the way care is enacted cannot rest primarily with the individual practitioner.

I am somewhat wary of suggesting proposals for policy and/or practice on the basis of themes which emerged, partly given the apparent disjuncture between policy statements on direct work and practice experiences.

Moreover, this reluctance flows from the perspective that relationship-based practice and direct work is complex, and aspects which help, or conversely hinder, need to be contextualised and understood within an ecological

framework. This includes perceptions of children and childhood, organisational cultures and practices, and what each participant brings in terms of experience and expectations.

For practitioners, forming caring relationships with children and engaging in direct work is associated with professional and personal satisfaction. It is also emotionally and intellectually demanding, and requires professionals with sufficient personal and professional resources, knowledge, skills, and motivation. If relationship-based practice and meaningful direct work are to be a core part of the social work role, extended to all children, the current balance between intrinsic motivation and external support is one aspect which needs to change. This would require organisations which train and employ social workers to *expect, prepare, actively encourage, adequately resource, and sensitively support* practitioners to engage in meaningful direct work with children. It would include universities critically reviewing and adapting their current curricula content, and employers prioritising this aspect of practice. The study found that small, everyday gestures of care are significant; it also found that practitioners engage in direct work and form relationships which they and children characterise as meaningful, despite barriers. This should give a sense of hope as to how much could be achieved if direct work was prioritised.

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Appendices

Appendix 1: Research Participants

The majority of the research was conducted in one local authority. I interviewed six children (6 -15). Two children (14) participated in the reference group. Eleven professionals from the same authority participated in individual interviews: six social workers, two social work assistants and three team managers.

Six managers participated in one reference group, and eight practitioners in another. They were drawn from outside the authority which hosted the research, and were all engaged in post-qualifying continuing professional development where I was their tutor.

All participants have been assigned pseudonyms.

Reference group for young people:

Julie and Jack (both 14). Each lived in a different town, and prior to the reference group did not know each other. Julie's social worker arranged the venue for the reference group and brought Julie while I collected and returned Jack.

Reference group for practitioners

This was comprised of Brigid, Carla, Eilish, Hayley, Joan, Sophie, Mandy, Nancy. All had completed the Graduate Certificate in Child Welfare and Protection with me as their tutor, and remained at the end of the final teaching day to participate (the teaching group had been provided with details about the research at the beginning of the last module).

Reference group for managers

This was comprised of Jane, Lou, Sara, Bob, Ann, Mary. All were completing the Module Supervising, Managing or Mentoring with me as their tutor, and had remained at the end of the second teaching day in order to participate, having been given the details of the research before the module started.

Individual Interviews

Children and young people

Josie (nine) and Reanne (six) are half-sisters. Both live part of the week with their mother, Annie, on Home Supervision. Reanne lives with her father for the rest of the week, while Josie is with foster carers. They have a younger sister Cara (three) who fell outside the age range agreed by the University Ethics Committee. I was taken out to meet the family by Caroline, social worker, and interviewed both girls together (their choice) in the living room while Cara, Annie and Caroline were in the kitchen.

Alan (nine) was interviewed with his father Jim. At their request this took place in the social work office rather than their home. Sally, social work assistant, booked the room and provided refreshments.

Naomi (13) lives with her mother Lesley. I was taken out to meet Naomi and her mother by Sarah, social worker, and interviewed Naomi in the living room while her mother was in the kitchen

Joe (13) lives with his parent, step-parent, and siblings. Joe chose to be interviewed with parents Audrey and Neil present in the living room. I was taken out to meet Joe and his family by Lisa (social worker).

Martin (15) lives with his father, stepmother and siblings. Martin was interviewed in the living room, and although this was an individual interview, members of his family came in and out of the room at various points and can be heard on the recording. I was taken out to meet Martin and his stepmother by Linda (social worker).

Professionals

There were six social workers, all female, Lucy, Lily, Susan, Mara, Rena and Janie, two social work assistants Claire and Kate, and three team managers, all male, Gary, Theo and Pete.

Appendix 2: Information sheets

Information sheet: Younger children

INFORMATION SHEET: YOUNGER CHILDREN

This should be given to and read through with children once their parent(s) have given their permission.



Hello



My name is Helen Whincup



I work at Stirling University and teach social workers

I'd like to talk to you about what you and your social worker do when you see him/her. This will help us to know how social workers can help children.

I'll also be talking to social workers about what they do, but I won't talk to your social worker.

All children who take part will receive a small gift token as a thank you.

When I am writing up what everyone has told me I won't say who said what, and won't tell anyone what you have said.

The only time I would need to speak to someone else is if someone tells me they or another child are not safe.

If you might like to speak to me please let your social worker know and I can come and meet you and your mum or dad.




Thank You



Helen Whincup

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Information sheet: Children



INFORMATION SHEET: CHILDREN

Children and young people who are on Home Supervision Orders: what are their experiences of social work contact?


WHY I WOULD LIKE YOUR HELP?

I would like to talk to children about their experiences of social work.

I'll be talking to children and young people (from 5 up to 18 years old) who are on Home Supervision Orders under s70 Children (Scotland) Act 1995.

WHO AM I?

I work at Stirling University teaching social workers. I am a social worker and used to work with children, young people and their families.



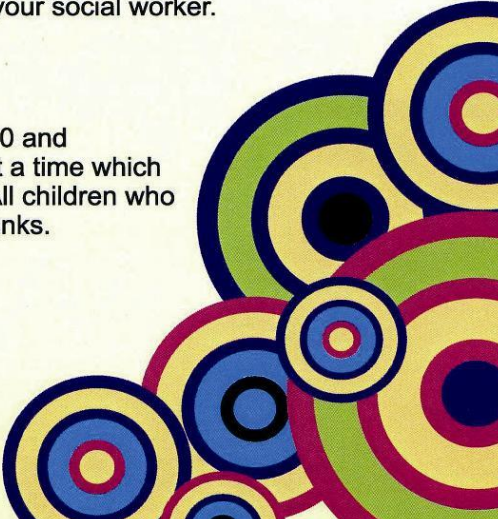

WHAT DO I WANT TO FIND OUT?

