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What Do Child Protection Social Workers Talk about When They Talk about Helping Children and Families? An Observational Study of Supervision

David Wilkins, Charlotte Pitt & Samia Addis

Abstract

Social work is often described as a helping profession. Yet in the context of child protection services, the kind of 'help' on offer is not always welcome. Relatively few parents or children request the assistance of child protection services, and child protection investigations are often highly stressful. Workers and family members may have different ideas about the nature of the family's problems, and the type of support they need. So, how do child protection social workers think they are helping children and their families? In this paper, we report an analysis of audio-recordings of supervision case discussions, through which we explore what social workers talk about when they talk about helping families. In some cases, workers did not know how they were helping, or even if they were. Other times, workers said they were helping by developing positive relationships, addressing parental behaviour change, coordinating with other services, and fulfilling their statutory duties. We reflect on these findings in relation to the nature of 'help' in child protection services, practice epistemologies and Hasenfeld's typologies of power.

Keywords: child protection; epistemology; help; outcomes; power; supervision

Introduction

Social work is called a helping profession (Mishra and Bandela 2015). According to the global definition, it 'promotes social change and development [based on] principles of social justice, human rights, collective responsibility and respect for diversities' (Sewpaul 2014). Student social workers are often motivated by their desire to help people (Bozek, Raeymaeckers, and Spooren 2017) and join the profession to promote social justice (Bhuyan, Bejan, and Jeyapal 2017). Yet it is also true that for many families, the kind of 'help' on offer from child protection services can feel anything but. In a UK survey, parents (n=14500) with experience of social services were less satisfied than for any other comparable type of public service (Wilkins and Forrester 2020). Other studies have reported similar concerns, with parents feeling their concerns are often dismissed and that workers have poor interpersonal skills (Tilbury and Ramsay 2018). Children have also reported being unsatisfied with services (Kriz and Roundtree-Swain 2017). Given these findings, the question of how child protection social workers think they are helping children and families is an important one.

Background

In this paper, we explore from the perspective of the worker – how are you helping the family, and what outcomes are you working towards? We do so while acknowledging there are many existing ideas about how social workers help people. For example, they may provide practical support, within an anti-poverty framework (Morrison et al. 2018). They may use strength-based approaches to mobilise internal motivations and resources (Miller and Rose 2009). They may use various psychologically informed approaches, including Cognitive Behavioural Therapy (Cigno and Bourn 2017) or attachment theory (Shemmings and Shemmings 2014). These can help by changing the way people think or feel, and ultimately how they behave. Other approaches, such as groupwork (Mullender, Ward, and Fleming 2013) or systemic practice (Goodman, Trowler, and Munro 2011), help by changing relational patterns of behaviour. Many social workers also use task-centred approaches, which help by breaking down seemingly intractable problems into a series of more manageable steps (Doel 2002).

The Nature of Help in Social Work

Yet the nature of help in social work is not straight-forward, especially in child protection services. In simple terms, help means providing someone with assistance, and the giving of material or financial aid. For example, the parents of a disabled child might be provided with direct payments, to employ a carer (Blyth and Gardner 2007). While this form of help is often welcome, the global definition of social work demonstrates a greater ambition to do more. For social work, ideas of strength-based practice (Graybeal 2001), empowerment (Lee and Hudson 1996) and liberation (Evans 1992) suggest a more complex view of helping (see also Fook 2016). It might even be suggested that providing direct payments is not truly a helpful kind of help, if it creates a dependency between the family and the state, mediated by a social work gatekeeper (Sowbel 2012).

The Nature of Power in Social Work

In child protection, one of the most important – and helpful – things a social worker might do is decide that the family do not need, or should not be made to have, state intervention against their wishes. This kind of ‘help’ recognises the freedom that all parents have to raise their child/ren in a manner of their own choosing, as long as they are not causing or allowing significant harm (Jordan 2012). It also acknowledges the power that social workers have as state actors. Hasenfeld (1987) says that to understand how social workers help people, we need to understand these power dynamics. The more help the family needs, and the more resources the worker has, the greater the power difference between them. The question, for Hasenfeld, is not

how can we reduce or eliminate power differences? but how can workers use their powers to help people?

