

'Revolutionizing' Participation in Child Protection Proceedings

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Abstract:

This thesis explores how English child protection proceedings embed meaningful participation. The collection and interpretation of wishes and feelings during statutory social work practice (s.53 Children Act 2004) should give insight into the child's lived experience, as well as highlighting their opinion of the impact of social work on their lives. However, with no statutory, participatory social work model currently in place, children are missing opportunities to comment on decisions made for them, by adults, at all stages of the child protection process.

Phase One comprised of semi-structured qualitative interviews and focus groups with parents, social workers and participation workers from one local authority. The findings revealed innovative social work practice taking place, along with examples of how practitioners and parents balance protection with participation. However, all research participants identified gaps in both service provision and their personal understanding of (or commitment to) participation. Emerging themes such as the imbalance of power, knowledge and application of social work legislation, relationship building, advocacy, the presence of the child in decision-making forums and the challenges / appropriateness of sharing information with children led to the development of a new model for participation in child protection proceedings.

Creative, semi-structured interviews with children aged 8-12 years, who were the subject of a child protection plan and living at home with their parents, were the focus of Phase Two. Whilst most of the participating children shared how much they appreciated their social worker, all indicated a breakdown in their ability to participate, particularly regarding the amount and type of information shared between the practitioner, the parent and the child. The child's experience of child protection proceedings, and their understanding of their own child protection plan, further tested and validated the usefulness of the newly designed participatory model.

Using the work of Bourdieu, this thesis reflects on the field of child protection; the challenge of sharing power in a social space where service user presence is involuntary. What becomes clear is that, despite growing amounts of social work research and literature, there remains little guidance for social workers (particularly newly qualified social workers) to routinely, inclusively and knowledgeably embed participation into their daily social work practice. This thesis therefore aims to provide practical responses to service user and practitioner dilemmas, and bridge the gap between research and practice.

Contents

Chapter 1: Introduction	13
Chapter 2: Literature Review	27
2.1 Introduction:	27
2.2 “Your name’s not down...you’re not coming in”	29
2.3 Participation in decision-making forums.....	32
2.4 To share or not to share?	38
2.5 Advocacy	39
2.6 Relationship Building	41
2.7 The effects of the political landscape	44
2.8 Parental Participation	47
2.9 Summary	52
Chapter 3: Methodology	54
3.1 Introduction	54
3.2 Theoretical framework.....	55
3.2.1 Social space, capital and habitus	55
3.2.2 <i>Illusio</i>	57
3.2.3 Structural objectivism and <i>doxa</i>	59
3.3 Analysis: children as active research participants	61
3.4 Data analysis	63
3.5 Design of the interviews	67
3.5.1 Design of the child participant interviews	67
3.5.2 Design of the parent participant interviews	70
3.5.3 Design of the SW participant interviews	72
3.5.4 Design of the Participation Worker participant interviews	73
3.6 Sampling	74
3.6.1 Children:	74
3.6.2 Parents:	75
3.6.3 Social Workers:	75
3.6.4 Participation Workers:	76
3.7 Gatekeeping	76
3.8 Summary	78
Chapter 4: Methods	80
4.1 Introduction	80

4.2 Participant selection – parents and children	80
4.3 Outreach to Parents and Children	88
4.4 Recruitment of social workers and participation workers	92
4.5 Ethical guidelines	92
4.6 Summary of Participant Recruitment	93
4.6.1 Social Workers:	93
4.6.2 Participation Team:	94
4.6.3 Parents:	94
4.6.4 Children:	95
4.7 Reflection on Phase One methods	96
4.7.1 Disclosure of positionality	97
4.7.2 Design of the Diamond Ranking Exercise	97
4.7.3 The vulnerability of service user participants	98
4.7.4 The design of the child participant interviews	99
Chapter 5: Findings and Discussion - Phase One	100
5.0 Introduction	100
5.1 Participant Introduction	100
5.1.1 Parent Participants	101
5.1.2 Social Workers	101
5.1.3 Participation Team (PT)	103
5.2 Participation; understood, embedded or after-thought?	103
5.2.1 The jigsaw of participation; when roles collide	111
5.2.2 Summary	117
5.3 Wishes and Feelings; the progression towards substantive practice	117
5.3.1 Age appropriate practice	117
5.3.2 Developing relationships with children; the initial meeting	120
5.3.3 The skills and experience of practitioners - it's not child's play!	124
5.3.4 Summary	125
5.4 Advocacy	126
5.4.1 Whose interests are being served? The debate on independence	127
5.4.2 Parental Perception of Advocacy	131
5.4.3 Summary	134
5.5 Relationship building	135
5.5.1 The Silenced Child	136

5.5.2 Non-acceptance of the 'risk of harm'	141
5.5.3 Powerfully positive parental relationships	147
5.5.4 The Child's Right to be a Child	149
5.5.5 The voice of the child; legislation versus practice	152
5.5.6 Summary	159
5.6 Decision-making	160
5.6.1 Perceptions of Restorative Practice in CP social work:	161
5.6.2 Family Group Conference (FGC)	165
5.6.3 The child's ability to effect change	168
5.6.4 The child's experience of child protection conferences (or lack of); a practitioner perspective	171
5.6.5 Parents' perception of case conferences	177
5.6.6 Promoting participation; proposing a way forward for LA1	181
5.6.7 Child participation within Core Group meetings	184
5.6.8 Summary	188
5.7 Information sharing	189
5.7.1 How accessible is the child's SW?	189
5.7.2 Age appropriate information sharing	191
5.7.3 Do the children know they are on a child protection plan?	194
5.7.4 My child reads their child protection plan and the minutes of meetings	196
5.7.5 Summary:	201
5.8 Conclusion: Developing a new model for practice:	202
Chapter 6: Methods - Phase Two	208
6.1 Introduction	208
6.2 Designing Phase Two	208
6.2 Inclusion Criteria - child participants	210
6.3 Recruiting Local Authorities	210
6.3.1 Response:	211
6.4 Levels of Gatekeeping	212
6.4.1 LA2	212
6.4.2 Notifying social workers of child interviews:	214
6.4.3 Video Recording	218
6.4.4 Presence of an advocate:	216
6.4.5 Risk assessment	217

6.5 The Recruitment of Child Participants - LA2	218
6.5.1 Eligible Children:	218
6.5.2 Advocacy:	220
6.5.3 Attendance at CP case conference:	221
6.5.4 Preparation of the sample:	221
6.5.5 Outreach for interview purposes:	222
6.5.6 Summary of participants:	228
6.6 Recruitment of Child Participants - LA3	228
6.6.1 Sampling	229
6.6.2 Outreach to children	230
6.6.3 Cessation of the research with LA3	231
6.7 Recruitment of Child Participants – LA4.....	232
6.8 Recruitment of Child Participants – LA5.....	232
6.9 The Fear Factor:	233
6.10 Reflection on Phase Two’s methods:	237
6.10.1 School holidays:	237
6.10.2 Design of the child interview questions	238
6.10.3 The age of the child participants	238
6.10.4 Parental involvement	239
Chapter 7: Findings and discussion – Phase Two	240
7.1 Introduction	240
7.2 The Child’s World	240
7.3 Perception of Social Work	243
7.3.1 What does a social worker do?	243
7.3.2 Who is your social worker?	245
7.3.3 Child-initiated contact with their social worker	245
7.3.4 How many???	247
7.3.5 SW visits to the child	249
7.4 The child’s experience of advocacy	252
7.4.1 Advocate accessibility	252
7.4.2 Relationship with advocate	253
7.4.3. Whose role is it anyway? The advocate’s contribution to wishes and feelings	254
7.5 Information sharing and decision-making.....	256
7.5.1 Attendance at Case Conference	257

7.5.2 Awareness of their child protection plan	258
7.5.3 Attendance at Core Group meetings	259
7.5.4 The Family Group Conference – food, fun and family	261
7.6 Joining up the circle...and starting again	262
7.7 Relationship Building	265
7.7.1 Who listens the most?	266
7.7.2 Who speaks the most?	268
7.7.3 Who is in charge?	269
7.7.4 Who makes the most decisions?	270
7.7.5 Who makes the most changes?	271
7.7.6 Who writes things down for you to read?	273
7.7.7 The child’s feelings towards their core group members	275
Chapter 8: Findings and discussion – Phase Two - LA3	279
8.1 The Child’s World – Tom (LA3)	279
8.1.1 The child’s perception of social work	280
8.1.2 Relationship Building	284
8.1.3 Attendance at meetings	286
8.1.4 Information sharing	286
Chapter 9: Theoretical framework and discussion	292
9.1 Introduction	292
9.2 Social space and the field of CP	293
9.3 Sharing the power and increasing volume of capital	301
9.4 Habitus	305
9.5 The feel for the game	309
9.6 Government and bureaucracy	313
Chapter 10: Revolutionizing social work	317
10.1 Rewriting the <i>illusio</i> : a practical response	319
10.2 A new way of thinking; ‘revolutionizing’ participation in CP	320
References	324
Appendices	344
Appendix 1: <i>The Restorative model</i>	344
Appendix 2: <i>Design of child interview questions</i>	345
Appendix 3: <i>Design of social worker interview questions</i>	348
Appendix 4: <i>Design of participation worker interview questions</i>	350

Appendix 5: <i>Parent4's diamond ranking exercise</i>	352
Appendix 6: <i>Parent2's diamond ranking exercise</i>	353
Appendix 7: <i>Parent1's diamond ranking exercise</i>	354
Appendix 8: <i>Parent3's diamond ranking exercise</i>	355

Glossary of Terms:

AM	Area manager
ASYE	Assessed and supported year in employment
CAFA	Child and family assessment
CAFCASS	Child and family court advisory and support service
CIN	Child in need
CP	Child protection
CRO	Children's rights officer
CSE	Child sexual exploitation
DBS	Disclosure and barring service
EHCP	Education and health care plan
EMOJI	A small icon used to express an emotion
FGC	Family group conference
FGM	Female genital mutilation
ICPC	Initial child protection conference
IRO	Independent reviewing officer
LAC	Looked After Child
LA	Local authority
LASSA	Local authority social services act
LJMU	Liverpool John Moores University
MARF	Multi-agency referral form
MASH	Multi-agency safeguarding hub
MFH	Missing from home
NHS	National Health Service
NSPCC	National Society for the Prevention of Cruelty to Children
NQSW	Newly qualified social worker
OFSTED	Office for the standards of education
PLO	Public law outline (also known as 'legal gateway')
PR	Parental responsibility
PSW	Principal social worker
PT	Participation team
PW	Participation worker
RD	Research department
RP	Restorative practice
SAAF	Safeguarding Children; assessment and analysis framework
SATS	Standard assessment tests (English primary schools)
SCR	Serious case review
SEN	Special educational needs
SF	Strengthening families
SPM	Strategy and performance manager
SW	Social worker
TAC	Team around the child
UNCRC	United Nations Convention on the Rights of the Child
WTTSC	Working together to Safeguard Children

List of Tables and Figures

Tables

3.1 Tom's habitus.....	65
4.1 Children 8-12 years on a CP plan in LA1.....	81
4.2 The categories of abuse recorded for the children.....	82
4.3 Family composition of the 44 children in LA1.....	83
4.4 Breakdown of social worker allocation to the families.....	84
4.5 Breakdown of social worker allocation and sample.....	86
4.6 Outcome of telephone calls to potential parent participants.....	89
4.7 Outcome of two sets of outreach to the parents of child participants.....	90
4.8 Summary of participants for Phase One.....	93
6.1 Number of children in LA2 eligible for the research.....	218
6.2 The age and sex distribution of the 154 children.....	219
6.3 Family composition within the sample.....	219
6.4 Child's engagement in advocacy.....	220
6.5 Number of LA2 children who have attended their own CP conference.....	221
6.6 Number of children on a CP plan with / without advocacy.....	222
6.7 Groupings for outreach.....	223
6.8 Recruitment of 8-year-old child, no advocacy.....	224
6.9 Recruitment of 9-year-old child, with advocacy.....	225
6.10 Recruitment of 10-year-old child, no advocacy.....	225
6.11 Recruitment of 11-year-old child, with advocacy.....	226
6.12 Recruitment of 12-year-old child, no advocacy.....	226
6.13 Recruitment of a child aged 8-12 who had attended their CP conference.....	227
6.14 Summary of LA2 participants.....	228
6.15 Outreach to child in LA3.....	231

Figures

3.1 Hart's ladder of participation (Hart 1992).....	33
3.2 Pathways to Participation (Shier 2001).....	33
3.3 Resources used for child interviews.....	61
3.4 Layout of a completed diamond-ranking exercise.....	71
3.5 Levels of gatekeeping in Phase One (LA1).....	78
5.1 SW visit and direct work with child for the purpose of assessment.....	109
5.2 Social worker assessment; feedback to the child on actions taken.....	110
5.3 The cyclical social work visit to child.....	111
5.4 Designing the model.....	203
5.5 Developing the model.....	204
5.6 Joining up the circle.....	204
5.7 The developing relationship.....	205
5.8 'Revolutionizing' participation in child protection.....	206
6.1 Levels of gatekeeping in LA2.....	212
6.2 Levels of gatekeeping in LA3 and LA4.....	213

7.1 Arthur's complete participatory cycle.....	263
7.2 Robert's broken participatory cycle.....	264
7.3 Rebecca, Casey and Nathan's broken participatory cycle.....	265
7.4 The cycle within a cycle.....	267
9.1 The field of child protection.....	293
9.2 The field of the CP case conference.....	295
9.3 The field of the CP case conference, following successful advocacy.....	297
9.4 Tom's habitus and social field of child protection.....	307
9.5: Parent4's daughter's <i>illusio</i>	312
10.1 'Revolutionizing' participation in child protection.....	322

Chapter 1: Introduction

The need for practitioners to ascertain the wishes and feelings of a child during statutory social work intervention is enshrined in law (s.22 (4) Children Act 1989, s.53 Children Act 2004). This legislation requires practitioners to encourage and support children to have their voice heard, find out how the child feels regarding the intervention and subsequent action plan, and give due consideration to these feelings. The term 'wishes and feelings' is perhaps contentious; it reads as whimsical and 'desire focused' yet the purpose of this legislation is to create meaningful participation which can empower maltreated children and young people and even prevent further abuse from happening (Bell 2002; Cossar et al 2016).

Article 12 of the United Nations Convention on the Rights of the Child (UNCRC 1989) states that the child's wishes and feelings must be heard "in all matters affecting them and to have their views considered and taken seriously". This carefully worded right is dependent on the age, stage and maturity of the child, along with their ability to formulate their own opinion (Archard and Skivenes 2009). The UNCRC continues to promote children's rights by declaring that all children should live free from abuse, neglect, violence and sexual exploitation (Articles 19 and 34 UNCRC 1989). Whilst both Articles uphold the rights of the child, there is the suggestion of conflict between encouraging a child to participate in the Child Protection (CP) process and the need to shield a child from the harsh reality of abuse (Sanders and Mace, 2006).

Recent legislation has introduced participation workers / advocates in to the social work arena. The Children and Families Act (2014) stipulates that local authorities must provide vulnerable children and their families with the means to take part in discussions regarding their own care, incorporating access to advocacy and mediation services. The Children and Social Work Act (2017) reminds practitioners to give full regard to a child's wishes and feelings, particularly children who are looked after by the local authority. The new provision of personal advisers for children leaving care ensures robust assessment of a young person's needs, access to personal support and guidance and the ability to participate in all matters affecting them.

With Laming's (2003) report on the death of Victoria Climbié emphasising the absence of Victoria's voice throughout her own social work experience, the subsequent introduction of Every Child Matters (2003) and the 2004 amendments to the Children Act (1989) partly focused on the understanding of the child's lived experience. A report written by Ofsted in 2011 examined 67 SCRs, concluding that children were seen infrequently by professionals, 'wishes and feelings' were not recorded and too much emphasis was given to the parents' voices rather than the child's. As a result, the child becomes invisible (Ferguson 2017). The absence of the child's voice however continued to be noted in many further SCRs: the high profile SCR of Daniel Pelka (Rogers 2013), and the unreported and more recent SCRs of Child I1 (Charles 2017), Alex (NSPCC 2017), and Child B (Muir 2017). The fact that SCRs are still emphasising the missed opportunities of talking and listening to children in social work, sometimes resulting in death or serious injury, demonstrates the

importance of including children in social work research. Whilst parental experience of participation in CP proceedings is important also, Ofsted (2011) continued to note that obstructions between the child and their SW remained, often created by the parent. Research with vulnerable and abused children is therefore vital to learn about their interpretation of social work practice and their understanding of their CP journey. These learning points can then be applied to practice.

Participation however is at the “centre of hotly contested discourses about the nature and meaning of childhood” (Sanders and Mace 2006:90) which have direct implications for practice. Collings and Davies (2008) for example observed a range of distinct participatory performances including ‘child as incomplete’ and ‘child with rights’. Their study of 14 frontline social work practitioners stirred emotional visual descriptions of ‘waif-like, abused children’, creating links to the discourse of ‘child as incomplete’ and waiting for adults to fill the child’s void with knowledge and care. Shemmings’ (1996 and 2000) research similarly noted how practitioners’ constructs of childhood might affect their perception of children as either autonomous or vulnerable, and identified practitioners following two approaches: Rescue (protection – not supporting the participation of children and young people) and Rights (supportive of participation). This conflict within practice is summarised succinctly by Trinder (1997):

What is remarkable, and frustrating, is how the adult constructions had become ensnared in . . . simple . . . dichotomy, where children are classified as either subjects or objects, competent or incompetent, reliable or unreliable, harmed by decision-making or harmed by exclusion, wanting to participate or not wanting to

participate...Practice then becomes founded upon certainties, the perfected (single) procedure, based on the single conception of the child.

(Trinder 1997:301)

Consensus is however emerging which seeks to balance the rights of the child with the responsibilities of the state. Vis et al (2012) for example discuss the notion of 'protectionism', that a child's access to certain people, processes or information should be restricted to avoid distress but conclude that sensitive, age appropriate participation is not harmful. This is echoed in Sanders and Mace (2006), Polkki et al (2012) and Cossar et al (2016) who prefer to view children as social actors, actively responding to their environments; an example of child liberation versus paternalism (Healy and Darlington 2009; Cossar et al, 2016). The 'social actor' perspective seeks out the strengths of the child, using their experience of the child protection journey as both a resource and as a meaningful contribution to their own child protection plan (Richards-Schuster and Pritzker 2015). In child protection, the child actor is not a 'problem', instead a survivor and potential contributor to solutions (Collins 2017). However, even in rights-based approaches, children (bestowed with rights) cannot access services without the assistance or involvement of adults (Sewpaul et al 2013); a good example of this is an independently living 16 year old school-leaver who is unable to access benefits and welfare assistance without confirmation (of their estrangement) from their (estranged) parent.

The focus of this PhD study is child participation in child protection, not parental participation. The design of the research questions for the parent have been focused on barriers to the child's level of participation and the parents

understanding of what these may be. However, it would not be possible to analyse this data without further exploring the context of potential parental resistance when working in the child protection arena and how this can influence the child's experience. Whilst Collings and Davies' (2008) study seemed to demonstrate a level of care / nurture shown from the social worker (SW) towards the child, there was an air of detachment between the SW and the parent. Parents are perceptive to this 'accusatorial stance' from their SW due to them being the subject of child protection allegations and can feel excluded and powerless (Darlington et al 2010; Appleton et al 2015). With it being recognised that parents themselves are sometimes the barrier to their child's participation in child protection planning (Aldridge, 2013; Dillon et al 2016) the SW must be afforded time to build relationships with the child's caregivers, as well as the child. This SW / parent partnership is enshrined in the Children Act (1989).

Parental participation allows for information sharing and joint decision making which can emotionally prepare a child for the journey ahead, particularly if that journey involves the child being removed from the care of the parent (Darlington et al 2010). The inclusion of parents within this research therefore adds a further dimension to the voice of the child and the SW's understanding of their practice. For the purposes of this research, it must be noted that parents as Gatekeepers have the ability to prevent their child from taking part in the research, perhaps for fear of what may be shared or what may be perceived as a threat to their family harmony (Bailey, Thoburn and Timms 2011). Bailey et al's (2011:128) study of 141 children who were subject to private law proceedings highlighted

Gatekeeper bias, “for parents, passing on a letter about the survey to their children and encouraging them to take part would not necessarily be a high priority and could even be seen as a threat to their children's well-being or family harmony”. This concern was carefully considered when planning the research methodology and designing the participant information sheets, along with ensuring that all parents received a full verbal explanation of the purpose and potential impact of the research study. Children may not wish to be truthful with SWs for fear of what they say being unacceptable (Hill 2005) or for fear of hurting their parents or carers (Turney 2012), therefore the inclusion of a parent has the ability to negatively influence the child’s account. This dilemma has hopefully been overcome within this study by recruiting child / parent participants who are not related and have no direct links to one another.

Darlington et al (2010) identified two influential levels that can enhance / destroy parental participation: the parents themselves or the system surrounding them. As a social worker living in the North West (NW) of England, it is disheartening to note that three NW local authorities – Manchester, Blackpool and Knowsley – are ranked in the top five of England’s most deprived authorities (New Economy 2015). With twenty percent of NW neighbourhoods being identified as the most deprived in England (New Economy 2015) projections also indicate that absolute poverty in these areas will rise further by 2021 (Hood and Waters 2017). Featherstone et al’s (2018) research concluded that children from Blackpool are ten times more likely to be removed from the care of their parents than children growing up in more affluent areas, such as Wokingham. Yet, despite 24,000 more children being assessed nationally as being ‘in need’ in

2015 than 2009, spending by English local authorities on children's services has fallen by around ten percent over the past ten years (Butler 2017).

The effects of poverty and austerity are forcing more children into the child protection system. Poorer families living in the most deprived areas of NW England have little money to feed their children and few resources are available to support them (BASWTalk 2018). Local authority budget cuts impact heavily on already vulnerable families, their benefits being reduced and means-tested, then subjected to lengthy Universal Credit payment delays (Butler 2017). In March 2018, 48% of the 53,790 children on child protection plans fell under the category of neglect, followed closely by the category of emotional abuse (35.1%) (Department for Education 2018). Whilst these statistics demonstrate clear links between poverty and neglect, the current focus of child protection investigations strangely remains on the parent's behaviour, choices and their capacity to parent (Featherstone et al 2018).

The predefinition of concerns in a risk-based arena is typical but sits uncomfortably within child-focused practice (Healy and Darlington 2009) where the child and family's voices should be at the heart of proceedings. In the current 'system', the parent must recognise that the safety of the child is non-negotiable and take responsibility for making changes to their own behaviour. Changes within the child's timeframe, as opposed to the parents', remains challenging (Forrester et al 2012). Further complexity arises when the child is aware that the parent is lying to the SW, yet feels unable to share the truth

(Polkki et al, 2012). Dillon et al (2016) identified how the child themselves perceived the 'power over' the parent, with the SW writing assessments along the lines of 'do this, do that...or else'. Herein lies the complexity of participation within a statutory setting; the circumstances are involuntary. The child and their parents have no choice but to be party to proceedings which, in turn, creates resistance. The current models of child participation are based on a voluntary relationship and "fail to take account of the complex status of parents in child protection work, where parents present simultaneously as citizens who have basic rights, as carers of children, and as the subject of child protection allegations" (Darlington et al 2010:1020).

The newly updated Working Together to Safeguard Children (WTTSC 2018:9) has reintroduced the phrase "working in partnership". It encourages SWs to seek children's opinions regarding the provision of social work services and to discuss their ongoing plans with the child and the family. A brand new section entitled "Children have said they need..." (2018:10) addresses issues important to children within CP social work, including the ability to understand the actions of the SW, to have that understanding acted upon, and to be informed and involved. Further 'snippets' of participatory instructions are however scattered throughout the extensive WTTSC (2018) document rather than contained in a separate section or chapter. Such disjointed guidance is difficult to follow. Ambiguous statements instructing SWs to "inform, in writing, all the relevant agencies and the family of their decisions and, if the child is a child in need, of the plan for providing support" (WTTSC 2018:37) could unwittingly see the child omitted from receiving written information, due to the interpretation of the word 'family' as 'parents'. Indeed, WTTSC (2018) corrects

its wording on the following page, in Flow Chart 3, by including “SW discusses next steps including review / decision points with child, family and colleagues” (WTTSC 2018:38).

The actual wording of the Children Act (s.53 2004) states that SWs should “ascertain the child’s wishes and feelings regarding the action to be taken with respect to him”. In my experience of reading many Child and Family Assessments (CAFA) whilst working for the Multi Agency Safeguarding Hub (MASH), the default setting for wishes and feelings tends to be the child’s penchant to play football and watch cartoons, rather than their opinion of social work provision. This skewed translation from legislation to statutory guidance and into practice may in part explain why there is a disparity within social work practice concerning participation, with the term ‘wishes and feelings’ being interpreted by practitioners as solely emotional and desire-focused rather than experiential and impacting. The persistent command for social workers to ‘obtain wishes and feelings’ blurs the links to participation, instead accepting ‘wishes and feelings’ as a task, or a tick-box exercise. ‘Wishes and feelings’ has therefore become an accepted and simplified discourse, yet “discourse can and must be as complicated as the (more or less complicated) problem it is tackling demands...” (Bourdieu 1990a:52).

My passion for participation began over twenty years ago, whilst working for a youth homeless charity in Blackpool. The young people using Streetlife’s night shelter and daily drop-in centre were consistently at the heart of our service. Our newsletters, funding applications, marketing materials and recruitment

procedures were always co-produced. Furthermore, the young people co-facilitated our school and church presentations, sharing their experiences about being street homeless with their peers and raising awareness of Blackpool's housing crisis, government funding issues and benefit concerns.

In 2005, I became the Participation Manager for Connexions, Lancashire with the responsibility of embedding the National Youth Agency 'Hear by Right' standards into the organisation (NYA 2018). The local response from both staff and young people was positive, with young people able to shape the service and promote change (e.g. staff working hours to now include Saturday mornings). However, it remained increasingly difficult to embed participation into the business-side of the organisation. Whilst four young people representatives attended Board meetings the meetings were not young-person friendly, taking place on week days, late in the evening, at remote Lancashire locations. Board members used jargon and acronyms unfamiliar to the young people, and most meetings concluded without the young person having spoken. This statutory experience was in direct contrast to the child centred practice experienced within the voluntary sector, an example of tokenistic participatory practice.

I remain passionate about children's inclusion in the design and provision of services aimed at promoting their safety and well-being. Following the publication of our pilot study (Dillon et al 2016) and my subsequent ASYE in child protection social work, it was clear that participation was overlooked in fast-paced, risk-focused practice. Whilst the use of the child's voice is of paramount importance in the WTTSC (2018) document, what remains missing is a semblance of order, or model, enabling practitioners to embed meaningful

child participation in their social work practice¹. One of the aims of this research is to therefore create a new model for participation in child protection proceedings, encouraging practitioners to consider their response to the child's voice whilst working in a fast-paced, risk-focused arena. Given the lack of clear, statutory guidance, this research study makes an important and original contribution to understanding and embedding participatory practice into child protection social work. Using the opinions and ideas of service users and practitioners, this thesis offers solutions to fill participatory voids along with presenting an easy-to-follow practice model. Most importantly, it identifies small changes within daily social work practice that, once made, will enhance the child's experience of child protection social work.

1.1 Research aims and objectives

My study will explore how participation can be embedded within everyday child protection social work practice. This aim will be achieved by:

- Undertaking a thorough review of the literature within this field, along with an exploration of legislation and statutory guidance
- Connecting theory to practice, in order to make sense of participatory gaps or imbalances
- Using qualitative research to identify the factors that enhance, or hinder, participation in social work, and ultimately to make recommendations for practice improvement

¹ At this point, it must be noted that this research study was underpinned by WTTSC (2015), with almost all of the writing and analysis taking place prior to the updated 2018 guidance.

1.2 Overview of Chapters

Chapter Two

This chapter provides a review of previous research studies and discussion papers focusing on participation in child protection. It concentrates on how social workers share information with children and involve them in decision-making, along with questioning the ad-hoc provision of advocacy services. Finally, it addresses the developing relationships between families and their social worker, with consideration given to the 'system' and bureaucracy.

Chapter Three

Chapter three provides an introduction to Bourdieu, with specific attention the concepts of social space, capital, habitus, *illusio* and *doxa*. It determines a rationale for the chosen research methods and data analysis, along with the creation and design of the participant interviews / focus group. Chapter three concludes by presenting the intended number of research participants, along with an explanation of gatekeeping issues that may occur when conducting research with vulnerable children.

Chapter Four

This chapter justifies the selection of (and the outreach to) parents, children, participation workers and social workers in Phase One of this study. Ethical issues are considered and the final participant numbers are revealed. The chapter concludes with reflection on the research design and the complexities of conducting research in participants' homes.

Chapter Five

Chapter five is presented as a reflective exegesis, discussing the five overarching themes emerging from the interviews with parents and social workers, and the focus group with participation workers. It explores the themes of wishes and feelings, advocacy, relationship building, decision-making and information sharing, and identifies participatory gaps in social work practice. Finally, a new model for embedding participation in child protection proceedings is revealed.

Chapter Six

This chapter provides the focus for the second phase of the research. It outlines the outreach to selected local authorities and considers the impact of gatekeeping on the validity of the study. Chapter six describes the recruitment of child participants from two different local authorities, concluding with reflections on the design and complexities of research with children.

Chapter Seven

Chapter seven focuses on the responses of five children from one local authority. The chapter explores the child's opinion on the topics of advocacy, information sharing, and relationship building, along with their interpretation of the role of social worker. The chapter concludes by using the newly created model for participation in CP as a tool to identify participatory gaps in the children's CP experience.

Chapter Eight

This chapter focuses on the experiences, feelings and opinions of Tom, aged ten years. Having been on a CP plan for as long as he can remember, chapter

eight explores Tom's understanding of why social workers are involved with his family and the difficulties of building and sustaining relationships with ever-changing practitioners.

Chapter Nine

Using the work of Bourdieu and the findings from this research study, Chapter nine draws out a deeper discussion of social space, habitus, *doxa* and *illusio*. Particular consideration is given to the structural disadvantages of the CP system, along with the devastating impact of austerity. The chapter concludes with recommendations of how social work practice can more meaningfully encourage participation of children and their parents.

Chapter Ten

The final chapter draws all strands of discussion together. It revisits the design of a new model for participation in CP and reasserts its ability to fill participatory voids. Practitioners are reminded of the cyclic nature of participation.

Chapter 2: Literature Review

2.1 Introduction:

A search using the exact keywords 'participation' and 'child protection', screening for peer-reviewed articles, yielded hundreds of results. The majority of these studies were undertaken with looked-after children and their associated practitioners, or with children reflecting on previous social care experience; research conducted with children on child protection plans, who are still residing with their parents, is rare (Cossar et al 2016). This may be due to the fast paced, risk-focused nature of frontline social work, in which practitioners have a very new relationship with the child and limited time (and training) in which to contemplate meaningful participation. Cossar et al (2016) continue to state however, that failure to include a child may compound issues of inadequacy and contribute to further feelings of low self-esteem therefore a balance between participation / protection is vital. All England-based authors indicated that the legal duty (s.22 Children Act 1989; s.53 Children Act 2004) requiring the child to be included within the planning process, along with Article 12 (UNCRC 1991), was the starting point for their research. van Bijleveld et al's (2015) review provided further studies not highlighted in the keyword search.

The current research study will focus on children who are the subject of a child protection plan and living at home with a parent. The literature review identified 23 studies with similar inclusion criteria, all focusing on child protection proceedings and all children living at home with parents. However, in order to understand more about the participation of vulnerable children and young

people in influencing their own outcomes, this literature review will also include research conducted within other areas of statutory social work, such as Looked after Children. Hearing the experiences of children at different stages of their child protection journey, and learning from the researchers' discussions, will strengthen the methodology, data collection and analysis within this current study. Whilst some of the research is UK-based, papers have been included from New Zealand, Australia, Norway, Denmark, Finland and Israel. All of these countries have adopted the UNCRC (1989) and follow a statutory child protection process.

I have therefore divided this literature review in to two sub-chapters:

- 1) Research devoted to the child's experience of child protection proceedings and aiming to understand their level of participation.
- 2) Research discussing the participation experience of the parents, all of whom have children on child protection plans (or equivalent, depending on the country where the research was conducted). Some of these studies examine both the child and parents' experience of participation and are therefore discussed in sub-chapters one and two.

The sub-chapters will also contain further high-impact research, conducted in other areas of statutory social work, examining how SWs and practitioners listen to the child's voice and the child's ability to participate in their own planning.

In order to understand the child's experience of participation within child protection proceedings, researchers have adopted a variety of methodologies.

Five of the 23 identified studies included a review of conference minutes, case records, policy documents or observations of live meetings over a certain period of time (Holland 2001; Sanders and Mace 2006; Pinkney 2011; Healy, Darlington and Yellowlees 2012; Alfandari 2015). Ten studies focused on interviews / group work / questionnaires with SWs and other child protection professionals (Shemmings 2000; Holland 2001; Sanders and Mace 2006; Vis and Thomas 2009; Healy and Darlington 2009; Seim and Slettebo 2011; Pinkney 2011; Vis et al 2012; Alfandari 2015; Toros, Lasala and Tiko 2017). Considering the specific nature of the research, it was surprising to see so few studies involving children. Only nine studies, where children on child protection plans were living at home with their parents, involved semi-structured interviews / activities / group work with children aged between 6 and 18 years (Bell 2002; Sanders and Mace 2006; Woolfson et al 2010; Seim and Slettebo 2011; Saebjornsen and Willumsen 2015; Dillon et al 2016; Muench, Diaz and Wright 2016; Cossar et al 2016; Toros et al 2017). Healy and Darlington's (2009:422) three-phase study in child participation levels (in child protection proceedings) chose not to interview children due to "numerous reports outlining the negative effects for children when they are interviewed by strangers about sensitive and possibly traumatic life experiences, especially when there is no benefit to the child from such participation".

