International Trends

The welfare state is now recognised as one of the defining features of advanced industrialised democracies, yet universally the welfare states of individual nations are showing remarkably similar signs of being in trouble as a result of increasing demands for services, fiscal stringencies and a questioning of the role of social protection – is it a safety net to protect the unfortunate in society or a trampoline to help people get back on their feet?

The child welfare system has not been immune to these wider changes, with the past three decades seeing massive shifts in both the need and demand for services, alongside the expectation that the outcome for service users meets the objectives of those who commission services. Around the world separate jurisdictions are struggling with issues such as: definitions of child abuse; orientation of the child welfare system – family preservation v child safety; reporting requirements and mechanisms; processes for responding to reports of maltreatment and concern; substantiation rates compared to the rate of referral; and the effectiveness of services for children and families.

Parton, Thorpe and Wattam have observed that “despite the differences in legislation and procedures, the patterns of filtering and decision making in the USA, Canada, Western Australia and the UK are remarkably similar. Thus, while there is an elaborate procedural overlay in the English and Welsh child protection system compared with Western Australia, and the USA has a mandatory reporting system, this does not have significant impact on the way the system operates nor on outcome. There are clear patterns of child protection intervention which are reflected in all four countries” (1997:11).

The Changing Face of Child Welfare in the United Kingdom

Over the past ten years a debate has arisen over the operation of the child protection system within the United Kingdom. This debate has been fuelled by:

- Increasing anxiety about the effectiveness of the system and its operation as a result of a series of high profile inquiries into the death of children who were
known to child protection services, and inquiries held into the large scale removal of children into public care in a number of different localities

- Research, often sponsored by central government, which highlighted the rising numbers of reports of child abuse without a corresponding rise in substantiation rates

- The reports of government audit bodies that found that whilst large numbers of children were being subjected to child protection investigations, only a small proportion received services, and usually only as a result of having their name added to a child protection register. Large numbers of other needy and vulnerable children, who were not at immediate risk of harm, were filtered out of the system without any offer of support.

- The increasing focus on the rights of individuals and in particular children

- Families ambivalence regarding contact with social workers – on the one hand they fear intervention by the state in their family; on the other hand they need practical support services as well as advice and counselling

The result of these converging issues within child welfare has led to:

- The introduction of ‘government by measurement’

- The issuing of guidance that requires all statutory bodies to provide services for children in need rather than just children in need of protection

- The commissioning of research to identify the types of need of different populations of children and to recommend ways of providing for these needs

- The introduction of a framework for the assessment of need for children and families that social services departments must implement

Thus the conceptualisation of the basis for the child welfare system has shifted from one of protecting children from their parents (the contractarian model), to one of working with parents to promote the well-being of their children (the communitarian model) (see Jordan and Jordan, 2000).

**Governance**

This change in the conceptualisation of the role of child welfare services has been closely entwined in the United Kingdom with the New Labour zeal for modernisation. The rhetoric of the Government stresses the need for collaboration (to identify what matters) as well as evidence (to discover what works) with the emphasis on improving the quality of services. In an effort to make child care systems better balanced, more efficient and more accountable, governments worldwide have paid close attention to the work of child welfare agencies. But control by prescribed measure is a highly politicised strategy and it is therefore important that professionals who operate the system, researchers who study it and families who are subject to it, find ways of expressing their voices. Given that the system is technical, bureaucratic and managerial in nature,
we need to find ways of ensuring its democratisation. The risk is that the system, as it has in the past, will become increasingly detached from the lived experience of service users and that dysfunctional patterns of practice will evolve as a result.

It is part of our own objectives as researchers, aside from increasing knowledge with regard to the operations of the child welfare system, to ensure that the widest range of information is available and that the quieter voices within the system may be heard. We have not chosen to theorize our presentation, save to observe that when we are able to discern similar processes at work in different countries we may safely presume that there are deeper structural forces at play which are to do with the relationship between the state and the family within democratised western states. There is a tendency within such states to seek to govern this relationship through social work agencies and to measure the process of this governance in statistical form. Whether this represents the McDonaldization of Social Work in the global village we are not qualified to say, but it might be a good point with which to begin a dialogue.