Hasenfeld identifies four typologies of power in social work. First, social workers have expertise, derived from their knowledge of theory and research, and of how professional systems work. Second, they have referent power, meaning interpersonal skills, used to develop positive working relationships and influence how people think and behave. Third, they have legitimate power, drawing on dominant cultural values to impose conformity on family life. And fourth, they have power over the allocation of resources, to which families and on what basis. Hasenfeld's typologies are useful for understanding how and why the provision of help in social work is made more complicated not only by the profession's ambitions in relation to empowerment and social justice, but also by the state-mandated role of child protection work.

The Nature of Knowledge in Social Work

Finally, when considering how child protection social workers think they can help families, we need to ask how they know. In social work, it is often not possible to simply measure the 'outcome' of any intervention, not least because the kind of outcomes that may result from child protection work is not inherently right or wrong. A child coming into care is a measurable outcome, but only on an individual basis can we judge whether this would be considered a 'good' (proportionate, necessary, reasonable) outcome or not. In addition, social workers encounter a wide range of different issues in their work. Part of their role is to determine the seriousness of any problems that may exist (and if necessary, to persuade family members that something needs to change). This is a very different role from that of a counsellor, for example, in which engagement between the professional and 'client' is more often on a voluntary basis, and where initial agreement about the nature of 'the problem' is easier to establish (Forrester 2017). The question, understood more broadly, relates to social work epistemology – how can workers know about (the impact they are having on) the social world around them, by what methods and with what limitations (Hothersall 2016; Aymer and Okitikpi 2000)?

Research Questions

In this study we analysed audio-recordings of social work supervision sessions to address the following research questions:

- i. What questions about helping and outcomes do supervisors use in case discussions?
- ii. How do social workers respond to them?
- iii. What do these responses tell us about contemporary notions of help in child protection?

Methodology and Methods

The study was based in one English local authority, covering a large city and metropolitan area, and with an ethnically diverse population. The locale has high levels of economic inequality and unemployment. Recent years have seen an increase in service demand, including rising numbers of referrals, child protection plans and children in care. We worked with four supervisors from one child protection team (North), providing them with training and support to deliver 'outcome-focused supervision'. We also worked with a second team (South), who provided supervision-as-normal. Ethical approval for the study was provided by Cardiff University School of Social Science' ethics committee in May 2018 (SREC/2765).

Methodology

This paper describes an observational study of supervision, undertaken from a stance of theory-oriented evaluation (Weiss and Weiss 1998). Theory-oriented evaluations use in-depth descriptions of practice to develop mid-level theories about how different elements relate to each other. As a primarily descriptive study, our intention is not to evaluate the social workers or supervisors involved. Rather, we contribute to a growing body of empirical (and observational) knowledge about supervision, while acknowledging the importance of developing theories that are grounded in the realities of day-to-day practice (Stepney and Thompson 2021).

What Is Outcome-Focused Supervision?

In the late 1980s, Harkness and Hensley (1991) completed an experimental study of supervision, involving a small group of social workers (n = 4) in the USA. For 8-weeks, workers were provided with supervision-as-normal. For another 8-weeks, they were provided with 'client-focused supervision'. To qualify as client-focused, at least one-third of the questions posed by the supervisor had to relate to client-definitions of helpfulness and outcomes (Table 1).

When workers were provided with client-focused supervision, their clients (n = 168) reported greater satisfaction in relation to goal attainment, worker helpfulness and the worker-client relationship. Inspired by these results, we sought to adapt the model for the English context via a small pilot study. We worked with four supervisors in the North team, for whom we provided two introductory workshops and six-monthly action learning sets (facilitated by the lead author). In the workshops, we reviewed the findings from Harkness and Hensley's study, and adapted their approach, resulting in an amended list of questions (Table 2). (We also re-named the approach outcome-focused supervision.) We asked the supervisors to use as many of these questions in their subsequent supervision case discussions as they felt would be useful.