2.2 "Your name's not down...you're not coming in"

Research studies overwhelmingly discuss the absence of the child from their own child protection meetings and case conferences. Out of 185 case conference minutes reviewed by Sanders and Mace (2006), only nine (4.9%)

had invited children and young people to the meeting. Of these nine, just seven conferences recorded the child's attendance. More disappointingly, none of the conference records detailed or shared written statements, experiences, audio tapes or video tapes of the child's lived experience with the adults present. A two-phase study of 28 files, belonging to 10 children, by Bruce (2014) demonstrated that 86% of children aged 9-14 years were not present at their CP conference; this figure rose to an alarming 93% following the introduction of an advocacy service and a survey of a further 11 children. Alfandari's (2015) study of the Israeli child protection system revealed that only 7 out of 21 children attended their committee meetings (similar to CP case conference). Those who did not attend did not have their views or opinions shared at the meeting by their SW. Sanders and Mace (2006) found that, in 76 out of 185 case conferences (41%), adults such as relatives or other professionals gave their opinion on the child's wishes and feelings. This however lacked clarity as to whether this was a true record of the child's experience or rather the adults' perceptions of the child's experience. This thought is echoed in Pinkey's (2011) research, where concerns are raised around the child's feelings being 'lost in translation', that policy text is devoid of the emotion found in interview text. The term 'Pure Voice' is used in Pinkney's (2011) study, the aim being to record the voice of the child with no elements of coercion, muffling or coaching.

The reason for the low numbers of children and young people represented at their own child protection meetings is discussed in most studies, with similar themes relating to the child's age and their ability to understand emerging. In Alfandari's (2015) Israeli research, only children aged 12 years and over are invited to participate in meetings; the younger children are asked to share their

thoughts prior to the committee convening. In one case, a SW refused to allow an eight-year-old child to attend her committee meeting as the child would have discovered that she was being removed from the care of her parents. The participating SW felt that the news would be too much for the child to hear, yet no further explanation of this was given. In this case, the SW had identified the child as vulnerable and in need of protection, yet it would have been beneficial to learn how and when the SW chose to share this crucial information with the child.

Similarly, age restrictions on CP participation are in place in Holland, where information concerning children aged under 12 years is shared with the parents only, and children aged 12-16 years receiving partial explanations only (Bouma 2018). This contrasts greatly with the Norwegian child protection policy where children aged 7 years (and younger, if deemed capable of understanding) have information shared with them in order to capture their wishes and feelings (Berrick et al 2015). In their 2009 study, Healy and Darlington state concerns around encouraging participation in children aged under five years of age, due to their inability to understand the processes. Children in this lower age bracket are consulted on their wishes and feelings, which are then relayed back to the chair of the conference by the participation worker (PW) or SW.

The ability to understand the child's lived experience therefore falls to the ability of the practitioner, who may be constrained by factors such as time or lack of appropriate training. However, Winter's (2010) research slightly contradicts with Healy and Darlington (2009), with a study of children aged four to seven years

concluding that these very young children had levels of insight in to their abuse and were able to describe the risks involved. Indeed, the children recalled details of their experience so intricately that SWs were surprised with their level of recollection. None of the participants in Winter's (2010) study showed evidence of adverse effects and all wanted to continue talking and extend the length of the interview. From my perspective, contribution to knowledge from this younger age group is vital:

For practitioners, the research highlights that young children's perspectives of their family lives should form a central component of risk assessment and decision-making processes particularly given the fact that their accounts help improve the understanding about the nature of risk and harm...

(Winter, 2010:190)

2.3 Participation in decision-making forums

Theorists such as Hart (1992; see figure 3.1) and Shier (2001; see figure 3.2) identify that participation can take place in a variety of increasingly participatory approaches.

Figure 3.1 : Hart's ladder of participation (1992)

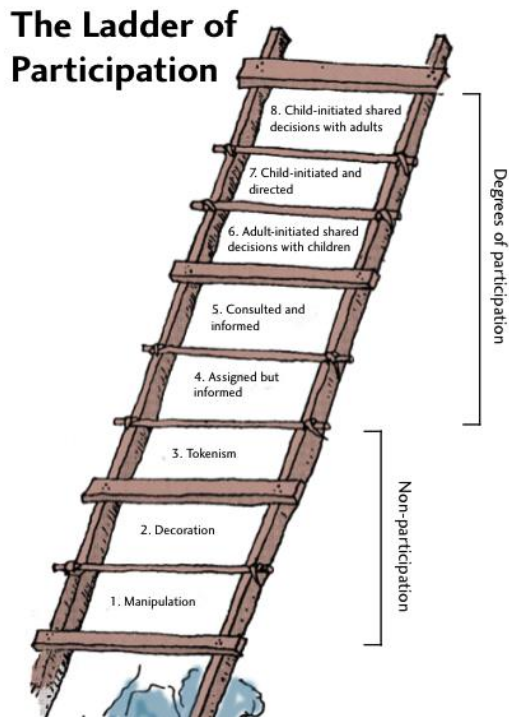
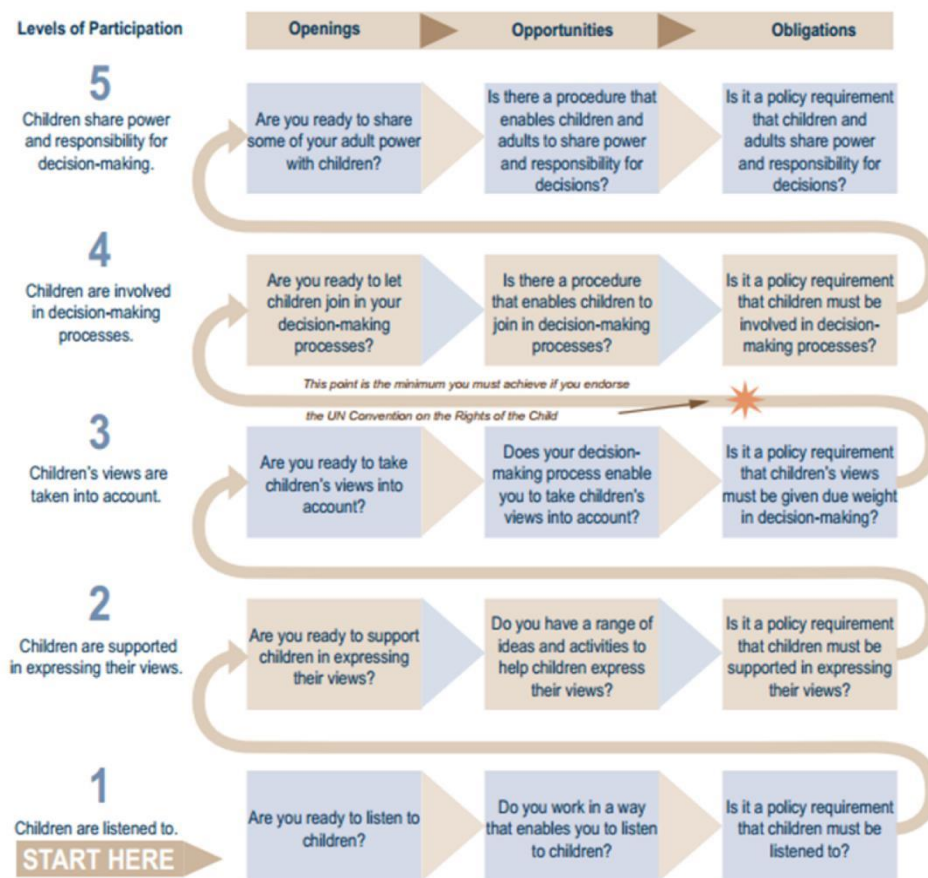


Figure 3.2: Pathways to Participation (Shier 2001)



Whilst Shier opts to avoid the lowest three 'rungs' of Hart's 'ladder' (manipulation, decoration and tokenism) a practitioner and child must climb high up their 'pathways' in order to achieve participation in the eyes and context of the law and ultimately enable children to share the powers of decision making. It is interesting therefore, that researchers within the field of child welfare often cite a finding from Vis and Thomas' (2009:163) research that states "children were three times more likely to count as 'participating' if they had attended one meeting, 10 times more likely if they had attended two, and 32 times more likely if they had attended three meetings".

The impact of this finding is significant and has resulted in the often default mechanism of assuming that 'attendance at meetings = participation'. Whilst the children identified in Vis and Thomas' (2009) research had been able to influence decisions being made by adults on their behalf whilst attending a meeting, there is evidence indicating that a plethora of daily child protection meetings are not influenced by children's opinions. There are therefore limitations to Vis and Thomas' (2009) study, with the examples of participation being self-reported by case managers, rather than documented within official policy documents such as conference minutes, or acknowledged by the children themselves. In contrast, Cashmore (2002) and Polkki et al (2012) reported that children and young people found being exposed to child protection processes 'frightening' or 'embarrassing' and wanted other ways to participate, rather than to simply attend meetings. Lansdown (1995) and Schofield and Thoburn (1996) emphasise the need to move the focus away from 'attending meetings' and

focus further on the way children, assisted by practitioners, understand the decisions being made with them and for them.

Alfandari's (2015) research concluded that the physical presence and participation by children in their child protection meetings could actually be destructive, rather than meaningful. The participating children felt that they had no opportunity to influence the decisions made on their behalf and some displayed violent behaviour as a result, with two voicing suicidal intentions. A small-scale study conducted by Woolfsen et al (2010) described the children as 'passive bystanders', uninformed of the process and misrepresented in conferences. Concerns were raised by Healy and Darlington (2009) regarding the exposure of the child to hostility within meetings, and that risks from estranged family members must be considered. Sinclair (1998) stresses the importance of the quality of participation over the quantity of participation, yet remained concerned about the amount of children absent from their own case conferences. Participants within Healy et al's (2012) research stated that children were not invited to Family Group Meetings (also referred to in England as Family Group Conferences) but practitioners marked their presence in other ways, such as having a photo of the child on the desk, an empty chair, the child's drawings, name cards or even the child's stuffed toys. This research raises intriguing and powerful ideas; all highlight the void created through the absence of the child and provide a reminder of who is at the heart of the discussions.

My experience of case conferences, within a local authority with over 700 children on child protection plans, was gained in a sterile, business-like

environment, attended by practitioners who mostly had never met the child, in a time-slot that always over-ran by at least an hour. In order to create child friendly conferences, consideration must be given to length of meetings, refreshments and breaks, along with recognising how intimidating the large numbers of strangers within one room must be for the child (Sanders and Mace 2006; Jackson, Kelly and Leslie 2017). Attending practitioners must also accept that the child will hear them state negative aspects of their parents' character and behaviour. When aiming to forge relationships with children, this aspect of the child protection process can be particularly harmful (Shemmings 1996).

Whilst legislation stipulates that the child's wishes and feelings must be heard and given weight, the above research studies confirm that different procedures, rules and routines are operating at a local level. The theme of attendance at meetings will therefore be scrutinised further within this PhD research, particularly the justification of the Phase One local authority's decision to invite children aged 5+ years to participate, yet operate a blanket rule banning children aged under 11 years from their own case conference.

In recent years, many English local authorities have adopted the Signs of Safety approach (Turnell and Edwards 1999) in order to balance the conflicting demands of risk assessment and child / parental rights (Keddell 2014). In turn, a 'restorative approach' to social work, where the focus is on relationship building and working 'with' not 'for' the family is followed (see appendix 1, p:344).

Restorative practice has emerged from Maori culture in New Zealand, with the thought that 'wrongs' committed by an individual affect the entire community; a collaborative family / practitioner / justice approach, along with the right amount

of regret and shame from the wrong-doer, were key to the justice process (Commins 2016). The key principles of participation fit nicely with the restorative approach, which promotes shared accountability, social responsibility and a desire for change. It is therefore usual for these restorative local authorities to use the Family Group Conference (FGC) as part of child protection proceedings. With its origins again in Maori culture, the FGC encourages parental participation where the parents had previously felt oppressed and unheard. In New Zealand, FGCs take place prior to court proceedings and emergency court hearings; under the Aotearoa New Zealand legislation, a suitable plan agreed at FGC *must* be accepted by the statutory services (Connolly and Masson 2014).

Children are also encouraged to take part in FGC. Bell and Wilson (2006) focused on the attendance and experience of 30 children during 12 FGCs in the north of England, with the aim of concluding whether the child's presence at the FGC was indeed useful. The feedback showed that the child's favourite part was the food and drink offered to them followed by the chance to see and spend time with their family, these results demonstrating the simplicity of the process through the eyes of the child. Overall, the children reported to feel happy about being involved although one child's experience was more negative due to witnessing a disagreement between his parents. Bell and Wilson (2006) concluded that child participation in FGC should be encouraged due to the increased value and involvement experienced by the children. The local authorities participating in both Phase One and Phase Two of this PhD research adopt a restorative approach, with SWs and service users giving their opinion on FGC during their interviews. This will be explored further in the data analysis.

2.4 To share or not to share?

The decision of information sharing, as in what, when, who, how and why, is discussed in almost all related research studies. Marshall (1997) feels that all information concerning the child / young person must be shared with the child. The statement “there is information about you which is so awful that you are not allowed to access it’ is more ‘damaging than knowing the information itself” (Marshall, 1997 in Cashmore, 2002: 842). Cashmore (2002) also raises concerns about the amount of redacted / blacked-out information contained in care-leavers files, stating that what the young person imagines it says may be worse than the reality.

The surprise and shock of initial social work intervention is frightening for children, particularly for those who are immediately removed from the home (Dillon et al 2016; Kriz and Roundtree-Swain 2017). The sharing of the most basic information with the child, such as the SW’s name and contact details, along with a concrete explanation of what is happening, is a crucial starting point; without this, the child has no basis for their wishes and feelings, nor a way of contacting their worker for further information or clarification.

Participants within Dillon et al’s (2016) research were eager to know more about their circumstances and the challenges being faced by their family as a whole however were asked to leave meetings at crucial points, when it was deemed that the information being shared was not their business. At the other end of the scale, a young person in Munro’s (2001) research into children in care was horrified to find that her decision to take the contraceptive pill had been shared

with the entire core group of professionals. The documents produced from formal meetings are often confusing to read and the contents have frightened and embarrassed children (Polkki et al, 2012). Similar concerns are evident in healthcare settings, Coyne and Harder (2011) finding that children aged as young as seven were frustrated about the lack of information sharing, their inability to join in medical discussions and their parents 'protecting' the child through the withholding of information. Franklin and Sloper (2005) approve of the sharing of information such as the purpose of medical treatment, the hoped-for benefits, the timing of the treatment, the risks involved and the inconvenience that will be experienced by the child; all of these headings could be easily transferred in to CP child-friendly materials. Referring back to the CP process, Winter's (2010) research with young participants (aged four to seven years) demonstrated an element of self-blame for their removal from their parents' care, which could have surely been alleviated with the use of appropriate literature / documents / plans written specifically to reassure the child.

2.5 Advocacy

Independent advocacy is described as having a positive impact on child participation / attendance at meetings (Shemmings 1996, Sanders and Mace 2006, Vis et al 2012, Aldridge 2013, Alfandari 2015, Saebjornsen and Willumsen 2015, Muench et al 2016; Thomas, Crowley et al 2017). A project led by Aldridge (2013), implementing change to their CP conferences, involved every child aged over seven years being offered an independent advocacy service. Their study then examined the impact of such provision. 78% of 105

eligible children were offered advocacy with a take up of 46% (37 children).

Aldridge (2013) describes advocacy as empowering and respectful to the child, the advocate helping the child prepare for their case conference and enabling their attendance wherever possible. The study reported an increase in participation levels, in general, with both children and their parents feeling more supported, yet the child's presence at case conference remained low at 10%; no further explanation was given for this. Notably, SW's collation of the child's wishes and feelings were absent in 27% of cases, demonstrating poor practice. With the SW's role requiring a 'best interest' approach and assessment (Polkki et al, 2012), the wishes and feelings of the child should be at the heart of each SW assessment, regardless of the threshold of risk. However, when an advocate is present, the lines / duties between them and the child's SW become blurred.

Barnes' (2012) research into the effect of advocacy on children in care analyses the child's differing perception of their SW and their Children's Rights Officer (CRO), with children finding their CRO more respectful, more responsive, more reliable and more caring than their SW. In return, the CROs felt that they compensated for the SW, "doing the tasks and providing the caring the social workers should" (Barnes, 2012:1283). Bell and Wilson's (2006) study of child participation in FGC found that advocates were not routinely available to children, therefore there was a general vagueness about their presence and purpose; two children did state that their advocate was however helpful. Jellicic, Gibb and La Valle (2012) identified that there is limited evidence regarding the impact of advocacy on child participation in social work, although existing

evidence shows positive results. Jelcic et al (2012) called for more research in this area, focusing on whether outcomes for the child are improved and whether independent advocacy should be statutory, rather than a decision made at local level. In response, Thomas et al (2017) undertook an online survey of 38 independent advocacy providers in England and concluded that advocacy remained ad-hoc due to LA resources, measuring outputs (e.g. money spent) rather than outcomes. Thomas et al (2017) also noted that advocacy services were crucial in embedding the voice of the child into decision-making forums, particularly when hard-pressed SWs failed to discharge this duty.

There is little research available regarding the use of parental advocates, with most parents relying on their family SW to challenge the system for them. Tobis' (2013) implementation of a parental advocate scheme in New York City encouraged the number of children in care to plummet by 82% over a fifteen-year period, at the same time sharpening the provision of good quality legal advice to families. The focus shifted to preventative services, along with access to advocates who have previously experienced child-removal themselves. Parents (once viewed as 'pariahs') were able to align themselves firmly with professionals, due to their inclusion and empowerment in all levels of decision-making (Tobis 2013). In this example, parents pushing for change have created change.

2.6 Relationship Building

Within the majority of the examined research studies, the relationship between child and SW is highlighted as key. This is emphasised by the title of Cossar et

al's (2016) England-based research 'You've got to trust her and she's got to trust you'. Children desired a good relationship with their SWs (Dillon et al 2016; Cossar et al 2016; Muench et al 2016) but often felt interrogated by practitioners, whilst consistently having to watch what they say for fear of SWs 'twisting things' (Cossar et al 2016). Bessell's (2011) Australian study of 28 young people in care revealed a prevailing standard of non-participation where the young people had no opportunity to express views or be consulted with, the study concluding that a good relationship between the child and their SW is clearly paramount. Similar and startling results from Timms and Thoburn (2006) research indicated that only 40% out of 461 children felt listened to by their SW / CAFCASS (Child and Family Court Advisory Support Service) stating that practitioners often used buzzwords such as 'delay' and 'permanence' that they did not understand.

The pilot research for this PhD (Dillon et al 2016) found that young people were annoyed and frustrated at being kept in the dark about the real issues, for example why SWs were actually intervening in their lives. However, it was the smaller issues that compounded the larger ones, with none of the young people knowing the office location nor the email addresses of their SW, and only one having their SW's phone number. The fear and anxiety over unwanted SW intervention spiralled for all involved children until a level of trust developed with the SW; only at this point were the young people able to reflect and identify that positive change may have taken place (Dillon et al 2016). It is not only SW intervention that can cause anxiety for children and young people, but also the steady stream of previously unknown professionals that keep coming through

the door (Bell 2002, Dillon et al 2016). The fear of being removed from their home (Bell 2002), the constant interrogation by professionals (Cossar 2016), the high turnover of SWs (Healy 1998, Saebjornsen and Willumsen 2015, Dillon et al 2016) and the poor sharing of information (Muench et al 2016) all impact on the ability to create meaningful relationships and enable participation. The attitude, skills and availability of the professional is raised many times as a barrier to participation (Berrick et al 2017). Children and young people sense 'attitudes' or 'dislike' from their SWs, with some SWs counteracting that the young person's negative personality characteristics prevent them from participating (Alfandari 2015). The fact that SW assessments of children were mostly two-dimensional, whilst the parent's lives and characteristics were portrayed in a thorough, lively manner (Holland, 2001) can also create a lack of understanding of the child's lived experience and result in the child feeling isolated, alone and unheard. The underpinning statutory CP system, its organisation, management and over-focus on risk assessment, prevents SWs from hearing the child's voice layered over their complex yet unique CP experience (McCafferty 2017).

Poor practice concerning relationship building was discussed in almost all of the research studies, with several highlighting the poor training offered to SWs regarding direct work with children (Healy 1998, Young et al 2014, Sanders and Mace 2006, Healy and Darlington 2009, Vis et al 2012). Five children within Alfandari's (2015) Israeli study were referred to case conference without having been seen by their SW, with written reports detailing very little contact or relationships between SWs and children on the whole. Alfandari (2015)

discusses the term 'seeing the children' as in social workers simply laying eyes on them, rather than attempting to listen and understand their experiences. This term is used frequently within English services also, with SWs being required to 'see and speak to the child alone' for the purpose of their child and family assessments. Working Together to Safeguard Children (2015) states clearly that this visit must take place within seven days of a referral. During a recent Ofsted inspection of my previous local authority employer, there was a flurry of activity to ensure that every child open to a SW 'had been seen', regardless of whether they had been assessed. It was a tick-box exercise with clear echoes of Alfandari's (2015) findings, requesting that SWs immediately left the building to 'see their children'. If the named SW was unavailable, and records showed the child had not been seen, another SW was sent 'to see'. The theme of 'tick-box compliance' was also a feature in Winter's (2009) research of children in foster care, Winter's participants complaining that there was no set format of how the worker should record or share any information given by the child. It is frustrating that studies seven years later continue to highlight the same issue. This concept will be explored further within my research, the interviews with the children aimed at coaxing out the level of engagement and understanding surrounding their relationship with their SW and the intervention by the local authority.

2.7 The effects of the political landscape

The formal nature of child protection proceedings and the business-like environment in which a SW operates (office hours 9-5 Monday - Friday when a child is at school, college or work) again creates barriers to relationship building

(Bell 2002; Alfandari 2015; Dillon et al 2016). Tregeagle and Mason (2008) found that children resigned themselves to case conferences and social work visits being conducted during school hours, therefore there were no opportunities for them to participate or build relationships with the core group. Aldridge's (2013) study recognised the inflexibility and rigidity of traditional child protection conferences and introduced advocacy as part of the process, its 'opt out' nature ensuring inclusivity. The current shift towards the privatisation of children's services being debated within government reports (commissioned by Children's Minister Edward Timpson in 2014) affirms that SWs will remain service led, with targets and attitudes focused on risk management. Working in a risk-focused arena can further lead to SWs predefining their concerns for the child (Healy and Darlington, 2009) which does not sit comfortably in a restorative / child-centred approach where families are invited to identify their own problems and help form their own solutions. This is echoed in Barnes (2012) research, where participating SWs confirmed their lack of quality time with children and young people, and that the 'risk-averse' system is a barrier to relationship building with the families.

The high turnover of social work staff hugely affects the quality of the SW / child relationship with Curtis et al (2010) predicting the working life of a SW to be just eight years. It is interesting to note that out of the five SWs interviewed for phase one of this research only one had been qualified for longer than four years, two for three years and the remaining two were Newly Qualified Social Workers (NQSWs). With Working Together to Safeguard Children (2015) stating that s.47 enquiries (conducted when a child is thought to be suffering / at risk of harm) must be led by experienced SWs, a dilemma is presented to locality

managers who simply do not have the experienced staff to facilitate this. In my last local authority, s.47s were chaired by senior SWs, although the subsequent investigation was conducted by the SW and, in my team, all SWs were newly qualified. With children supposed to be at the heart of child protection planning, it is alarming to read that SWs often prepare care plans for children that they do not know and have never met (Cashmore, 2002; Beckett, McKeigue and Taylor, 2007) and there were clear links to ineffective and inadequate levels of participation observed in all identified research projects.

SWs were perceived to be poorly trained in participatory methods and constrained by timescales (Sanders and Mace 2006; Winter 2009; Polkki et al 2012; Jelcic et al 2012; Vis et al 2012; Cossar et al 2016; Dillon et al 2016). Indeed, my attendance at my first child protection conference, as the child's SW, was unaccompanied by any senior staff or management and I had received no training as to what to do / say. Issues such as lack of quality and regular supervision, hot-desking, poor pay and high caseloads pile further pressure on SWs, who then face criticism in the media and on social media for their inattentive and misguided practice, and in Serious Case Reviews (SCR) for the consequences of their actions. In 2015, a Greater Manchester local authority introduced a £3000 retention bonus for all child protection SWs who remained in post for an entire year; their recent Ofsted report had declared serious failings within their children's services department, along with criticisms of their failure to retain experienced staff. This study will therefore consider the impact of SW turnover, and the impact of the SWs' working environment and pre-qualification training programmes, on children and families. It will then discuss how participation of both children and parents in child protection planning is

subsequently hindered or enhanced. It is crucial that the child and their family are shielded from the anxiety caused by environmental and political issues within social care (Polkki et al 2012).

Participation was announced as being achieved in some of the research studies, although seemingly not celebrated; the focus remains on what we do wrong, our barriers and challenges. With SCRs continuing to highlight how the child's voice fails to be heard however, it is easy to overlook examples of successful participation. A sharp increase in child participation within Aldridge's (2013) research, following the provision of advocacy, demonstrated positivity around the case conference process, with children and young people feeling positive, supported and involved.

2.8 Parental Participation

Previous research has identified that parental participation and consent is the greatest barrier for child participation (Healy and Darlington 2009, Aldridge 2013). Models of youth participation are based on voluntary service users and ignore the complexity of parents who have rights to care for their children whilst the child is the subject of child protection allegations (McLaughlin 2007). The SW therefore is required to undertake risk-based assessments, influenced by the wishes and feelings of the child, all with the full cooperation of the parent; often no easy task for even the most experienced of workers.

The influence a parent can hold, concerning the risk posed to the child and the influencing of the child's opinions, can affect the voice of the child and prevent

the child from participating in their own planning (Holland, 2001). Out of the 23 research studies in the initial literature search, six were identified as having similar research criteria to this study, but with specific links to parental participation being the gateway to child participation. Two studies (Ney, Stoltz and Maloney 2013, Appleton et al 2015) followed a restorative approach, interviewing and observing professionals and family members about their involvement in, and experiences of, non-traditional child protection meetings. Darlington et al (2010) and Dickens et al (2015) interviewed parents and other key practitioners, with Dickens et al (2015) focusing on families who entered in to pre-proceedings. Muench et al (2016) conducted interviews with both parents and children, focusing on the barriers to parental and child participation.

O'Mahony et al's (2016) Ireland-based research was based on the views of court practitioners and SWs only, Ireland's 'in camera' rule preventing the data release, and subsequently the opinion, of families in the child protection system.

Munro's (2011) review of the child protection system introduced a new holistic way of working in statutory cases, combining initial risk based assessments and longer term core assessments in to one child-centred, family focused report.

Working in partnership with the family is also at the heart of restorative practice, yet the parents' feelings of disempowerment overwhelmingly dominate all research studies. Ney et al (2013:186) identify that within child welfare "the balance of power is tipped towards the state and notions of collaboration in full and equal participation may become sites of problematization", reminding us of the involuntary nature of the intervention. The power imbalance is fully clear to families; parental non-engagement with services or non-compliance with risk assessments can result in the removal of children (Dickens et al 2015) which

sits very uncomfortably in a traditional, empowering model of participation.

Dumbrill's research (2006, 2010) identified two strands of power at play within the field of child protection: power over the parents and power with the parents.

Participation by parents therefore rests on their ability to identify risk and take responsibility for their actions / non-action and be willing to make the necessary changes (Darlington et al 2010), yet three different parental responses emerged: opposition to social work, playing the game, or collaboration (Dumbrill 2006). These findings were partially echoed by Dickens et al (2015) whose study focused on the rhetoric of parents agreeing action plans with the local authority, yet were unwilling to change their behaviours. The imbalance of power in pre-proceedings is visually evident with the representatives from the local authority outnumbering the parent and their solicitor, and the presence of lawyers for both parties raising anxieties and tension (Dickens et al 2015).

Restorative and Signs of Safety case conferences were designed to encourage family activity and empowerment, adopting a solution-focused approach and 'working with' the family partnership to achieve the best outcomes for the child (Appleton et al 2015). Flaws in this process were however identified by some families who felt uncomfortable seeing their lives so critically and publically displayed on whiteboards or flipchart paper, despite the design of the conference being based on the parents' understanding of their situation (Appleton et al 2015). Feelings of shame, dehumanisation and worthlessness are commonly experienced by parents whose children are on CP plans (Gibson 2015), whilst some SWs continue to claim that 'they know best' (Arbeiter and Toros 2017). Jackson et al's (2017) small-scale study of 11 parents with

children on CP plans in Scotland however described positive relationships with their SWs, emphasising that outcomes for children improve as relationships with parents develop over time.

Further barriers to parental engagement and participation were identified, most falling in to an area classed as the 'system' (Darlington et al 2010). Both Dickens et al (2015) and Darlington et al (2010) remind SWs to examine the impact of poverty and inequality on the parents' lives because "a life history of personal, social or economic deprivation, including previous negative experiences with child protection authorities, is likely to impede this process" (Darlington and Healy 2010:1021). The focus of the CP 'system' remains on the parents: their choices, their behaviours and their capacity to parent (Featherstone et al 2018). The blame for child abuse and neglect within an austere and failing child protection system falls squarely on the victims, yet the structural pressures within families (e.g. low income, unemployment, disabilities and housing conditions) can restrict the parents' ability to provide good care for their child (Tobis 2013). Whilst the availability of good food, warmth and safety within the home directly affect the child and family, the indirect impact of parental stress, mental ill health and substance misuse, because of the structure of poverty, is often over-looked by assessing practitioners (Bywaters et al 2015).

The 'dance of responsibility' begins after practitioners decide that abuse or neglect exists within a family. (BASWTalk 2018). Families are passed from service to service, fragmenting the provision and reinforcing the need to be

diagnosed with something, anything, in order to receive support (Featherstone et al 2018). Cuts to the provision of youth and children centre services of around 50% in the past eight years, along with the rising costs of living, have affected poorer families the most (Parton 2014). This lower level of spending prevents local authorities from providing early help to vulnerable children, therefore increasing the need for child protection intervention (CIPFA 2011).

Findings from Wilkinson and Pickett's (2009) study of health and social problems suggest a very strong link between ill-health, social problems and inequality within communities, therefore the CP gaze must refocus on the efforts needed to raise children on that street, in that particular community (BASWTalk 2018). The shift from 'patch work' to city centre social work has distanced practitioners from the service user, both physically and psychologically, moving further away from family support and closer towards the blame and shame of parents (Featherstone et al 2018; Gupta et al 2016).

The shaming of parents by practitioners and the 'system' was evident in research by Slettebo (2013), focusing on parents who had had children removed and placed with foster carers. Research on this client group is scarce as the focus in social work research remains on the child. The four-year long project centred around collective participation, a political exercise aimed at improving services for all in the same situation rather than for individual gain. Within the study, a parent described how their child's foster carers were offered training and courses aimed at improving the foster carers' interaction with birth families and SWs. The birth parents were left to fend for themselves and make their way blindly through the system, which really strikes a chord with me. In my

previous role as a child protection SW, my focus was on risk analysis, chronology preparation, court reports and care planning. I recall having to remove a two-year old child due to chronic neglect; the child was found in their cot, in a derelict bedroom filled with debris, human and animal faeces and food waste. The child could not walk nor stand, had no speech and an unresponsive gaze, and was removed immediately from the care of the parents under s.46 of the Children Act 1989 (powers of police protection). I engaged with the parents to the best of my ability, holding numerous assessment sessions, explaining who would sit where in the court, even the quirk of that particular judge of doling out cash fines if their mobile phone rung in the courtroom. However, the emphasis needed to be placed on the child's safety, development and stability and therefore time spent with the parents, following the assessment, dwindled. Once the adoption order had been granted, the focus was fully on the child, with the parents liaising primarily with their family solicitor. My feelings of detachment towards the parent, in a context of 'my work with you is done', were similar to the findings in Collings and Davies (2008) Canadian study of frontline practitioners. Workers spoke about the child being the central character in their story and a figure to care about, whilst parents remain secondary figures, soon to become detached.

2.9 Summary

The findings from this literature review revealed areas of social work practice (or gaps within practice) that need further scrutiny. With children being included in only nine of the research studies, this thesis will explore the challenges of recruiting children on child protection plans as research participants, with particular focus on the role of the Gatekeeper. The presence of a child in

decision-making forums remains contentious due to the policies / approaches adopted at a local level; a blanket rule of 'no child under 11 years may attend meetings' for example could silence an interested and capable 10-year-old. The interviews will therefore include questions for all participants regarding the structure of CP meetings and case conferences, with specific attention to child participation. The importance of good, trusting relationships with children and their parents is undisputed throughout the literature review therefore this thesis will focus on the intricacies of relationship building, such as the parents' experience of social work visits and the child's feelings about their social worker and advocate. With the literature review highlighting examples of poor practice regarding appropriate information sharing, blurred advocacy boundaries and a practitioner workforce under pressure, addressing these issues within my research will provide new evidence regarding participatory social work practice.

Chapter 3: Methodology

3.1 Introduction

A Bourdieusian approach will underpin the discussion of participation levels in child protection proceedings within this thesis. Following a brief theoretical discussion, this chapter will address the design of the participant interview questions and the creation of innovative resources, along with a more detailed look at research sampling and inclusion criteria. Finally, I will introduce the issues of Gatekeeping when recruiting vulnerable young children as research participants. These issues (and their recommended solutions) are discussed in more detail within Chapter 6.

This study draws on the theoretical insights of Bourdieu in order to analyse social work practice. Applying a Bourdieusian lens will aid the conceptualisation of possible ways forward for participatory social work practice (Anka and Taylor 2016) therefore it was important to not simply 'tack on' a theoretical chapter at the end of the thesis. Instead, my new understanding of Bourdieu, particularly the concepts of capital, field and habitus, helped shape the design of the participant research questions and activities, allowing for contemplation and internal challenge throughout the years of my study. It is therefore important for me to position my theoretical framework introduction at the beginning of my methodology chapter.