We don't know as much as we would like to about what children find helpful when they have to meet with a social worker. I'd like to know more about this and that's why I'm asking for your help.

As well as speaking to children and young people I'll talk to social workers to hear their views but not your social worker.

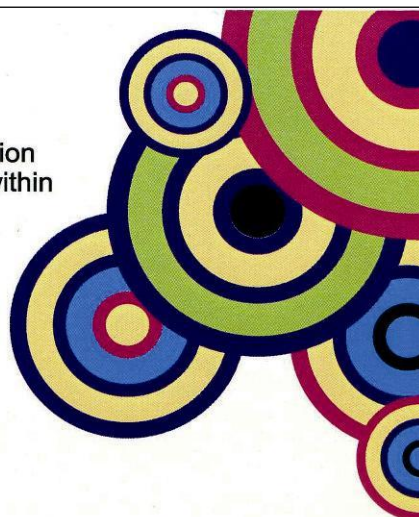
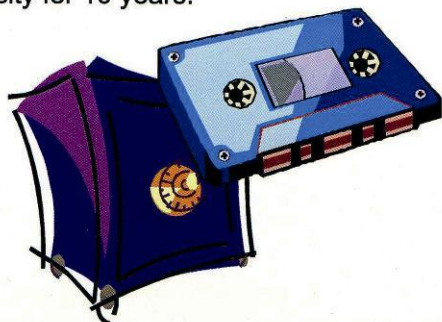
WHEN WILL INTERVIEWS TAKE PLACE?

I'll be talking to people between summer 2010 and autumn 2011. The interview will take place at a time which is ok for you and will last for about an hour. All children who take part will receive a small gift token as thanks.

HOW WILL I RECORD YOUR VIEWS?

If you don't mind I'd like to tape record our conversation and type it up afterwards. These will be kept safely within the University for 10 years.



WILL ANYONE KNOW WHAT YOU HAVE SAID?

When I am writing up what you and other people have told me I will give everyone a made-up name, so no-one will be able to tell who said what.

The only time I would pass anything on, is if someone tells me they or another child are not safe.

WHAT IF YOU WANT TO FIND OUT MORE ABOUT ME OR YOU HAVE WORRIES ABOUT THE RESEARCH?

If you would like to talk about to someone other than me please contact Brigid Daniel at the Department of Applied Social Science. Her phone number is 01786 467726 or email at b.m.daniel@stir.ac.uk

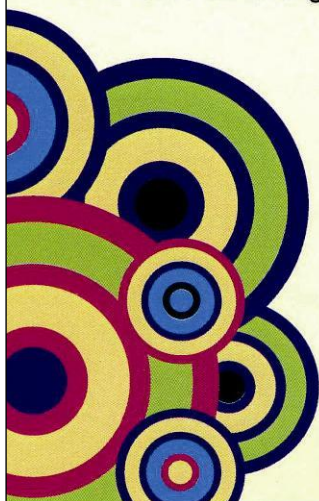
HOW DO I GET INVOLVED?

If you would like to meet me to get more information please let your social worker know and I will arrange to meet you and your parent(s).

Thank You

A handwritten signature in black ink that reads "Helen Whincup". The signature is fluid and cursive.

Helen Whincup



The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Information sheet: Young people

INFORMATION SHEET - YOUNG PEOPLE**Children and young people's experiences of social work contact when they are on Home Supervision Orders:****RESEARCHER: Helen Whincup****WOULD YOU LIKE TO TAKE PART IN RESEARCH?**

I'd like to talk to children and young people (from 5 up to 18 years old) who are on Home Supervision Orders under s70 Children (Scotland) Act 1995.

WHO AM I?

I work at Stirling University teaching social workers and seniors. I qualified as a social worker in 1991 and worked with children, young people and their families from 1991-2004.

WHAT DO I WANT TO FIND OUT?

Although we know some things about what children and young people on home supervision orders think (for example, about going to Hearings) we don't know as much about what they find helpful when they have to meet to a social worker. I'd really like to know more about this and that's why I'm asking for your help. As well as speaking to children and young people I'll talk to social workers and seniors/team managers to hear their views, but not to your social worker.

It won't make any difference to the help you get if you don't want to talk to me.

WHEN WILL INTERVIEWS TAKE PLACE?

I'll be talking to people between summer 2010 and autumn 2011. The interview will take place at a time which suits you and will last about an hour. All young people who take part will receive a small gift token as thanks.

HOW WILL I RECORD YOUR VIEWS?

Because your views are important and I want to make sure I don't miss anything you say, if you don't mind it I'd like to tape record our conversation and type it up afterwards. These will be kept safely within the University for 10 years.

WILL ANYONE KNOW WHAT YOU HAVE SAID?

When I am writing up what you and other people have told me I will give everyone a made-up name, so no-one will be able to tell who said what. I won't mention the area in which the research took place in.

The only time I would pass on information is if someone tells me they or another child are not safe.

The results of the research will be in my PhD. You might not want to read all of this so I will send a summary to everyone who took part and to the Head of Social Work. I will also let social workers who are doing courses at Stirling University know what I have been told and will write up the research for journals.

WHAT IF YOU WANT TO FIND OUT MORE ABOUT ME OR YOU HAVE WORRIES ABOUT THE RESEARCH?

If you would like to talk about the research with someone other than me please contact my supervisor Professor Brigid Daniel at the Department of Applied Social Science. Her phone number is 01786 467726 or email at b.m.daniel@stir.ac.uk

HOW DO I GET INVOLVED?

If you would like to meet me to get more information please let your social worker know and I will arrange to meet you and your parent(s).

Thank you



Helen Whincup
Teaching Fellow
Department of Applied Social Science
University of Stirling
Stirling FK9 4LA

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Information sheet: Children and Young People in Reference Group

INFORMATION SHEET- CHILDREN AND YOUNG PEOPLE IN REFERENCE GROUP

Children and young people who are on Home Supervision Orders: what are their experiences?