Sampling

Having recruited four supervisors from each team (North and South), we then recruited families. Any family was eligible, if at least one child had either a child in need or child protection plan. In total, we recruited 21 families (North 1/4 11; South 1/4 10), who agreed we could audio-record supervision discussions in relation to their child/ren. Each participant in the study was allocated a research code (TM for supervisors, SW for social workers, plus a random two-digit number). All family names and other potentially identifying details have been changed.

Data Analysis

We collected audio-recordings of supervision case discussions between May and September 2019. These were transcribed by an independent company. One researcher, not otherwise involved in the study, used the transcripts to identify every question asked by the supervisors. Each question was independently coded by the three authors of this paper, without knowing whether it originated from the North or South teams. This ensured we were unbiased in our coding of whether the question was outcome-focused or not. To qualify as outcome-focused, the question had to be identifiable from the list in Table 2. In cases of disagreement, majority coding was used. The questions were then organised back into their respective transcripts, before we examined how workers in the North team responded to outcome-focused questions, using recursive abstraction. As described by Polkinghorne and Arnold (2014), this involves a sequential process of paraphrasing, coding, and developing themes (Table 3).

Findings

We present the results of our analyses, starting with an overview of outcome-focused questions employed in supervision, and then how workers responded to them.

Which of the Outcome-Focused Questions Did the Supervisors Use More or Less Frequently?

In the North team, the most frequently used questions were 'What does the parent or child want help with?' and 'What else could you do to help the parent or child?'. The least common questions were 'How would that work?' and 'Does the parent or child say that would work?' (Table 4).

How Did Social Workers Respond to These Questions?

When exploring how social workers responded to these questions, we focused on two aspects – (a) the content of their answers and (b) their epistemic claims.

Following the process of recursive abstraction, the 11 outcome-focused questions (Table 2) were combined into three themes, based on the workers' responses (Table 5) – (i) the nature of help, (ii) defining outcomes and (iii) questions too difficult to ask or answer.

The Nature of Help in Social Work

For questions about the nature of help, supervisees responded in five ways – by talking about service coordination, fulfilling their statutory duties, engagement and relationship-building, parental behaviour change and not doing things (Figure 1). First, they said that helping families meant coordinating with other services. This frequently involved housing or financial problems. One worker said, 'you know, the benefits to be sorted and the housing' (SW05). Another said, 'I'm chasing up housing' (SW31), while a third talked about providing 'support around the family's financial situation, which is pretty catastrophic' (SW08). Workers also spoke about making referrals to other services and obtaining funding for these. One worker talked about 'funding for Gabriella to attend nursery' (SW43), and another about '[going] on parenting courses' (SW31). Another worker said she had agreed with the mother that 'she needs to be referred to Alcohol Services' (SW8). One worker recognised that their role involved 'mostly coordinating the work [of other agencies]. I don't actually do any[thing] practical' (SW05).

Second, supervisees referred to fulfilling their statutory duties. This included making home visits – 'I go and see them once every ... two weeks, just do my usual statutory checks' (SW05). It also included 'monitoring [the] situation' (SW28) and ensuring care plans were in place – 'I've got a child in need plan which was formulated by the previous social worker' (SW41). Other workers talked about assessments, including 'going out and doing the pre- birth [assessment]' (SW31) and '[starting] the parenting assessment with them' (SW48).

Third, workers articulated the importance of engagement and relationships. Workers talked about mothers (not fathers) being 'very keen to engage' (SW43), about listening skills – 'I'm just sitting there letting her talk, but by letting her talk, I'm getting my information' (SW24) – and about 'building relationships' (SW49). Some workers specified the type of relationship they were aiming for:

I'm just trying to build that working relationship with her at the moment, [so] that she can, you know...develop that element of trust in me, in that relationship, so at the moment, it's about her and, you know, taking an interest in what she likes (SW48).