3.2 Theoretical framework

Whilst rejecting the notion of himself as a 'theorist', Bourdieu encourages his work to be used as a tool to make sense of situations and problems (Webb, Schirato and Danaher 2002). The work of Bourdieu spans a wide spectrum of topics, including art, education, class, deprivation, the state and housing (Bourdieu and Wacquant 1992). Throughout this thesis, I will examine whether the concepts of Bourdieu are transferable to social work, with focus on the triad of field, habitus and capital. Deeper scrutiny will be given to *illusio*, where agents are committed players within a highly staked game, and how *illusio* is evident in child protection enquiries and multi-agency teamwork. Covering two epistemological strands - the logic of practice and reflexivity - Bourdieu's work encourages practitioners to contemplate practices rather than identify problems, which is wholly appropriate yet often overlooked in a time of fast-paced, risk focused child protection social work.

3.2.1 Social space, capital and habitus

The association between the actors / agencies within the field of child protection is relational, each connected primarily through difference (Bourdieu 1998). All have a reason for their position within this social space, the statutory nature of the child protection field ensuring that roles and tasks are allocated to safeguard the child. As a site of power, and a mass of cultural and economic capital, the local authority is dominant. SWs lead the child protection enquiry; their assessments are guided by the knowledge of the in-house legal team and supported by departments such as housing, education, drug and alcohol services and domestic violence units. At the opposite end of the social space,

the family remain a microcosm; the smallest, least knowledgeable, most dominated agency within the CP field (Emirbayer and Williams 2005).

Distribution and movement within the social space of child protection is wholly dependent on the type and structure of capital held by each actor or agency within the field (Bourdieu 1989). Actors gain privilege as they accrue resources or knowledge (Emirbayer and Williams 2005); families who fail to demonstrate understanding for safeguarding concerns will have less opportunity to progress within this social field than those who do. Ensuring that children and their parents have opportunities to participate meaningfully within child protection proceedings can add weight to their level and structure of capital, service users becoming more aware of both their human and legal rights and how they can affect decisions made on their behalf. The SW becomes the outlet for the voice of the child and the parent, via their assessments / court statements / statutory reports yet this relationship can be precarious; the SW, through disagreement or poor practice, can always silence the voice of the service user. The family therefore remain oppressed, despite their accrual of capital.

Two young people in France and Haddon's (2014:318) study of class theory and youth trajectories considered "their space" within their social field. The study focused on the experiences of two teenagers - a black 15 year old male from an under-privileged background and a mixed-race 16 year old female adopted in to a white middle-class family – and considered how their habitus influenced their life choices, opportunities and goals. Habitus relates to values, principles and tastes of that particular community, determined by mostly

unconscious responses to social rule (Bourdieu 1998). It shapes thoughts and actions, created and embedded as part of people's culture and underpinning their choices and processes as logical and obvious, to them. The two children participating in France and Haddon's (2014) study had differing parental expectations, work ethics and future career pathways, leading to a unique 'field of possibles' for both children; the male was focused on practical work opportunities requiring no academic skills, whilst the female was considering university. In social work, habitus reminds practitioners that families do not exist in a social vacuum (Bourdieu, 1989); the constraints of habitus and capital lead to varying perceptions of situations.

3.2.2 *Illusio*

The concept of *Illusio*, derived from the Latin word 'Ludus', is used by Bourdieu and Wacquant (1992) to compare a social field to that of a game. The involved actors have seriously invested in the *illusio*, with high-stakes and its 'playworthiness' being mutually accepted for all involved (Emirbayer and Williams, 2005). In the social space of child protection, where children on CP plans have been identified as being at risk of significant harm (s.47 Children Act 1989), there is an underlying acknowledgment that, if the risk of harm is not reduced, the child will be removed from their parents' care. For a parent, these are very high stakes indeed. Collaboration of all actors is imperative; in fact, social work assessments will often comment on, criticize or praise the level of engagement between the parents and the multi-agency team. Bourdieu (1998) recognizes, however, that there will be differing levels of interest amongst the players of the game. Whilst some take the serious investment in the *illusio* for

granted, others will have no concept of the rules or game etiquette. This is an indifference rather than a disinterest, as described by Bourdieu (1998:77):

The indifferent person “does not see why they are playing”...such a person is someone who, not having the principles of vision and division necessary to make distinctions, finds everything the same, is neither moved nor affected.

Examples of indifference in child protection social work are found in cases of parent / child discipline, where over-chastisement (such as smacking or hitting) by their parent has left marks or bruises. During subsequent social work assessment, parents may reflect on their experience of childhood discipline and their choice to parent as they were parented; after all, ‘it never did me any harm’. In one of my most recent cases, a nine year old Somalian child was assessed under s.47 (Children Act 1989) following a family member’s disclosure that the young girl had been subjected to female circumcision (otherwise known as Female Genital Mutilation) as a baby. Whilst examination of the child revealed that all was medically well, the mother acknowledged that a Pinprick circumcision ceremony (where the prick of a needle forces one drop of blood from the vulva) had taken place in Kenya when the child was two months old. The mother remained indifferent to the situation throughout the subsequent assessment; having been subject to full FGM herself as a teenager, she saw the process as a rite of passage, a symbol of female submission and community tradition, rather than child abuse. The case closed to children’s services following a period of education and with family agreement that their daughter will not be subject to further unlawful medical procedures.

3.2.3 Structural objectivism and *doxa*

Rejecting subjectivism, due to the absence of cultural values, Bourdieu embraces structuralist objectivism. The objective structures "independent of the consciousness and will of agents" (Bourdieu 1989:14) are reproduced; people are not creating the systems, instead the system is creating them (Webb et al 2002). In social work, the force of these structures shape the vision and behaviour of the child and their family, therefore requiring the SW to understand the 'lived experience' of their service user and attempt to see the world through their eyes. Whilst agency is assumed, the child and family have clear boundaries in place. Child protection case conferences and plans denote rigid commands for change, allowing children and parents to meaningfully discuss their needs and feelings yet unable to leave the confines of the process (or structure) without permission. Whilst striving to be inclusive, child protection conferences restrain thought and interaction due to the capital held by practitioners and the non-explicit rules of the 'CP game' (Bourdieu 1989). Indeed, Bourdieu's concepts explore the 'lived experience' of the social world, the taken-for-granted objective and internalised structures that create habitus and *doxa*.

Within my previous Australian role as Senior Intake Worker (duty team), I undertook several social work assessments for families living on a large council estate in Frankston, Victoria. Properties on these streets present synonymously with couches, barbeques and awnings in the front gardens. After sunset, the neighbours would socialise nightly with each other by moving up and down the streets, sharing alcohol and constantly changing gardens. The residents of the

streets were often the subject of referrals to children's services due to very young children being out late at night, mostly unsupervised, and police viewing the area as a hot spot for anti-social behaviour. In this Frankston community, it would have been difficult to assess a primary school-aged child and discuss an appropriate night-time routine with their parents; the cohesion, culture and structure of the community expected residents to participate in the nightly get-togethers and, due to the level of poverty within the area, entertainment had to take place within the home. In this scenario, Bourdieu's concept of objectivist structuralism would explore the values and desires held by this community along with the notion that each resident is living and parenting as they know best (Webb et al 2002). From a social work perspective however, it must be acknowledged that objective factors exist if a person is part of a field (Bourdieu 1989) and, in this example, practitioners had identified the children as being at risk of harm.

Doxa within the social work field can be identified throughout the use (or misuse) of s.20 (Children Act 1989) where children can be voluntarily placed by their parents into the care of the local authority, due to an inability to safeguard at that moment in time (s.20 (4) Children Act 1989). Whilst s.20 (4) reads as parent-led and informed decision-making, local authorities have been criticized for using s.20 as an alternative to local authority-led court proceedings when crises happen (Doughty, 2016). The voluntary position of the placement, which allows parents to reverse their decision at any time, is sometimes unexplained or misunderstood; parents assume that their children have been legally removed from their care as 'that is what social workers do'. As in Bourdieu's

(1999) research, families simply comply with SWs because they are unaware of their oppression, unknowledgeable of alternative options and therefore accepting of the situation.

Chapter 9 continues the Bourdieusian discussion in order to make sense of the responses and experiences of the participants taking part in this research.

3.3 Analysis: children as active research participants

The discourse of childhood, where children are seen as active social agents in their environments rather than passive and vulnerable, enables a child to participate in their own decision-making. The child should be placed as the subject of the research, rather than the object, implying that children are “sentient beings who can act with intention...considered as persons of value and persons with rights” (Greene and Hogan, 2005:3). Aldridge (2015) states that children who are victimised and abused, due to their powerless position of being a child, can still make important contributions to research due to them being social actors; it simply makes research more complex. The approach of constructivist research views children as dynamic and self-determining, where the child is both the ‘observed’ and the ‘observer’, and allows for relationships between the child and their environment to be examined over time and within particular contexts (Greig, Taylor and MacKay, 2013). The notion of child as the observed / observer is ideal for the proposed research; the lived experience of the child within the child protection system is needed to ensure good, participatory practice whilst inviting the child (as expert of their situation) to identify and effect change. The sensitively conducted research will ensure that

the contrasting discourses of child as victim versus child as solution finder (Sanders and Mace, 2006) place no further burden on the child already on a child protection plan.

3.4 Qualitative research

Qualitative research will enable the exploration of how children and parents on CP plans meaningfully participate in their own CP planning. It will assist my understanding of why social workers and participation workers choose particular methods of direct work with children and families, and how statutory information is shared appropriately with service users. Qualitative research will link experiences, discourses and practice together, whilst providing a context, then assist in interpreting local meanings (Flick 2014). As this research will be conducted within local authorities using differing approaches for CP social work, it is assumed that no one person's experience will be the same (Braun and Clarke 2013). The qualitative data will therefore provide a rich account of personal experiences.

A creative qualitative approach, comprising of semi-structured interviews and one focus group, has been used for this study. Semi structured interviews will be used with the social worker participants. The non-standardised nature of the interview allows questioning to be responsive to the participants' accounts, affording them time and space to 'stray' and discuss unanticipated, yet important, issues (Braun and Clarke 2013). It was anticipated that a participation workers' focus group would encourage data and insights that may not have surfaced during individual, private interviews (Morgan 1997). Focus

groups provide opportunity for participants to debate and negotiate meanings, generating a diversity that Lunt and Livingstone (1996) liken to 'everyday arguments'.

Whilst a separate creative exercise will be used with the child participants, a semi-structured interview was initially designed to underpin the exercise (see appendix 2, p: 345) and ensure that all topics of importance were discussed. This kept the exercise firmly on track, whilst allowing for flexibility and opportunity to discuss more sensitive issues (Braun and Clarke 2013).

3.5 Data analysis

Whilst not often recognised as a 'branded' approach (such as narrative analysis or grounded theory) thematic analysis is the identification, analysis and reporting of specific data corpus (Braun and Clarke 2006). For the purpose of this research, thematic analysis is a constructionist method, examining the way practitioners conduct direct work with children, explore wishes and feelings, share information and make decisions; "the effects of a range of discourses operating within society" (Braun and Clarke 2006:81). Recognised as a highly flexible approach, thematic analysis can be used to examine large amounts of data, reviewing differing participant perspectives and showing commonalities or differences (Nowell et al 2017).

To ensure that the collection of data does not lead to 'more of the same', the inclusion of parents, children and practitioners in this study will present a wider perspective and understanding of participation in CP (Braun and Clarke 2013).

Balancing the subjective experiences of the child and parent, alongside the statutory duty and practice of the SW / PW, creates a triangulation study which allows for the comparison and contrast of data.

Boyatzis (1998) described how the researcher's perception of patterns within the data corpus leads to classification, then analysis: making sense, consistent coding, development and interpretation of the data remain at the heart of thematic analysis. The data in this thesis will be described and interpreted, and balance between analytic narrative and illustrative extracts achieved (Braun and Clarke 2006). Whilst the data was analysed individually, each participants' thoughts or opinions were compared with others - other participants, other research findings, law and statutory guidance and my own exploration and writing. Chapter 5 therefore becomes a reflective exegesis, a critical interpretation of the participant interviews and focus group.

Nvivo software helped to manage the volume and richness of the data, whilst enabling the identification of patterns throughout participant responses.

Highlighting specific participant responses and grouping them into Nvivo 'nodes' (in accordance with the context of the discussion) allowed for themes and subthemes to be identified; for example, the children's use and explanation of emoji cards to describe their feelings of working with advocates. Qualitative researchers often talk about 'emerging themes' but as Braun and Clarke (2006) again point out this can be misleading as it suggests that data prepares itself, falling neatly into categories with no active involvement of the researcher. Whilst Nvivo assisted in organising the data, analysing the content and context of

participant information remained solely my responsibility. The data was analysed in two sets: Phase One (comprising of interviews with parents and SWs, plus a focus group of participation workers) and Phase Two (interviews with children).

An in-depth analysis of Tom's (Child participant - LA3) interview transcript formulated a Bourdieusian discussion of habitus in Chapter 9. Following the initial analysis and descriptive summaries, outlined in Chapter 8, Tom's transcript was scrutinised again to draw out life experiences and his associated feelings. This enabled the exploration of the underpinning structures and dispositions (Bourdieu 1990b) that shape and define Tom's habitus (Chapter 8), as displayed in table 3.1 below. Chapter 9 continues this discussion and uses the data analysis to present a visual image of the layering of habitus.

Table 3.1: Tom's habitus: using Tom's life experiences to define his habitus

Tom's experience	The influence on Tom's habitus
Seven house / location moves in ten years	<u>Instability and transience.</u> Lack of opportunity to form friendships or a community connection. No sense of 'home'. No local family. Interrupted education.
Abandoned pets	<u>Grief and loss.</u> Tom has food bowls set out for his missing pets in his living room.
Death of older sibling as a baby	<u>Bereavement.</u> Tom speaks about his sister as a valued member of the family.

Presence in child protection since a baby	<u>Risk</u> . Factual knowledge of risk from both father and stepfather. Lack of friendships due to the need to police check people with whom Tom spends time.
Cared for solely by his mother	<u>Family Loyalty</u> . Tom adores his mother and sees himself and his mother as partners.
Large number of allocated SWs	<u>Lack of relationship</u> , primarily due to transience.
Placement in foster care for two years	<u>Anger and mistrust</u> of SWs. Tom did not understand the reason for his removal and stated that no one listened or spoke to him.
Child protection plan currently in place	<u>Confusion</u> . Tom does not know why social workers are currently involved and what they are aiming to do for his family. This is creating <u>resistance</u> in Tom.
Lack of information sharing between the SWs and Tom	<u>Potential bias</u> . Mum is the sole sharer of CP information with Tom; Tom trusts her feedback but this could be creating bias.

To enhance the validity of the findings, a de-identified transcript of a random participant interview was submitted to an experienced social worker, with no links to any of the research participants, for review. The social worker agreed that the participant's voice and opinions were accurately represented within the thesis. Ongoing discussions regarding the research findings continued with the PhD supervisors throughout the duration of the research project.

3.6 Design of the interviews

3.6.1 Design of the child participant interviews

Due to the absence of a statutory model aimed at participation in child protection proceedings, Shier's (2001) voluntary Pathway to Participation framework underpins my design of the child interviews (as shown in figure 3.2, p:33). With the minimum level of participation in accordance with the UNCRC being identified by Shier (2001) as 'due weight being given to the child's views', Shier's model aligns itself firmly with s.22 (Children Act 1989) and s.53 (Children Act 2004). Consideration was given to each stepping-stone descriptor of Shier's Pathway to ensure that the child participants have full opportunity to discuss and give examples of their experiences of participation.

It makes sense that a new model of participation could be used by children's services, particularly concerning the process, or flow, of sharing information regarding decision-making in unattended meetings/ case conferences and the reasons for the meeting in the first instance. All participants within this PhD research study will be asked for their opinion on information sharing therefore the study will examine the responses of both service users and practitioners.

With the age range of child participants being from eight to twelve years of age, an innovative interview process is ideal for when a child feels misunderstood by adults, or in situations where the child feels that their perception of a situation is not valid (Waksler 1991). A study by O'Kane (2008) concluded that creative participatory methods could reduce the anxiety of the research study by developing a sense of 'mysticism'. The children in O'Kane's (2008) study

remained interested and intrigued to find out details of further activities, which in turn reduced their worry about what might happen next. Such child-driven methods see the adult and child as 'co-researchers' which can allow for a more equal balance of power. However, child-led research may produce obstacles; the child could choose to restrict conversation about particular topics or avoid this topic entirely, which can be problematic for the researcher and may require a renegotiated research title (O'Kane, 2008). In Cossar et al's (2016) research, the participating children chose prompt cards signalling the topics of discussion that were comfortable to them; the pre-preparation of these prompt cards however ensured that the discussion remained focused and true to the aims of the research study.

To address the above concerns, the child interview questions for this research were constructed and phrased to allow fluidity and continuity from all possible answers. Appendix 2 (p:345) details the format for the children's semi-structured interview.

A compilation of a 'treasure-chest' of resources, giving the child access to dolls, toy figures, paper, pens, name-cards, stickers and pictures (figure 3.3) enabled the child to illustrate and describe their experiences in a way that was familiar and unique to them.

Figure 3.3: Resources used for child interviews



The interviews with the child participants were designed to take place at a venue that was comfortable to the child. It was anticipated that most children would prefer to be interviewed within the family home which, whilst an appropriate place, can however create difficulties such as obtaining workable space for the participatory research or the freedom to speak without interruption or coercion from family members. The venues for the child interviews were therefore decided on a case-by-case basis.

3.6.2 Design of the parent participant interviews

The sometimes-uncooperative nature of parents can place boundaries in the way of SWs, with regards to undertaking direct work with children and seeing the child alone (Sanders and Mace 2006; Polkki et al 2012; Cossar et al 2016; Dillon et al 2016). It is therefore important to understand why such obstructions occur and whether parents wishing to restrict child participation consciously create the obstructions. With parents forming the last layer of gate keeping before the researcher (and also the SW) can speak freely with the child, it is imperative that the parents' understanding of participation, information sharing and social work practice is recorded and balanced alongside the experiences of their child.

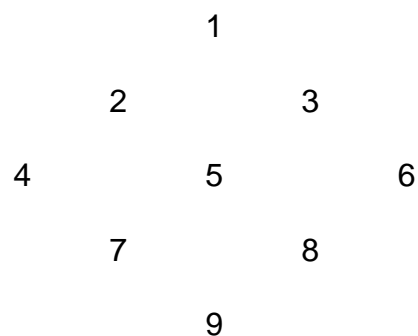
In order to keep the parent participants focused on the child's experience of participation, the parents completed a participatory research activity. The diamond-ranking exercise was a method used in O'Kane's (2008) 'Children and Decision-making Study' in order to maintain focus on a particular topic and to achieve a scaled outcome of opinion. The parents received nine factual statements, again underpinned by Shier's (2001) Pathway to Participation, each written on individual pieces of card. The nine statements were:

- My child's opinion is listened to
- My child attends their Child Protection meetings and case conferences
- I speak to my child about their child protection plan
- My child is able to speak to their social worker alone

- My child knows their social worker's name and contact details
- I encourage my child to voice their thoughts and opinions
- My child reads their Child Protection plan and minutes of the meeting
- My child influences decisions being made for them by adults
- My child has the right to be a child and not be part of CP processes

The parent participants placed these nine statements in a diamond-shape, in order of importance; cards at the top of the diamond were statements that the parents agreed with and believed to be important. Cards placed at the bottom of the diamond contained statements that the parents were not in agreement with or felt to be unimportant by the parent. Cards placed in the centre of the diamond were of lesser importance to those nearer the top. Using a diamond shape allowed parents to not focus too heavily on ranking the statements from 1 to 9 in order of importance, rather give an indication of what is most and least important to them and their child (O'Kane 2008).

Figure 3.4: Layout of a completed diamond-ranking exercise:



After placing the cards, the parents were asked to explain and justify their choices further, for example, “You have indicated that your child spending time alone with their social worker is, in your opinion, the lowest in importance of these nine statements. Can you tell me more about why you feel this way?”

Following the discussion of the parents’ interpretation of their child’s experience of participation, parents then contemplated their own personal experiences of participation, based again on the nine statements above. Examples of these questions were “do you read the minutes of the meetings and the child protection plan?” and “do you feel listened to?” Whilst the focus of this research will remain on child participation, hearing the experiences of the parent will identify the potential level of influence and positive / negative bias that can affect the experience of the child.

3.6.3 Design of the SW participant interviews

Previous research has demonstrated that SWs have inhibited child participation, within child protection proceedings, due lack of time, lack of knowledge and training or a lack of confidence (Sanders and Mace 2006; Jelcic et al 2012; Polkki et al 2012; Vis et al 2012; Cossar et al 2016; Dillon et al 2016). Phase One of this research study aims to find out the SWs’ interpretations of the term ‘wishes and feelings’ along with their perception of facilitating meaningful participation with the child, and building a trusting relationship with both the child and parent (Children Act 1989). Semi-structured interviews will also consider the imbalance of power, bureaucratic processes and environmental issues

encountered within child protection social work. Appendix 3 (p:348) details the interview questions used to facilitate discussion with the local authority SWs.

3.6.4 Design of the Participation Worker focus group

The local authority taking part in Phase One of the research had passed the responsibility of participatory work during child protection proceedings to a separate team of experienced child and family support workers. The Participation Workers (PWs) act as advocates for the children. It is their responsibility to conduct CP wishes and feelings work, as well as completing statutory “Missing from Home” interviews for looked after children. The local authority describes their participation referral system as an ‘opt out’ approach, aiming to meaningfully include all children aged 5 years and over.

With this being a very new scheme, it was deemed appropriate to include the PWs in this research, to understand more about their role. The negotiation of power from statutory SWs to experienced children’s rights / participation workers will be further explored and evidence gathered to fill the research gap in this area. I will also consider whether the participation team’s ‘in-house’ status affects their ability to provide an independent, confidential service, along with the value that children and parents place on advocacy.

With the participation team, in theory, receiving a referral for every child over the age of 5 years who is subject to child protection proceedings, it is likely that at least one person within the team will have worked with one or more of the child research participants. However, due to the confidential processes involved in

the recruitment of children and parents, there will be no links made to individual cases, rather a discussion of the current challenges and benefits of the participatory model used within the local authority.

LA1's team of participation workers consists of four members of staff. A focus group will be conducted to explore their understanding of participatory work and methods, and how this is currently working, as a new initiative, within their local authority. Appendix 4 (p:349) details the questions on which the focus group discussion was based.

3.7 Sampling

Consideration was given to saturation; previous research has indicated that no new information is gathered following 20 qualitative interviews and that saturation is actually achieved at a rather low level (Green and Thorogood, 2009). Taking into account the confidential nature of child protection proceedings and the substantial layers of gate keeping involved, the sample size for Phase One of this research was realistic, and as follows:

3.7.1 Children:

It was anticipated that five children aged 8-12 years would participate in Phase One of this study. All child participants would be on a child protection plan at the time of interview and all living at home with at least one parent.

Children known to be experiencing trauma or chaos at the time of the research were excluded from participating by the Local Authority. This exclusion was also extended to children who were living with another primary

care giver, in a different address to their parents at the time of the research, for example children in temporary local authority care or respite placements.

3.7.2 Parents:

The parents of all children aged 8-12 years, living at home whilst on child protection plans, were invited to take part in this study with the intention of interviewing five parents / couples. This sample included separated parents where the child may spend time at both parents' houses. Parents, who were identified as being extremely vulnerable, or where it was deemed too risky to approach the parent due to volatility, ill health or chaos within the home, were excluded from the study. Parents with parental responsibility for a child on a child protection plan but not involved in a co-parenting relationship with the primary caregiver, or estranged from the child, were excluded from the study due to privacy and confidentiality reasons.

3.7.3 Social Workers:

All SWs working with children aged 8-12 years at the time of Phase One research were invited to participate in the study. It was anticipated that five SWs will be interviewed and that the interviews will take place at the SW's offices. There were no identified reasons as to why SWs would be excluded from participating therefore all SWs who meet the inclusion criteria were contacted.

3.7.4 Participation Workers:

The team of four participation workers were invited to take part in a focus group.

There were no identified reasons as to why any participation workers would need excluding from the process.

It was therefore proposed that Phase One of this research will aim to recruit:

- Five children
- Five social workers
- Five parents
- A focus group consisting of four participation workers

3.8 Gatekeeping

Organisations that hold confidential child protection data must adhere to law and legislation (Children Act 1989, Data Protection Act 1998, WTTSC 2015) therefore consent to access service user information needs to be sought from a variety of adults in differing positions of authority, with different relationships to each potential participant. When acting as a gatekeeper to child participants, the argument of protection versus participation is predominantly at the forefront as "it is adults who determine whether necessary steps have been taken to protect children, thus entrenching a view of children as vulnerable and in need of [adult] protection" (Collings and Llewellyn 2016:500). Westlake and Forrester (2016:1540) urge researchers to be cautious during participation recruitment as "...overstating the vulnerability of service users can take the decision-making power away from them and place it in the hands of the gatekeepers...who may decide that they are too vulnerable to participate". Whilst gatekeeping can

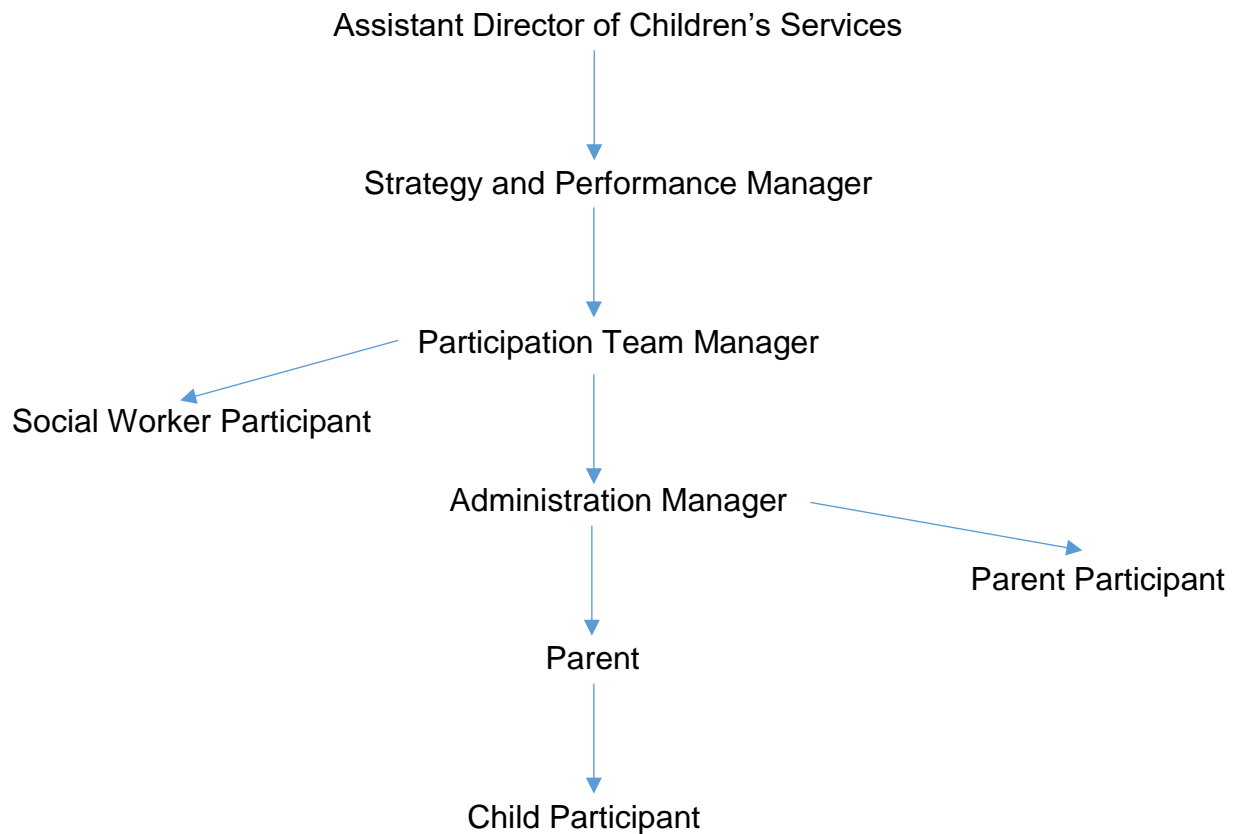
therefore effectively halt research before it begins, accepting this decision-making without challenge or further exploration of the child's opportunities to participate is however in direct conflict with the both the requirements of the UNCRC and s.53 (Children Act 2004). The child is at the heart of the child protection plan and it is therefore essential that we learn of the impact of such proceedings on the child's understanding and emotions; this will in turn influence statutory guidance.

The large number of gatekeepers restricting access to vulnerable young children is surprising. Turner and Almack's (2016) research with children and young people uses the phrase 'wheels within wheels', signifying the grinding of cogs in a machine; each turn building a new relationship, allowing the next wheel in the machine to turn and producing hierarchical layers of gate-keeping. Collings and Llewellyn (2016) struggled to recruit child research participants via their local authority, the lack of interest and support from the SWs preventing their first 'wheel' from turning and forcing them to continue child participant recruitment via a voluntary advocacy agency.

Such an intricate process of relationship-building takes time; the local authority involved in Phase One of this research study demanded a very detailed research proposal along with further questioning on certain aspects of the methodology, before allowing me to make contact with the next layer, or wheel, within the gatekeeping hierarchy. Following this initial screening, three further managers needed to authorise my access to their child protection data. In total, there were four layers of gate keeping that needed to be addressed prior to

speaking to a SW, five layers to speak to parents and six layers to speak to a child “thereby relegating children’s participatory decision-making as secondary” (Collings and Llewellyn 2016: 501).

Figure 3.5: Layers of Gatekeeping in Phase One (LA1)



3.9 Summary

The writings of Bourdieu encourage practitioners to contemplate practice rather than identify problems (Bourdieu 1990b). The concepts of field, capital, habitus, *illusio* and *doxa* will underpin my analysis of all participant data gathered from Phase One and Phase Two and will be discussed further in Chapter 9. Using Shier’s (2001) model of youth participation as a base for the design of participant questions encourages further exploration into linear models of

participation within CP social work. Finally, the hotly debated topic of gatekeeping within social work practice and research introduced the impact (or barriers) to recruiting vulnerable young people as social work research participants; this will shape discussion within Chapters 5 and 6.

Chapter 4: Methods

4.1 Introduction

This Chapter will describe the practical dilemmas faced by many researchers, including participant selection, recruitment and issues with both ethics and sampling. A more detailed reflective discussion in section 4.7 will highlight deliberations arising from the data collection that had not previously been considered; these include the vulnerability of the parent participants at the time of their interview, along with the logistics of using creative resource methods.

4.2 Participant selection – parents and children

An outreach email explaining the purpose of this PhD research study was sent to the Assistant Director of children's services within LA1 in June 2016. Within two weeks, the manager of the Participation Team invited me to present my research proposal at a meeting in July 2016. The response from the Local Authority was positive; their participation team funding was under threat and therefore research into the levels of child participation within their authority was crucial to them in the light of their potential restructure.

In 2016, LJMU granted this study full ethical approval along with formal acceptance of the PhD proposal. At the request of LA1's Strategy and Performance Manager (SPM) a full research proposal was submitted to LA1 for their perusal. The intention to video record the interviews with child participants caused initial concern for the SPM, their worries based on confidentiality and privacy issues for the families involved. These concerns alleviated quickly,

following an explanation that the video recordings were to capture the child's body language and gestures that voice recording alone would not demonstrate. Full permission to conduct research within LA1 was granted in late October 2016.

In November 2016, LA1 supplied an anonymized list of children aged 8-12 years who were the subject of child protection planning. All children were living at home with at least one parent. At the time of the data collection, there were 237 children aged between 0 and 17 years on child protection plans; 44 children fell in to the sample size for this research study (see table 4.1).

Table 4.1: Number of children aged between 8-12 years on a CP plan, living at home, in LA1 (in November 2016)

Age of child	Number of children on CP plan
8 years	12
9 years	9
10 years	13
11 years	8
12 years	2
Total	44

The design of the parent and child interview questions required no previous knowledge regarding why the child was subject to child protection proceedings. The information supplied by LA1, however, did give an indication to the categories of abuse assigned to each child protection plan; these are shown in figure 5. Being privy to this information ensured that I, as the principal

researcher, could prepare for the use of body language, gestures or insinuations that may be used by the child or parent participants during the interviews.

Table 4.2: The categories of abuse recorded for the children aged 8-12 years on a CP plan, living at home, in LA1 (in November 2016)

Category of Abuse	Number of Children
Physical abuse	0
Emotional abuse	26
Neglect	18
Sexual abuse	0
Total	44

Whilst 44 children had been identified as eligible to take part in the study, the number of sibling groups needed to be identified for the purpose of outreach to both child and parents; the increased number of children aged 8-12 belonging to the same family would reduce the number of parents eligible to take part. The sample of 44 children belonged to 33 different families, the family composition displayed in figure 6. It must be noted that these families may have had multiple other children also on child protection plans who fell outside of the 8-12 age range therefore the family make-up (as shown in figure 6) may not be reflective of the actual family composition. This has been noted within the interviews with SWs who spent time reflecting on their differing direct work with children, depending on the ages of the siblings.

Table 4.3: Family composition of the 44 children aged 8-12 years on a CP plan, living at home, in LA1 (November 2016)

Family composition	Number of families	Total number of children aged 8-12 yrs on CP plans per family
One child	24	24
Two children	7	14
Three children	2	6
Total	33	44

With the aim of collecting as varied participant experiences as possible, I intended to interview only one child or one parent per participating family unit. Whilst good practice should mean that each child's direct work is tailored to their age and stage of development, the recruitment of five child participants from five different families would ensure the most varied responses. Recruiting either the parent or the child to the study reduces the chance of the parent's opinion / experience of participation influencing the voice / experience of the child, or vice versa.