RESEARCHER: Helen Whincup

INVITATION TO TAKE PART IN A REFERENCE GROUP

I am doing research about children and young people's experiences of social work. I'll be talking to children and young people (from 5 up to 18 years old) who are on Home Supervision Orders under s70 Children (Scotland) Act 1995. Although we know some things about what children and young people on home supervision orders think (for example, about going to Hearings) we don't know as much as we'd like about their experiences of social work contact. I'd really like to know more about this. As well as speaking to children and young people I'll talk to social workers and their managers to hear their views.

Before I interview children and young people, social workers and seniors I'd like to see what young people think about the questions. This is where I need your help. I am organising a group for young people to give me feedback on the questions. This will be called a reference group and I wanted to see if you would like to be part of this.

WHO AM I?

I work at Stirling University teaching social workers. I qualified as a social worker in 1991 and worked with children, young people and their families between 1991 and 2004.

WHAT WILL THE REFERENCE GROUP DO?

The group will have a look at the questions I'm planning to ask children and young people, social workers and their seniors. I'd like the group to tell me if they think I've missed anything out which is important and if they think the questions are clear.

It will take place between summer 2010 and autumn 2011. This will give me a chance to make any changes to my interview questions based on what you and other young people have said to me.

All children and young people who take part will receive a small gift token as thanks.

HOW WILL I RECORD YOUR VIEWS?

Because your views are important and I want to make sure I don't miss anything you say, if you are happy for me to do it I'd like to tape record the reference group and write it up or transcribe it afterwards. The recording and transcripts will be kept safely within the Department of Applied Social Science for 10 years.

WILL ANYONE KNOW WHAT YOU HAVE SAID ?

When I am writing up what you and other people have told me I will give everyone a made up name, so no-one will be able to tell who said what. I won't mention the area where the research took place in

The only time I would need to pass on information is if someone tells me they or another child is not safe.

The results of the research will be in my PhD thesis. You might not want to read all of this so I will send a summary to everyone who took part in the reference group and interviews and to the Head of Social Work. I will also let social workers who are doing courses at Stirling University know what I have been told and will write up the research for journals.

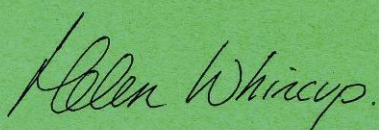
WHAT IF YOU WANT TO FIND OUT MORE ABOUT ME OR YOU HAVE WORRIES ABOUT THE RESEARCH?

If you would like to talk about the research with someone other than me please contact my supervisor Professor Brigid Daniel at the Department of Applied Social Science. Her phone number is 01786 467726 or email at b.m.daniel@stir.ac.uk

HOW DO I GET INVOLVED IN THE REFERENCE GROUP?

If you would like to take part in the reference group please could you and your parents sign the consent form and return it to me in the stamped addressed envelope. Could you please include contact details so that I can get in touch with you.

Thank you



Helen Whincup
Teaching Fellow
Department of Applied Social Science
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The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Information sheet: Parents

INFORMATION SHEET- PARENTS**Children and young people who are on Home Supervision Orders:
what are their experiences of social work contact****RESEARCHER:** Helen Whincup**INVITATION TO TAKE PART IN RESEARCH**

You are being asked to give permission for your child to take part in research which looks at children and young people's experiences of social work.

I'd like to talk to children and young people (from 5 up to 18 years old) who are on Home Supervision Orders under s70 Children(Scotland) Act 1995. I am also interested in finding out what helps or hinders social workers from working with children and young people and would like to speak to social workers and their seniors.

WHO AM I?

I work at Stirling University teaching social workers and seniors. I qualified as a social worker in 1991 and worked with children, young people and their families from 1991-2004. I am also doing a PhD at the University and the research is part of this.

WHAT DO I WANT TO FIND OUT?

Although we know some things about what children and young people on Home Supervision Orders think (for example, about going to Hearings) we don't know as much as we'd like about their experiences of social work. As well as speaking to children and young people I'll talk to social workers and their managers to hear their views. I won't be interviewing your child's social worker.

The service you and your child receive from the local authority will not be affected whether your child participates or not.

WHEN WILL INTERVIEWS TAKE PLACE?

Between summer 2010 and autumn 2011 I would like to speak to children and young people, social workers and seniors. This will take place at a time and date to suit your child and will last about an hour. Dependant on the age of your child s/he may want to have someone with them.

All children and young people who take part will receive a small gift token as thanks for their time.

HOW WILL I RECORD YOUR CHILD'S VIEWS?

I'd like to tape record the interview and write it up afterwards. These will be kept safely within the Department of Applied Social Science for 10 years after I have finished my PhD.

WILL ANYONE KNOW WHAT YOUR CHILD SAID?

When I am writing up what I have been told, I will give everyone a false name, so no-one will be able to tell who said what and I won't mention the area.

The only time I would have to pass on information is if a child tells me they or another child is not safe.

The results of the research will be contained in my PhD. You might not want to read all of this so I will send a summary to everyone who took part in the interviews and to the Head of Social Work. I will write up the research for journals and will share the findings with social workers undertaking courses at Stirling University.

WHAT IF YOU WANT TO FIND OUT MORE ABOUT ME OR YOU HAVE WORRIES ABOUT THE RESEARCH?

If you would like to talk about the research with someone other than me please contact my supervisor Professor Brigid Daniel at the Department of Applied Social Science. Her phone number is 01786 467726 or email at b.m.daniel@stir.ac.uk

HOW DO WE GET INVOLVED?

If you and your child would like to meet me to get more information, please ask your social worker to pass on your contact details to me and I will arrange a time to meet which suits you.

Thank you



Helen Whincup
Teaching Fellow
Department of Applied Social Science
University of Stirling
Stirling FK9 4LA

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Information sheet: Social Workers, Seniors/Team Managers

INFORMATION SHEET- Social Workers, Seniors/Team Managers

Children and young people who are on Home Supervision Orders: what are their experiences of social work contact

RESEARCHER: Helen Whincup

INVITATION TO TAKE PART IN RESEARCH

You are being asked to take part in research which looks at children and young people's experiences of social work. I will be talking to children and young people (from 5 up to 18 years old) who are on Home Supervision Orders under s70 Children(Scotland) Act 1995, Social Workers, Seniors and Team Managers. Children and young people who participate in the reference group or the interviews will be given a small gift token as thanks.