References


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ACHIEVING BALANCE IN RESPONSE TO CHILDCARE ISSUES

Since the high-water mark of child protection influence on the shape and breadth of delivery of services to children and their families in the early nineteen nineties, there has been a reining back in the United Kingdom on child protectionism as the defining feature of the states’ relationship to the family as mediated by social workers. Legislation, research and policy have largely driven this retrenchment. The Children Act 1989 established the legislative touchstone delineating the new balance between family rights and thresholds of state intervention. While research indicated that the child protection system may have identified and protected a majority of those children requiring this type of intervention (Gibbons et al., 1995), such gains were outweighed by the costs involved. These included, the alienation of families who were estranged from social workers as service providers as a consequence of their experiences (Cleaver and Freeman, 1995) and the inefficiencies apparent in the failure to develop and deliver services to children in need (Audit Commission, 1994). Since the mid nineteen nineties there has been an energetic and sustained effort on the part of government to develop and promote policies which challenge the influence of a child protection culture on management and social work practice, which has been perceived as distorting the balance of service provision to children and families. The alternative to child protection, as the overarching concept in childcare, is family support.

The attempted shift from a child protection to a family support orientation in the United Kingdom has become known as the ‘re-focusing debate’. The antecedents to the promotion of a shift in social work practice from an over concentration on child protection issues towards a recognition that much of that work might be better understood as, and reconstituted to be, family support work, have been thoroughly rehearsed elsewhere (Jack, 1997; Parton, 1997). It is now regarded as axiomatic that there should be a re-focusing of social work practice, the debate having moved on from why this is necessary to how this may be achieved. Some commentators (Parton, 1995; Pelton, 1998) have drawn attention to the constraints on achieving such changes in practice, pointing out that those childcare systems that attempt to both manage child protection risks and meet
the needs of children and families usually fail to achieve these dual goals. However, the thrust of government policy in the United Kingdom has been to integrate child protection and child welfare issues within a general promotion of the Parts of the Children Act 1989 which deal with the identification of children in need (Section 17) and the provision of supportive services to them and their families (Part III). In doing so the government have sought to restate the primary duties of local authorities, within the mandate of the Children Act 1989, as safeguarding children by promoting their welfare.

THE RESEARCH PROJECT

The overall aim of the project was to compare child protection social work with family support social work. The project has been concerned with examining the potential for rebalancing the childcare system through an investigation of decisions made by social workers, their patterns of practice, and the impact of these decisions and practices upon families. The specific objectives were, firstly, to compare how decisions are reached which determine what become child protection cases and what become family support cases. Secondly, to compare social work processes in child protection and family support cases. Thirdly, to examine the experiences of families in family support cases, in the light of the findings from the first two parts of the research project. The research reported here has been published in a series of articles in the British Journal of Social Work (Spratt, 2000, 2001; Spratt and Callan, 2003).

Part One The first part of the project examined the potential for increasing the number of cases conceptualised as ‘family support’ at point of referral, with a consequent reduction in child protection cases. A total of 17 senior social workers were asked to code 34 case vignettes as requiring either a child protection investigation or, alternatively a family support enquiry, and to give reasons for their choices. It was found that respondents disagreed in their categorisation of 94% of the vignettes. When all option choices made by the senior social workers were totalled it was found that more than half favoured family support enquiries. As 30 of the 34 vignettes used in the questionnaire represented actual referrals receiving child protection investigations, there appeared to exist potential for a significant proportion of such referrals to receive responses more in keeping with family support practices. However, from the comments made supporting option choices it was evident that respondents justified their choice of family support enquiries on the basis that there were no risks present, or if there were, these could be managed outside the framework of child protection procedures. There was scant mention of this route being a better one to meet the needs of families. We might speculate that such responses betray an underlying concern on the part of social workers to manage the risks involved in childcare work, and that technical redefinition of cases at point of referral may not fundamentally change the nature of social work processes in such cases.