The information supplied from LA1 initially showed the name of the allocated SW for each child. At my request, the names were redacted and replaced with SW 1, 2, 3 etc.; this was necessary to prevent me from making links between the allocated SW and the participating parents or children, during either interviews or the recruitment process. The supply of case numbers for each child allowed for the identification of both sibling groups and allocated SW, showing precisely how many SWs were involved with the sample of 44 children and whether some SWs had more than one family within the sample (see table

4.4). This was an important step as it eliminated any potential bias or influence due to the SW's length of experience in child protection social work, their ability to work effectively (or ineffectively) with children and parents, their approach to social work and their skills set.

Table 4.4: Breakdown of social worker allocation to the families and children (aged 8-12) identified as eligible participants in phase one, LA1 (November 2016)

Social worker	Number of families within the sample on SW caseload	Family composition (of children aged 8-12)
Social worker 1	One family	Sibling group of two
Social worker 2	Two families	Sibling group of two
		One child
Social worker 3	One family	One child
Social worker 4	One family	Sibling group of two
Social worker 5	One family	One child
Social worker 6	One family	Sibling group of two
Social worker 7	One family	Sibling group of three
Social worker 8	Two families	One child
		One child
Social worker 9	One family	One child
Social worker 10	Two families	Sibling group of three
		One child
Social worker 11	Two families	One child
		One child
Social worker 12	One family	Sibling group of two

Social worker 13	One family	Sibling group of two
Social worker 14	One family	One child
Social worker 15	Two families	One child
		One child
Social worker 16	One family	One child
Social worker 17	Two families	Sibling group of two
		One child
Social worker 18	Two families	One child
		One child
Social worker 19	One family	One child
Social worker 20	One family	One child
Social worker 21	One family	One child
Social worker 22	One family	One child
Social worker 23	One family	One child
Social worker 24	Two families	One child
		One child
Social worker 25	One family	One child
Total	33 families	44 children

Following the identification of the number of children, families and allocated SWs the sample was broken down further to identify which of the 33 families will be targeted for parent participants and which for child participants. The number of single children / sibling groups were distributed equally into either a) outreach for either child or b) outreach for parent, ensuring that the family composition in the outreach group for parents was as similar as possible to the outreach group

for children. Where an allocated SW was linked to two different families within this sample, one family was placed in the ‘outreach to parent’ group and the other family in the ‘outreach to child’ group. This technique, highlighted in figure 8, ensured that participants were able to report on a wider experience of parental or child participation (or non-participation) whilst working with that particular SW. Out of thirty-three families, seventeen letters were sent to parents, inviting their child to take part in the study. Sixteen letters were sent to families, inviting the resident parent (or parents) to participate in the research.

Table 4.5: Breakdown of social worker allocation to the families and children (aged 8-12 years) identified as eligible participants in phase one, LA1 (November 2016) and the division of the sample into potential parent / child participants

SW ID	Number of allocated families on caseload	Family composition of children aged 8-12 years	Person from family invited to take part in research study
Social worker 1	One family	Sibling group of two	Child
Social worker 2	Two families	Sibling group of two	Parent
		One child	Child
Social worker 3	One family	One child	Child
Social worker 4	One family	Sibling group of two	Child
Social worker 5	One family	One child	Child
Social worker 6	One family	Sibling group of two	Child
Social worker 7	One family	Sibling group of three	Parent
Social worker 8	Two families	One child	Child
		One child	Parent
Social worker 9	One family	One child	Child

Social worker 10	Two families	Sibling group of three	Child
		One child	Parent
Social worker 11	Two families	One child	Parent
		One child	Child
Social worker 12	One family	Sibling group of two	Child
Social worker 13	One family	Sibling group of two	Parent
Social worker 14	One family	One child	Parent
Social worker 15	Two families	One child	Parent
		One child	Child
Social worker 16	One family	One child	Parent
Social worker 17	Two families	Sibling group of two	Parent
		One child	Child
Social worker 18	Two families	One child	Child
		One child	Parent
Social worker 19	One family	One child	Parent
Social worker 20	One family	One child	Parent
Social worker 21	One family	One child	Parent
Social worker 22	One family	One child	Child
Social worker 23	One family	One child	Child
Social worker 24	Two families	One child	Child
		One child	Parent
Social worker 25	One family	One child	Parent
Total	33 families	44 children	Child outreach:
			17 families
			Parent outreach:
			16 families

4.3 Outreach to Parents and Children

Using the data sheet supplied by the Local Authority, outreach mailshots were prepared for each of the parent / child potential participants. These contained:

- A letter written and signed by the Participation Team Manager, introducing the research proposal and myself as the principal researcher. As parental consent was needed for child participants, all of the letters at this stage of recruitment were aimed at parents, despite the intention to interview either the parent or the child
- An LJMU ethically approved participant recruitment letter signed by myself. The letter stated that the local authority would follow up the letter with a telephone call if no response was received from the family
- A participant information sheet
- A case identifier number on the corner of the envelope. Due to confidentiality and ethical processes, the name and address of each potential participant was completed by the Administration Manager (AM) prior to posting and remained unknown to me.

The letters posted in mid-November 2016 generated nil response. Follow-up telephone calls to the families began late November 2016; these were conducted by the AM. If the recruitment telephone calls diverted to voicemail, no message was left. This was due to a) the participant having already received the participant recruitment information and b) to ensure that another person did not intercept voicemail messages which may have resulted in a breach of confidentiality.

If a parent answered the telephone and consented to being contacted directly by myself, AM recorded their name and telephone number; I completed all follow-up calls on the same day of the initial outreach telephone calls. Figure 9 displays the outcome of the initial telephone outreach to potential parent participants, whilst figure 10 shows the outreach to parents of potential child participants.

Table 4.6: Outcome of telephone calls made by AM to potential parent participants (November 2016)

Parent	Outcome of Phone Call by AM	Outcome of follow-up call by Researcher
1	Voicemail – no message left	
2	Consent given for researcher to contact parent	Appointment to interview parent made
3	No working telephone number on case file	
4	No telephone number on case File	
5	Consent given for researcher to contact parent	Appointment to interview parent made
6	Consent given for researcher to contact parent	Appointment to interview parent made
7	No telephone number held on case file and it was not clear which parent the children were living with	
8	Voicemail – no message left	

9	Case notes indicated that children were temporarily in the care of Grandparents, therefore ineligible to participate in this study	
10	No answer	
11	No answer	
12	Consent given for researcher to contact parent	Appointment to interview parent made. Parent subsequently withdrew from the study, prior to interview, due to the ill health and hospitalization of their child.
13	No working telephone number on case file	
14	No working telephone number on case file	
15	Consent given for researcher to contact parent	Appointment initially made to interview parent. However, following further discussion with parent and PM it was agreed that the parent was too vulnerable to participate in the study, due to illness.
16	Consent given for researcher to contact parent	Appointment to interview parent made

Table 4.7: Outcome of telephone calls made by AM to the parents of potential child participants. Due to the lack of response, this exercise was completed again one week later.

Parent	Outcome of initial telephone call by AM	Outcome of subsequent telephone call from AM, one week later
1	No answer	No answer
2	No working telephone number on case file	No working telephone number on case

3	Children had been removed from CP plans therefore no longer eligible to participate in the study.	Not applicable
4	Children had moved out of the area and were no longer on CP plans	Not applicable
5	No working telephone number on case file	No working telephone number on case file
6	Parent stated that they would revisit the participant information sheets but did not consent to be contacted by the researcher	Not applicable
7	No working telephone number on case file	No working telephone number on case file
8	No working telephone number on case file	No working telephone number on case file
9	No working telephone number on case file	No working telephone number on case file
10	No answer	Parents refused consent to be contacted by the researcher
11	No working telephone number on case file	No working telephone number on case file
12	Voicemail – no message left	Parent consented to be contacted by interviewer and permission granted to interview child. However, neither child nor parent turned up for interview and were no longer contactable.
13	Children were now LAC and therefore no longer eligible for the study	Not applicable
14	Voicemail – no message left	No answer
15	No working telephone number on case file	No working telephone number on case file

16	No working telephone number on case file	No working telephone number on case file
17	No answer	No answer

4.4 Recruitment of social workers and participation workers

In accordance with LJMU ethical guidelines, the Participation Team manager within LA1 assisted with the recruitment of SW and participation worker participants; no direct recruitment between myself, as the principal researcher, and the potential participants took place. Participation information sheets / letters were sent to all of the twenty-five SWs identified as working with children aged 8-12 on CP plans, along with the four members of the Participation Team. All members of the Participation Team responded very quickly and a focus group date was set for December 2016. Following a ten-day period of nil response from the SWs, a reminder email sent by the Participation Team manager resulted in five SWs consenting to take part.

4.5 Ethical guidelines

The period of participant recruitment adhered strictly to LJMU's ethical framework and guidelines. Participant information sheets indicated the confidentiality of information collected and provided links to supporting services if needed. Prior to beginning the research, I undertook a full DBS check and prepared a risk analysis and lone-working plan. When visiting the home of service users, all members of the supervisory team were alerted at both the start and the end of the interview. There were no disclosures of harm made

during the participant interviews, although written procedures ensured that referral processes were robust and that appropriate support identified.

4.6 Summary of Participant Recruitment

The number of participants taking part in Phase One of the research are shown in table 4.8 below:

Table 4.8: Summary of participants for phase one

Participant	Number taking part in Phase One research
Social Worker	5
Participation Worker	3
Parents	4
Children	0

4.6.1 Social Workers:

The study achieved its target sample of five SWs. All interviews with the five SWs took place within the Local Authority offices in December 2016; there were no interruptions during any of the interviews. Interviews ranged in length from 52 minutes to 65 minutes. All have been fully transcribed and coded using NVivo software.

4.6.2 Participation Team:

Three of the participation workers attended a 1.5-hour focus group held within Local Authority Offices in December 2016. One of the full-time workers could not attend due to ill health. Having only three participants, the focus group was indeed small. Morgan (1997) states that focus groups should ideally contain between six and ten participants although stresses that this is a typical number, rather than a requirement. His concerns were due to the possible difficulties in sustaining discussion if the group is too small, yet admits to having held successful focus groups containing just three highly involved participants (Morgan 1997). For the purposes of this research, there were only four members of staff employed within the PT, therefore restricting the ability to include a higher number of participants. Despite these field constraints, the focus group generated 1.5 hours of rich data, deemed very suitable for inclusion and discussion within this thesis.

4.6.3 Parents:

Whilst six parents consented to participate in this research study, only four interviews were completed. This was due to:

- a) One parent being excluded from the study by the Local Authority due to concerns about her health
- b) The child of a potential participant being admitted to hospital during the week of the scheduled interview

All interviews took place within the family home and ranged in length from 17 minutes to 57 minutes. The interviews were transcribed and coded using NVivo software.

4.6.4 Children:

The recruitment of child participants for Phase One was unsuccessful, due to the following reasons:

- The sample size was extremely small, limiting the possible amount of responses
- None of the 17 families responded to the initial participant outreach mailshot
- Two families spoken to by AM refused to give consent for contact. In accordance with ethical guidelines, no further explanation was sought from the parents and the parents did not volunteer this information
- Eight of the seventeen children had no working telephone number recorded on their case files. This proved frustrating for both the AM and the PTM, although from my experience as a SW this is not unusual. Parents change mobile telephone numbers frequently and new numbers may be stored in the SWs' case notes, instead of on updated cover sheets. This factor however requires further scrutiny within the discussion chapter as it clearly provided a barrier to both this research and to the ability for the parent to be contacted (in general) by the Local Authority safeguarding unit.
- One parent consented to contact from the researcher but was not present at the time and place arranged for the subsequent meeting. All attempts to contact the parent following the unsuccessful meeting failed and outreach ceased from this point.

4.7 Reflection on Phase One methods

Following the completion of the interviews and focus group in Phase One, a brief period was spent reflecting on the research experience. With parents, SWs and participation workers being aware of my status as a qualified and registered SW, my experience in CP social work and my interest in child participation, the interaction between myself and the participants became reflexive. Probst (2015:37) describes reflexivity as "the awareness of the influence the researcher has on the people or topic being studied" and that a circular relationship forms between the researcher and the participant; participants will often direct information and attention back to the researcher. Research studies are socially constructed (Finlay 2002; Enosh and Ben-Ari 2016) creating differing agendas and viewpoints dependent on the positionality of the participants and the researcher. The result is a "web of social interactions in which both researchers and participants play major roles, negotiating perceptions of reality, meanings, and interpretations" (Enosh and Ben-Ari 2016: 582) and ultimately constructing collaborative knowledge (Probst 2015). Whilst it is essential that we understand how our values and ethics can affect and shape the emerging themes of our research, the focus must remain with the participants (Finlay, 2002; Pillow, 2003; Probst, 2015; Enosh and Ben-Ari, 2016) and must not stray into indulgent self-analysis (Pillow 2003). The following reflections therefore discuss only the pertinent issues that had clear impact on the research:

4.7.1 Disclosure of positionality

The decision to disclose my SW status was important to me. Parents of children on child protection plans are vulnerable; aside from the risky or abusive situation their child is in, the presence of a SW (albeit a worker previously unknown to them) can lead to a power imbalance due to the perceived statutory authority held by a LA SW. In my position as 'researcher' and not 'SW employed by a local authority', this perceived power was not present and my responsibilities within each interview lay within the framework of ethics alone. A non-disclosure of my SW status to the parent participants would have felt as a lie by omission; the parents needed to make an informed choice of what information and feelings to share with me. Conversely, sharing my practice and academic experience with the SW participants and the members of the participation team enabled me to validate the practitioners' ability to use jargon and acronyms, and to understand their sometimes sarcastic and humorous responses to interview / focus group questions.

4.7.2 Design of the Diamond Ranking Exercise

Along with a semi-structured interview, it was perceived that a Diamond Ranking Exercise would be useful in maintaining parental focus on their child's experience of participation and prevent an over-emphasis on parental reactions to CP social work. Whilst the exercise generated interesting and informative data, I had not anticipated the amount of space needed in order to facilitate it effectively. In Parent One's home, the living room was extremely cluttered; I had to carefully move the parent's belongings off a small coffee table in order to create room for the activity. The table did not provide enough room to create a

diamond-shape but instead the cards were laid out in a vertical, hierarchical column; this did not however detract from the quality of the interview.

Whilst there was no issue with space in the home of Parent Two, the presence of the parent's youngest child (aged 8 years) resulted in the diamond-ranking cards being moved around by the child during the activity. Again, this did not detract from the purpose of the activity. However, the parent clearly felt unable to speak openly about their view of child participation, as their child repeatedly joined them during the interview process; to avoid the child hearing information that the parent deemed inappropriate to share, they chose to use hand gestures, whispering and acronyms. Further discussion in relation to parent / SW conflicts in transparently sharing information with children will be take place in Chapter 5.7 of this thesis.

4.7.3 The vulnerability of service user participants

A loud, verbal argument could be heard taking place in the home of Parent Three whilst I was waiting outside. The parent admitted to having forgotten about the appointment and presented as flustered, yet chose to continue with the interview. Two adult children were present in the home at the time of the interview but neither showed interest in the questions nor the researcher's agenda. Whilst the parent was content to take part in the resource activity and interview, there was an air of tension; the parent was packing to move home the following day and the interview felt superfluous to the parent's needs and intrusive. I therefore chose to keep the activity and interview brief.

4.7.4 The design of the child participant interviews

During the Phase One research interviews with parents, SWs and participation workers, it became apparent that LA1 did not extend child protection case conference invitations to children aged under 12 years. The child's attendance at case conference remains a very grey area in social work practice and appears to differ widely between authorities; this will continue to be discussed in Chapter 5.6 of this thesis. At the time of the research design, this blanket rule was not known to the researcher and, with hindsight, many of the child interview questions would have been inappropriate.

Chapter 5: Findings and Discussion from Phase One Interviews and Focus Group

5.0 Introduction

The following eight sections within Chapter 5 present the voice of each participant in the same format. Whilst the data was analysed individually, each participants' thoughts or opinions were compared with others - other participants, other research findings, law and statutory guidance and my own exploration and writing. Chapter 5 therefore becomes a reflective exegesis, a critical interpretation of the participant interviews and focus group.

The heart of this chapter focuses on five over-arching themes identified within Phase One findings; wishes and feelings, relationship building, advocacy, decision making and information sharing. Each theme will be deeply scrutinized, in order to identify even the smallest participatory gaps within social work practice and suggest alternative ways of working. Using the analysis and interpretation of Phase One findings, this chapter concludes with a newly created model for participation within child protection proceedings.

5.1 Participant Introduction

Short biographies of the SW and parent participants have been included to provide a brief contextual background. Whilst an overview of the PT is provided, individual biographies are not; this is due to the small-scale nature of the PW focus group and the need for anonymity.

5.1.1 Parent Participants

Parent One was female. She had four children on child protection (CP) plans aged between five and fifteen years; two children fell in to the sample age range of 8-12 years. The children had been on CP plans for fifteen months and the parent estimated that this would continue for at least another five months.

Parent Two was male. He had two children on child protection plans, both aged between eight and twelve years. The children had been on CP plans for eight months and were in pre-proceedings; this process was due to end, owing to the positive progress that the parents had made.

Parent Three was female. She had two children on child protection plans, aged two and ten, and four adult children. The children had been on CP plans for three months.

Parent Four was male. He had four children on CP plans, aged four, nine, ten and fourteen. The children had been on CP plans for 12 months and the family were in pre-proceedings. The fourteen year old was in foster care at the time of the interview.

5.1.2 Social Workers

SW1 was full-time with 27 children on her caseload and described herself as 'flustered'. She had been qualified for 4 years. At interview, managers promised her only 13/14 cases due to the restorative model and 'working across thresholds'; in this particular LA the SWs hold cases from duty and referral, all

the way through to adoption. Cases that go into crises take time away from the other more steady cases, such as looked-after children. She was therefore finding her role hard.

SW2 was full-time with 24 children on her caseload; she stated she was 'coping'. SW2 had been qualified for 3.5 years and agreed with SW1's reflection on their workloads, particularly regarding the managing of crises.

You need to put safety plans into place, you need to make sure that tonight that child will eat and that child will have a safe bed and...you know. And if that means you have to cancel your visit to your looked-after child and do it another day, you have to do that.
(SW2)

SW3 was part-time and had 18 children on her caseload. She had been qualified for five years. Some of her cases she described as 'time intensive' and the duty system meant that they lost one week out of four from moving those families forward. She felt she would make more progress if she had more time to work with each family.

SW4 was full-time and had 25 children on her caseload. She had been qualified for 2 years. She found working across the entire range of statutory intervention, from duty / referral to adoption, very difficult due to the competing demands of each threshold of child protection social work.

SW5 was completing her ASYE and had been qualified for 18 months. She had 20 children on her caseload despite being informed she would not have more than 16 during her ASYE. At peak, she held 28 children with 11 on CP plans. At

the time of interview, her caseload comprised of children with Team around the Child (TAC) plans, CP plans, care plans and several s.7 (Children Act 1989) reports.

5.1.3 Participation Team (PT)

The PT estimated that there were 70 children on their caseloads across the entire team. With LA1 operating an opt-out referral system, this meant that 160 children were not being offered an advocacy service. Whilst some of these 160 children were aged under five, and some may have refused the service, there remained a significant number without an advocate due to the working capacity of the team. Participation Worker 2 (PW2) thought she had approximately 19 families that she visited throughout the year, seven or eight of these on a regular basis. The role of the PW was to offer impartiality, uphold the rights of the child and emphasize the child's voice throughout proceedings. This aligns perfectly with the role of an advocate, the Department for Education and Skills (2004:8) stating that "advocacy is about speaking up for children and young people and ensuring their views and wishes are heard and acted upon by decision makers".

5.2 Participation - understood, embedded or after-thought?

Participation is expected in social work practice but seldom meaningfully defined, or consistently implemented, by practitioners. With the absence of robust participatory guidance for CP social workers creating a chaotic (or haphazard) style of working, participation remains dependent on the SWs experience, training and knowledge. The interviews therefore began by asking

the SWs and the PWs for their definition of participation and their interpretation of the phrase 'wishes and feelings'. Their answers were analysed against fellow participant responses and statutory guidance, allowing for identification of blurred boundaries, duplicated roles and misinformed practice.

PW1 provided their interpretation of participation in CP social work:

Being involved. As the word says, participating means being part of the whole process, knowing what's going on. And having an understanding of what's happening and being involved about potential decisions being made for you.
(PW1)

Immediately, in this initial interpretation of participation in CP, we are reminded of the contrasting nature of CP social work and other non-statutory organizational activities / procedures embedded in the models by both Hart (1992) and Shier (2001). PW1 spoke of decisions 'being made for the child' by practitioners rather than 'with the child', practice that would only reach rung four (out of eight) of Hart's ladder of participation and level three (out of five) of Shier's Pathway to Participation. Schofield and Thoburn's (1996) research agreed that whilst adults retain the ultimate decision-making power in CP social work, children should be actively involved within the process, a finding echoed by PW3:

I think they're not completely involved in the decision-making stage necessarily but then that's not always appropriate...you can't just have a kid going 'right, this is what I want to do with my life'. And if they don't have that experience then professionals have to make those decisions...And being involved in the decision-making process you know...being able to identify...I mean it's not always appropriate for a young person to be told to identify the issues but you know... (PW3)

This sentiment aligns with the findings from Sanders and Mace (2006:90) where they identified the “tension within CP between the child as the powerless victim...and the child as the potential unlocker of the solutions to their own difficulties”. This tension was further enhanced when PWs concluded (during interview) that instead of being embedded in to the culture of their local authority, their ‘wishes and feelings’ work followed a regimented timetable or chain of events.

We almost only want it at specific times. We only want their views and wishes on child protection when they’re coming to conference. Our point of view, from the participation team, we only get involved when that referral has been made for a child protection conference. (PW1)

This sits uncomfortably with PW3’s view that participation is “young people’s involvement throughout the whole process, not just a little bit of it” and could signify a massive gap in their efforts to embed participatory practice throughout CP social work. With only 4 participation workers, and around 200 eligible children needing a service, it would be impossible to liaise with every child throughout their three / six / twelve / eighteen months CP journey. Due to the low staffing numbers, the current participation team manager within LA1 screens referrals and chooses appropriate ones for her team. Levels of gatekeeping are then in place between the PW and the child, with the PW needing consent from the child’s SW and the child’s parent before being allowed to liaise with the child. Whilst gatekeeping is essential in protecting vulnerable children, I question whether gatekeeping for advocacy reasons is a breach of Article 12 of the UNCRC (1989). The child is an involuntary participant

in child participation proceedings; their right to be involved and informed, as well as kept safe, is of paramount importance.

There is a need for honesty and transparency throughout child protection social work practice. Parents and children can remain anxious and worried during the weeks when no visits take place (Dillon et al 2016) and PW2 spoke passionately about wanting to see the children on their caseload more regularly. Due to their heavy workload, however, this often cannot happen.

Because I'm not seeing them constantly, a lot of them, after initial [case conference], I'll know that I'll see just before, or a few weeks before, reviews [case conferences]. I don't want to go out and meet them just 2/3/4 times. I want to go and meet them for five weeks constantly before the review, or for two weeks after the review to go and do different ways of explaining it to them.
(PW2)

In LA1, there is opportunity for participatory work by the PWs to continue immediately after conference, but this is with the manager's permission and not a usual occurrence. During their interviews, the SWs also referenced the 'one-off' visits of the PWs, whilst the PW similarly stated their concern for the lack of contact / explanation by the SW following CP case conferences.

When they come out [of ICPC] they're shell-shocked. They don't know what's going on. And it amazes me in some cases that I have, this funny feeling I have when I'm sat in a planning meeting, and rather than wait 'til a few more months, sometimes I think four weeks? I might just go and see how they're doing. And you're talking to a family there who've been dragged in...'We're so concerned about you, you are going on child protection!' Five weeks later...'how's it going?' Not seen anyone yet. You know that happens quite regularly. It's something I've identified and I feel I'm banging my head against a brick wall and I'm trying to create a drop-in to just fill that little gap. Parents could come to us, just to clarify things. Or we could chase up a little here and there.
(PW2)

These responses suggest that participatory practice and 'filling in the gaps of knowledge' are wholly dependent upon practitioner availability and capability. In the narrative above, PW2 is describing the emotions and experiences of a parent following an initial case conference, and identifying what they perceive as a gap in SW service for the parents. However, most children suddenly subject to CP investigations may not have been prepared for this involuntary situation either and have no previous experience in sharing private thoughts with strangers. The quality of participation is therefore dependent on the skills of the SW / PW involved:

I think what happens is the social worker says 'these are the issues, these are the issues, these are the issues'. Is there ever an open and honest discussion with all parties about what the issues are, what the answers are, what you know...what needs to happen?
(PW3)

SW1 described how she gathered wishes and feelings when assessing a child:

It's like who do you want to live with, who do you want to spend time with? Who do you want to see around you, you know? That kind of thing. What's important to you, at the minute? Are you worried about anything? Who would you speak to if you are worried about anything, you know? How do you feel about being squeezed in a one-bedroomed flat with your brother? It's that kind of stuff.
(SW1)

Whilst appearing generic, the questions used above are a good example of how the child's opinions can influence or impact on the SW's recommendation of services. SW2 reflected on the complex nature of wishes and feelings work, particularly with children who feel they have normal childhoods because they have not experienced any other way of living.

A child's wishes and feelings can work in two ways, can't it? I mean, I think that thing around neglect where a child doesn't see, sometimes that can be incorporated in to a sense, that actually this child should know what it means to feel full up and you know...we shouldn't feel complacent about the fact that they're hungry or they're smelly, or something like that. You know...their wishes and feelings might be that I go away and life is nice and normal. (SW2)

In this example, the SW is able to contextualize the child's wishes and feelings and design a response that would enable the child to understand and engage with social work intervention. SW2 continued to describe the fine line between balancing risk with the opinion of the child, as a social actor.

We need to understand that a child has the right to be with their family wherever possible, the child's voices are meaningfully heard. Because, you know, a child has a right to have their life play out how they want it to, to a certain degree as well, you know, make choices and decisions about stuff, and not be done to. (SW2)

There were however mixed opinions as to the difference between the terms 'wishes and feelings' and 'participation' throughout both the SW and PW participants, with PW1 stating "Coz with participation, I connect it with the same, that by giving us their wishes and feelings they're participating". PW3 swiftly challenged this statement:

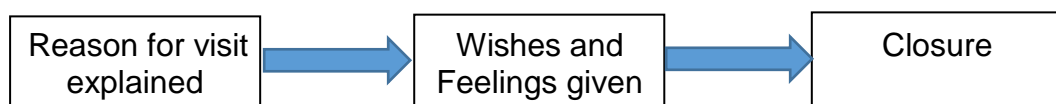
Really? Coz I don't. Wishes and feelings is a way of them being involved and participating but it's a small snippet under the umbrella term of participation and it...when it goes back to the ladders is...if you are involving them to a degree because you're saying 'we want to hear this'. But for it to be truly participative....it's young people's involvement throughout the whole process. Not just a little bit of it. For me, wishes and feelings is going 'we want your involvement and participation, but we want this. (PW3)

SW3 described the terms as being different due to their timeliness:

I think that you could gather a child's wishes and feelings and not fully encourage them to participate in the process so, as a snapshot, you'll gather their wishes and feelings for an assessment. Yet they're not kind of actively encouraged to participate in the rest of the process, or you might gather wishes and feelings at certain times but they're not actually participating. (SW3)

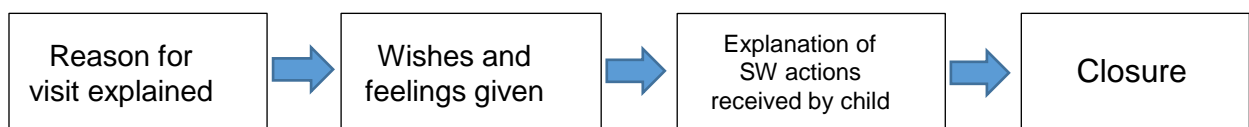
The recording of wishes and feelings in a CAFA can be a one-dimensional act where practitioners record the child's voice with no further action, for example in unsubstantiated child protection enquiries. In these cases, it is unlikely for a SW to revisit the child and explain why the initial intervention, and then case closure, had occurred. The parent usually receives notification of case closure, despite Working Together to Safeguard Children (2015) stipulating that a further explanatory visit *should* be made to the child. Children are left feeling anxious and fearful, surprised by an unannounced SW visit and a lack of understanding about perceived risk or vulnerability (Dillon et al 2016). This creates a linear model of participation ending only at the point of adult-initiated case closure, or escalation to care proceedings. From the child's perspective, it would look like figure 5.1:

Figure 5.1: SW visit and direct work with child for the purpose of assessment



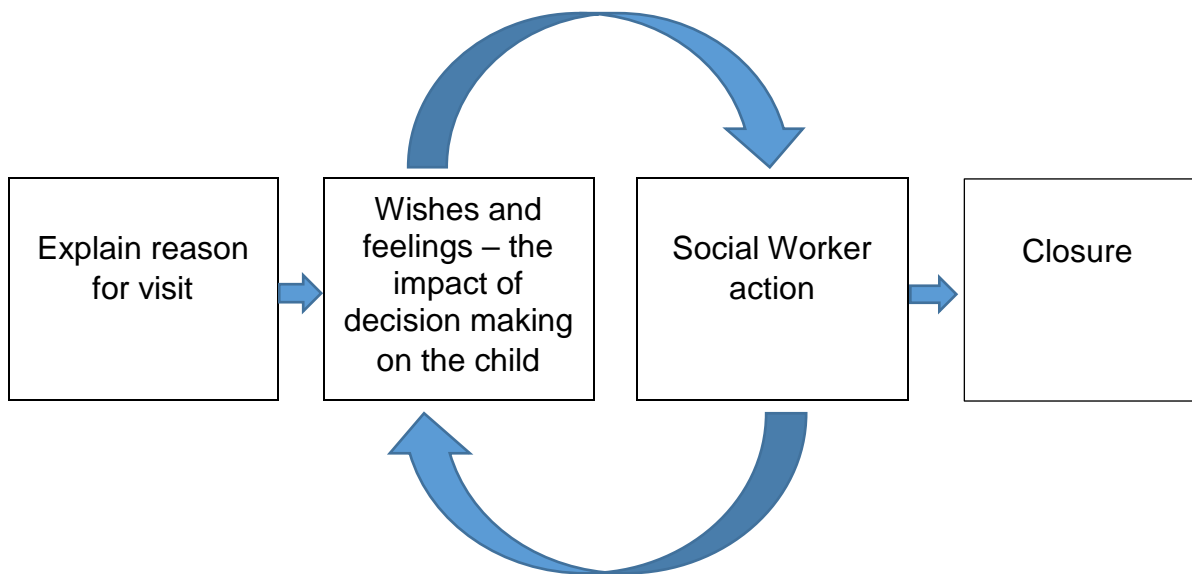
Whilst enhancing participatory experience may be overlooked during brief social work intervention, there remains opportunity to revisit and reassure children as a way of 'joining the circle' and completing the child's knowledge. The time pressured, fast-paced environment of CP social work may eliminate what management might view as a frivolous or superfluous visit, however a letter, or greetings card, with a simple 'Here's a recap of what I've done, thanks for speaking to me, Goodbye' would help fill this void. The model would then look like figure 5.2:

Figure 5.2: Social worker child and family assessment: feedback to the child on actions taken



From the child's perspective, this practice however remains one-dimensional. Whilst informed about the SW's intentions to cease the intervention, the child is uninformed about how their voice affected the outcome and the decisions made. The child is silenced from offering their opinion on the SW's plan (or lack of) for their family, which is ultimately designed to keep the child safe. The ideal model for participation in this circumstance is demonstrated in figure 5.3 below, introducing the concept of a cyclical participatory model:

Figure 5.3: The cyclical social work visit to child



There is certainly a gap in research exploring the participation levels of children reaching the threshold for s.47 investigation. Whilst this research study will focus more on longer-term child protection plans, the impact of s.47 child protection enquiries on children, particularly those subjected to child protection medicals, cannot be under-estimated; the family and child may not move on and forget the intervention as quickly as the SW does.

5.2.1 The jigsaw of participation; when roles collide

The gathering and actioning of wishes and feelings is central to the participatory process within CP social work; coordination and planning is assumed, particularly when there is potential for practitioner roles to overlap. Practitioner participants were asked to consider the purpose of, impact on and the professional relationship between the SW / PW role, particularly concerning wishes and feelings work. SW1 began by speaking highly of the service offered by the PW:

It's just a little bit more...you know...when I go, you know, there's always something going on, you know. Mum's just had a fight or Dad is saying we've had all our benefits stopped, there's always something going on. And you're still in, you're managing PLO as well, you've got to remember to tell them, you know, there's this court date coming up or are we stepping down, you know, the messages about managing the case in general. So you're juggling a huge lot of information in your head at all times. And you've got to see the children and work out what's going on for them. But that dedicated role... 'tell me what's going on for you'...because my head is full, I'll be honest about it, all the time. So as well-meaning as you [the social worker] think you would be to give those children the space and time, that [the participation worker] is a dedicated role and I think it's very important to the child protection process in general. Yeah. (SW1)

SW1 is facing a practical struggle to apply theory to practice, what good participatory practice *should* be, as opposed to what was actually happening (Arbeiter and Toros 2017). This inability to work 'with the child' as opposed to 'for the child' (Toros, Tiko and Saia 2013) is understandable due to work pressure and time constraints, but is not good enough reason to wholly delegate the participatory role to the PW. The redistribution of wishes and feelings work (from a SW to a PW) has caused some practice issues for SW4, when they deemed the work conducted by the PWs as being poor quality.

Reflecting on this further, SW4 felt that the PWs non-statutory practice and inability to challenge children / parents about their decision-making made it much easier for PWs than SWs to forge relationships with service users.