WHO AM I?

I am a part-time PhD student at the University of Stirling. I also work at Stirling University teaching the Graduate Certificate in Child Welfare and Protection and the module Supervising, Managing or Mentoring (Child Welfare and Protection). I qualified as a social worker in 1991 and worked with children, young people and their families from 1991-2004. I currently sit on a local authority permanence panel.

WHAT DO I WANT TO FIND OUT?

Although we know some things about what children and young people on home supervision orders think (for example, about going to Hearings) we don't know as much as we'd like about their experiences of direct work or about what helps or hinders social workers to work with them. I'd like to talk to you about your role and your experiences. The aim of the research is to contribute to the knowledge base and inform practice, and so it is important that the views of practitioners are included.

WHEN WILL INTERVIEWS TAKE PLACE?

Interviews will take place between summer 2010 and autumn 2011. The interview will take place at a time which suits you and will last about an hour.

HOW WILL I RECORD YOUR VIEWS?

Because your views are important and I want to make sure I don't miss anything you say, if you are happy for me to do it I'd like to tape record the interview and transcribe them afterwards. The recording and transcripts will be kept safely within the Department of Applied Social Science for 10 years after I have finished my PhD.

WILL ANYONE KNOW WHAT YOU HAVE SAID ?

When I am writing up what you and other people have told me I will give everyone a pseudonym, so no-one will be able to tell who said what. I will also change any details which might be identifiable to ensure your confidentiality. I won't mention the area which the research took place in any written material.

The only time I would need to pass on information is if I have concerns about a child's safety or if I am aware of practice which breaches the SSSC Codes of Practice (2003).

The results of the research will be in my PhD thesis. You might not want to read all of this so I will send a summary to everyone who took part in the interviews and to the Head of Social Work. As part of a process of dissemination, I will write up the research for relevant social work journals/conferences and share key messages with students undertaking social work courses .

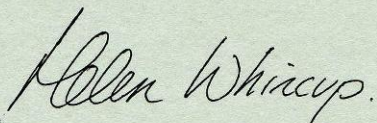
WHAT IF YOU WANT TO FIND OUT MORE ABOUT ME OR YOU HAVE CONCERNS ABOUT THE RESEARCH?

If you would like to discuss the research with someone other than myself please contact my supervisor Professor Brigid Daniel at the Department of Applied Social Science. Her phone number is 01786 467726 or email at b.m.daniel@stir.ac.uk

HOW DO I GET INVOLVED?

If you would like to participate by being interviewed please complete the consent form and return to me in the stamped addressed envelope. I will then contact you to arrange a time which is suitable for you.

Thank you.



Helen Whincup
Teaching Fellow
Department of Applied Social Science
University of Stirling
Stirling FK9 4LA

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Appendix 3: Consent forms

Consent Form: Younger children

CONSENT FORM: YOUNGER CHILDREN

I would like to speak to Helen

YES NO

I am ok with Helen taping our talk and keeping this tape safe in her office

YES NO

I would like someone to be with me when I speak to Helen

YES NO

If yes who

Signature: *Please write your name here*

.....

Thank You

Helen Whincup

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

CONSENT FORM: Younger children, section for parents**For Parent(s):**

I have read and understood the information sheet. I am happy that my child understands the research and I give permission for Helen to talk to him / her.

Name(s)

Signature(s)

Date

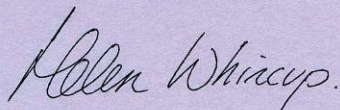
Please give contact details so that I can arrange an interview time:

Telephone Number(s)

Home

Mobile

Thank you



Helen Whincup
Teaching Fellow
Department of Applied Social Science
University of Stirling
Stirling FK9 4LA

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Consent Form: Children (Interview)

CHILDREN - CONSENT FORM (INTERVIEW)

Children and young people who are on Home Supervision Orders: what are their experiences of social work contact, and what helps/ hinders effective social work contact?

This research looks at children and young people's experiences of social work while they are on Home Supervision Orders and what helps or hinders social workers from working with children and young people.

The research is part of a PhD by Helen Whincup at the University of Stirling.

I have read and understood the information sheet and would like to take part in the research by talking to Helen

Name

Signature:

I give / do not give my consent to the interview being tape recorded (Please circle)

I would like to have someone with me during the interview

No / Yes (please give details) (Please circle)

Date

Name of current Social Worker

For Parent(s):

I have read and understood the information sheet and am happy for my child to take part.

Name(s)

Signature(s)

Date

Contact Details:

Please give contact details so that I can arrange an interview time:

Telephone Number(s)

Home

Mobile

Thank You

Helen Whincup

Helen Whincup
Teaching Fellow
Department of Applied
Social Science
University of Stirling
Stirling FK9 4LA

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Consent Form: Children and Young People in Reference Group

**CHILDREN AND YOUNG PEOPLE - CONSENT FORM
(REFERENCE GROUP)****Children and young people who are on Home Supervision Orders:
what are their experiences of social work contact?**

This research looks at the experiences of children and young people who are on Home Supervision under s70 Children (Scotland) Act 1995 of social work and what helps or hinders social workers from working with children and young people. The research is part of a PhD undertaken by Helen Whincup at the University of Stirling in the Department of Applied Social Studies. The Research Ethics Committee of the Department has approved this research study.

I have read and understood the information sheet and would like to take part in the research by being part of the reference group.

Name

Signature:

I give / do not give my consent to the reference group being audio-recorded
(Please circle)

Date

Name of Current Social Worker

.....

For Parent(s):

I have read and understood the information sheet and am happy for my child to take part in the reference group.

Name(s)

.....

Signature(s)

.....

This research looks at the experiences of children and young people who are on Home Supervision under s70 Children (Scotland) Act 1995 of social work and what helps or hinders social workers from working with children and young people. The research is part of a PhD undertaken by Helen Whincup at the University of Stirling in the Department of Applied Social Studies. The Research Ethics Committee of the Department has approved this research study.