Part Two The second part of the project sought to examine the social work processes evident in family support cases, to ascertain what these might reveal about the nature of practice in this area. This involved an examination of social work processes evident in family support cases and a comparison with those in child protection cases. One hundred and fifty four case files were examined and semi-structured interviews were carried out with 26 social workers. It was found that because most (four-fifths) family support cases are not risk free, social workers had developed practice responses that resembled those in child protection cases. Whilst a majority of the social workers aspired to work in ways that promoted the support of families in the context of partnership
relationships, they were also clear that a concern to manage risk was their first priority in such cases. We might argue that social workers cannot be expected to implement policies which promote family support perspectives without recognition, at governmental and organisational levels, of the inherent contradictions in the state’s relationship with the family which, while subjugated at policy level, are unavoidably expressed at practice level. The overall results of the research project at the end of it’s second stage thus called into question the premise upon which the re-focusing debate was largely based, i.e. that state intervention with families based upon the partnership ideals and service delivery principles of the family support model, would impact upon families in a fundamentally different way than intervention’s carried out within a child protection framework.

**Part Three** The third stage of the project, constituted an initial exploration of the experiences and views of parents’ who had been the subject of family support interventions by social workers. A larger scale study, based upon this study, is currently underway. None of the 12 families in the study had had previous contact with social services. It was found that referrals concerning these families contained potential or actual concerns in relation to children. Consequently, because social workers had to address these concerns then some of the elements of the social work process evident in child protection cases became evident in family support cases, albeit to a diminished extent. It was, however, apparent that the key determinants influencing the evaluation by parents of their referral experience were the attitudes and the performances of the social workers. Parents’ generally favoured social workers who were skilled in interpersonal communication; they were less impressed by social workers who were more bureaucratic in their approach, ‘going by the book’. We theorised that there were two styles of practice evident in family support cases. *Covert surveillance/high engagement*; most social workers quickly addressed issues of risk before subsuming such concerns within the context of a full engagement with the family. *Overt surveillance/low engagement*, some social workers prioritised the policing of child protection risks with only perfunctory attempts being made to engage the family.

**SOME CONCLUSIONS**

It is possible to reduce child protection investigations and increase family support enquiries, but statistical evidence of such change only tells us half the story. Family support cases still carry risk and social workers are keenly aware of this in their dealings with families. Most social workers appear to manage such risks within the context of relationship whilst others relay on procedure. The essential nature of social work with families and children is about managing risk and this helps explain why a culture and practice of social work based around the development and delivery of services has been slow to develop.

**REFERENCES**


Background

With the introduction of new child welfare legislation in 1991 (in England) and 1996 (in Northern Ireland) child care professionals have seen the emphasis shift from one of rescuing children from abuse and neglect, to supporting families in need in order to prevent crisis, family breakdown and abuse. Over the past ten years the government has been anxious to refocus professional efforts away from remedial to preventative interventions.

The government has set itself twin goals. Firstly, to reduce the numbers of children who need Looked After in the public care system through the provision of family support services. And secondly, through the Quality Protects programme to establish a clearer link between the objectives of the child protection system and the outcomes that are achieved for children and their families.

The objectives of the child protection system centre on:

- Reducing the child mortality rate as a consequence of having a system for identifying and protecting children at risk of significant harm.
- Preventing children identified as being in need of protection from experiencing repeated harm.
- Addressing the effects of the harm experienced by children on their development, and promoting their welfare resulting in improved psychological and social functioning and improved educational attainment.
- Addressing the needs of other family members so that they are in a better position to provide for the care of the child.

Yet it is clear from previous studies by Farmer and Owen (1995) and Devaney (1999) that for one quarter of these children the outcomes are poor – they remain subject to a child protection plan in excess of two years; they have multiple periods of registration; and/or they experience repeated harm whilst subject to a child protection plan.
The Study
Northern Ireland has eleven regional bodies providing statutory child protection services. On 31 March 2002 1,531 children had their name on the child protection register in Northern Ireland (a rate of 30.7 per 10,000 children), with the largest categories being for Neglect (625), Physical Abuse (359), Emotional Abuse (212) and Sexual Abuse (159).