It was a bit like taking sides in a way...it felt that [the PW] was on her side and I was on the other side, if you like. But that was unhelpful to me. It was great for mum, that she thought she had that, but then that just...I need to work with the family and that just pushed me away further, if you like. (SW4)

In contrast, SW2 felt that removing bias from proceedings, leaving the child free (via the PW) to speak without prejudice was of paramount importance. PW2 agree with this whole-heartedly:

So, and I know that I'm aware that social workers will get their views and opinions prior to [case conference], but they're not getting independent opinions. (PW2)

Whilst initially feeling disgruntled, SW4 acknowledged that her relationship with parents improved over time, due to the PWs encouragement and support for the service user. However, there remained an annoyance over the contrasting PW / SW availability and remit.

So sometimes you are a step removed, I feel, because she is doing that direct work with the eldest child in terms of digging deep. 'What are you worried about?'...You know. I probably don't touch as deep as [the PW] does but at least [the child] has got a good relationship with her and that's fed into the process, the child protection process. (SW4)

It is potentially dangerous for SWs to assume that the PWs will obtain deep, meaningful wishes and feelings; simply being in a position to do so does not mean it is achieved. The social work CAFA, used as a referral form in most LAs for ICPC, must include the child's wishes and feelings before a referral to case conference and ultimately the participation team. The SWs are writing 'best interests' social work assessments, whilst the PWs are embedding participation and children's rights, as well as recording snapshot wishes and feelings. Whilst the terms overlap, the actual role and purpose of each worker does not. As stated by PW1:

We're not really decision-makers. We are repeating what people are telling us but using good assessment skills to get that information and good engagement skills. (PW1)

Therefore, whilst a child's wishes and feelings remain the same, regardless of whom they are relayed to, the actions and requirements of the SW and PW are not.

That [participation] worker is there solely to echo the voice of the child and I think that's very important in the whole process. (SW1)

The PW illuminates and radiates the child's voice throughout proceedings, whilst the SW designs the appropriate response. The child then gives their opinion on this, and the participatory cycle begins once more. Two of the SW participants however alluded to a lack of mutual consideration and planning between PW and SW, stating that they did not know enough about the role and purpose of the Participation Team.

I probably feel that I don't know enough about the service which I'm not sure is kind of a PR job for them or is kind of a fault on my part, but I just don't know enough about them...Like, I didn't know until I had this case with the 11 year old boy that went on a CP plan, that they actually actively went out to visit children before the initial conference. (SW3)

This findings chapter will later reflect on both SW and PW ability to engage with parents of children on child protections plans, and the child themselves; research shows that the quality of this relationship is paramount (Dillon et al 2016; Cossar et al 2016). SW3 was therefore curious as to how PW were able to seemingly leapfrog this barrier to relationship building and obtain meaningful wishes and feelings so quickly.

You know, if they go in as a stranger to this child, so they've not necessarily formed a relationship...then what strategies are they using that we're not using, if they're kind of getting that participation from a child? And I think that some of that learning should be shared maybe...maybe it's because they're kind of not a social

worker, if they're getting that kind of result that we're not, but...maybe if they've got kind of techniques to kind of break down those barriers, then it would be useful for them to share that. (SW3)

The PWs felt that barriers to participatory work with children were less about resources and more about professional identity. For example, prior to meeting the families, the PWs would share with them the fact that they are *not* SWs. The team stated that they witness visible, immediate changes to the parents' body language and families become open to sharing information with them. The more flexible PW timetable is also potentially more service-user friendly. SWs are restricted by statutory visit timescales, each visit needing careful planning to ensure that all issues are addressed; the PW has no such remit. PWs voiced concern about the large number of NQSWs entering the profession each year (Department for Education 2016) and the lack of a participatory model for CP social work. Limited training on participation theory on social work courses, and the phrase 'wishes and feelings' being left open to interpretation in practice, halts progression and understanding in this arena.

From the perception of PW2, SWs positively perceive the concept of delegating or redistributing SW tasks to PWs, particularly regarding direct work with children. This is clarified with PW2 as being a workload distribution rather than a 'best person for the job' scenario. However, if criticism of the SWs practice is on the cards it is a different story.

They leave you to it. But if they feel you're going to point out something that they may have forgotten or missed, rather than us learning from it and moving forward with us identifying this, then the walls are up! (PW2)

In LA1, the PWs and IROs (who also chair the CP conferences) are based in the same office. If they feel that the child's voice is not coming through in the corresponding social work, PWs will raise this issue informally (yet directly) with an IRO. This idiosyncratic practice would be in direct contrast to most local authority SWs, who will view IROs as senior and often only spoken to at case conference. PW2 explains this further:

You know what worries me, I think we're the eyes and ears of the IROs. That part, knowing all of these fantastic promises that are being made in an initial conference, CP conference, is actually being done....coz now and again, if it's not happening, I'll go up to the IRO and...[whispers] 'I've just realized that this is not happening, you know'...and they'll either give the SW a bell or they'll ask me to, if I've got that type of relationship with [the family]. (PW2)

As a child protection SW, I am unsure how I feel about this. SWs are often managing 25+ CIN / CP / LAC cases at one time and an oversight of a task would be wrong, but a reality. To sustain effective working relationships I would rather a co-worker brought any oversight to my attention, rather than go to my Senior Practitioner. However, with further exploration of this dynamic, these PW insights seem driven by their passion to uphold the rights of the child, rather than purposefully create an antagonistic relationship with the SW.

I've all due respect for the responsibility that [social workers] have, but also I have a healthy respect and awareness for what we need from them. And as long as [the SW] is straight and honest with me, if something's occurred that they've not done, if they say 'oh shit, I'm really sorry I've not done that because of this', it's like 'ok mate, no worries but let's get on with it'. But with someone that's downright lying and coming out with pitiful excuses, then I'll address it. (PW2)

5.2.2 Summary

This initial section has highlighted a lack of clarity regarding the definition and implementation of participation in CP social work. Limited time to embed participation has forced PWs towards a regimented timetable of direct work with children, primarily coinciding with the timing of the child's CP conference. Similar regimentation for SWs points towards linear models of practice, along with the recording of one-dimensional 'wishes and feelings'. Any hesitation, however, surrounding the involvement of a PW in CP social work was primarily due to SWs being uncertain of the PW role; the blurred working boundaries and potential overlap of 'wishes and feelings' collation.

5.3 Wishes and Feelings; the progression towards substantive practice

When discussing how to obtain the wishes and feelings of a child, three contested issues arose that exemplify current practice issues and helped frame Phase Two of this thesis. These were:

- Age appropriate practice
- The developing relationship between the child and practitioner
- Skills and training of the practitioner

5.3.1 Age appropriate practice

As addressed within Chapter 2, the debate regarding the age appropriateness of participation in social work continues. Berrick et al (2015) identified that different countries follow different rules concerning the age of the participating child. In Norway, for example, children aged 7 (and under if deemed capable) are supplied information and invited to express opinion, whereas the views of

children aged 12+ years will be given weight (Berrick et al 2015). Whilst initially appearing an inclusive and empowering system, it is interesting to note that Norwegian children aged under 15 years are not recognised as an official party in court, hence the importance of advocacy (Vis and Fossum 2013). In England, the invitation to participate, either in person or within assessment processes, is dependent on the local authority, the skills / awareness of the practitioner and the perception of whether the child is capable. In New South Wales, Australia, children aged ten years and over are deemed by the Children and Young Persons (Care and Protection) Act (1998) as mature enough to instruct their own lawyers, who then have a duty to act on these instructions (Parkinson 2001). McCafferty (2017) however reminds us that Article 12 of the UNCRC (1989) states that children need to be able to give a view, not a '*mature*' view therefore SWs need to stop inflating the age at which they presume a child is capable. The recent publication of Safeguarding Children; Assessment and Analysis Framework (SAAF) (Department for Education 2017:50) echoes McCafferty's concerns:

'Too young to give views' was often cited as the reason for not talking with children, but this was sometimes applied to children who we perceived as quite able to provide views e.g. children who were old enough, and who had no apparent additional needs. Often the 'no views given' related to the children at either end of the family e.g. oldest (above 16) or youngest (2 and under), and generally this was not commented on further. It is possible that younger children may not have been able to provide their views, but a judgement of this is needed, especially when information elsewhere in the assessment suggests they are able to communicate e.g. a 2 year old whose views are not included is described as 'chatty with his father during contact.'

Whilst I am in full agreement with this above opinion from SAAF, I also appreciate the concerns and anxiety held by SWs concerning the potential oversharing of information with a young child. SW2 holds the same concerns:

The younger ones, much younger ones I have struggled with. You know, trying to...because you don't want to put fear into them, do you, and often with them I suppose, eight year olds, their parents are like their world and everything, aren't they, so it's...it's about getting that balance, isn't it? (SW2)

The SW recognises that there needs to be a context, or reason, for the SWs' visit balanced with an eight year old's level of understanding. SW4 provides an example of this:

It depends on the age, it depends on the level of learning. It depends on the environment that they're both suited to so they might feel able to open up. So it's not just a simple statement...to say to just get the wishes and feelings, I think, would be quite simplistic. (SW4)

For me, this vagueness is the crux of the wishes and feelings dilemma yet social work assessment forms and reports encourage one-dimensional practice. Boxes are provided for the SW to indicate the child's wishes and feelings yet there is no subsequent box in which the impact and response to these can be recorded. It is, therefore, very hard for SWs to evidence whether the child's voice is having a direct impact on social work services provided. Wishes and Feelings, and the impact of social work services on the child, therefore become the first theme included within the new model for participation in CP proceedings. The subsequent analysis of data within the findings chapters will further develop this model, depending on themes arising.

5.3.2 Developing relationships with children; the initial meeting

This research study was designed to focus on children aged 8-12 years, therefore the SW participants reflected mainly on this age group during their interviews. Certain SWs felt more comfortable working with certain ages of children:

For me, I find it much easier to engage with the younger ones, that's just me reflecting on my own practice. Teenagers, I'm definitely not in my comfort zone. (SW3)

SW2 also finds the target sample of children aged between 8-12 as the most easy age group to engage.

They've got the verbal skills and kind of that, the communication skills to get in to chats and they're always interested in something so you can always find what they're interested in, and talk a lot through using their interests as a kind of starting point with 8 year olds, you know, to kind of build that relationship. (SW2)

The passion for using age-appropriate and creative resources with children was evident throughout all of the SW participants. SW3 undertook direct work with a sibling group during an initial, intensive two weeks with one family, resulting in a good example of evidence based practice.

There was four of them and it was about kind of...erm...domestic abuse between mum and dad, and the oldest child kind of being awake all night listening to it. We did a really nice piece of work. I went frequently in a short period of time to do a piece of work with them and then brought all the family together and we kind of came up with a plan. And that was actually quite...because I went intensive, that was a nice piece of work and the children engaged really well...And, then, and then it closed so we kind of worked it to a point where it could close. (SW3)

SW2 finds creative methods of direct work being useful in making shy children feel comfortable when talking to strangers:

Get them to feel...erm...very comfortable and happy to kind of converse with yourself. And you can do things like get pens and paper out...you know...if you draw alongside a child or write alongside a child then they're happy to do that, and are often less shy about sharing their feelings. They're still at that age where, you know, feelings are more acceptable to have. By the time they get to 12, they're often clammed up [laughs] and they often decide that it's not acceptable to be sad. Erm....with eight year olds I've used books...like 'the Big Bag of Worries' and conceptual ideas...erm...playing cards and things like that...truth games. (SW2)

The contextualization for the child's presence in the child protection system, when facilitating direct work with children, will help make sense of what the child is trying to say. SW2 reflected on her experience working with two children who were struggling to share their feelings with her:

They've been brought up with a Mum who has a mental health condition...sometimes you really forget that they're 11 and 12 coz they're very hostile, very vocal verbally, but when you analyse the pattern of communication...everything's boring or everything's stupid, people are evil. For, for, for everything, these three descriptors come up and I think that's a difficulty in them expressing themselves. Using these negative three or four words to describe everything is saying 'I'm not happy with this situation but I can't really express it fully'. (SW2)

In response to this, SW2 introduced a journal, where the child wrote down their thoughts and feelings between SW visits; at each visit, SW2 asked them to read what they had written.

I think that being able to sit down in a quiet space...and they can keep writing for as long as they want, 'til they find the right [words], rather than feeling that they've got to answer a certain question that I'm asking them right now and they've got to come up with the right answer and the right word [laughs]. And that's working really well. (SW2)

SW2 raises a pertinent issue here in that CP direct work expects the child to participate and engage in *our time*, rather than theirs. In an involuntary situation, such engagement and insistence on direct work has an element of coercion; the SW has a duty to meet with the child and it would be difficult, particularly for younger children, to refuse. On top of this, SWs have to analyse the words and actions of the child, at that particular moment in time, for their assessments. In this example, SW2 has created a model that can evidence a child's feelings at any moment in time and can be replicated by the child's parents after social work intervention has ceased.

Most SWs mentioned their use of the Three Houses exercise (Weld and Greening in Bunn, 2013) which prompts the child to describe their lived experience. Avoiding direct questioning and talking around the topics as raised by the child keeps lines of communication open. SW4 had identified that she needed to focus on the impact of the child's home life, rather than the factual experience:

...and so he broke it all down into a comic strip and drew pictures of family life, but it was quite distressing really to see what it was all about, you know. Parents fighting and shouting and arguing and playing loud music, and he drew pictures of the music. You know, the house of worries... (SW4)

SW4 stated that this information was 'written' as evidence for a court report. Interestingly, SW1 reported that there was no opportunity to include a child's drawings as part of assessments or court reports, that drawings need to be translated in to words for the 'wishes and feelings' box on the CAFA. Pinkney (2011) reminds us not to attach an adult voice to the feelings of a child therefore computer systems need to be updated in line with creative, direct methods of

work. SW4 however continues to state that they record the voice of the child and then check it back with them, to ensure they are encapsulating what the child is saying. The hardest thing for SW4 was:

...trying to work out what's a priority for a young person I suppose, that's the most important thing for them, because sometimes what I may feel has been the biggest worry isn't what's the biggest worry for them. (SW4)

Despite the varied use of direct work, the nature of involuntary social work intervention means that some children will not respond positively, due to their choice or their (lack of) understanding of the situation. SW5 described her interactions with one child on her caseload:

He will NOT engage. He attacked four members of staff at school, school had to go on lockdown...it's a high needs school...he caused havoc and seriously attacked four teachers. He's involved in all of the burglaries in [local area]. Erm...and the younger kids are lovely. The three younger kids are lovely. The two year old is like an angry 13 year old in a 2 years old's body, but he was lovely at nursery....completely different nursery. But from what I've been told is that the eldest child used to be just like them. (SW5)

Valba, Toros and Tiko (2017) choose not use the term 'engagement' in their research, instead referring to a 'helping relationship', where SWs become engaged in the life of the service user, not the service user engaged in child protection social work. This acceptance of a worker by the family indicates the privileged position that SWs are in. Despite this, the phrase "they won't engage!" seems commonly used throughout CP social work. I feel strongly that, in such a forced, powerless position, the family should not be the agency expected to make strides and break down relationship barriers. The question

“how can I engage the child and family?” is therefore more appropriate and is discussed in more detail throughout Phase Two of this research.

5.3.3 The skills and experience of practitioners - it's not child's play!

It is very unlikely that NQSWs received specific university-based training on how to speak to a child (Bruce 2014). With statutory child and family social work placements being hard to obtain, SWs may have trained within adult-only environments and enter the profession with no previous experience in children's social work. It is therefore imperative that SWs are honest about their capabilities and raise training needs, regarding communication with children, in supervision (Bruce 2014). This was reflected in SW2s interview:

I found the university course didn't cover enough of the practicalities of social work really. I loved the course because I'm an academic at heart, so I loved doing all of the anti-oppressive practice, the ethics...but I thought, when coming into the job and not having had any statutory placements, I was surprised to see how little that featured in day-to-day work. And I found myself being a bit of a, you know, tyrant for trying to explore the ethics behind a decision [laughs] when no one else gave a crap! It's like, hang on a minute, we used to spend days and complete essays thinking about the complexities and ethics and then...I think it is good ground work...for me. I'm a values-led practitioner and that's because of that education I had, and I wouldn't like it to be any other way. (SW2)

From my own experience, I find this to be a true and honest account of the complex transition from student SW to NQSW. Hypothetical case studies chewed over repeatedly throughout student coffee breaks and online chat rooms are replaced with real-life scenarios, where the SW is instinctively expected to 'know' what to do and how to do it. This leap to acquire practical skills was noted by four out of the five SWs, all agreeing that they had received insufficient training on direct work with children either at university or on

placement. SW3 disagreed slightly with her colleagues, stating that the majority of direct work with children should be learned in practice; she completed a training course on direct work as an NQSW and felt that this was sufficient. SW3 however was the most experienced SW taking part in this research, with over five years of LA experience, which may have influenced her response on this issue.

Whilst close networking with other specialist teams within the LA allows for the sharing of resources, such as domestic abuse, SWs stated there were few resources shared between themselves and the participation team. SW1 reported that her complete absence of training on direct work with children within LA1 led her to privately access the CAF/CASS website and use their child-friendly materials as templates for wishes and feelings work.

I know from my experience, you get a lot of training on how to fill assessment forms, procedures and rules. But I never once had a session on how to sit and use open questions with a child. (SW1)

SW2 agreed that there should be more tangible resources used in the CP process and that these are not routinely shared between colleagues.

But I do think it would be helpful to have more material resources, to actually sit down with a child or teenager...any age really...to go through and say 'this is what the process is, what / where are you up to, how are you feeling?' because I think if you had something tangible to sit down and do with them then I think that would be helpful. (SW2)

5.3.4 Summary

This section has identified a disparity in the interpretation of participation and the phrase 'wishes and feelings'. SWs were confused about the role of the

PW (their remit, their responsibilities and their ability to 'engage children' at speed) but spoke positively about their own role in 'wishes and feelings' work with young children. This was despite four out of the five SWs feeling that their training in direct work with children, both at university and on placement, was inadequate. The fast-paced nature of CP social work, along with high caseloads / differing practitioner experience, allows little time for practitioner reflection of their impact on the child's world.

5.4 Advocacy

The local authorities consenting to participate in this research study all had clear pathways to advocacy services for the children. In LA1, the PWs (undertaking the role of an advocate) were part of an in-house team; their setup is common, with 30% of LAs choosing to provide advocacy services from an in-house perspective (Thomas et al 2017). LA2, LA3 and LA4 were commissioning local, independent advocacy services to work with their children and young people. In LA1 and LA2, advocacy is offered to every child aged five years and over, whilst LA3 and LA4 were in the process of developing referral criteria.

The participants in Phase One (LA1) of this research were therefore asked about their provision of advocacy (PWs), their coordination of the service (SWs) or their child's receipt (and interpretation) of advocacy (parents). It was anticipated that their responses would aid my understanding of how the provision of advocacy aligns with CP social work and whether LA1's service was in place with the four participating parents.

5.4.1 Whose interests are being served? The debate on independence

Advocacy serves to “enable children to clarify, question and challenge the decisions and actions of professionals” (Aldridge, 2013:7). It is therefore important for the advocate to be impartial to proceedings and able to place the child at the heart of their service. Whilst the interviews with children conducted in Phase Two offer greater insight in to a child’s expectations and values of an advocacy service, the practitioners interviewed in Phase One debated the practice implications of the ‘independent advocacy’ offered in LA1. For example, the PWs describe themselves as independent; they are employed by the LA, based in LA offices and wear matching LA lanyards with ID badges. However, SW2 raised concerns regarding the PWs close proximity in both location and appearance to that of SWs, suggesting this may create relationship barriers if parents assume PWs are “one of them [a social worker]”.

The PWs perceived independent status is similarly skewed in other areas of the service. PWs spoke of their inability to participate in any decision-making within CP conferences, their role as an independent advocate having no authority or power to decide whether a child becomes the subject of a child protection plan. The PWs do however remain in the room during the case conference’s confidential police-led slot, whilst the parents (and children) leave. This is very unusual; a truly independent advocacy service is non-judgmental, non-biased and transparent, with information shared with the advocates on a need-to-know basis only. The PWs ability to remain in a case conference and be privy to information that the family and child might not know (and must leave the room for) not only creates a potential conflict of interests but also exacerbates the

imbalance of power as, given their limited authority, their presence can only serve to benefit the decision makers. An example of this is the attending police officer sharing intelligence of previous parental criminal history that has no bearing on current issues; an advocate does not need this information when acting solely as a mouthpiece for the family and unwittingly allows the PW to accrue more capital than the family with whom they are working (Bourdieu 1989).

There are further examples of how PWs stray from their claims of independence. Upon referral of a family to the Participation Team, the PWs acknowledged that they read the last few entries of SW case notes prior to visiting a family for the first time. This is without the knowledge nor consent of the parents or child, as a way of the PWs understanding the issues. If the LA has provided the PWs with access to the case notes then no breach of data would be occurring as long as PWs are informing service users of this practice.

PW2 justified this way of working:

And I think it's great that we've got that freedom, but sometimes even I think we're being hypocritical...I want my cake and eat it. I love the idea of saying we're independent, we're independent! But then I love the access to the IS [computerized files]...Sometimes I wonder if I'm a bit too comfortable with it. But, at the end of the day, what justifies me doing it is knowing I can sleep at night and I've done what I need to do for that family and young person. (PW2)

In my previous local authority, referrals to the Children's Rights Officers (CRO) were on a multi-agency referral form (MARF). The CRO would then use the child's electronic file to record their visits, but they would not have access to SW notes. This ensured that the CRO focused on the voice of the child and sharing that at case conference, rather than applying it to a context of risk assessment.

PW2 however identifies that, without reading case notes, the PWs would receive limited amounts of information, which could affect their work with the family.

Now, that's why I like that bit, because when I was truly independent...commissioned to a local authority, we didn't have access to their records. So we went in blind quite a lot, which was a real downer. Because all we could do is get off the referral form and speak to parents. So that bit I do like. To me, that's a good thing. (PW2)

There are different ways to improve the standard of referrals to the PWs, rather than simply allowing open access to a parent and child's file. If MARFs are not completed properly by SWs this identifies a training need, rather than an entitlement for practitioners to read private details. The service user's understanding of the word 'independent' is also concerning; they may not assume that the PW had full, unrestricted access to their most sensitive information and I doubt that this access further enables children to question and challenge the decision making of practitioners.

SW5 stated that it was acceptable for PWs to read the child's history "to be able to make a balanced decision". PWs however do not make decisions; they are involved to hear the voice of the child and uphold the child's rights (Aldridge 2013). This uncertainty around their independent status leaves PW1 feeling uneasy, particularly regarding the sharing of information with SWs:

But I think that if we were independent, things that we see as little niggles that we would just have a conversation with the social worker about, that wouldn't happen. So we would only pass things on if they were genuine safeguarding concerns. So, are we doing them a disservice by talking about these niggles because...I almost sometimes feel as though I'm dropping people in it, when it's not necessary. Because the things that are niggles are, in my eyes,

literally niggles. Whereas when you put them into a bigger picture sometimes, it makes it...I don't know...into something else. (PW1)

The safeguarding disclaimer widely used by practitioners (including researchers) emphasizes the confidentiality of shared information, whilst acknowledging that concerns regarding harm to the service user / others cannot remain a secret. PW1 therefore feels conflicted within their role and uncertain of their over-sharing of information to other core group members. With poor multiagency work repeatedly highlighted as a contributing factor within serious care reviews and child deaths (Munro 2011), the concern regarding the *undersharing* of information is understandable. PWs need to feel confident in their roles and responsibilities, along with the ability to provide service users with honest and transparent information sharing:

I can't handle being that person who goes into families and says everything's great, walks out and goes and says something to a social worker. I feel like I want to have that family involved in it. (PW1)

The blurred participatory boundaries and the skewed façade of independence in place in LA1 have prompted PWs to align themselves with the SWs, rather than with the parents and children. PW1 discussed her reluctance to 'drop a social worker in it' by admitting that the SW was wrong for not being in touch with the family, instead of standing up for the rights of the child:

I felt like I had to learn very quickly then what words I should say and shouldn't say. And actually I feel like, if we were independent, I feel like I could say a lot more of those things than I can working here. Does that make sense? It's one of those like...as soon as they've got a social worker involved, they've lost respect. They're a shit parent. No they're not! They're just really struggling or they're uneducated, or they need support like....they are not a person who had children and said "do you know what, I'm going to fuck their lives up". No one ever does that! (PW1)

It is my opinion that LA1 advocates want to advocate and need to advocate. They have been tasked with the introduction and embedding of participatory practice throughout the service yet are not adequately supplied with the tools, resources and staffing to allow this to happen. Whilst in-house training days, led by the PWs, are informing SWs of the aims of the participation service, SWs continue to be confused about the role and positioning of the PWs. There needs to be a service-wide, management-led introduction and structure to the workings of the Participation Team, allowing the PWs to focus solely on their direct work with children.

5.4.2 Parental Perception of Advocacy

The four parents involved in Phase One research were asked for their perception of whether their child has benefited from an advocacy service in LA1, when exploring the statement “I encourage my child to voice their opinion”. The responses were as follows:

- None of the four parents interviewed in Phase One were aware of the Participation Team. They did not know its purpose, nor its location.
- Other independent advocates were already in place for the children of Parent2 and Parent4, with whom the children had excellent relationships. These advocates were from the same, local voluntary agency with no connection to, nor commissioning from, the LA.
- Parent3 spoke highly of their SWs interaction with their child and felt that the SW was an appropriate advocate for her child along with herself, as her son has profound disabilities;

...I've got to speak up for him because no one else can. I've always had to be his voice and stand up for what's right for him. Because no one else can do it and he can't do it himself...(Parent3)

- Parent1 was the only participant reporting no separate arm of advocacy. She felt that the relationship between her family and their SW was very poor.

In their interviews, SWs named intensive support workers, specialist disability workers from the voluntary sector, mental health practitioners, family support workers and contact workers as likely advocates for children on CP plans. As mentioned in 5.2.2, there is potential for practitioner roles to overlap when there is no one specific person focused on the voice (and the rights) of the child. With confusion already noted in section 5.3 regarding the PW and SW interpretation of both participation and wishes and feelings, it is unclear how (or whether) each of these practitioners named above have been trained in undertaking an advocacy role *in CP social work*. If the 'advocate' is assigned to the child on their ability to form a trusting relationship only, rather than following the PWs structured attempt to advocate and embed participation, then all children will be receiving a different level of provision. My wish to create a new model for participation in CP proceedings will also be affected, unless each and every practitioner undertaking the role of 'advocate' is trained in social work law, along with an understanding of the fragmented participatory guidance as detailed in WTTSC (2018).

Despite the focus on independent advocacy in LA1, none of the parents had accessed an advocacy service in their own right, and none of the SWs identified parental advocates as present in case conferences either. SW3 stated that she

would not know how to refer a parent for advocacy and would not know where such a service was located. Whilst parents are often encouraged to bring a friend to meetings / case conferences for support, there are ethical issues to this. With the majority of children not attending their case conferences, they would not know their private information was being shared in front of a friend or neighbour. The PWs stated that they have occasionally advocated on behalf of a parent, but this is normally at the specific request of a SW, rather than a universal service. Again, ethical implications arise in this circumstance as the rights and the voice of the parent may not sit comfortably with the rights and the voice of the child. The family court system is an excellent example of this, the child and parents all having their own legal teams / guardians. Separate, independent advocacy for children and parents can also identify gaps in service provision (Thomas et al 2017).

Despite three parents feeling that their child had a good relationship with at least one practitioner, or advocate, within their core group, none of their children had ever attended their own CP case conference (further discussed in Chapter 5.6). Parent2 felt that the advocate-led pre-conference work was sufficient “rather than put the kids on stage and say right, come on then...”. This was agreed by Parent4:

...someone goes to school to see them before the conference...to talk to the kids. Now the kids will tell them straight you know. The kids are honest them. You know, if they've got an issue they'll tell them, just like they did when they said they did not like me giving them a back-hander every now and again, when they was naughty and carrying on. (Parent4)

Throughout his interview, it became clear that Parent4 was unaccepting of the high-level of social work intervention in place with his children. It is therefore understood why he aligns himself with his PLO solicitor and his children's advocate, both upholding the rights of the child, rather than the SW who must act in the child's best interests.

Yeah, coz you know you have to have a solicitor for PLO...he's alright. Erm, he tells my point across. Because I'm straight, I'm straight-forward with them. You know, and my solicitor says that I'm a bit blunt because I am a blunt person, I tell them what it is. Erm, and I don't like it, because I tell them the way it is, coz I am disgusted with the things [the social workers] have done. (Parent4)

The experience of Parent4 throughout his children's child protection journey has not been positive. He based his attempts to control every mode of communication, home visit, core group and case conference on his belief that his children were safe and that all social work intervention was unwarranted. Parent4 therefore felt that he is the most likely candidate for the role of advocate for his children and that the duty of sharing the child's voice at case conference should be his, and not the advocates. Parent4's deep-seated unease and social work experience will be further explored in Chapter 9.

5.4.3 Summary

This section has highlighted several pathways for the provision of advocacy within LA1, despite the provision of an in-house advocacy service. With many different practitioners identified by SWs as adopting the role of the advocate, there remains a need to ensure that all are providing advocacy in accordance with the law and statutory guidance. Surprisingly, this section demonstrated the

different experiences of advocacy within each of the participating families, whilst underlining the lack of knowledge regarding the LA1 PT. The claim of 'independent advocacy' made by PWs in LA1 is a deep contradiction to the actual service provision, where PWs have access to case notes and police intelligence, unbeknown to the parents. This will be discussed and analysed in greater detail within Chapter 9, using the writings of Bourdieu.

5.5 Relationship building

The focus of this PhD research is child participation in child protection proceedings, not parental participation. With previous studies however concluding that parental resistance can negatively influence the child's experience of participation, the parent / practitioner relationship needs further scrutiny. The role of the gatekeeper within research with vulnerable children, in this case the SW and the parent, continues to be under-researched with little weight given to the fact that "the gatekeeper is rarely portrayed as a fully social being with their own motivations and capacities for action..." (Collyer, Willis and Lewis 2017:97). Indeed, the gatekeepers within LA2, LA3 and LA4 all amended my participant recruitment process in order to 'shield' their vulnerable children from potential trauma. This therefore raises the question of whom or what the gatekeeper is actually screening. Whilst the LA uses the shield of 'potential trauma to child' to shield its services and practitioners from intense scrutiny, the parent uses their parental responsibility (PR) to shield their family. The result is the same: a silenced child.

The inclusion of parental perception of participation in this research is therefore vital to understand the child's experience. Despite local authorities' adoption of differing social work models and frameworks, such as restorative practice and Signs of Safety, the feelings of powerlessness experienced by parents still dominate all research studies in this field (Collings and Davies 2008; Darlington et al 2010; Bailey et al 2011; Aldridge 2013; Appleton et al 2015).

The analysis of Phase One data for this section on relationship building focuses initially on the topic of the 'silenced child'; the parents' cumulative opinion on the absence of their child's voice throughout proceedings versus the complexities of direct work with children. It will explore the parental view of 'risk of harm'; the significant threshold that is reached for initiation of CP planning and whether the parents' acceptance (or rejection) of these concerns enhances or negatively affects both their and their child's relationship with the SW. The section concludes by seeking parental and practitioner opinion on how children's rights are upheld (in accordance with the law) in daily social work practice.

5.5.1 The Silenced Child

In Phase One of the research, all of the parent participants agreed that practitioners failed to listen to their, or their children's, voices and opinions at the beginning of their CP intervention.

They're just not listening! It's like, they've got what they want, they don't care. They've got an innocent man in prison, what more do they want. Oh yeah, they want our blood and they're quite happy to take it. But, I've had enough, they're just draining me. They're not listening, they've not listened since day one, so why should they start now? (Parent1)

I just don't feel like they've done enough. Everything we've said, they've turned around and said 'no' to. You know, we've not been listened to at all. You know, everything I've said, you know, comes from the heart, it comes from...what I say is what I see, basically. And I just don't feel that they've done enough at all, no. (Parent4)

The urgency of s.47 enquiries (Children Act 1989) often requires SWs to speak to children without any prior interaction or opportunity to build relationships.

SW5 reflected on the ease and fluidity of a child's voice following a crisis, or an incident. She found that the child will initially talk freely and honestly yet, on subsequent meetings, may be less open to talk, or responsive to questions. The censoring of the child's voice by a parent (Turney 2012) or the child realizing the impact of their disclosure on their family harmony (Bailey et al 2011) is understandable in social work, with both being contributors to the levels of gatekeeping surrounding the child. SW2 reflected similarly, having noticed a child's use of language change over time:

So, he's only 11 and up until the end of primary school he was really easy to engage actually and to work with. But since he's started secondary school we're seeing a lot more resistance from him now and a lot more negativity, so some mirroring of the comments of his mum. 'There's no point you being involved, you're making things worse', you know, that's quite difficult because her attitude is so negative that that's rubbing off on him. How do you kind of break down that barrier when she's...? I mean, she's so defensive to any professional. It's not just social care, it's any professional involvement actually. (SW2)

It can be argued that this is not simply a case of mirroring his parents' turn of phrase. SW2 uses the words 'he was really easy to engage' before identifying the relationship had changed. Here we are reminded of the involuntary nature of CP social work, where the child does not get to decide their presence in the system nor choose their worker. As the child matures and widens his social group, his opinions, wishes and feelings will mature also, along with his ability to

decide to whom he wishes to speak. It is therefore imperative that the practitioner reframes their thinking to 'How can I best engage with this child'.