Date

Contact Details:

Please give contact details so that we can arrange a time for the reference group which is suitable for most people:

Telephone Number(s)

Home

Mobile

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Consent Form: Social Workers, Seniors/Team Managers

CONSENT FORM - Social Workers, Seniors/Team Managers**Children and young people who are on Home Supervision Orders:
what are their experiences of social work contact?**

This research looks at children and young people's experiences of social work while they are on Home Supervision Orders under s70 Children (Scotland) Act 1995 and what helps or hinders social workers from working with children and young people. The research is part of a PhD undertaken by Helen Whincup at the University of Stirling in the Department of Applied Social Studies. The Research Ethics Committee of the Department has approved this research study as has the Head of Service.

I have read and understood the information sheet and would like to take part in the research by being interviewed by Helen.

Name

Signature:

I give / do not give my consent to the interview being audio-recorded

(Please circle)

Date

Contact Details:

Please give contact details so that I can arrange an interview time:

Telephone Number(s)

Work

Email

The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.

Appendix 4: Interview schedules

Interview Schedule for children and young people

Beginning

Re-introduce self and research, check still interested, whether have any questions, whether want anyone with them, if not agree where adults (parent/social worker) will be, how will let them know finished/ if need them. Check where want voucher for (if social worker hasn't already told me). Explain contingent confidentiality. Check consent including is it OK to record or not, and how will pause/stop (orange/red card), practice. Show recorder, record and play back; who will listen (me), where will store, and anonymity (pretend names). Child and parent sign consent. Other children have looked at questions and given me a bit of help with them. Check if any questions before start? Unpack drawing stuff/ fuzzy felt/ if in office check where loos are/juice and biscuits

Possible Questions

Can I just double check how old you are?

And can you tell me a bit about you, and what you like doing?

As you know from when I came to meet you and your mum and dad, I'm interested in what happens when children/young person and social workers meet and I'd like to have a chat about that if it's OK?

How about starting with where you usually see each other?

And do you see each other on certain days/ times - how is this worked out/what if you want to change, would you phone/text?

Have you known (name) for long?

Is s/he your first social worker or have you seen others?

Before you met (name) what did you think having a social worker would be like?

You were saying you thought it would be... is it the same or different to how you thought?

One of the things the young people who looked at the questions said is that when they first met their social worker they were nervous; can you remember how you felt?

I'm really interested in what happens when you are together - what kind of things do you do?

Is there anything you wish you could do with your social worker that doesn't happen now?

If you were able to come up with the ideal social worker for you what do you think they'd be like (drawing/ fuzzy felt)?

Does it make a difference if they are man/woman?

Suppose we could go forward two years what do you think you'd remember about social workers that was good/not so good?

Suppose you were to tell a boy/girl/ same age what it's like having a social worker, what would you say to them?

What advice would you give a social worker meeting a child/young person for first time?

I'm going to be interviewing social workers and their bosses, is there anything you think I should ask/tell them?

Is there anything else that you wanted to tell me about the time you have spent with social workers?

We're almost at the end now, but can I just check, is there anything which you thought I'd ask which I haven't done?

Is there anything else you want to say?

Anything you want to ask me?

Endings

Includes: Thanks, and certificate. What will do next - still need to speak to other children and social workers and that will take quite a long time but when finished will make sure they get something in writing which tells them what came up (no-one will know who said what). Check how feeling, give info sheet numbers for service (Barnardo's). If something crops up and they think I want to mention that, how they can let me know. Whether ready for adult to come back in. If older and making own way home check if want to use phone to let parents know they are on way.

Interview Schedule for practitioners

Beginning

Includes: Re-introduce self/ research, check whether have questions, let them know about contingent confidentiality/ anonymity, check OK to record, how will let me know if want to stop/pause. What will do with research findings - summary to all involved, dissemination events, journals, conferences. Consent form. Offer biscuits/fruit.

Possible Questions

Can I just check how long you've been a social worker?

Is this your first social work post, have you worked elsewhere?

Thinking back, what do you think made you choose children and families?

Dependent on answer, possible follow ups: Is it different to how you thought it would be? Can you tell me a bit more? What do you like about your work? Are there any bits that you don't like, could do without, or would like to change?

One of the things I'm interested in is what kinds of direct work happens with children on Home Supervision. Direct work can mean different things to different people so I just wanted to ask what you'd include as direct work?

Can you talk me through an example of direct work you've done?

Depending on what comes up - What do you think (child's name) got out of direct work?

One of the things I'd like to know more about is what helps or hinders social workers from doing direct work with children and I'd be interested to know what you think?

Depending on answer - might want to introduce things other people have said to researchers - lack of time, not feeling confident, not wanting to upset children, too painful to hear. Are any of these relevant to you or the people you work alongside? Has this changed over career? What about solutions?

I'm going to be speaking to seniors/team manager, what are your thoughts about their role in helping or hindering direct work?

Are there other things you think affect the amount or quality of direct work?

Children who have spoken to researchers have, over the years, come up with qualities they think are important in social workers; some of the things they have mentioned are reliable, humour, remembers things important to them, involves child. From your experience what qualities do you think are important?

We are almost at the end now but can I just check, is there anything you thought I'd ask that I haven't done?

Is there anything else which you wanted to tell me which you think is relevant to the direct work you or other people do with children on Home Supervision?

Endings

Includes: Thanks, and check how feeling, it may have raised difficult feelings, confidential line in authority. What will do next - still need to speak to other children and social worker but when finished will make sure they get something in writing which tells them key themes (no-one will know who said what) and will be dissemination events plus journals/conferences. If something crops up which they want to mention, how they can let me know. Anything they want to ask me? How can they involve children/other practitioners?

Interview Schedule for seniors and team managers

Beginning

Includes: Re-introduce self/ research, check whether have questions, let them know about contingent confidentiality/anonymity, check OK to record, how will let me know if want to stop/pause. What will do with research findings - summary to all involved, dissemination events, journals, conferences. Consent form. Offer biscuits/fruit.