Fourth, workers talked about parental behaviour change, most often in relation to alcohol or substance misuse. One worker said she was helping a mother by '[identifying] that alcohol is very much used as a coping mechanism for stress. So, dealing with talking about different ways to address that...which she's now doing' (SW08). Others talked about the prospects for future work – 'For them both to be, erm, substance free' (SW48) and 'Help to get him clean, yeah, to be free from, erm, substances'. Another common behaviour change issue was parenting skills. For example, 'just ensuring that the routines remain child-centred, erm, because with five children...you know, it is quite difficult for them to maintain routines' or 'they know that they need to ensure the children get to school on time, that they're fed and they, they're erm, they're dressed more appropriately' (both SW28). Some workers talked about domestic violence – 'I'm gonna do quite a lot of work with her around choices and risky adults because that is my, my concern, is around her ability to, to recognise risky adults' (SW31).

Finally, some workers talked about helping by not doing things. This often meant ending their involvement as quickly as possible. One worker talked about 'getting rid of [social services], I think is ultimately their goal. They don't want a social worker in their lives' (SW43). Another said the parents wanted help to keep 'baby in their care' (SW31). Some said the parent did not want any help – 'He says he's fine' (SW49).

Defining Successful Outcomes

In response to questions about defining successful outcomes, workers responded in five ways – by talking about parental risk factors, agreement about concerns, the need for stability, better family relationships and child-related outcomes (Figure 2). First, workers identified improvements in relation to parental behaviour or well-being. For many, this related to alcohol or substance misuse – for example 'Mum is maintaining, you know, her abstinence from, erm, substances' (SW48) and 'I mean, we got a successful outcome with ... mum remaining alcohol free' (SW49). For mental health problems, workers referred to unspecified improvements, as well as more tangible examples. One worker talked about 'father's mental health is so much more improved now. Um, and visibly, he looks so much better' (SW31), while another said that 'Maria works really well with her GP to manage her mental health, she goes regularly for check-ups and review of medication' (SW43).

Second, workers talked about the positive outcomes of engagement, including parental recognition of professional concerns, and agreement with the plan. Workers talked about parents 'understanding what the concerns are' (SW31), and about '[having] the same list of what the problems are' (SW8). One worker gave an example of when she had talked to two parents about outcomes, and what might happen if they did not engage and recognise concerns:

[I] had quite a frank discussion them and I said, 'Listen, you know, I'm not planning at the moment on removing your baby, but that's not to say that that's not where it will go if you don't engage', and this, that and the other. 'But I, I want to make sure the supports in place for you and stuff'. (SW31).

Third, workers talked about the need for stability. For example, 'I think no more police referrals regarding domestic abuse would be great. You know, for a period of time. A good six months would be great, to just kind of know that the work that's been done has actually been absorbed' (SW5). Other workers talked 'monitoring their situation because we have had children's services involvement ... over several years' (SW28).

Fourth, workers talked about the importance of better family relationships. For example, 'a successful outcome would be the family home being a happier place to live' (SW43) and 'the home environment is much more settled, calm, peaceful and relaxed' (SW44). Finally, workers referred to child-related outcomes, including improved access to services. For example, 'Henry's at nursery..., that was a positive...and mum was supported to kind of get into that routine' (SW5). Other workers talked about parents being more consistent with the child – 'the children have clearer boundaries and routines and they're receiving that consistent guidance' (SW44).

Questions Too Difficult to Answer

In response to questions too difficult to answer, we cannot provide examples from the transcripts – because workers struggled to answer these questions. When supervisors asked, workers tended to give brief and limited responses, such as 'yes, I'd say so'. One worker said they would 'discuss it at the next core group meeting' (SW43) but added nothing further.

Epistemic Claims to Knowledge

We now turn to the epistemic nature of these responses – what claims to knowledge did the workers make? Or, how did they know they were helping? These can be categorised in four ways. First, workers said they knew the answer because of something they had directly seen or heard.

This is an example of traditional empiricism, a phenomenalist account of knowledge based on experiences and sensations (Hempel 1952). For example (emphases added) – ‘Yeah, when I’ve spoken with Davina, she has said that she would want a nicer house’ (SW28), ‘He has mentioned rehab’ (SW48) and ‘I observed yesterday, she said that Sita is very emotional’ (SW41). Despite these examples, it was rare to hear workers talking directly about what parents or children wanted. As described below, workers were more likely to say what they thought ‘mum would say’ (SW5).