SW5 agreed that poor relationships with parents can negatively influence the relationship with the child, but that positive child / SW relationships can work in reverse:

Yes, it does to some extent coz the parent can block you from that child if the relationship's not good. However, erm, saying that I've had a parent who was just the most...it took me, I don't know, nine months to get her to even properly talk to me. But her daughter, who's a non-school attender and real problems and stuff erm, I had a better relationship with her...It's time and just building up that stuff. And to some extent, I think that the relationship that I have with the daughter, and how I helped her, help the Mum accept me, does that make sense? Sometimes it can work the other way round but I'd say a lot of the time it depends on Mum. And Dad, for that matter. (SW5)

The often-complex nature of the relationship between separated parents can place further barriers on the relationship between the parent and SW, and ultimately the child. Pinkey's (2011) research raised concern around the child's feelings being 'lost in translation', and stipulates that the voice of the child should be recorded with no elements of coercion, muffling or coaching. When separated parents provide conflicting accounts of perceived risks of harm, understanding the child's lived experience is paramount. However, when asked to complete a statutory s.7 (Children Act 1989) report, SW5 felt that both parents were coercing the child's voice:

...and caught in the middle of this is this child and he was being told, he's only about 7 or 8, you need to say this (by dad) and you need to say this (by mum). And I've been to see them and in the end I just said 'Look, they're telling you to say this, aren't they, and they're telling you to say that. What do you want?'. (SW5, emphasis added)

From a service user perspective, Parent4 wished to act as a shield to all of the information flowing between child and SW.

I'm happy with anything that my kids have got to discuss but I like it when my kids come to me and discuss it with me first. And so we can try and resolve the issue, instead of getting more people involved in the issue. Like if there's an issue, if there's a family issue, we should sort it out as a family. You know. (Parent4)

The need to manage his child's experience of their child protection journey is perhaps due to Parent4's distrust of SW intentions. He feels that the child's voice alters depending on the context applied to it; this is indeed a valid point. Parent4 gave the example of his daughter asking him what condoms were, whilst in a pharmacy. Her repeating of this information in school led to an appointment with the school nurse; Parent4 argued that his explanation to his daughter had been sufficient yet her CP plan triggered a heightened response that her peers would not have received. Other situations that Parent4 also viewed as acceptable, or typical family life, repeatedly lead to s.47 (Children Act 1989) enquiries and CP medicals; one such incident of child play fighting with a metal bar resulted in his son being left with a bruise on his chest. Parent5 was enraged when school queried this bruising with the parents:

Basically, she [Headteacher] was blaming me, it felt on the phone. And then they turned around and said my partner was drunk...and then we've both gone up to school because we've been told we need to go to school...[partner] has not touched a drink and I have not touched my son. You know, but it felt like that's what they were saying...they made him go to the hospital. Made him go up to the hospital for a full check...and the doctor was asking 'where did you get that bruise from?' Where did you get that bruise from? You know it felt...his mum went with him and said it felt like they was asking him to try and make him say like it was me dad". (Parent4)

The use of the word 'they' in the above example represents several figures Parent4 deems powerful: schoolteachers, SWs and child protection paediatricians. There is a real lack of research regarding a child's understanding of s.47 (Children Act 1989) enquiries, particularly around participation and consent. In Arbeiter and Toros' (2017) study, only one child out of 11 had made links between talking to a SW and being taken to a GP. It would therefore have been interesting to explore whether the children of Parent4 had been able to make a connection regarding their bruising, their explanation of the situation and their subsequent medical, all of which underpin their presence in CP. As a result, Parent4 did not have a trusting relationship with his SW though and felt justified in his dislike of her.

Basically, she turned round and said to me 'You kids are going to turn out like animals'...So, I wasn't happy about that at all. Now she has become my new social worker and I did not want her, I did not want to work with her. And I still don't. The only reason I'm working with her is because I'm laid back. You know, they've got nothing on us no more, because the kids are well looked after and there's been no incidents in months. (Parent4)

Parent4's statement of 'they've got nothing on us no more' is juxtaposed with their PLO status, suggesting that serious concerns do remain. The phrase in itself also indicates that he finds a SW's accusations of harm more damaging to the children than their actual lived experience. Parent4's reflection on their CP intervention therefore focuses on external pressure rather than internal change:

But they're still not backing down. They're saying nowt but I know, we know what they're waiting for. They're waiting to see if [partner] has a bump, do you know what I mean? To see if, to see if she'll drink, or anything. To see if she gets intoxicated...the kids will tell the social workers that she's had a drink. You know, coz me kids don't like it. (Parent4)

The family appear to be in a period of assessment, to see how the parents are able to reduce the likelihood of harm to the children and manage the risk and impact of substance misuse. When asked to talk about aspects of positive SW / child / parent relationships, Parent4 stated :

It is important. It's very important. You know because, obviously, your kids need to be heard, if they've got an issue. But you know, the kids have no issues with me, they've got no issues with their mum now because the chastising has stopped. And the alcohol has stopped. And that is the only thing my kids have ever been concerned about. (Parent4)

Parent4's distrust of social work may be obstructing both his and his children's experience due to his insistence that no change is needed to his family; his children's voices are therefore silenced.

5.5.2 Non-acceptance of the 'risk of harm'

Participation by parents rests on their ability to identify risk and take responsibility for their actions / non-action (Darlington et al 2010; Dickens et al 2015). It is therefore interesting that the four parents interviewed for this study divided into two separate viewpoints:

- a) Parent1 and Parent4 were *not* accepting of the risks as stated by children's services. Parent1's children had been on CP plans for 18 months. Parent4's children were in pre-proceedings. Both were very unhappy with the social work intervention.
- b) Parent2 and Parent3 *accepted* the reasoning for their children's child protection plans. Both discussed the positive changes they have made to their parenting and spoke highly of the social work intervention.

Parent1 was adamant that there was nothing wrong with her family and blamed her daughter for fabricating the reasons for their CP plan.

But, and this is where I have my problems with the things that have been said and have happened...I know it is a hard thing to say but I know my daughter and I know that the allegation that she's made is false. I know she has lied. And because of her lies, it got my husband sent to prison...I've known him [husband] longer than I've known the kids and we've both stated the same thing. He's too much like me. There's no chance on this earth...she has lied! ...they were more interested in sending an innocent man to prison, than actually knuckling down and finding the truth. (Parent1)

In my capacity of researcher, and not SW, it is impossible to speculate on the intricacies of Parent1's CP plan nor the reasoning / evidence behind the decision-making. The plan has however been in place for eighteen months. Parent1's reluctance to accept the level of risk posed to her children may have contributed to this lengthy CP process. Whilst the children's father was in prison at the time of the research interviews, there will be expectations for Parent1 to adhere to a safety plan upon his release; SWs may therefore view the non-acceptance of risk as being negligent or harmful, and declare Parent1 as being non-protective, hence the lengthy intervention. This is a good example of McGhee and Waterhouse's (2017) frustration about the overused phrase 'a clear cut child protection issue'; there is no clear pathway forward when CP issues contrast with a parent's perception of safeguarding.

Parent4 also blamed his children for their placement in pre-proceedings, particularly his eldest daughter (aged 14 years) who had been in the care of the LA for the twelve months prior to the interview. He had not spoken to her in over a year, having disagreed with his daughter's version of events leading to SW intervention. Parent4 shared examples of several incidents that had taken place

within the family home, centred mainly on domestic violence, his partner's alcohol misuse and allegations of physical chastisement. As the child could not have been the cause of any of these issues, the parents' blame is misplaced. There had been at least two s.47 investigations, where the children have arrived home from school to find SWs and police present without warning. The children had undergone CP medicals and were placed in temporary foster care for three weeks whilst police and SW investigated; his eldest daughter was still there at the time of the interview. As well as blaming his children for their presence in CP, Parent4 criticized the foster carers' poor parenting whilst his children were in their care:

One of me sons has...has picked a knife up before to me. Me other, me daughter said she was going to jump out of a window, before any of my kids went in to foster care they wouldn't do anything like that! Me oldest daughter, she was having a few issues, she'd tried to cut her wrists a few times. And she...me...me second daughter down, which is [name], she [eldest daughter] burned her on her head with a set of hair straighteners whilst she was asleep. So we was having a few issues with [child] before the social workers got involved. (Parent4)

Whilst acknowledging that they were facing challenging parenting issues prior to SW involvement, leading to a bundle of investigations, Parent4 continued to insist that he had not done anything wrong.

Another thing I used to do is give my kids a tap across the lughole. You know, and my kids have turned around and said I don't like that so I stopped. But I cannot do anything....I'm not supposed to shout at my kids now, I'm not supposed to erm...basically I'm not supposed to burp without permission. (Parent4)

With Parent4 insisting that he believes his parenting to be 'good enough' (Adcock and White 1985), SW2's earlier reference to children accepting their lifestyle as 'normal' may be pertinent here; it is possible that consistent police

and SW visits, crisis situations and exposure to highly emotive situations are normal for these four children. Eleven parents within Jackson et al's (2017) research of children in the CP process conceded the need for social work intervention, but this concession developed over time. With CP plans in place for over 12 months, and one child remaining in LA foster care, Parent4 was still not ready to concede his children's need for SW intervention. During the interview, Parent4 pointed at a family photo on the wall and stated:

And you can't say they don't look happy. Look at them!" (Parent4)

SW3 reflected on her work with a parent who had also minimized the level of risk within her family and did not understand the reason for SW intervention.

Historically with the older child, there was a lot of concern about parenting of teenagers and a lack of acknowledgement of the risks that...that the daughter was exposed to. So a lot of Missing From Home, high risk CSE, there was some domestic violence, the issue of drug use from Dad, just real minimization of the risk. And I think, the standard line from Mum tends to be "this is normal teenage behaviour", "this is what I did when I was a child", "this is just life on a council estate. (SW3)

The family in SW3's example above was in consideration for pre-proceedings, which highlights the seriousness of non-acceptance of risk. However, the continued identification of parental failings in social work, where emphasis is on weaknesses rather than strengths, contrasts with the introduction of restorative models (Toros et al 2017; Arbeiter and Toros 2017). In the typical Strengthening Families / restorative models, the parent has strengths and is considered a partner, which is a shift from the 'SW as expert' model (Berrick et al 2017). Whilst adopting a gentle approach, in line with restorative practice, there

remains an ultimate threshold of care that must be upheld (Choate and Engstrom 2014).

I think where it can be difficult is where you are being highly challenging and people don't want you involved. And that's where, to a point, where they don't acknowledge that there's a concern. I think that is really hard to work with. You know, you can work with families where they might be really volatile but actually they know things need to change and they acknowledge that. Where there's no acknowledgement of risk, and they just really can't see the point of you being involved, then that's really difficult to work with. (SW3)

There is a difference between no acknowledgment of risk and a clear attempt to deceive SWs. SW1's attempts to establish whether an alcohol-misusing mother was drinking again proved difficult, as the parent had forged close relationships with other professionals supporting her.

...she could make them believe her and she knew that I was always honest with her and saying 'I don't believe you and I think you're drinking at the minute' so she never liked me because I would challenge her on what I thought. And she couldn't manipulate me. She could not manipulate me and she found that very, very frustrating. (SW1)

SCRs continue to highlight the missed opportunities by SWs, due to the manipulation or disguise of a situation by a parent. The most referenced of these is the case of Peter Connolly (2006-2007) whose mother disguised his facial injuries with the deliberate smearing of food on his face (Haringey Local Safeguarding Children Board 2009). SW3 used the term 'disguised resistance' to describe the parent's attitude to social work.

So they'll say they're gonna do something or they'll attend a meeting and be quite positive about it, but then as soon as the meeting's over you can't engage them. And we're kind of seeing the same pattern now with the younger child also. Mum will attend meetings and within the meetings she'll be quite positive. So I think oh right, we've got agreement to kind of move things forward but then when I visit at home she'll just be really annoyed, volatile and

really quite angry with me about some of the things that were said in the meeting, but hadn't challenged them at the time, and said 'oh yes, I'm happy to go along with that'.

Whilst this could be an example of parental resistance, Berrick et al (2017:627) states that the unwillingness for parental change may be "not a question of blaming them for avoiding or resisting, but being realistic about their capacity and interests." This certainly aligns with the opinion of PW2 who described the scale of post-conference shock and worry experienced by a parent following a formal meeting, whilst SWs have little time to reflect on the impact and scale of CP intervention. SW1 had maintained a good relationship with one father, until an angry phone call accused her of "sending all your soldiers in". She had resorted to a project management-type role, coordinating a large number of professionals from several support services, and acknowledged she had lost the personal relationship with the child and family.

With relationship building potentially affected by the low level of SW skills or lack of time (Berrick et al 2017; Wilkins and Whittaker 2017), the phrase 'they won't engage' often deflects the responsibility for the SW / parent relationship on to the service user. Interestingly, in research by Wilkins and Whittaker (2017), one highly skilled SW was observed adopting two different participatory approaches with two different parents - one parent being accepting of risk and the need for SW intervention, and the other not. The SW's approach to the accepting parent was empathetic, gentle and affirming, whereas the non-accepting parent was firmly handled by the SW. This finding by Wilkins and Whittaker (2017) therefore challenged links often made between authoritarian styles of social work and

low-skilled practitioners. When Parent1 was asked whether she had a good relationship with her children's SW, she stated:

We didn't have. I wanted a new social worker. I voiced my opinions four times. Four times, but got ignored and I've still got her...still stuck with her. I said I wanted someone that listens but she doesn't listen. Well, neither do her bosses coz if her bosses would listen then they would have given me a new social worker. But no one listened. (Parent1)

From the perspective of Parent1, the CP plan had been in place for eighteen months, suggesting drift and a lack of evidenced change; a change of SW may be the key to progression. Despite feeling aggrieved with the whole CP process, Parent1 admitted that the relationship with her SW had recently improved and that she sees her a lot. She could not help, however, adding on to the end of the sentence however "...because I have to".

5.5.3 Powerfully positive parental relationships

Due to acting as an extension of the child's voice, and upholding the child's rights, the PWs do not encounter as many barriers to relationship building with families. Whilst knowing the underlying reasons for the children being on a CP plan, it is not the role of the PW to challenge behaviour or assess risk; this allows them to remain impartial and focus on the voice of the child:

They're all human beings and as much as something might have gone wrong, and the kids might have got hurt or whatever's happened, that...when you look at it as a whole, them kids love their parents and them parents love their kids....so...you gain nothing by judging people...I question myself all the time. I question myself as a worker and then I go home and question myself as a parent. I think it's...it's...I don't think you realise how much it takes its toll on you, until you want to cry. (PW1)

Parent2 has had a positive experience of social work intervention, despite feeling ashamed about his previously violent behaviour towards his children's mother. He felt that being honest and reflective with his SW led to a positive outcome from his risk assessment and his children being placed in his care.

Like I said, honesty gets you everywhere. You cover things up, you know, you're getting nowhere. You know, coz eventually everything you've covered up, the wind'll blow it and it's still there, isn't it?
(Parent2)

Parent2 described his relationship with his children's SW as 'fantastic'. Despite the SW visits having been reduced due to the winding down of the CP plan, the SW will phone and text him and always return his telephone call on the same day. Parent2 sees the SW as knowledgeable and he has been happy to follow her lead. It is interesting to note that this family have had the same SW since the initial referral, similar to Parent1, yet both have had completely contrasting experiences. It would have therefore been useful for this study to interview both of these SW in order to understand why the parental experiences differed so greatly. SW experience, length of time post-qualification and caseloads may be reasons for the differing approaches and levels of engagement.

Parent3 also reported a positive experience of social work, despite the initial mistrust.

I'm not going to lie. I was very, very dubious coz...see in my mind, when I was brought up, when social services get involved that's when you lose your kids. That's my era. (Parent3)

For this parent, honesty was key. Parent3 felt that the SW had worked hard to build trust with their family and their children.

We've always done everything ourselves, so when she first became involved we weren't probably the most responsive. And [child] obviously when it's someone new, he doesn't like change. He doesn't like people that are new that he doesn't know. So it took her a long time to, you know, to...to erm build a relationship but yeah...she really has worked hard. (Parent3)

Parent2 and Parent3 both felt assertive in meetings and were able to ask questions or ask for change. Whilst initially stating he had no input in any part of the proceedings, Parent4 conceded that the format of his meetings had changed at his request. He does not identify this however as a positive example of influencing decision-making. Parent4 insisted that SWs see a contrived situation on their home visits, where his children adopt attention-seeking behaviour in the presence of the SW.

It's like me daughter last night. I was sat here on my own with me daughter, and we were sat here hugging watching Tipping Point. You know, they don't see that part of my family. They only see what they see when they walk through my door. (Parent4)

5.5.4 The Child's Right to be a Child

The parents were asked to consider the child's right to be a child, rather than 'a child on a CP plan' where medical / social / educational appointments are enforced rather than recommended. Parent1 stated that "it's not my children's fault they're on a child protection plan" and emphasized how much she wanted it to end. Parent3 also felt strongly about this; however, she had accepted that initially the CP process was right for her child.

I think that there were a lot of issues in the house at that time. And I think that now he doesn't belong, neither of them belong there [on CP]...to keep their innocence, to keep them away from that...It's because they don't belong there anymore, I believe, because of how

far we've come. And like I say, it's to protect their innocence as well.
(Parent3)

The umbrella-term of participation within child protection proceedings covers a broad range of meaningful inclusivity, dependent on the age and understanding of the child. Children have a right to know what is going on in their family and information sharing may prevent further harm from taking place once CP thresholds are reached (Vis et al 2012). Parent4 however reflected on the way SW intervention can take priority over everything. He recalled an unannounced visit from the advocacy service, taking place at school on his daughter's birthday; it upset her. As well as the poor timing of the visit, Parent4 feels that children should just be 'normal children' at school:

I don't think they should be doing things like that in school. If they want to speak to me kids, take em out or you know...don't take 'em out of their class in school and then send them back in to class. Coz obviously they're gonna be a bit distraught, aren't they? They're gonna be a bit upset, they're gonna be emotional.
(Parent4)

Regarding this visit, Parent4 gave feedback to the advocacy service who agreed to reschedule their visits. In the whole of Parent4's interview, this was the only example that evidenced positive influence of change.

SW2 has found it hard to explain the reason for social work intervention to children, especially those who would not consider their lives or lifestyles to be in need of support. In these cases, the child would not feel different to any other child.

Some children think you're mad. That's their entire life, especially around issues such as neglect and stuff. If the child's never experienced anything other, and doesn't feel harmed in the

situation, it's sometimes difficult to get them to participate meaningfully in what you do, because they don't see...they don't see the need for change. But that's part of hearing that voice as well, isn't it. Understanding. Getting that subjective reality. (SW2)

With several previous research studies highlighting poor practice concerning relationship building between SWs and children (Healy 1998, Sanders and Mace 2006, Healy and Darlington 2009, Vis et al 2012, Young et al 2014) all practitioners reflected on the quality of their relationships with children on their caseloads. Parents also identified what they perceived as positive aspects of their child and the SW's relationship, as well as suggesting areas for improvement. All practitioners identified how their relationships with children developed over time. With SWs in LA1 however working across the range / thresholds of intervention, e.g. from duty and referral through to adoption, time spent with each family will vary due to the risk of harm, or support level needed, within the home. For children on CP plans, their social work intervention may have started as a s.47 investigation, including an unannounced SW and police visit to the home. On social work university courses, training on 'how to engage a child, assess risk within twenty minutes and assist in a police interview' is not given' yet s.47 enquiries require immediate intervention, with no build-up or explanation.

I mean, on a s.47 you do it as part of your process, but you might not actually get anything meaningful like on those longer term cases until you've built that relationship. If you're not asking about a specific event, like if a child's been hit and you speak to them, you're going to ask about what's happened and they'll tell you the story, but you might not get anything deeper about that person's wishes and feelings out of life, until you've had that time. (SW5)

Such skills can only be acquired 'on the job' and involve etiquette, as well as protocol. A NQSW, who joined my previous social work duty team, was the

subject of a complaint following her interrupting whilst police detectives were interviewing the child. This etiquette is not recorded anywhere, rather learned through experience, and we as colleagues forgot to share it with her. The s.47 enquiry therefore demands inter-professional relationships as well as instantaneous rapport with the child. Further research is needed in this area concerning relationship building and participation in an intense, often brief, period of assessment and even medical intervention.

Parent4 described how their SW poorly handled a s.47 enquiry:

...and the police came round and the kids were all down at the neighbour's. But when me kids were down at the neighbour's the social worker turned up here and she dragged all my kids back up here where the police and everything was. Now, me daughter is 11, so she understands a bit more, do you know what I mean? And she didn't want to be around all that, so she...she kind of blames the social worker, but she understands on our side that it was me and her mum as well. But, she understands that the social worker has brought her up to the house and got her involved basically, when the kids have been here, when she didn't need to. She could have gone round to me neighbour's and spoke to them. (Parent4)

In this instance, Parent4 is correct. S.47 enquiries are about establishing the level of risk of harm to the child (e.g. no risk, some risk, significant risk, immediate significant risk) and the ensuing assessment would have given time for the child to be seen within their own home. In this situation, priority was given to the urgency to investigate rather than methodically planning for the visit and assessing the situation as it presents itself.

5.5.5 The voice of the child; legislation versus practice

To ensure that the voice of the child is recorded as transparently as possible, WTTSC (2015:23) states that "children should, wherever possible, be seen

alone...". Unannounced visits without parental consent to speak to children alone, mostly within the school / nursery environment, are commonplace during s.47 enquiries; these are essential in assessing the risk and severity of harm to the child. Speaking to the child alone as part of statutory CP visits remains important, although consent from the parents and willingness from the child remain barriers to these visits, as shall be seen in the following analysis.

Parent1 has always consented to her children being seen alone by their SW as part of the statutory home visit. However, she is dubious about the quality and honesty of information shared by her children.

Half the time I get the impression that they're not being completely honest with her...coz they don't want her in our lives as much as I don't. So, half the time they just ...they're just gonna clam and just say what she wants to hear. I don't think that they're actually being honest with her. (Parent1)

Parent1's children were ten years old, therefore this raises the question of whether a ten year old child would consciously mislead their SW, or whether the children were simply subconsciously absorbing their parent's mistrust and dislike of the worker. With Parent1 feeling angry about her social work intervention, the children may be mimicking their mother's attitudes and feelings, assuming that they should also be feeling that way. Parent1 however is adamant that the one-to-one, private nature of the visits made no difference to her child's experience.

...that's why they clam up because they've not listened to them before so why should they start listening to them now?". So, it doesn't matter really whether it's a one-to-one or in a group, they're not being listened to. (Parent1)

Parent4 agreed with Parent1 regarding the vague content of the SW / child interviews, but vehemently opposed the requirement of SWs seeing the child alone. He rated this aspect of social work as being the least important to him and his children (see appendix 5, p:350) and maintained that all information shared between the child and the SW should go through him first.

You know, there's been many a time where she's been forced to come and talk to them, you know, pressurizing, to come and talk to them. I've done it plenty of times where I've had to go upstairs and go 'come on love, you're gonna have to come and talk'. You know, she doesn't want to be involved coz she knows that, that there's nowt wrong now. (Parent4)

The mistrust of SWs by Parent4 stems from his belief that there is nothing wrong with the dynamic of his family, nor his parenting. The presence of a SW is therefore, in his view, not needed or wanted. However, this does not correlate with the number of s.47 enquiries, the status of being in pre-proceedings and the fact that the eldest daughter (14) remains in LA care and is refusing to return home. Regardless of risk and circumstance, strengths-based social work and relationship building with the family should remain at the heart of any intervention, and perhaps this is why Parent4 feels so alienated within the process.

Basically when the police came to my house, she wanted to speak to me daughter, the social worker. Now, me daughter was not happy with talking to her on her own, so she asked me if I can come in with her. Well, I come in the room and the social worker's been sat down and she went 'I want you out!'. Now, me daughter was not happy with that. And that is why me daughter does not like this social worker we're working with now. (Parent4)

Instead of asserting and challenging, time spent gaining trust with the whole family before asking for 'alone time' with the child would have been more appropriate (Cossar et al 2016). However, time to exercise frontline duties in CP

SW is limited therefore this needs to be balanced, along with the need to openly assess risk with the child without fear of parental repercussion. Parent4 stated that his daughter had no opportunity to take anyone else into her chat with the SW and that his lack of inclusion in the conversation led to a traumatic experience for the child.

No, there was nobody else there apart from me and her mum, obviously, and her mum was intoxicated. But erm she come out there into the hallway and she was crying her eyes out. So I've come back in here and I've said 'What have you said to my daughter?'. She said 'I haven't said anything to your daughter'. I said 'You must have said summat to her, she's stood out here distraught and she thinks she's going in to Care'. I said 'I'm not very happy at all...' (Parent4)

The insistence for the SW to speak to Parent4's children alone is clearer due to Parent4 remembering that his partner was intoxicated at the time of the visit. In a situation where risk is evident, and has previously caused harm, the SW must assess the father's ability to care for the children at that moment in time. The child's voice would have been essential in assessing this situation.

SW3 does not force an 'alone' visit on a child, instead assesses each situation uniquely:

...there might be times when I do a statutory visit and I'll try to speak to the child alone. But if they really did not want that to happen and they wanted their parents to be there, depending on the scenario, I would allow that. You know, to enable them to engage. If otherwise, if they just didn't want to speak to me then...it's better sometimes to speak to them with a parent present than not at all. (SW3)

SW5 agreed with SW3. On statutory visits, SW5 may see children individually, but also collectively, especially in young sibling groups.

They're a bit scared of talking to me, you know, and I know that I'm not that scary but they're a bit scared of this lady that comes to talk to us and, you know, asks us how we're feeling and what we've been doing. And sometimes in a group they're just a bit more open because you know you can make it more of a game almost, with them. (SW5)

PW2 is also in agreement with the SWs. In fact, she prefers the parent to be present for the first visit so that she can be explicit about what the service offers. SW3 has never been prevented from speaking to a child alone, stating that it all comes down to the way the SW explain the situation. However, she reflected on the power dynamic that underpins her work and the unspoken, underlying threat that underpins CP social work. She stated that families would think:

The LA has power to put my child on a plan, to be involved in my life, to come and do statutory visits or unannounced visits, and whatever. Yeah, you have the power to speak to my children... (SW3)

Parent2 ranked his child's ability to see and speak to their SW alone as the second most important thing to him (see appendix 6, p: 353). Both the SW and advocacy service have permission to visit the children at school and at home, announced and unannounced. Parent2 has a good relationship with his children's SW and accepts the reasons for CP intervention; this is not the case with Parent1 and Parent4, where there is a continued resentment for SW intervention and an active dislike of the workers. This is a good example of how relationships with parents can have a direct influence on SW relationship with, and access to, the children on their caseloads.

Examples of inability to 'see the child alone' were also given. SW2 admits that there are a few children on her caseload that refuse to talk to her at all, either alone or accompanied.

One child, who hadn't been seen by anyone for a year, decided to come and speak to me the other day. Not on his own, at all, but that was quite a move-on from standing outside his bedroom door and knocking...hearing radio silence. (SW2)

The absence of a participatory model to guide 'wishes and feelings' work with children, and the policy requirement of seeing a child within seven days of a referral (WTTSC 2015), means SWs are uncertain of how to evidence their visit to the child.

Everybody's concerned with the date you've seen them, that comes first, and I think that...there's detailed discussions with professionals and detailed discussions with family, then child development, then parenting capacity then consultation with children. (SW1)

Here, SW1 was reflecting on both the order and timeliness of information addressed within a child and family assessment; accurate recording of the date / time period of the SW's initial visit to the child is crucial to satisfy Ofsted scrutiny. SW1 however notes that the child's voice comes right at the end of the CAFA document, often after the SW has been asked to risk-assess the situation. The child's voice therefore becomes a token comment, rather than the foundation of the entire assessment.

The methods by practitioners in LA1 used to develop relationships with children are innovative and varied. All workers interviewed adopted child-led practice, concerning the type and place of meeting, as well as the focus of conversation.

SW2 feels that a direct approach is most effective:

So I think I always try and ascertain their understanding of what might be going on and often they're very, very clued up about what's going on [laughs]. But you know, they're not daft. (SW2)

Having fewer children on the caseloads, the PWs can offer more flexibility with their approach to relationship building. One PW regularly took a teenager to get her eyebrows done; car journeys can provide time away from the family home and a neutral place to chat. This method is also adopted by SW5:

...there's no eyeballing. Works miracles. If kids don't have to eyeball you, they'll tell you the world (SW5).

SW2 reflected on her tricky relationship with an eleven-year-old boy on a CP plan, with whom she has been working for nine months.

I probably don't feel like I've got a particularly positive relationship with him. We've just not made that inroad and I know his youth offending officer met with him last week and went for lunch, as an example. Now, I would not feel comfortable to go for lunch with this boy, I just wouldn't know...we haven't got that kind of grounding to kind of just sit there and chat, And I know that when he went out with the worker, who's a male worker, he said that one of the things he finds hard about social workers is that social workers are kind of making these big decisions about him and his family, and kind of making these big assessments, and actually I don't even know him. And I thought well that really resonated with me...that's probably right. I visit once every three or four weeks but we haven't actually formed a kind of active...you know, like a proper relationship. (SW2)

SW3 echoes these thoughts, and spoke about her relationship with a twelve-year-old boy on her caseload:

Because I'm not sure even if I went out kind of every day of the week, how much he would actually form a relationship with me. Which is...it feels quite sad but I'm willing to say...in this case it just feels like how it's going to be, that he'll engage with me to a point but there's always gonna be that kind of arm's length and a bit of a barrier up coz of the kind of families feelings about social care. (SW3)

These examples identify the lack of time available to develop relationships further. SW3 reflected on her struggle to form meaningful relationships with children; she has a caseload of 18 children and works 30 hours per week.

Because I've got a couple of cases that are really time intensive, and with the duty week we've been doing once every four weeks, we've lost a full week with dealing with new cases. So...there's periods of time where I feel it's manageable and periods of time where I'm struggling. Erm, and there are certain families where I feel like I'm...it would benefit with me being able to engage with them more... (SW3)

Without an established or trusting relationship, SWs have to rely on one-dimensional, other-professional reported accounts for assessments. After being unable to create a meaningful relationship after nine months, it may be more appropriate to request a change in practitioner, as PW3 states:

We're not precious over cases, we're not precious over kids. If it's working better with one person than the other we're like...you're welcome to it! (PW3)

This change however is not as prevalent within social work teams. As previously discussed, the child / SW relationship is a forced one; parents and children are involuntarily involved. The SW and the child need time to find connections and commonalities; these cannot be assumed. At what point do we recognize a child's right to say that the relationship is not working?

5.5.6 Summary

This section has discussed how SW's relationships with children and their parents could directly influence children's participation in CP social work. All four of the parent participants agreed that their SWs had not listened to either their voice, or their child's voice, at the start of the intervention, leading to a

'silenced child'. The contrasting acceptance of 'risk of harm' divided the four parents within this study into two separate viewpoints; non-acceptance of risk (unhappy with intervention) versus acceptance of risk (happy with intervention). With SWs and PWs within LA1 striving to adopt a strengths-based, restorative approach, this section has highlighted how the differing perceptions of family circumstances and social work practice can ultimately affect the trust between the child, their parent and the practitioner.

5.6 Decision-making

As discussed in Chapter 2's literature review, the focus on decision-making forums, with regards to participation, often diverts to discussion on whether the child is present at meetings. Research studies, new and old, continue to demonstrate that children are not routinely invited to their own child protection case conferences, with practitioners seemingly reverting to the 'protection versus participation' debate.

With Lansdown (1995) and Schofield and Thoburn (1996) shifting the focus from 'attendance' to 'inclusion', the data from Phase One was analysed to provide a picture of how children in LA1 are included in decision-making forums; this could be a physical presence, or an understanding of how their voice is captured in meetings and then responded to. The use of FGC, the understanding of conference / meeting formats (from both child and parent perspective) and the child's ability to effect change will be also discussed within this section.

Before this analysis can take place however, further exploration is needed regarding LA1s adoption of restorative practice throughout their services for children. It would not be accurate to reflect on the data without establishing how the restorative approach has influenced decision-making in CP social work and whether SWs and PWs view it as a help or a hindrance.

5.6.1 Perceptions of Restorative Practice in CP social work:

LA1 uses restorative practice (RP) to underpin their child and family social work. Whilst collaborating with the whole of the family throughout each stage of the CP process may reduce time spent on CP plans, families also have a right to be involved in decisions made about them; “practice is more effective when based on participative principles” (Bell 1999a:438). In theory, this is a whole service approach. For such practice to work there needs to be an organizational shift, a culture adopted by each practitioner and service user. The SWs were therefore asked to reflect on how restorative practice sits with fast-paced, risk-focused child protection social work, where the UK CP system is “criticized as bureaucratic, forensically orientated and adversarial systems, more focused upon procedure and risk management than engagement with, and support of, families” (Healy, Harrison et al 2016:328).

SW1 liked the idea of a whole service approach, but was dubious about its impact:

It’s a really integrated service in terms of what we offer to the family. It sounds great in principle but in reality, it doesn’t actually work that well [laughs]. Because I think it’s new and I don’t think it’s as seamless as it could be. (SW1)

SW3 spoke positively about her experiences of restorative social work, particularly in care proceedings, where RP can recognize that you are building relationships, and ensuring respect, even when the balance of power lies with the LA.

...You can still be highly challenging saying 'this is our expectation' but you're also setting out 'this is what we're going to do to support you, but this is what you've got to take this responsibility to change, we can only take it so far'. So I think that right through we are using a restorative approach, I would hope. (SW3)

Whilst SW5 agreed that using RP across the social work spectrum promotes mutual service user / practitioner respect, she has struggled to embed RP into her practice with particular service users. Balancing the conflicting demands of CP risk assessment and child / parental rights (Keddell 2014) has been a stressful process for her:

The CP core group meeting I did the other day...I sat there and I've got a just-about 18 offending, drug using lad...bless him...who's lovely but 'nice but dim', bless him...He makes stupid mistakes. And I sat there and I read him the riot act, because I had to and it wasn't restorative. But it had to be that, because that was the way he had to hear certain messages. (SW5, emphasis added)

SW5 understood that this was not an ideal example of restorative practice, which would follow a more gentle approach, avoiding strictness. She continued to state:

I have the power to sit there and bollock him. Is it restorative? No. Will a restorative approach get any kind of response from him? No. Will this way? Well actually, yes. (SW5) .