Possible Questions

Can I just check how long you have been a senior/ team manager?

And how long have you been in your current post?

What did you do before/where?

Thinking back, what do you think made you choose children and families?

Dependent on answer, possible follow ups: Is it different to how you thought it would be? Can you tell me a bit more? What do you like about your work? Are there any bits that you don't like, could do without, or would like to change?

One of the things I'm interested in finding out a bit more about is direct work with children on Home Supervision. Direct work can mean different things to different people so I just wanted to ask what you'd include as direct work?

Can I ask from your perspective what kind of things do you think social workers do with children who are on Home Supervision? What do you think child/children got out of direct work?

From your experience as a manager, or as a practitioner, or both, what do you think affects the amount or the quality of direct work?

Depending on answer - might want to introduce things other people have said to researchers - lack of time, not feeling confident, not wanting to upset children, too painful to hear. Are any of these relevant to workers you supervise/manage? Has this changed over career? What do they think might be solutions?

Are there other things you think affect the amount or quality of direct work?

Children who have spoken to researchers have over the years come up with qualities they think are important in social workers; some of the things they have mentioned are reliable, humour, remembers things important to them, involves child. From your experience what qualities do you think are important?

What qualities do you think are important in a senior/team manager?

What role do you think seniors/team managers play in supporting or enabling direct work? Dependent on answer, might want to ask about role of supervision, training.

We are almost at the end now but can I just check, is there anything you thought I'd ask that I haven't done?

Is there anything else which you wanted to tell me which you think is relevant to the direct work social workers do with children on Home Supervision?

Endings


Includes: Thanks, and check how feelings, it may have raised difficult feelings, confidential line in authority. What will do next - still need to speak to other children and social worker but when finished will make sure they get something in writing which tells them themes (no-one will know who said what) and will be dissemination events plus journals/conferences. If something crops up which they want to mention, how they can let me know. Anything they want to ask me? How can involve children/practitioners?

Appendix 5: Certificate of involvement



Appendix 6: Information sheets summarising findings

Younger children




INFORMATION SHEET
Younger Children

My name is Helen Whincup. I work at Stirling University and teach social workers

I have been talking to children and social workers about the time they spend together so that I can let social workers know what children find helpful.

WHO DID I TALK TO?

2 children helped me to get my questions ready.



Then, I talked to **6** children (aged 6-15 years) who were on Home Supervision Orders under s70 Children (Scotland) Act 1995. These are now called Compulsory Supervision Orders.

I also spoke to **2** social work assistants, **6** social workers and **3** team managers (**11** in total).

WHAT DID CHILDREN AND SOCIAL WORKERS SAY?

- The relationship between a child and their social worker is important. Children said they want to know their social worker *"cares about"* them. One child said that their worker would *"never say she's too busy"*.
- Most children said that they like having someone who they can *"talk to"* and who will help if are worried about anything.
- Some children want to *"do"* more things with their social worker like going for a walk or having something to eat.

please turn over


- Sometimes social workers use *"big words"* which makes it hard to know what they are saying.
- Social workers talked about the ways they try to help children.
- Social workers said they want to spend more time with children but sometimes the amount of written work gets in the way.
- Some offices where social workers work did not seem to be built with children in mind.

WHAT AM I GOING TO DO NEXT?

I am speaking to social workers so that they know what children and young people have said is helpful. I will also ask social workers to give this sheet to children and their parent(s).

THANK YOU


Thank you to the children, young people, and social workers who took part. I am very grateful for your time, and hope that what you told me will help others.



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The Department of Applied Social Science of the University of Stirling Research Ethics Committee has reviewed and approved this research study.



Children



WHO AM I?

My name is Helen Whincup. I work at Stirling University teaching social workers. I am a social worker and used to work with children, young people and their families.

WHAT DID I WANT TO FIND OUT?

We don't know as much as we would like to about what children find helpful when they have to meet with a social worker. I wanted to find out more about this and I have been talking to children and social workers about their experiences.

First of all, **2** children, plus **8** social workers, and **6** managers helped me come up with interview questions.

Then, between January 2011 and May 2012 I talked to **6** children and young people (aged 6-15 years) who were on Home Supervision Orders under s70 Children (Scotland) Act 1995.

I also spoke to **2** social work assistants, **6** social workers and **3** team managers (**11** in total). Everyone I spoke to was given a pretend name so when I wrote up what they told me no-one would know who said what.

Since completing the interviews, the Children's Hearing (Scotland) Act 2011 came in to force, and Home Supervision is now called Compulsory Supervision Order.

INFORMATION SHEET
Children



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The Department of Applied Social Science of the University of Stirling Research Ethics Committee reviewed and approved this research study.



What are their experiences of social work contact?

Children and young people who are on Home Supervision Orders (now called Compulsory Supervision Orders).

RESEARCHER:
Helen Whincup



WHAT DID CHILDREN and SOCIAL WORKERS SAY?

- The relationship between a child and their social worker is central. Children and young people told me that it was important to know their social worker "cares about" them. The way children know their social worker cares varies, but one child said that their worker would "never say she's too busy".
- Most children said that they like having someone who they can "talk to" and who will help if they are worried about anything.
- Some also want to "do" more things with their social worker as well as talking like going for a walk or having a meal.
- Sometimes social workers use big words which can make it hard to know what they are saying.
- Social workers talked about the different ways they try to help children.



- Social workers said they want to spend one to one time with children and young people but sometimes the amount of written work got in the way.
- Some of the buildings where social workers worked did not seem designed with children and young people in mind.



WHAT AM I GOING TO DO NEXT?

- I will send this information to social workers so they can pass it on to children and their parents.
- I have also agreed to speak to social workers about the key themes coming up from the research.
- As well as writing up my research and speaking about it at conferences I will tell social workers who are doing courses at the University of Stirling what children and young people have said is helpful.