This study sought to explore the characteristics and careers of those children where outcomes are deemed as poor, by studying the children from the time of inclusion of their name on a child protection register in 1997 up until 1 October 2002. In total 212 children from four of the statutory agencies were included in the study, which included a secondary data analysis of social services case files; in-depth interviews with a sample of thirty-six parents; in-depth interviews with thirty-six child welfare professionals; and interviews with senior managers with responsibility for policy implementation in the area.

Practice Issues
The families could be characterised as fitting one of three categories:

**The Violent Family** – children subject to excessive corporal punishment; children deliberately hurt; children witness to significant domestic violence between the adults in the household.

**The Adult Lifestyle Family** – parents abusing alcohol and/or drugs; significant parental conflict; parents suffering from mental health problems that impact significantly on their children's development.

**The Sexual Abuse Family** – children who have been sexually abused through the negligence of their family; families who minimise concerns about the sexual abuse of their child; families who allow on-going contact between their child and a confirmed/convicted sex abuser.

Practitioners found it most difficult to work with parents who were in denial that a problem existed, such as an addiction, or who minimized the impact of adult issues on their child, for example, domestic violence. The social work role became one of policing adherence to a child protection plan rather than engaging parents in therapy. This was compounded by a lack of resources in key areas such as Child & Adolescent Mental Health Services.

The most skilled practitioners were those who could engage parents early in the process and negotiate a child protection plan that sought to balance the protection of the child with providing support services that the family recognised they needed.

System Issues
The current system relies heavily on procedures and systems developed thirty years ago aimed at co-ordinating professional information sharing and intervention. In reality social services are left to assess and manage the situations, often experiencing little support from other professionals who view child protection as important, but peripheral to their daily work. Access to specialist services for parents and children is therefore often difficult, which either allows problems to escalate or alienates parents.

There is a need to renegotiate multi-disciplinary roles to focus more on joint working in addressing the needs of children and families, which may require a change in the structures through which services are delivered (see the outcome of the Climbie Inquiry
Alongside these issues, recruitment and retention difficulties with qualified social workers is negatively impacting on both the throughput of work and quality of practice, with a discernible decrease in the average level of experience of practitioners. As a consequence, inexperienced staff are dealing with larger workloads with the result that the quality of intervention as experienced by service users is often poor.

Policy Issues
The Government is committed to reducing the numbers of children needing public care whilst simultaneously improving the standard of protection afforded to the increased numbers of vulnerable children living at home with a child protection plan. For example, the Quality Protects programme (Department of Health, 2002) has as one of its objectives:

C21 The percentage of children de-registered from the child protection register during the year who had been on the register continuously for two years or more.

The rationale for this indicator, against which social services departments are assessed and compared, is that registration should ensure that children who are likely to suffer harm are protected and that they and their families receive services to bring about the required changes in the family situation within as short a timescale as possible. Professionals, the child and their family should be working towards specified outcomes that should lead to the child’s name being taken off the child protection register within two years. Therefore the figure for this objective should be low (i.e. 10% or less of the total number of de-registrations). Yet both in this study and other studies (Oliver et al., 2001) there is little agreement between senior managers about whether this measure is a good proxy for the effectiveness of the system. Higher percentages of children maintained on the register in excess of two years may reflect the flipside to children being maintained at home in difficult circumstances rather than be admitted to state care.

Conclusions
The drive to link objectives to measurable outcomes is to be welcomed as one strand of the process of making services more effective and responsive. This information though should be used to inform rather than dictate the nature of service provision and delivery, as the processes at work are multi-layered and complex. The interpretation of policy by practitioners as refracted through the lens of local systems means that the ascribed meanings of children, their families and the professionals working in the system must be explored to better understand the impact and outcomes of the child protection system.

References