Restorative practice is based on the underpinning (and embedded) belief that a collaborative family / practitioner / justice approach is key to the entire process

(Commins 2016) rather than a systematic framework. The LA1 practitioners however admit confusion:

The only thing that I would say about the restorative approach is that it's probably a bit...it's open to interpretation obviously and it's not...it's an approach but it's not kind of guided in the same way that I know other councils use...like Signs of Safety...you know what you're asking, certain questions, or a certain process that you're following. I think the restorative approach is a kind-of overarching approach...at times it may be a little woolly. (SW3)

The responses given by all practitioners to their thoughts on restorative practice and participation were very similar. All were able to define both processes but struggled to identify positive restorative experiences of either, particularly when it came to meetings and case conferences. None of the SWs or participation workers could agree that the child protection case conferences in LA1 were a positive example of restorative practice. All of the practitioners identified that their restorative approach finished at the point of ICPC; case conferences were of the traditional round-table model, with the IRO disseminating information from their position at the head of the table and being in charge of creating action plans.

This is what I've always been saying...about [LA1]...'restorative, restorative, restorative'...We don't hold restorative conferences! That's not a restorative conference! It's the old-fashioned way. (PW2)

SW4 had recently moved from a LA where case conferences were interactive, following the Signs of Safety approach (Turnell and Edwards 1999) and aiming to promote parent-led problem identification and decision-making. SW and police reports are shared prior to the start of the conference and the meeting remains discussion-based, rather than authoritative. This avoids the isolation

and imbalance of power experienced by service users in Jackson et al's (2017) research where parents were asked for their opinions only after all of the professionals had given theirs. In Signs of Safety conferences, the IRO is an active participant, walking around the room, writing on flipcharts / white boards and making eye contact with all attendees. Children are encouraged to attend and participate in the creation of the danger statement (i.e. 'If nothing changes, what's the worst thing that could happen?') and the CP plan. Having observed a Signs of Safety case conference within a separate LA, and after sharing my observations of this with the Participation workers, PW1 stated:

That's made me question everything yet again. Because I'm now sat here thinking...at the end of the conference when the IRO reviews that plan, or looks at the plan that the SW has put forward, I don't think that the parent talks at all! (PW1)

After a recent ICPC, SW4 asked the parents if they had understood the meeting; the parents stated they had not. PW3 identified that this response was evidence of a lack of restorative practice:

I think if you get to the part where the parent doesn't understand the plan, you've not involved them in it. Do you know what I mean? If they get to a point where they don't understand the plan, then you've not done your job in being restorative and involving them in the first place! Do you know what I mean? They should understand what is going on. And like [colleague] said quite rightly, they're probably shell-shocked but their involvement is vital and it just misses the fundamental point of working with people. (PW3)

The lack of parental understanding of the democratic decision making process within case conference is highlighted in Jackson et al (2017), with parents assuming that the IRO was in charge. This is a natural assumption, given the structure and formality of the traditional child protection conference, and some practitioners felt that moving away from this was not necessary:

It's not very restorative, in our restorative world...but again, I suppose particularly initial child protection conferences are a very formal process where quite a lot of serious stuff's got to be discussed. (SW5)

SW2 mused on how changes to ICPC format may be oppressive in their introduction to service users, such as introducing an open-circle ICPC without any change in organizational culture:

That's my little bugbear about imposing these new ideas on people without giving them some agency power actually. (SW2)

Participation workers suggested that the length of restorative conferences (most take around three hours although, in my experience, traditional conferences run for a similar amount of time) may be a factor as to why they have not been adopted by LA1. One PW stated that they had asked IROs directly as to why RP ended at the door of ICPC and the reply was 'it's not [the IRO's] decision to make'.

5.6.2 Family Group Conference (FGC)

With traditional child protection meetings outnumbering service users with professionals (Healy 2012), the collaborative approach of FGC encourages parents and extended members of families to identify workable solutions to child protection issues. In 1997, Campbell wrote an Australian review of the CP case conference, in which she cited Lord (1992):

...the weaknesses of case conferences as residing in interpersonal dynamics between professionals within the meetings, professionals' discrepant perceptions of risk and abuse, the difficulty of predicting harm, and a heavy dependence on the skills of the chairperson for the quality and output of the conference.
(Lord 1992, in Campbell 1997:5)

It is disappointing that the issues raised twenty-six years ago by Lord (1992) remain as pertinent and divisive in social work today. It was in response to these issues that Australia embraced the structure of the Family Group Conference. LA1 are also fierce advocates of this approach.

Two of the parents in Phase One of this study had participated in FGC whilst in child protection proceedings within LA1. Parent2's experience of FGC provided positive outcomes for both parents and children. The wishes of his eldest child, aged twelve, were heard and responded to, with the extended family supporting a safe progression to overnight stays with his mother:

So yeah. They are listened to. They ARE listened to. And they go to family group meetings. Family group conferences. (Parent2)

Further discussion on this issue revealed that the children did not actually physically attend FGC, rather their voices were present and listened to. Parent2 described how he felt during the FGC and the expertise of the facilitator:

It's debated [laughs]. It's sometimes fiery. But things need to be said, on both sides you know?...we were stuck at the beginning without a plan you know. And no one could see where the road was leading to, and so Family Group...this lady called [name], she's amazing, her...she's done it really well. Cos at the first one...the first one was just a mess. You know. It was just a mess. Everything was raw but...after four or five months...it was productive. And we got a plan. It just needs tweaking a little bit though, that's why we've got one this week. (Parent2)

The use of the adjectives 'fiery' and 'raw' by Parent2 to describe his experience of FGC reminds us of the implications of child participation. If parents are finding CP meetings to be intimidating, humiliating and frightening (Jackson et al 2017) consideration must be given to the appropriateness of child exposure to the hostility within meetings (Healy and Darlington 2009). Parent2 admitted that he

found collaborative working difficult due to the presence of the mother's boyfriend in the meeting. Whilst accepting that the new partner had a role, it was hard to see that his children's mother had moved on and that a stranger was assuming caring responsibilities for his children.

I was anxious about it. Mum's new partner was there at the time. That was the first time like I'd seen him. She had a seven month affair. That was like the first time....that's why the first plan didn't go well, you know? It was just raw. But like I say, seven months, eight months? We've moved on. (Parent2)

Parent4's family were also attending FGC; at the time of interviews, they were approaching their third conference. The FGC aims to encourage parental participation where the parents had previously felt unheard (Healy et al 2012) yet Parent4 continued to feel oppressed. He stated that the conference was based on negativity and untruths, and questioned why a strengths-based approach was not used.

I said, everything in this report is negative. I said, there's not one positive thing about what I do with my kids. About that my kids are constantly in school, my kids are consistently fed, my kids are constantly clean, me kids get everything, pretty much everything what they want. You know, there's nothing like that. Now, a social worker come when I was in the back garden putting up swings and stuff for my kids. There's nothing like that put in the reports. (Parent4)

Only two of the SWs interviewed had families in the FGC process. Both held positive views about the service, particularly the way family members step up to provide support for issues of which they were not previously aware. It is evident that FGC rests on the relationship established between the parent and the SW; parents may be reluctant to admit their problems to wider family members for

fear of shame, judgement or simply not wanting to burden others with their issues.

5.6.3 The child's ability to effect change

Parent1 stated that her children's ability to voice their opinion is of paramount importance to them.

I've always done it. I've done it with all of them. I've just told them straight. Tell me exactly what you're thinking. Even if you're frustrated and angry, and all they want to do is swear, I've told them free speech...tell me exactly what you're thinking. They always have done. (Parent1)

It is important to Parent1 that their children can ask any questions regarding their CP experience, in order to alleviate any worries. Her two children however have different needs and levels of understanding:

Me lad's the bright one and the girl isn't. With everything that's gone on, she understands but she doesn't understand if you know what I mean? So she doesn't ask any questions at all, whereas me lad is worrying about everything. He has a lot of concerns, a lot of worries, he's forever asking me...I always tell him that one day we will get through this and this all will be behind us. (Parent1)

The quietness and non-questioning nature of the girl in the above example should not be a reason to exempt her from honest information sharing. Whilst the eight-year-old child shows no interest in the CP process, she may continue to soak up the atmosphere following SW visits, or family discussions. Children have the right to services provided by competent and skilled practitioners, therefore innovative ways of working with more reserved children are key to ensuring participation (Cabiati 2017). Both Parent1 and Parent4 felt that the most vocal children in their families were the most affected by the CP process,

due to their constant questioning of the situation. However, it may be that the children in each family learn and process information in a different manner; quietness and non-questioning should therefore not be overlooked.

Despite encouraging their voices to be heard, Parent1 ranked the statement “My child influences decisions made for them by adults” in the lower half of her ranking scale (see appendix 7, p:354). They were not able to give an example of their children having a positive influence on their child protection plans.

Parent4 was happy for their children to voice their opinions but was sceptical about the way this was interpreted by the SW. He also felt that his children’s voice had no influence on decisions being made for them by adults and had been clear about his attempts to act as a barrier between the flow of information.

I am positive about it, I just don’t want to, you know...you know what social workers are like, they twist things. They look at a lot of negative stuff. A hell of a lot of negative stuff. And I’m not happy with that, coz I’m their Dad. (Parent4)

Despite their child being non-verbal, Parent3 felt strongly about her child’s ability to effect change:

And that’s what I’ve always found...erm...is that, you know, I’ve got to speak for him because no one else can. So, I’ve always had to be his voice and, you know, stand up for what’s right for him. Because no one else can do it and he can’t do it himself. Just because he can’t talk doesn’t mean that he can’t influence. He’s got a lot of other ways that he does communicate. (Parent3)

When asked whether they had witnessed a child being able to influence decisions made by adults on their behalf, SW4 discussed an eight-year-old child who had asked to be returned to the care of his mother.

And we're saying 'No, sorry, it's not safe for you at the moment'. And it's quite sad, and you know, it can be upsetting, but actually his safety has to come...is paramount. So that's therefore...his views are being taken into consideration, they're being listened to and we know what he wants to do, so we need to make sure that we can address that as best we can. (SW4)

This is a good example of the fine line separating children's rights and child protection. Multifaceted, inclusive assessments can balance the presence of risk, the perception of the risk by the parent or child, along with an understanding of the 'danger' should the risk continue. However, research continues to show that the child's ability to influence and understand decision-making, particularly regarding their living arrangements, remains inadequate. Balsells, Fuentes-Peláez, and Pastor's (2017) Spanish study, focusing on children removed temporarily from their home, found the information shared throughout the decision-making processes inaccurate and incomplete. Children did not participate in the choosing of their foster care placements nor received information regarding where they will be living (Balsells et al 2017). Similarly, a study of 30 children by Mateos et al (2017) concluded that the point of separation and the point of return are the most important events regarding a child's removal from their parents' care. Taking in to account the age and understanding of the child, there must be an explanation given as to the reasons for both the removal and the process of reunification (Mateos et al 2017) allowing the child to absorb the information and voice their opinion. Whilst the 'child as victim' should not be expected through participation to become 'child as solution-finder' (Sanders and Mace 2006), being party to decision-making can empower the child as a social actor, responsive to their environment (Sanders and Mace 2006; Polkki et al 2012; Cossar et al 2016).

The child will one day need to make decisions for themselves; therefore participation in decision-making can encourage independence (Kriz and Roundtree-Swain 2017).

5.6.4 The child's experience of child protection conferences (or lack of); a practitioner perspective

There is no current statutory rule regarding the age of children attending their own CP case conference or core group meeting. Decisions are made on a case-by-case basis however, in my experience, the default position is that the child does not attend meetings. In LA1, children aged 11+ years are invited to attend their ICPC and review conferences. PW2 feels that this age boundary is a 'grey area' and stated that younger children would be welcome to come, but they had not yet met a younger child who they would consider an appropriate attendee. SW2 disputed this:

As a social worker, I always ask children if they want to attend. And I wouldn't give anyone any choice about that; if a child said yes, they're coming! (SW2)

It is unclear where this rule regarding 11+ years only participation came from. LAs consenting to take part in Phase Two of this research had a 10+ years rule (LA2) and a 12+ years rule (LA3) respectively, despite their RP / SF approach. With all research pointing towards participation being dependent on the age and stage of the child, having a higher cut-off point regarding age silences the voices of younger, yet more insightful and communicative children (Winter 2009; Department for Education 2017). Whilst having a clear age-range to whom participation is promoted clearly makes planning and practice easier, it places

further restriction on an already involuntary participatory model; it seems too simplistic to say “I have never come across a child who would benefit from it”, as PW3 stated in their focus group. The argument that an age-related blanket rule for participation could potentially omit and oppress a perfectly capable child from involvement in their own CP planning points towards to unique and tailored experience for each and every child, depending on their needs.

None of the SWs had any examples of children aged 8-12 years attending their own case conferences. Despite being encouraged to attend, the practitioners shared that only a few children (outside of this study’s age range of 8-12 years) have attended their ICPC in LA1.

I think that I will always encourage the kids to come and if I’m honest, the way I do it, is saying ‘How are you NOT wanting to be there? They’re all in a room talking about you!’ ... I’m just literally that honest” (PW1)

The presence of children attending their own CP conferences or Looked after Child reviews, in separate recent research studies, remains low. Bruce (2014) conducted two random file samples, focusing on child participation in CP conference before and after the introduction of an advocate. In the first file sample, 86% of children did not attend their case conference yet, following the introduction of the advocacy service, this figure increased to 93% in the second file sample. Pert, Diaz and Thomas’ (2017) review of children’s attendance at their Looked After review concluded that participation was very low and participatory methods used quite ineffective, whereas Sanders and Mace’s (2006) study of child protection conference minutes recorded only seven children attending conference out of a sample of 185. Opinions of the children

involved in Phase Two of my research will therefore be explored to understand more about their experiences of CP case conferences.

SW4 and SW5 seemed hesitant when discussing the presence of children at meetings. SW4 stated that invitation to ICPC needs basing on age and level of understanding, along with ensuring whether they want to attend, because “people need to understand what the world of that child looks like in that meeting”. If a child is not invited to their ICPC, or does not wish to attend, SW4 stated that they would make sure they visit prior to conference to record what the child’s view are.

Or, if worse case scenario, I hadn’t met with them, I’d make sure that there would be some agency that had spoken to them and they would tell me what their views are. (SW4)

Along with the admission that the SW may not have met with the child prior to case conference the SW is reliant on the interpretation of the child’s voice passed between several adults and then shared at conference. This process however would be more feasible if an advocate was already engaged with the child and could share the child’s views verbatim and in an appropriate context. Pre-conference is the time when the PWs facilitate most of their relationship building with the child and family. The PWs in LA1 share newly prepared child / parent friendly leaflets with the child and family, explaining the purpose of the meeting and showing a picture of the meeting room. With the old-style leaflets creating anxiety and confusion amongst parents, the PT designed fresh material, free from jargon and oppressive language. PW1 stated that honesty is the best policy when it comes to describing conferences.

'It's horrible, mate. It's going to be horrendous. You're going to be sat around a table with all these professionals and you know, you've got to stick up for yourself'. (PW1)

Whilst the PWs have their new leaflets to share with families, the SWs do not currently have any pre-conference materials that they use with their children.

But I do think it would be helpful to have more material resources, to actually sit down with a child or teenager...to go through and say 'this is what the process is. What / where you are up to? How are you feeling?' because I think if you had something tangible to sit down and do with them, then I think that would be helpful. (SW3)

Shemmings (1996) expressed caution regarding children attending their CP case conferences and the harm that children may experience listening to practitioners talking negatively about their parents' characters and behaviour.

SW2 however was adamant that this was not the case, that it was easy to forget that the children are living this experience daily:

They would be coming, coz I think it's really important...and I get some children that come and they're fantastic, you know...really add insight. A lot of the professionals get really funny about it. They don't like...they worry about talking about these things in front of the kids but it's their life [laughs]. Don't worry, they see it! (SW2)

SW5 reflected that children who attend ICPCs are able to learn why things are suddenly happening that have never happened before, such as dentist appointments. However, SW5 contradicted this later in interview, when discussing the presence of a fourteen-year-old girl at her own case conference as 'not being helpful':

...She turns up for meetings and things, even when it's not appropriate. She'll turn up with mum for a meeting. And she turned up [to CPC]. I'm not sure it helped actually. It was managed well and the IRO, it was the IRO who managed her, let's put it like that...it wasn't appropriate for her to be in all of it and none of us knew she was coming. Erm...so no, I wouldn't have said it was a help really. (SW5)

Analysing the responses of practitioners in Phase One, there appears to be no fluidity of process for participation of children in decision-making forums (Kriz and Roundtree-Swain 2017). There is certainly an argument about planning participatory practice in order for it to be meaningful, therefore assuming the child is attending case conference should be the default position. Designing the conference around the presence of the child ensures that the child remains at the heart of the meeting; in the absence of the child, the opening statement by the IRO should reflect on the characteristics of the child, their lived experience and reasons for CP status. The cultural shift by certain LAs towards Strengthening Families or Signs of Safety further embeds the significance of the child and the role of the parent into case conference, aiming for families to be partners in the process.

Consideration must be given to the presence of 'strangers' within meetings; if children are participating, case conferences need to be a safe space where they can speak honestly (McCafferty 2017). In my previous LA, for example, a generic police officer (rather than the professional who supported the family during the crises) attended the conference. It is also usual for the school nurse to attend ICPC and present medical statements, rather than doctors / nurses who may have consulted with the child initially. The presence of strangers discussing and judging the intimate details of a child's life would be an intimidating experience and this often confuses children (Pert et al 2017). SW1 admitted that she had never invited a child to ICPC; she felt that was the role of the Safeguarding unit (for invitation) and the PWs (for wishes and feelings). A teenage boy on her caseload was always invited to his case conferences:

...but you know, he won't attend that. He doesn't even stay in the house. He's just started to be there when I visit and I have actually had a conversation with him which nobody else really [could]...the ISW could, he spent a long time, but he won't engage with YOS, he thinks she's just a grass for the police. It's how we keep him safe. He bounces between Mum and Dad's addresses, there's over crowding in both homes so he can't...hasn't got his own bedroom...or his own bed, even. He feels nobody wants him. (SW1)

If a child's basic needs are not being met, or his family life is unstable and chaotic, attending a meeting will not be a priority. Social work does not take place in a vacuum; the reasons for the child being on a CP plan remain present. This sentiment was echoed by SW3, who thinks that a very low percentage of children and young people are actively involved in their case conferences.

Despite saying that she'd come right up until the last minute she just didn't, then just didn't turn up. And she has said she finds the meetings...she doesn't like the meetings...she feels that she's being judged by the people, is what she says. (SW3)

Practitioners reflected on how the child's voice could be heard at ICPC if the child was not present at the conference. SW2 and SW5 reported that the PWs collect the child's views and share them at conference. SW2 however stressed that they, as the SW, would have already collected wishes and feelings work through statutory visits and assessments but is mindful that some children have better relationships with other practitioners. SW5 speaks to all of her children prior to the ICPC and will share how the child is doing and what is going well / not well.

Both Parent2 and Parent4 stated that advocates visit their children prior to case conference and record their thoughts and feelings. Parent4 does not consider this to be fair; he feels that this is his role as a parent:

I'd like it if I could give them the information coz my kids are honest with me. If my kids have got issues then my kids would tell me. Because I've always been there to support them and do everything I can for them. (Parent4)

Due to the lack of examples of children aged 8-12 years attending case conference, SWs gave examples of how older children were able to influence decisions made at conference on their behalf. SW2 gave an example of a sixteen-year-old female, determined to acquire more freedom of choice than her parents were affording her; attending her own ICPC allowed the family to reach a compromise about rules and boundaries within the home. SW4 and SW5 also provided positive examples of older teenagers being able to influence decisions made for them by adults. However, when SW3 was asked whether she had any examples of a child influencing the outcome of a conference she simply replied "No. Which is a shame".

5.6.5 Parents' perception of case conferences

The factual data gathered from parents regarding their child's attendance at ICPC contradicts the information given by the SWs. This may be a coincidence within the small-scale sampling, although practitioners did admit that child attendance at conference is very low. It is also possible that SWs were alluding to practice that they knew was 'good' but in reality is harder to promote. Without clear guidance, culture or protocol, SWs will adopt differing approaches to

participation; it is, without a doubt, much easier to hold a meeting without a child being present.

None of the children (aged 8-12) of the parent participants had attended their child protection case conference, nor were they invited to attend. Parent1 reported that her ten-year-old children were deemed too young to attend their case conference. They had also never been invited to their Core Group.

It's a decision from the social worker. She made that decision. We're there to talk about the kids, not talk to the kids, apparently according to her. But they don't listen to them anyway, no one's listening to any of my kids within the whole fifteen months....so the quicker that everyone gets out of our lives, and stays away from us, the better. And if they don't, I'm just gonna end up moving and disappearing, coz I've had enough. (Parent1)

Parent1's narrative throughout the interview focused on the SW's inability to hear her family's voices. Her fourteen-year-old child did attend her ICPC, however it was a negative experience for both parent and child; Parent1 therefore ranked the statement "my child is listened to" as the lowest on her diamond (see appendix 7, p:354):

She got an invite and she wanted to come, so I took her along and everyone ignored her. They blanked her or acted as if she wasn't there...in the end, me and her walked out....she just wasn't being listened to. No. But I'm the one that knows my daughter and yet at the start of all of this, no one would listen to me. And now, no one will still listen to me....she came away blazing! She was going off her head and personally I don't blame her. Coz they just weren't willing to give her the time of day at all. (Parent1)

The context behind this statement needs further explanation. During her interview, Parent1 explained that her fourteen-year-old daughter had attended conference to ask to be removed from the CP plan, due to the initial CP concerns being based around her ten-year-old sibling. With the perpetrator of

the crime - her father - now in jail, the teenager felt that there was no current need for her CP status. In my experience, it is very rare for lone children within families to be on CP plans. If one is deemed to be at risk, then scrutiny and support is offered to siblings also. However, Parent1 felt that this was not explained to her daughter:

It is the responsibility of the Chair and the SW to have explained to the child as to why she cannot be removed from her CP plan and this did not happen. (Parent1)

Parent2 confirmed that his children, aged 8-12 years, had not attended ICPC and admitted that even he had not wanted to participate either:

...I think it was because everything was volatile at first. I didn't attend because I didn't want to. I didn't want to sit in the same room. (Parent2)

Parent 4 was pleased that his children are kept away from meetings "coz some things they don't need to know". His children are not invited to their own child protection conference and he supports this, because "they used to be negative...everything was negative what they used to say about us (Parent4)".

Parent4 reflected on what they would say if his 11-year-old child asked to attend case conference or a meeting:

'No, honestly, you're a bit young for it love, you know, it's for adults really'. And then I'd tell her honestly that if there's anything that I need to tell you, I'll tell you when I come home'...because it's a lot of information for a child to take in as well, you know. Erm, some of the stuff they come out with in meetings it's like belittling you. But I know what I feel and I wouldn't want that in front of my kids. (Parent4)

Parent 4 believes that only he should share information with his children and is unhappy with the SW's requests to speak to his children alone. However, his

statement about ICPC being for adults only is partially correct, particularly when CP Chairs are not routinely planning their conferences to (meaningfully) include children. Traditional case conferences, as used in LA1, involve the sharing of sensitive adult information and police intelligence that children and parents are not privy to, requiring family members to leave the room during their own conference. This process is not evident in Signs of Safety / Strengthening Families conferences; information sharing takes place prior to the start of the meeting therefore parent (and child) are not required to leave the room.

The difference about [a child] coming to conference is that they are allowed in for ten minutes / twenty minutes, they're not allowed to stay for the full thing. And I know that if I was in that position, that would do my head in more than anything. That I come and give my bit, but you're not trusting me to hear the rest of it. (PW1)

The absence of the parent and child from a case conference gives practitioners the opportunity to speak freely. In my experiences of ICPC, however, it also allows practitioners to 'talk behind the parent's back' and vent frustration over the details of the case, particularly if it is thought that the parent is not being truthful. This is echoed by PW1:

One thing that really gets my goat, and this is me having a moan now, is that when we have parents that need to go out and have five minutes to themselves...so, as soon as they shut the door, everyone's like 'Oooh, did you know about this, did you know about this, ooh she does my head in, why is she always having a big moan, why is she always stressing herself...'. And it's like, are you fucking kidding me? That parent is losing her shit, quite rightly, because you are all around the table telling her she's a bad parent. She needs five minutes, let's all just sit here quietly and wait for her, and support her. (PW1)

The ability to use decision-making forums to belittle and silence the voice of parents is due to the clear power imbalance in the room (Jackson et al 2017), summarised succinctly by SW2:

I think, well it's almost like you can just see the apathy in parents who walk into a room and think 'Right, my monthly telling off and then I'll go home [laughs]. (SW2)

5.6.6 Promoting participation; proposing a way forward for LA1

The PWs in LA1 are developing a process for parental and child participation in CP decision-making forums. Their initial meetings with the child and family, for example, explain the CP processes and encourage all to attend conference. They aim to visit weekly until the ICPC, and instil confidence in the attending child or parent:

A lot of people have had bad experience of meetings so we try to put in strategies, and this is for young people as well, and the adults. And we'll have codes...I'll have a code and I'll say 'say biscuit to me if it's getting too much for you and we'll go out for a walk and get a bit of fresh air. (PW2)

In LA1, CP conferences take place in one large room in an old office block, around a U-shaped table. All participating SWs and PWs described the environment as child-unfriendly, with one SW stating that it was parent unfriendly too. It was clear that the PWs found their actual case conferences to be extremely child-unfriendly too:

I think that if we really want to be participative and we really do want to get our kids involved in it, we need to completely scrap what CP is and reinvent it to be child-friendly, because that's not child friendly. It's terrifying. (PW2)

At the request of the PWs, large disused metal filing cabinets were removed from the conference room as the families thought that their personal information was being stored in there, making them feel judged and vulnerable. The waiting area was described as being of poor standard:

I've brought books in from home that my kids weren't using anymore because they were shit in there...in fact, I was in there the other day and I sorted through the toy box in there. Nothing had full pieces to it. There was chalk, half a jigsaw...it's just really poor, there's nothing for kids in there. (PW1)

All SWs noted that parents could not control the scheduling of a case conference. In Pert et al's 2017 study, children concluded that the timing of their meetings were based on the practitioners' need to finish work at 5pm, negatively affecting the child's ability to socialise after school with their friends. LA1 provides no childcare for pre-school children yet toddlers cannot attend case conference; SW3 gave an example that a PW had to babysit a mother's toddler whilst the ICPC took place. Whilst this is a great opportunity for the PW to engage with the child, it has arisen out of oppression. Failures in parenting are often ascribed to the lone female parent, rather than acknowledging the paternal non-involvement. The issue of absent fathers arises in Berrick et al's (2017) research, questioning how their views were being evidenced in conference and whether SWs even tried to involve them.

It is difficult to argue for a child's presence in an arena viewed by all as oppressive and judgmental, particularly when practitioners (rather than the culture of the conference) are the facilitators of negativity. PW2 has been accused of 'conference coaching' by attending practitioners, who feel that the PWs persuaded the parents and children to change their behaviour specifically for conference:

'We're not going to see the real them!' No, you are going to see the real them because we can ask them more questions and look at more things, coz they're keeping calm. (PW2)

PW1 feels that ICPC focuses too much time on what the family has done wrong, rather than adopting a strengths-based approach:

Everything that they did was seen to be wrong though. It could be like...pulling up things like...why has your child not been to their doctor's appointment? Like, there are millions of appointments that I've missed for my kids because I've got three kids. I work full-time and I forget. It happens. I struggle when they pull them up on things like that because that's almost seen as a negative when actually they're just a bloody parent that's struggling. (PW1)

This aligns with the findings of Arbeiter and Toros (2017); highlighting parental failings promotes the SW as the expert, which sits uncomfortably with LA1's restorative approach. The PWs felt that they promote positive, inclusive practice with families only for it to be ruined at conference by practitioners reacting negatively and judgmentally:

And you're knocking their confidence as well. We're meant to be empowering them and supporting them to be better parents so their kid's not in harm's way or whatever. And actually these meetings do nothing but knock their confidence and say 'You're shit at being a parent!'...I'm sure most parents worry whether they're a good parent or not. It seems to be a fear that parents have. (PW1)

PW2 discussed a recent ICPC where no evidence of 'significant harm' was evident; support needs were indeed present but nothing meeting CP thresholds. Yet at the end of the meeting, all professionals around the table voted that the child should become the subject of a CP plan. In response to this, PW3 stated:

See, if you're frustrated by that, then you look at it and think how the parent is feeling. (PW3)

The PWs hold a similar frustration regarding the amount of acronyms and woolly language used within case conference. The use of LAC, MFH, TAC, CSE, CIN and ICPC can confuse and exclude parents and children from taking part in the conversation and being able to carry out actions post-conference:

...parents don't understand what that means. If you want a parent to stop hitting their child, write on the plan 'you must not hit your child!'. It does not need to say discombobulation and all that crap. Parents don't know what it means! And, don't get me wrong, I'm not trying to say that all the parents that come in to child protection don't understand it. I'm not at all. I would consider myself to be quite educated but I don't understand half the words that these people come out with. It makes me feel thick. (PW1)

In an emotional situation, clarity is needed. Action plans for parents must be straightforward with a clear identification of the tools and services the parent needs.

That's what it is. It's like instructions. And guidelines that the parent needs to follow. Surely, if it's for the parent to follow and implement, it doesn't need to be written like a bloody Masters assignment, does it? (PW1)

5.6.7 Child participation within Core Group meetings

There was a clear disparity between the responses of the SWs ("children do attend conference") and the parents of children on CP Plans ("my child has never been invited to conference") regarding child presence at ICPC. Following this, all research participants reflected on whether a child is encouraged to attend their core group meeting. These regular, statutory meetings ensure the provision of support to the family in meeting the needs of their children, taking into account the recommendations for change as outlined within ICPC.

Initially, all parents stated that their children had not been invited to, nor attended, their core group meeting. However, further into his interview, Parent2 stated that his 12-year-old child has attended one core group meeting for ten minutes at the end. SW5 echoed this statement, saying that it would be unlikely the child attends their core group meeting all the way through.

We usually do it at school or somewhere like that, so it's easy to do your bit and then bring them in to finish the meeting...so they think they've been in the whole meeting, but they haven't. (SW5)

I find no logic in bringing in a child at the end of their core group meeting, once all discussion and planning has concluded. On Hart's (1992) participatory ladder, this would barely reach the rung of 'tokenism', nor the starting blocks of Shier's (2001) Pathway to Participation. Practitioners cannot claim to be 'ready to listen to the child' (Shier 2001) if the child's voice is decorative or an 'add-on'. If the LA policy is to allow a child to partially attend their own core group meeting, logic states that the child's presence, voice, thoughts and opinion opens the meeting and set the tone for discussion. The quote above from SW5 also raises concerns about the need to lie to the child regarding the length of the meeting; the child would surely feel reassured to be informed that their support network will remain and discuss how they can best help the child. There must be an element of transparency and honesty retained at all times whilst adults discuss the intimate and private details of a child's life. PW2 raised concerns at this apparent dishonesty, or fear to be truthful, of which they realized they were a part of:

And I feel that we're not very honest with them either, so we should say look...we want you to change. We're going to give you 'til 20 weeks time and by that time we need this to happen. If you need more support with it, this is going to happen. If you haven't done it because you're refusing, this is going to happen. And if you've done it, this is going to happen. They need to know because by the time those 20 weeks come back, I'll often find that people are like 'we're having a PLO meeting for them'. Well, have you told them? No. Well then, how do they know that they need to change? Do you know? We know! (PW2)

PW1 feels that SWs are too scared to be truthful about the negative consequences of a situation. In the introduction to the new combined child and

family assessment, Munro (2011) referred to extended timescales as being imperative to allow families to make appropriate changes; clear language, clear timescales, clear planning and clear consequences must be used with parents. Regarding the child's physical presence at core group meetings, the information supplied by all of the SW again contradicted the experiences of the parents. SW2 stated that she always invited children to their core group meetings.

We had a lovely core group the other day with babies crawling around on the table, lots of drawing going on, but really nice...coz I think actually that really focuses the mind. I think we can say it does help keep professionals on a positive note....We can ask the children what's going on and what we still need to work on, and we can keep it a bit more focused. We are actually here to try and make life a bit more better for the children. (SW2)

SW5 was in agreement, stating that whilst few of her children attend "the formal CP ones" she regularly has children at core groups / Team around the Child (TAC / CIN).

I think that sometimes just to bring them into a meeting where they see that people are human and are gonna just...you know, they're talking about things that are going to affect them....makes a big difference to a child. It becomes a less scary process for them. (SW5)

SW3 described how professionals needed to 'tweak' their language to ensure that a teenager understood what was being discussed at his core group, but all were able to be transparent about their concerns:

...everyone was still you know honest about what their concerns were...I think there's a danger sometimes to err on the side of being overly positive to try and engage people, and I think that's a real risk in terms of not making the family aware of how concerned we are. (SW3)

SW1 invited all of her children to core groups, although felt some core group environments were not suitable for a child. Her most recent core group was

attended by a large number of external agencies as well as separated parents, the meeting swiftly abandoned due to their inability to communicate effectively in large numbers and parental hostility. Whilst reducing the number of attendees to key professionals and parents only, SW1 felt there were risks to the children that needed urgent discussion and there was no place for the child in that format. SW5 stated that children need to be prepared for meetings and given time to consider what their role might be:

Well, I don't go in cold, if you know what I mean. I tend to speak to them beforehand and say 'Look, we're going to have a meeting. Do you want to speak in it? Do you want to come to it? And, if so, this is what is going to be involved. But do they actually understand our full process now? Not really, not in a lot of cases, particularly the younger ones. Erm...you know...like I had a teenager today. He knows how the land lies, he understands why he's living elsewhere, why his parents' are at each other's throats, so he understands why we are there, in relation to that. But erm his three younger siblings probably don't understand the process around it. (SW5)

This sentiment is echoed by SW1, working with an eight-year-old child who was oblivious to the child protection process:

...The younger one, he would not know what's going on if we brought him to a core group, it's probably not conducive to what he needs, to be fair, he'd just be like 'what are they all talking about?'. (SW1)

This raises the question of whether there is the ideal time to explain the process and reasoning of CP planning to a child. If an eight-year-old child is receiving monthly SW visits, surely the child should know why these visits are taking place; if not, I am uncertain how their SW is obtaining accurate wishes and feelings regarding the impact of services on his life.