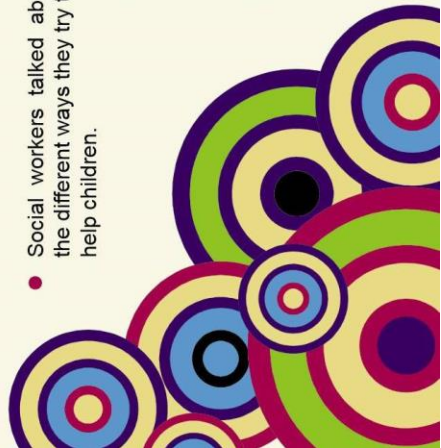
THANK YOU

Thank you to all the children, young people and professionals who participated. I am very grateful for your time and hope that the research will be of benefit to others.

Helen Whincup
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Stirling
FK9 4LA

helen.whincup@stir.ac.uk

The Department of Applied Social Science of the University of Stirling Research Ethics Committee reviewed and approved this research study.



Young people



INFORMATION ABOUT THE RESEARCH

My name is Helen Whincup. I qualified as a social worker in 1991 and worked with children, young people and their families from 1991-2004. I now work at Stirling University teaching social workers and managers and am also doing a PhD.

Although we know some things about what children and young people who are looked after at home think (for example, about going to Hearings) we don't know as much about what they find helpful when they have to meet with a social worker. I was interested in learning more and was given permission to speak to children and social work professionals in one Scottish local authority. The full details will be contained in my PhD, but I wanted to send this summary of the results to children, young people, their parent(s) and social work professionals.

First of all, **2** children, plus **8** social workers, and **6** managers helped me to develop questions.

Then, between January 2011 and May 2012 I talked to **6** children and young people (aged 6-15years) who were on Home Supervision Orders under s70 Children (Scotland) Act 1995.

I also spoke to **2** social work assistants, **6** social workers and **3** team managers (**11** in total).

Everyone I spoke to was given a different name so that when I wrote up what they had told me no-one would else would know who said what.

Since completing the interviews, the Children's Hearing (Scotland) Act 2011 came in to force, and Home Supervision is now called Compulsory Supervision Order.



INFORMATION SHEET
Young People



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The Department of Applied Social Science of the University of Stirling Research Ethics Committee reviewed and approved this research study.



Children and young people who are on Home Supervision Orders (now called Compulsory Supervision Orders).

What are their experiences of social work contact?

RESEARCHER:
Helen Whincup

WHAT DID CHILDREN, YOUNG PEOPLE and SOCIAL WORKERS SAY?

- The relationship between a child and their social worker is central. A key message from children and young people was that it was important to know that your social worker "cares about you". The way particular children know their social worker cares varied, but one child said that their worker would "never say she's too busy".
- Although most children and young people said that they value having someone who they can "talk to" and who will help with things they are worried about, several also wanted to "do" more things with their worker outside the house like going for a walk or having something to eat.
- Sometimes social workers use "big words" when they are with young people which are difficult to understand.
- Professionals talked about the value of spending one to one time with children and young people. One social worker said that this was "where my heart is".

- Social workers talked about the different ways they try to help children.
- Social workers said that sometimes the amount of "paperwork" gets in the way of being with children and young people. What seems to help them prioritise the time with children and young people is their sense of commitment, and working in a team where this is valued and expected by their manager.
- What I noticed as a visitor is that some of the buildings in which social workers are based did not seem designed with children and young people in mind.

WHAT AM I GOING TO DO WITH THE FINDINGS?

- This summary will be sent to social workers so they can give it to children and young people and their parents.
- I have agreed to speak to social work professionals about the themes coming up from the research so that they know what children and young people have said is helpful. As well as writing up my research for my PhD, journal articles, and speaking about it at conferences, I will share the findings with social workers and team managers undertaking courses at the University of Stirling.

THANK YOU

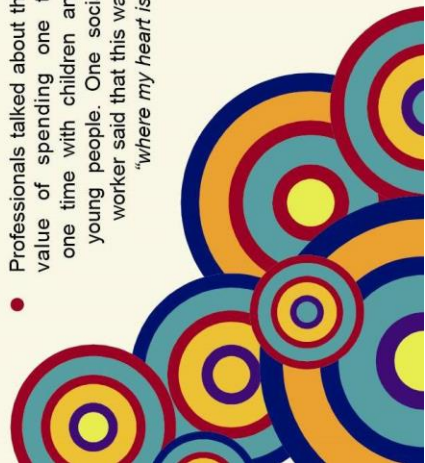
Thank you to all the children, young people and professionals who participated. I am very grateful for your time and hope that the research will be of benefit to others.



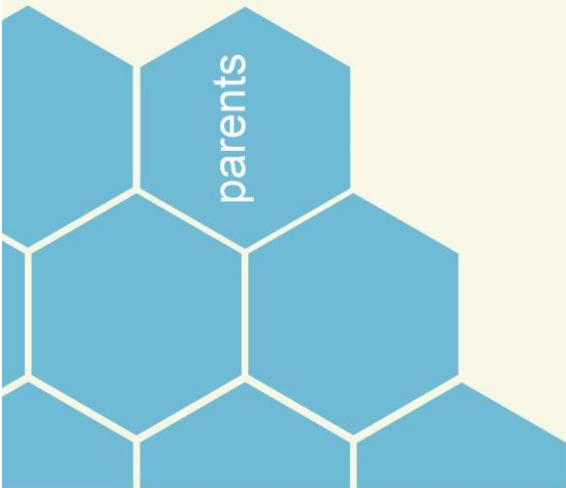
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The Department of Applied Social Science of the University of Stirling Research Ethics Committee reviewed and approved this research study.



Parents



INFORMATION ABOUT THE RESEARCH

My name is Helen Whincup. I qualified as a social worker in 1991 and worked with children, young people and their families from 1991-2004. I now work at Stirling University teaching social workers and team managers and am also doing a PhD.

I was interested in learning more about experiences of Home Supervision and was given permission to speak to children and social work professionals in one Scottish local authority. The full details will be contained in my PhD, but I wanted to send this summary to children, young people, their parent(s) and social work professionals.