Second, workers said what they thought to be true, based on available information. This is an example of deductive reasoning, whereby information is used to reach a (new) conclusion (Goswami 2011). This often involved some speculation about what a parent might say. For example (emphases added), ‘I think that he would say he's been able to look at his behaviour’ (SW43) or ‘I think they would – they know that they need to ensure the children get to school on time [and] that they’re fed’ (SW 28). Some workers expressed a degree of uncertainty. For example, ‘I could be totally wrong ... ’ (SW24). Such deductions may indicate the worker’s depth of knowledge about the family, as well as in some cases a lack of direct knowledge about what parents and children have said.

Third, workers talked about knowing via intuitive means, a form of gnostic epistemology based on subjective, non-rational, forms of inner knowledge (Urban 2019). For example, ‘my gut’s telling me’ (SW24). Finally, in rare cases, workers expressed a lack of knowledge. For example, ‘I don't know..., but we can give it a try’ (SW31) or ‘We can ask’ (SW49).

Discussion

What do these responses tell us about the nature of helping and defining successful outcomes in child protection services? In this section, we consider this question, before reflecting on the nature of social work practice epistemology, and the relevance of Hasenfeld’s typologies of social work power.

The Nature of Helping and Defining Success in Contemporary Children’s Services

Perhaps the most striking aspect of these findings is their relatively narrow conceptions of help. The global definition of social work refers to social change and justice, human rights, addressing life challenges and enhancing well-being (Ornellas, Spolander, and Engelbrecht 2018). How these ideals can be operationalised into the messy reality of contemporary child protection practice is not obvious. In discussion with their supervisors, the workers in our study referred to coordinating services, completing assessments, monitoring families, parental behaviour change,

and closing cases as soon as possible. No doubt some of these things can be related to the global definition. For example, closing a case as a form of social justice, if there is no need for ongoing state involvement. And helping a parent abstain from substance misuse will certainly enhance their well-being. Nonetheless it is hard to avoid noticing that explicit references to social change, human rights and social justice were absent. As, indeed, were references to strengths-based practice, or empowerment, where the 'help' being provided is not reckoned in terms of what the professional can do for the other person, but what the person can do for themselves. While in adult services, there is a relatively stronger narrative about strengths-based practice, especially in relation to the Care Act 2014 in England, this is less evident in relation to children's services, at least insofar as statutory guidance is concerned.

On the other hand, what can we reasonably expect? Child protection social workers operate within the limits of local authority policies, while coping with rising demand and significant budget cuts (Local Government Association 2017). Here, we see echoes of the notion that poverty is 'too big to tackle and too familiar to notice' (Morris et al. 2018, 370). Perhaps social justice is also 'too big to tackle and too familiar to notice'. Having said this, in fact we did hear some workers talking about poverty. They knew families were often living in deprivation and did what they could to help. Yet they did not see anti-poverty work as the solution to the problems they were concerned about. Poverty was not invisible exactly, but it was quite transparent.

Social Work Epistemology

Being a social worker brings with it formal expectations of having certain knowledge (Department for Education 2018). And there are myriad informal expectations too. In general, when asked a question, especially by your supervisor, you are expected to answer (Schegloff 2007). When asked 'What does mum/dad/the child want help with?', there are (at least) three ways of responding. The social worker could report information directly ('mum/dad/the child said they want help with...'), acting as a conduit. Or the worker could deduce the answer based on other knowledge ('Based on what they've said previously and what I've observed, I think mum/dad/the child want help with ...'). Here, the worker has a more active part in constructing the answer and may be seen to perform their professional role more clearly. They are not a mere conduit but have provided some analysis. Or the worker could speculate, by drawing on knowledge less directly related to the question ('I don't know, but I hope it would be in relation to ...').