First of all, **2** children, plus **8** social workers, and **6** managers helped me to develop questions.

Then, between January 2011 and May 2012 I talked to **6** children and young people (aged 6-15 years) who were on Home Supervision Orders under s70 Children (Scotland) Act 1995.

I also spoke to **2** social work assistants, **6** social workers and **3** team managers (**11** in total).


Everyone I spoke to was given a different name so that when I wrote up what they had told me no one would else would know who said what.

Since completing the interviews, the Children's Hearing (Scotland) Act 2011 came in to force, and Home Supervision is now called Compulsory Supervision Order.



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The Department of Applied Social Science of the University of Stirling Research Ethics Committee reviewed and approved this research study.



INFORMATION SHEET

Children and young people who are on Home Supervision Orders (now called Compulsory Supervision Order)

What are their experiences of social work contact?


RESEARCHER:
Helen Whincup



WHAT DID CHILDREN, YOUNG PEOPLE and SOCIAL WORKERS SAY?

- The relationship between a child and their social worker is central. A key message from children and young people is that it is important to know your social worker “cares about you”. The way particular children know their social worker cares varied, but one child said that their worker will “never say she’s too busy”.
- Although most children and young people said they value having someone who they can “talk to” and who will help with things they are worried about, several also wanted to “do” more things with their worker outside the house like going for a walk or having something to eat.

- Sometimes social workers use “big words” when they are with children which can make it difficult to understand what they are saying.

- Professionals talked about the value of spending one to one time with children and young people. One social worker said that this was “where my heart is”.
- 

- Social workers talked about the different ways they try to help children.
- Social workers said that sometimes the amount of written work gets in the way of being with children and young people. What seems to help them prioritise seeing children is their sense of commitment, and working in a team where this is valued and expected by their manager.
- What I noticed as a visitor was that some of the buildings in which social workers are based did not seem to have been designed with children and young people in mind.

WHAT AM I GOING TO DO WITH THE FINDINGS?

This summary will be sent to social workers so they can give it to children and young people and their parents. A similar summary will go to professionals.

I have agreed to speak to social work professionals about the themes coming up from the research so that they know what children and young people have said is helpful.

As well as writing up my research for my PhD, journal articles, and talking at conferences, I will share the findings with social workers and team managers undertaking courses at the University of Stirling.

THANK YOU

Thank you to all the children, young people and professionals who participated. I am very grateful for your time and hope that the research will be of benefit to others.



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Professionals

INFORMATION ABOUT THE RESEARCH

My name is Helen Whincup. I qualified as a social worker in 1991 and worked with children, young people and their families from 1991-2004. I now work at Stirling University teaching social workers and team managers and am doing a PhD.

Although we know some things about what children and young people who are looked after at home think about some things (for example, going to Hearings and being involved in other decision making forums) we don't know as much as we'd like to about their experiences of day to day direct work.

I was interested in learning more about experiences of Home Supervision from the perspectives of children, practitioners and team managers and was given permission to speak to children and social work professionals in one Scottish local authority. The aim of the research is to contribute to the knowledge base and inform practice. The full details will be contained in my PhD, but I wanted to send a summary to children, young people, their parent(s) and social work professionals.

2 children, plus **8** social workers, and **6** managers helped me to develop questions which were the basis for semistructured interviews.

Then, between January 2011 and May 2012 I talked to **6** children and young people (aged 6-15 years) who were on Home Supervision Orders under s70 Children (Scotland) Act 1995. I also spoke to **2** social work assistants, **6** social workers and **3** team managers (**11** in total).

Everyone I spoke to was given a pseudonym when I transcribed interviews so that when I wrote up what they told me, no one would know who said what.

Since completing the interviews, the Children's Hearing (Scotland) Act 2011 came in to force, and Home Supervision is now called Compulsory Supervision Order.



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The Department of Applied Social Science of the University of Stirling Research Ethics Committee reviewed and approved this research study.





INFORMATION SHEET

Children and young people who are on Home Supervision Orders (now called Compulsory Supervision Order)

What are their experiences of social work contact?

RESEARCHER:
Helen Whincup

WHAT DID CHILDREN, YOUNG PEOPLE and SOCIAL WORKERS SAY?

- A key message from children and young people is that it is important to know that your social worker "cares about you" and that this care is authentic. The way particular children know their social worker cares varied, but one child said that their worker would "never say she's too busy". The relationship between a child and their social worker is central, and is both a precursor to direct work, and a result of it.
- Although most children and young people said they value having someone who they can "talk to" and who will help with things they are worried about, several also wanted to "do" more things with their worker outside the house, including going for a walk or having a meal together.
- Direct work is a process. The children, young people and professionals who participated in the research gave examples of thoughtful direct work which was meaningful for those involved.
 - Sometimes social workers use "big words" when they are with children which can make it difficult to understand what they are saying.

- Professionals talked about the value of spending one to one time with children and young people. One social worker said that this was "where my heart is". They said the amount of 'paperwork' gets in the way of being with children and young people, particularly as this aspect of practice is more easily audited and measured by the organisation, whereas direct work is less tangible. What seems to help them to prioritise working with children is their sense of commitment, their view that it makes a difference, and being part of a team where there is a culture of direct work and where this is valued and facilitated by their team manager. Some also highlighted the role of pre and post qualifying teaching and learning.

- Although the Children's Services Plan notes that children are at the centre of the service, what I noticed as a visitor is that the buildings in which social work professionals are based did not seem designed with children and young people or direct work in mind.

WHAT AM I GOING TO DO WITH THE FINDINGS?

The full results of the research will be in my PhD thesis. You might not want to read all of this so this summary will be made available to social work professionals. A similar summary is available to give to children and young people and their parents.

I have agreed to speak to social work professionals about themes coming up from the research so that any implications for practice can be considered.

As well as writing up my research for my PhD, as part of a process of dissemination, I will write up the research for relevant social work journals/conferences and share key messages with social workers and managers undertaking courses at the University of Stirling.

THANK YOU

Thank you to all the children, young people and professionals who participated. I am very grateful for your time and hope that the research will be of benefit to others.



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