Mostly in our transcripts, we see social workers drawing on deductive forms of reasoning. They had empirical knowledge about the family and used this to inform their responses. But rarely did they make direct empirical claims – 'I know what mum/dad/the child wants help with because

they said (this)' – even though such responses would be conversationally acceptable. This could suggest the absence of such knowledge, that workers do not know what parents (or children) want help with. But it might also suggest that, even when they have such knowledge, workers prefer to 'perform' their professional role by presenting their own analysis alongside their direct knowledge.

There is however a fourth way that workers could respond to such questions – by acknowledging their lack of knowledge ('What does the parent or child want help with? I don't know'). This did not happen explicitly in any of our recordings. When it did happen, it was coupled with a stated intention of future remedial action ('What does the parent or child want help with? I can ask at the next meeting'). This dispreference for not-knowing is hardly unique to social work (Shattell 2004; Goffman 1955). No doubt, the supervisors in this study (and supervisors generally) would say they have no issue with social workers expressing a lack of knowledge. Yet in practice this did not happen. This might be because social workers often (or always) do know things. But it might also be because they do not want to adopt a position of not-knowing. If so, this could give the supervisor (and reflect to the worker) a false sense of what is really known about the family. If nuanced differences in epistemology between 'Dad has said', 'Dad would say' and 'Dad knows' are not examined, then it might be assumed that direct conversations between the worker and family have taken place about outcomes and helpfulness when this is not so. By providing some information, if not exactly answering the question, the supervisor and worker may inadvertently fix a representation of the family that does not correspond with their actual views (Hall 1997). We also note that the social workers, when responding to questions about outcomes, often referred to proxy indicators, particularly when called upon to provide tangible evidence. For example, there being fewer police callouts to the home as a proxy indicator for a reduced risk of domestic abuse. When aiming to judge something as often intangible as 'significant harm' to a child, proxy indicators are not only useful, but may also be the only kind of evidence available. If you are worried about physical abuse, the child having no bruises or other injurious marks may well be a positive sign that they are experiencing less or no more abuse (of that type). Yet in other cases, the harm being caused will never be directly observable. Consider North's evocative use of the phrase 'bruises on the soul' in relation to emotional abuse (2019). For domestic abuse, a reduced number of police referrals could be a sign of increased harm, if it happens because the perpetrator has restricted the ability of the victim to call for help. Of course, the social workers here were only too aware of these complexities, and of the limitations of the evidence upon which they often had to rely.

Hasenfeld's Typologies of Social Work Power

Finally, we consider our findings in relation to Hasenfeld's (1987) typologies of power. Most often, we observed social workers drawing on their expert power (e.g. coordinating with other services) and their referent power (e.g. developing positive working relationships,). They referred less to their powers of legitimacy or resources, the latter of which Hasenfeld considered to be the primary source of their power. Why might this be the case? Certainly, more than a decade of cuts to local authority budgets have severely impacted the availability of resources (Webb and Bywaters 2018; Webb et al. 2021), and by so doing has clearly lessened the ability of social workers to help people (Pentaraki 2019).

Limitations

The study has several limitations. These include a lack of generalisability, based on the small sample and the siting of the study within one local authority. We do not know how comparable the supervisions we observed might be with other authorities, although there is some evidence to suggest it is not entirely atypical (Wilkins, Forrester, and Grant 2017). We also focused on the views of the social workers involved and not the views of parents or children. Not because we think the views of families are less important, but because of the nature of the data we had available and our desire to understand how workers responded to questions about help and outcomes. In a future paper, we intend to focus on parent-defined goals and to compare these with social worker-defined goals on a case-by-case basis.

A strength of the study is that we looked in detail at naturally occurring conversations and explored how social workers talk about helpfulness and outcomes, not in research interviews, but during everyday conversations with their supervisors.

Conclusions

When considering what social workers talk about when they talk about helping and outcomes for families, we see both humility and honesty. Social workers know that they cannot help every family, because some families do not need help, because the problems they encounter are too severe, and because they do not have the resources available to make a difference. We have argued that one effect of austerity has been to reduce the power that social workers have to help families and say now that this may have resulted in them relying on other, less supportive, forms of power, such as procedural coercion. The global definition of social work remains relevant to this practice context – yet we must (also) acknowledge that the reality often falls far short of these ideals.

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