5.6.8 Summary

LA1 has embedded restorative practice in order to aid partnership working between practitioners and service users. Despite its participatory ethos being a popular choice for an increasing number of LA children's services departments, this section demonstrated that LA1 SWs were conflicted in their opinions of RP and its appropriateness for use in CP social work. The research study also emphasized practitioner frustration regarding the cessation of RP at the door of child protection case conference, this multi-agency meeting reverting to the more traditional round-table, 'old-fashioned' format where the IRO disseminates the action plan.

The findings also contained a lack of evidence pertaining to children aged 8-12 years attending their own CP conferences, due to the '11 years and over only' rule in LA1. Contrasting SW opinions regarding the child's presence at case conference demonstrates the lack of fluidity of process for participation in CP forums. Assuming that children are attending their own CP meeting should therefore be the default position.

None of the children (aged 8-12 years) of the parent participants had attended their own child protection case conference and the parents were split in their opinion as to whether they deemed a child's presence in ICPC as appropriate. This interesting observation will be explored further in Phase Two of this study, when six child participants will be asked whether or not they would like to attend their own CP case conference.

5.7 Information sharing

Due to the frequent absence of the child from a decision-making forum, responsibility falls to different people to share outcomes of meetings. However, information sharing is required at several stages of the child protection journey, such as the initial SW visit for assessment purposes, pre / post child protection medical, pre / post CP conference, and statutory CP visits. As each piece of information is shared, the child retains the right to voice their wishes and feelings regarding this (Children Act 1989); this is then fed back in to the decision-making forum. The cyclic nature of participation in child protection proceedings is again evident; this process should be constant until the removal of the child from their CP plan.

With previous research warning SWs about the over-sharing of sensitive information (Munro 2011), the worry of frightening or embarrassing children (Polkki et al 2012), or the redacting / withholding of information that may actually alleviate a child's worry (Cashmore 2002; Dillon et al 2016), participants in this study were asked to consider appropriate information sharing with children.

5.7.1 How accessible is the child's SW?

The findings of Dillon et al's (2016) interviews with five children revealed that, despite being on CIN / CP plans, only one child had knowledge of their SWs telephone number and none knew where the social work offices were located. No email addresses had been shared with the children either, who were all aged over 12 years old. With all participants in the 2016 study

emphasizing the need for privacy, it was concerning that they would need to seek assistance from their parents / carers in order to make contact with the SW. This topic was explored in greater detail with the parent participants in Phase One.

Parent1 stated that her three children (excluding her two year old) were able to recite their SW's full name and telephone number, from memory. The children knew the location of their SW's office. Parent1 stated that if her children wanted to contact the SW privately that would be fine and that the SW is responsive to contact. For a parent who felt that her social work intervention is unwarranted, and relationship with the SW poor, this demonstrated a surprising level of openness.

Parent2 stated that his twelve-year-old child knew his SW's name and had her telephone number in his phone. The child also had the contact details of both his advocate and the school's pastoral team, with full permission from Parent2 to speak with them privately at any time. However, the eight-year-old child within this family did not understand that he had a SW and had shown a complete disinterest in the whole process. Parent2 remarked that, when the child does show a level of interest or understanding, he will be as open and honest with his youngest son, as he was with the oldest:

I mean, they can talk to whoever they want! (Parent2)

The child of Parent3 who falls in to this research sample had disabilities. He would not be able to speak the SW's name but would visibly recognize her and

react when she walks in the door. Parent4's children knew the name of their SW but did not have any contact details for her; if the children wished to speak with their SW privately, they would need to ask their father for the contact details. In practice, SWs readily leave their name and contact details with the parents, but we need to question why we fail to leave the same information with the child. Children on CP plans are vulnerable and at risk of harm, therefore providing them with telephone numbers of support services (such as children's services, advocacy and Childline) should be standard practice. The presence of child friendly documents / booklets left with the child after the initial SW visit could address this issue.

5.7.2 Age appropriate information sharing

There is currently no consistent approach to information sharing. It is wholly dependent on the parents' level of openness and honesty with their children, the skills / attitude of the practitioner and the receptiveness of the child. The blurred boundaries of the child's lived experience, age appropriateness and the sensitivity of sharing parental issues, coupled with the reluctance to place the child as the 'solution-finder' (Sanders and Mace 2006) creates a unique experience for each child in CP. The parent and practitioner participants were therefore asked to consider their opinions on appropriate information sharing, and whether their views aligned with those of the service user or connected SW / PW.

Parent1 described the clash between her and the SW's opinion on what is appropriate information to share:

Always have been [honest]. That's why my social worker doesn't like it [laughs] because I've always been honest and straight with them from day dot. She appreciates my honesty but I don't think she likes how honest I actually am. (Parent1)

Parent1 stated that she purposefully shields her youngest son (aged five years) from knowing about the reasons why he has a SW.

I've kept him in the dark about it all because he can't...he's too young to understand and he's too young to know. Because the situation we're in, it's his dad, so I don't want to...to end up with bad thoughts against his dad...it's not fair on him. I've got no intention of giving him bad thoughts about his dad anyway...It's a lot easier for him to be able to continue as a child and not have this stuck on him. (Parent1)

Links can be made here to Winter's (2010) research about children as young as four years old having a clear insight in to the levels of harm within their family. It is likely that this five-year-old child has some understanding about his situation; this is his life. However, having had a social worker for the past eighteen months, since the age of three, it may also be the child's assumption that SW presence is just a normal part of everyday life.

SW5 mostly agreed with Parent1, but stressed the importance of understanding what a child already knows without being too explicit in explanation:

You know, adult relationships and all the hassle that goes with that, a kid doesn't need to know that. That should be in an adult world and nowhere else. However, that doesn't mean that you can't talk to a kid about you know...you know that mummy and daddy argue a bit. It's what you put to that kid...and each kid's different, isn't it. It's what that kid's already seen and already knows before you tell them. (SW5)

Parent4 felt that he was always in the wrong with regards to sharing information with his children and, like Parent1, was reprimanded by his SW for oversharing.

Yeah, I am honest in front of my kids anyway. I always have been like with the drinking and stuff, erm, when their mum was drinking and they didn't agree with it. They used to come and you know tell me and I used to have a go at me partner...that's why it's been a bit funny as well coz they're saying I shouldn't have a go at [partner] in front of me kids. Which I do understand. Right, but when you've got your kids coming at you, er saying I'm sick of mummy and the drinking, I'm sick of it she's always drunk and that, you know. You have to open your mouth because it's the kids telling you and they and they want you to do something about it basically. You know, you've had to say something to them. You can't listen and then let her get away with it. (Parent4)

Oversharing information was a feature in SW5's interview also, particularly in cases featuring separated parents with children on CP. In one particular example, a parent placed their child in the role of a friend, counsellor or sounding board, rather than sharing the information to facilitate understanding:

I'm of the opinion that we shouldn't lie to children...but you should tell them the truth in a way that's appropriate for them. And I think...when you get messy, chaotic situations, I think sometimes the parent uses the child as the sounding off bit and they shouldn't. So therefore the child knows more about what's happened than they would otherwise do. It might be that the child already knows it, coz it's heard and seen it but even so it's adult stuff...the adult intricacies of relationships and arguing and communication. (SW5)

SW3 found that she had no choice to be honest with a child on her caseload as, like Parent1 and Parent4, the child's mother spoke freely about issues in front of her child. SW3 recognized that openly sharing information, in this case the father's drug misuse and police concerns, could actually keep the child safe. In chaotic situations, where parental issues and problems need to be urgently addressed, SW1 reflected how the child could be lost and oppressed without appropriate information sharing:

I found Mum drunk with the youngest boy and then the family workers were getting abused [by Mum] so we couldn't continue with contact at home. We had to put contact in a contact centre after

that because the family workers would not go into the home. So [the child] said why? And the [advocacy service] fed that back to me. And I must admit I'm so busy dealing with the crisis and trying to organize contact workers and contact centres and organizing it, I'd lost oversight of that. (SW1)

Embedding a new model of participation into CP practice can ensure that the child's voice does not become lost amongst the louder adult voices. In children's social work, the majority of work is undertaken with the parents rather than the child. It is therefore vital that the child can make sense of the activity surrounding them.

But it's very very difficult to talk through child protection, PLO, why things change, all at the same time, you know...And I'd touch base with him every now and again when I did visits, saying that meeting was for that today, and do you understand that, and remember we talked about that. But I still don't know if it wholly goes in. (SW1)

5.7.3 Do the children know they are on a child protection plan?

Two parents, Parent1 and Parent2 stated that their older children (over ten years) knew that they were on CP plans. Parent2 indicated that as well as knowing that he's on a CP plan, the twelve-year-old child understood the PLO process also:

Yeah, I'd say [advocacy service] helped. Because [child] was hearing about all this PLO and all these meetings and Family Group and all that, and he couldn't see anything progressing. He was still here. He was seeing his Mum in a contact centre a couple of hours a week and he couldn't see anything happening, he couldn't see it moving forward. And it was a problem. So, obviously I had a word with everybody and explained to him what it's all about and he knows now. (Parent2)

Parent4 stated that his children would not all know they were on child protection plans; only the second-oldest child (aged twelve) would. The younger children knew they were on a 'plan of sorts':

And if the wheels come off the bus, then they can pull things back. That's the way they've put it to the kids. (Parent4)

Parent4 uses the word 'they', which suggests that someone else speaks to his children about their plan, despite ranking the card "I speak to my children about their child protection plan" as important (see appendix 5, p: 350). It has already become evident during this data analysis that Parent4 is restrictive about the content of information shared with his children, therefore it is reassuring to see that information is reaching the children in some shape or form. Parent3 removed this and other questions / statements from their activity (see appendix 8, p:354), due to her child having disabilities; she thought that her child could not equally participate in their CP proceedings due to practitioners' imbalance of child rights and ability to communicate effectively with the child (Roche 1995; Boylan and Braye 2007).

When the SWs were asked whether children on their caseloads would know that they were on CP plans, there were mixed replies. Two of the SWs identified that younger children on their caseloads had always been on CP plans and would assume that SW presence was normal.

The eight and six and two year old probably don't [know they are on CP plan]. And they've been on a plan forever, anyway. I picked them up over the last couple of months so they probably don't know that they're on a child protection plan. (SW5)

SW5 here refers to the longevity of the plan plus the change of SWs. As verbal / written handovers are rare in CP cases, often due to the abrupt ending of agency worker contracts, the new SW may not be clear on the level of information previously shared with the children. In contrast, SW2 stated that every child on her caseload aged 8+ years would be aware of their CP plan and the reasons for its existence.

I always try to start that conversation with ‘So, you know, why do you think we’re still on a child protection plan? Do you think you still need to be on a child protection plan? What do you think needs to be addressed on the plan? What am I going to tell the IRO tomorrow?’ (SW2)

SW2 reflected on how honest information sharing can prevent a child from worrying about their presence in CP:

I think, as well, that internalizing of the concern you get from 11/12 years olds, I think they...if you’re saying that part of the plan says the child needs to be in school, they think that they’re on the plan because they’re not in school. As like, it’s their fault [laughs]. You know, and I often have that conversation. (SW2)

5.7.4 My child reads their child protection plan and the minutes of meetings

It is the responsibility of the SW to “explain the [CP] plan to the child in a manner which is in accordance with their age and understanding and agree the plan with the child” (WTTSC 2015:45). In LA1, there was a clear absence of post-conference work undertaken with the child. None of the SWs prepared child-friendly CP plans for their children to read. Only one SW took the CP plan out and shared the outcomes / actions in an age-appropriate manner with the children, but even she said that this rarely happened.

I think it's about the level of interest in these things. I've always made that as an option for children but often they just do not care to look at...and they're really ugly and inaccessible anyway. (SW2)

PW1 stated that the IROs sometimes created child friendly versions of CP plans, although it is debatable as to how child-friendly they are. When pressed on this however, the example given was an IRO amending a plan for a parent with to understand; an example given by SW5 spoke of a CP plan being simplified for a parent with learning difficulties.

I'd love to have the time myself to sit down and write child-friendly action plans. You know, and that is what I imagined myself to be as a social worker. You know, when I did my social work training and I had like six kids on my caseload, you could do bubble plans and nice pretty things. I just don't have the time to do that for every child now. (SW2)

SW2 states that she lacks the time to be creative within her social work practice, along with space to reflect on how to share sensitive yet important information with a child.

I had a child whose Mum abandoned them and that was really prominent, a lot of effort was put into why these things happen...do you know what I mean? That was very interesting as it was a massive thing in their life, it was. I think it's just difficult to...to fully make that...bureaucracy of it available to children. (SW2)

SW3, SW4 and SW5 acknowledged that they did not share written CP plans or core group minutes with the child.

Not at all. (SW5).

If the child had not attended their core group meeting post conference, SW4 stated that she would not purposefully visit the child to share the outcome of the meeting.

Again, I don't feel it's explicit and I think maybe that's something...this is a useful exercise for me to reflect on my own practice and, as you're talking about these things, I think that maybe we could be more explicit. (SW4)

Reflecting further on her practice, SW4 feels that she works honestly with the children on her caseload and explains how the risk of abuse needs to be balanced with the wishes and feelings of a child; she is willing however to explore more participatory ways of working.

In terms of what you're saying about the plan, then maybe yes...that sounds like something that may be useful, to actually get that plan and go through it in a friendly way. But the way it's written is not child friendly. (SW4)

SW5 thought about how a child-friendly CP plan could be presented.

Why shouldn't they have a one page summary that says 'this is our worries'. Again, they don't have to be written in the, in our forms, they can be, you know, 'You're not being fed regularly' for instance. Or, or, mum's not...and Dad's not making sure that you get to school on time. Things like that. So the plan is that number one: Mum and Dad are going to make sure you get to school on time. Number two: you're going to help Mum and Dad get yourself to school on time by getting up when they say. You know. And breaking it down for their bit, so they don't think it's all for them to do. I'd hate for a child to get something and think 'I've got to do all this' and it be scary. Coz these kids are, you know let's face it, by the time they get here, we only deal with high end risk these days. Top end and their lives are chaotic and messy enough anyway. (SW5)

SW5 describes how a useful bullet-point explanation could remove worry and uncertainty about CP action planning. However, I do not agree that tasks should be assigned to children as part of a child-friendly plan. Keeping a child informed about involuntary changes to their family life, and seeking their opinions on these, is of paramount importance, but delegating roles to children identified as being vulnerable and at risk of harm is not appropriate (Sanders and Mace

2006). Social work assessment of CP situations examine parental response to issues and the impact of these responses on the children; an ideal response to neglectful home conditions could therefore entail the parent encouraging / rewarding a child to help out with chores, tidying their rooms or washing dishes.

All of the parent participants echoed the responses of the SWs; their children did not read their own CP plans. Throughout their interview, Parent1 remained focused on maintaining a level of honesty with her children and providing methods of good communication as a way of alleviating worries. Parent1's response of "Err, no they don't!" to the statement "My child reads their child protection plan and the minutes of meetings" was therefore surprising. Parent1 stated that her children have a) never seen their CP plan b) would be unaware of their actions planning / goals or c) understand the purpose of the child protection plan.

No one's ever tried to share the information with them...And the way I see it, it's not my role to tell them everything about the child protection meetings, by rights the social worker should do it, but she doesn't bother. Because she's got a better understanding of it all, but she's never told 'em". (Parent1)

Parent1 stated that the SW does not come and see the children after meetings or conference reviews to explain what has happened. Whilst Parent1 received the CP plan through the post, the SW never attempted to discuss it with the parent or child. No minutes of core groups were shared as no minutes were written. Parent1 leaves her meetings unaware of what needs to happen.

Parent2 ranked the statement “My child reads their child protection plan” as the least important of the nine statements (see appendix 6, p:353). He feels there is no need for the child to read this document:

...coz they're going to ask more questions you know. Coz there's a lot on that plan, on the minutes, you know...and kids shouldn't read that. (Parent2)

The fact that formal CP plans may contain sensitive information about the child's parents or relatives is valid; there remains a need for a child-friendly version written in basic sentences, explaining the purpose and outcome of the conference. Children cannot be expected to slot in to a 'mini adult' role, praised for understanding adult language or attending adult-oriented meetings (Begg 2004); processes must be adapted to suit the child, and not the external agenda (Thomas 2007). Parent2 stated that he receives copies of the CP plan and minutes of core group meetings. He checks all information and finds them to be extremely accurate. Whilst the children do not have any written records of meetings / conferences shared with them, the advocacy service inform them of any changes to routines. Parent2's experience of the CP process has been good so far. He has a good relationship with his SW, and is accepting of parenting support and crisis management. He finds paperwork to be timely and of good quality. This is in complete contrast with the experience of Parent1 who reports a poor relationship with her SW, missing minutes of meetings and a lack of understanding regarding the child protection planning. Whilst Parent2 speaks highly of LA1s service, Parent1 is angry and resentful.

In a similar situation to Parent2, Parent4 acknowledged that the SW does go through bits of the CP plan with the children.

But they don't really go through that much with them. We tell them more than the social worker does....but if I don't think it's suitable for her to listen to, I won't give her it, do you know what I mean? But because she's getting older she wants to know more, you know. (Parent4)

In this circumstance, the child of Parent4 is receiving information screened by either the social worker or the parent. I am uncertain what part of providing family support and alcohol services, whilst reducing the risk of harm to the children, would be unsuitable to share with an eleven year old who is scared of her mother's alcohol misuse. SW2 agrees with this argument, stating that children aged 8-12 years would have factual knowledge about their own lives; it is more about clarifying what they know rather than describing the situation.

Parent3 stated that her child does not read his CP plan nor is it discussed with him. Due to his disabilities, she feels that it is beyond his level of understanding.

5.7.5 Summary:

In accordance with WTTSC (2015, 2018) and the Children Act (1989), SWs should be seeking the opinion of children in all matters affecting them. This research study has already discussed the issues arising from the absence of the child in decision-making forums; a consistent approach to information sharing is therefore of paramount importance.

The findings from Phase One demonstrated that, whilst there is consistency regarding the sharing of information, these are not examples of good participatory practice. The lack of child friendly child protection plans and core

group minutes, for example, are consistent yet poor examples of social work practice. Similarly, only one SW regularly shared the outcomes of the CP conference with the child, further admitting that this was a rare occurrence due to the 'ugly' nature of the formal document. Coupled with parental reluctance for their child to be exposed to private parental issues, the simple task of sharing information remains fraught, inconsistent and subject to layers of Gatekeeping.

5.8 Conclusion: Developing a new model for practice:

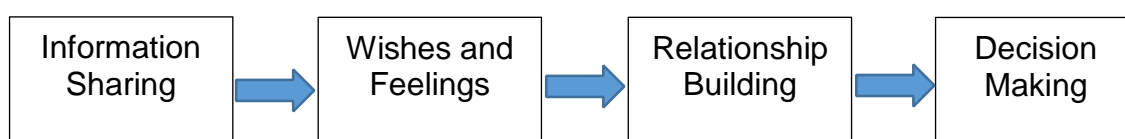
Previous models for youth participation (Arnstein 1969; Hart 1992; Shier 2001) have been built around the concept of 'scaling ladders' or 'pathways', where the last stepping stone or rung on the ladder sees the child at the ultimate level of participation; child-initiated decision making. At this point, the models signify achievement and abruptly stop.

Whilst both this PhD and the pilot study (Dillon et al 2016) have drawn heavily on Shier's (2001) Pathway to Participation, there remain aspects of participatory practice within CP social work Shier's model cannot address. On the initial level of Shier's pathway ("Are you ready to listen to children?") children are encouraged express a view without being invited, or prepared, by adults. This starting point is not appropriate for child protection social work, where SWs must ascertain wishes and feelings "regarding the action to be taken with respect to him" (s.53 of the Children Act 2004). In order to do this, there *has* to be an initial form of age-appropriate information sharing with the child.

Thomas (2007) advises practitioners attempting to redesign participatory models to consider whether the model is suitable for the child, or whether it is meeting an external agenda. The child clearly has the right refuse participation yet social work law and legislation provides the child with the right to participate, if they so choose. It must therefore be emphasized that the suggested new participatory model is offered as guidance for practitioners only, based on social work law and best practice.

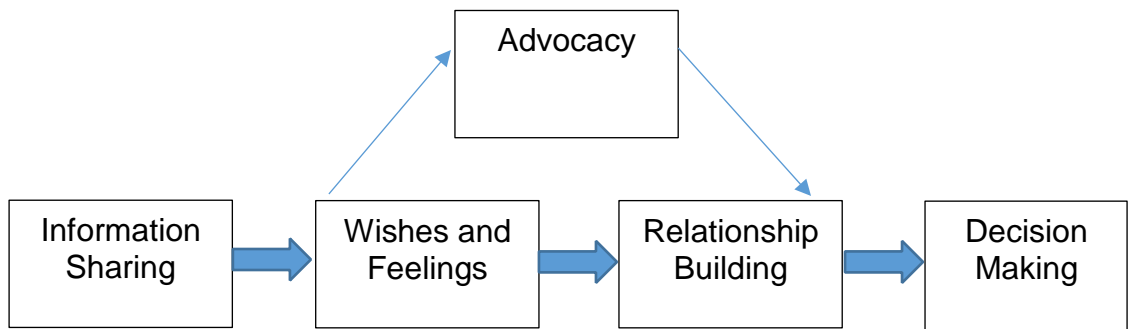
The research with parents, SWs and participation workers throughout Phase One of this study teased out five main themes within participatory social work: wishes and feelings, relationship building, information sharing, decision-making and advocacy. These themes were arranged in the most appropriate order for all levels of CP social work, ranging from s.47 enquiries (Children Act 1989) to long-term child protection plans / PLO. This order was as follows:

Figure 5.4: Designing the model



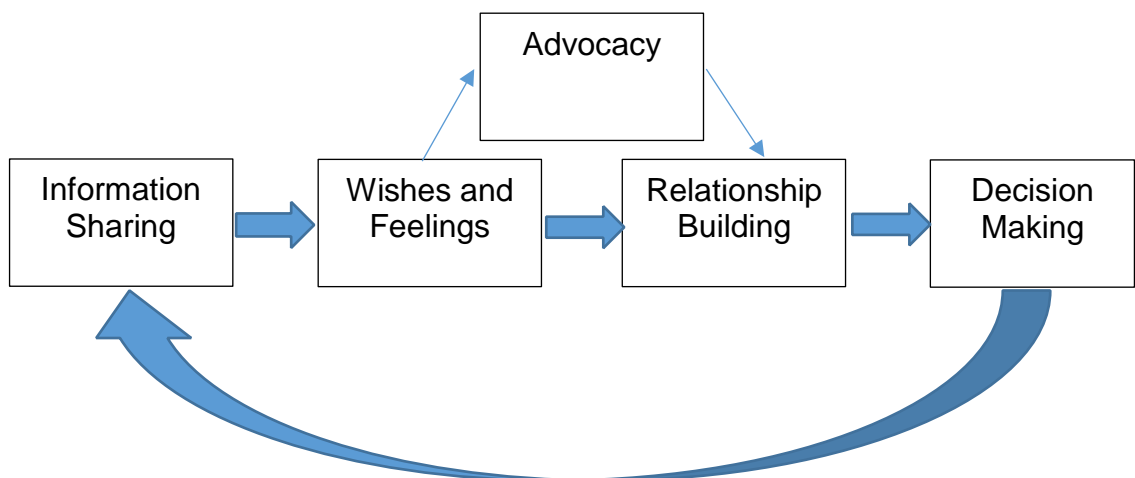
With advocacy remaining as an opt-in / opt-out provision for children and their families, the advocacy service is currently unable to occupy a permanent position on any statutory child protection participatory model. It is therefore shown in figure 5.5 as an optional (yet highly recommended) pathway:

Figure 5.5: Developing the model



To leave this model as a linear diagram would be inaccurate. The analysis and discussion in Chapter 5.2, regarding the cyclic nature of child participation in social work (particularly following unsubstantiated s.47 enquiries), emphasizes the requirement for children to give opinion on the impact / experience of the social work service provided. This often-overlooked requirement therefore requires a cyclical approach, in which decisions made utilizing wishes and feelings are shared with the child; the cycle then begins again and can be demonstrated as thus:

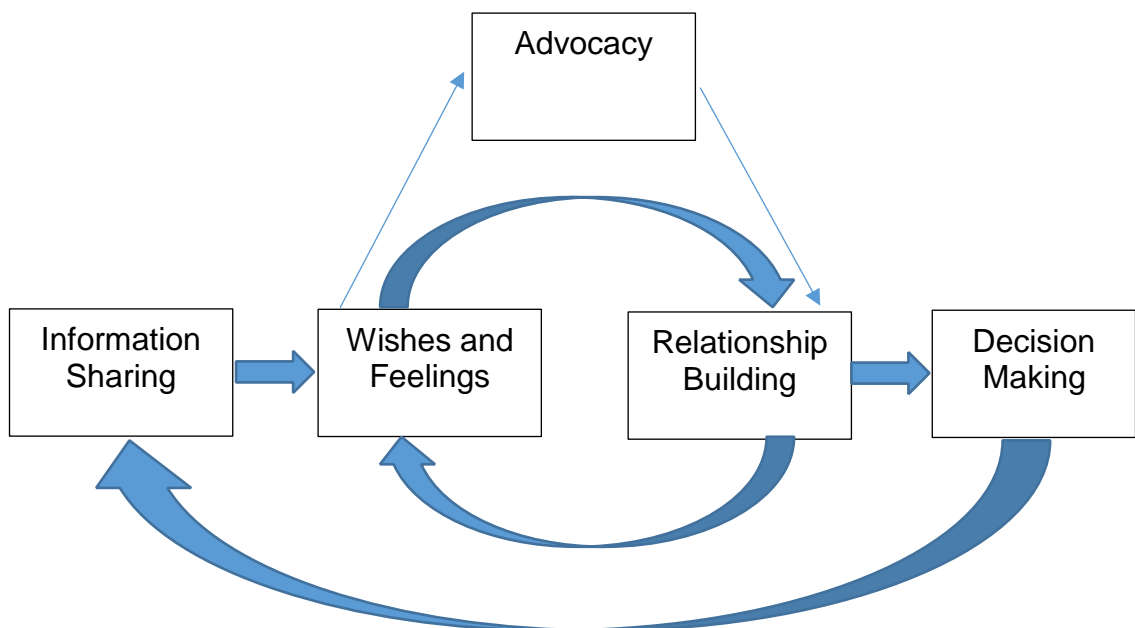
Figure 5.6: Joining up the circle



The length of time it takes for the child and SW to progress around this model is wholly dependent on the type and level of CP social work involved.

Unsubstantiated s.47 enquiries (Children Act 1989) resulting in a CAFA alone may involve two brief cycles of participation before the case is closed, following management decision-making. Children on longer-term child protection plans would experience the model differently; their CP case conferences, in which larger decisions are made, may only take place every six months. There will therefore be several core group meetings and statutory home visits taking place between each case conference, increasing the amount of contact between the SW and the child, thus encouraging their relationship to develop. This growing interaction between child and SW, and deeper understanding of the child's needs and views, is demonstrated in figure 5.7 below:

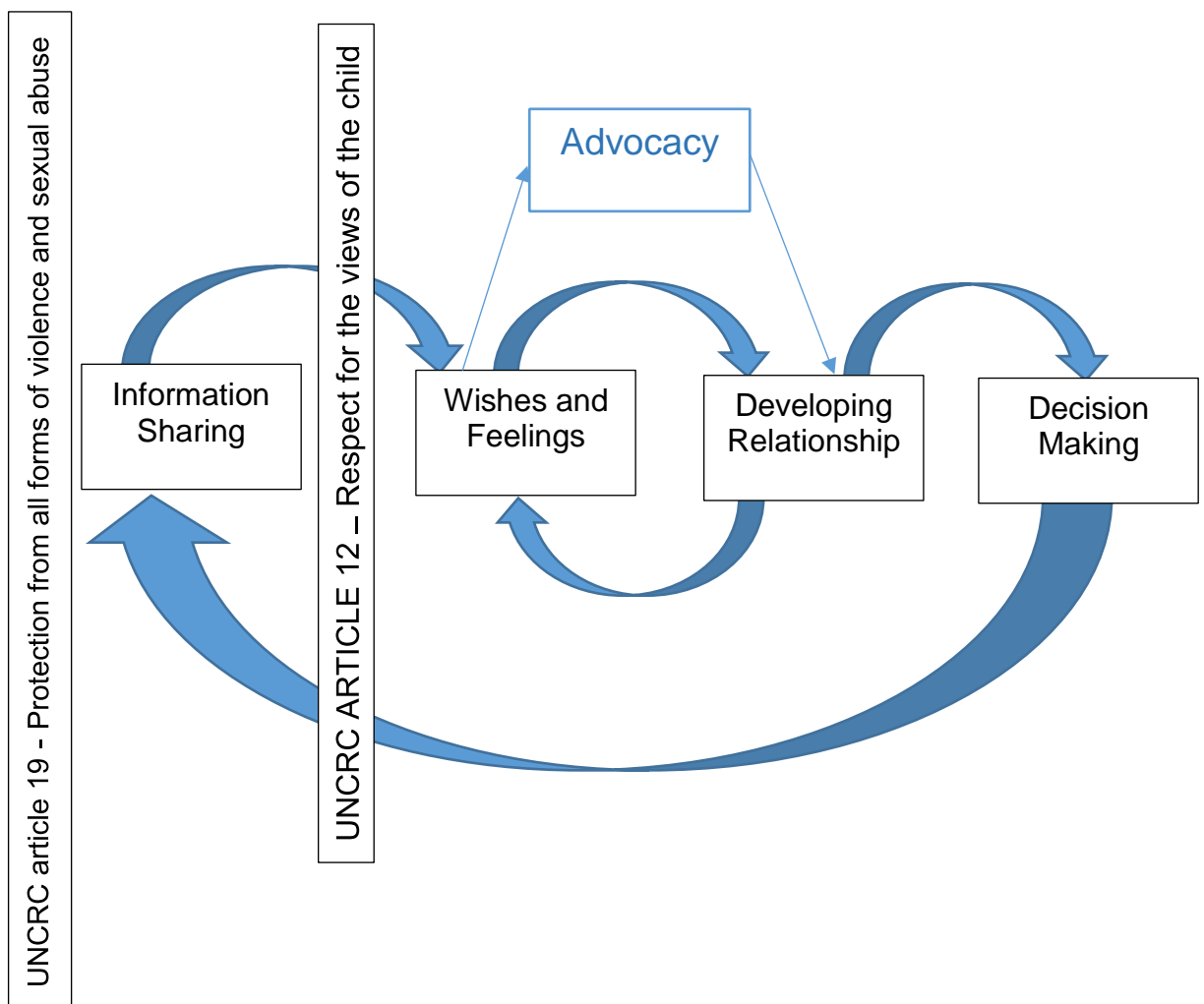
Figure 5.7: The developing relationship



Finally, in a nod to Shier (2001), indication is given within the model regarding its adherence to Articles 12 and 19 of the UNCRC (1989). The model firstly

demonstrates how participation in child protection is underpinned by the requirement for children to be safe from all forms of abuse and neglect (Article 19). As information sharing by itself cannot be deemed participatory, due to the one-sided nature of the act, Article 12 (UNCRC 1989) cannot be in play until the gathering of wishes and feelings, learning about the child’s lived experience, the impact of social work provision on the child’s life and giving due consideration to this information. Despite the number of rotations (or revolutions) around the participatory cycle, information sharing by itself will always fall short of the UNCRC guidelines. The finished model is shown in figure 5.8 below: *Figure*

5.8: ‘Revolutionizing’ participation in child protection



The new participatory model can be used to identify gaps in promoting meaningful participation, along with providing guidance for best practice. To test its validity, the model will be used within the analysis and discussion of Phase Two findings (interviews with children).

Chapter 6: Methods - Phase Two

6.1 Introduction

The planning and facilitation of Phase Two methods were based on the findings, and limitations, arising from Phase One. Chapter 6 will therefore discuss the decision to focus solely on child participants in Phase Two, along with a more in-depth scrutiny of the social work approach (or model) embedded within the children's services of each participating LA. Finally, it will review in detail the differing requests made by each prospective LA regarding their inclusion within this study.

6.2 Designing Phase Two

The initial research proposal for Phase Two planned a repetition of Phase One's methodology, to compare and contrast practitioner / service user experiences in an alternative local authority. However, following the failed recruitment of child participants in Phase One, the need to hear the voice of the child was deemed more important. The entire second phase of research was therefore devoted to the child's experience of participation during their child protection journey.

Prior to conducting the research study within LA1, I had not been aware of their commitment to restorative practice; it was a most interesting theme to emerge from Phase One findings. Whilst SWs and participation workers saw many benefits of working restoratively, all agreed that their LA's child protection conferences were not good examples of restorative practice and remained

completely child-unfriendly. With local authorities across England choosing to adopt a variety of social work approaches and risk assessment frameworks (Signs of Safety, restorative practice, Strengthening Families, Risk Sensible) it raised the question of whether these frameworks influence or affect the child's ability to participate meaningfully. To add further dynamic to this study, I decided to interview children from three different LAs, each of whom followed a contrasting social work approach. Whilst the research would remain focused on the child's understanding of, and involvement in, their CP planning, the opportunities for meaningful participation presented by the differing social work frameworks would be taken into account.

Given the complex nature of gatekeeping issues arising with LA1, the challenge of recruiting three separate local authorities, and undertaking three separate research governance processes, was not under-estimated. The prospect of collecting rich and comparable data on children's experiences of CP planning however was decidedly desirable and achievable, along with filling a clear research gap in this field. It was anticipated that Phase Two recruitment would be a very lengthy process and therefore began in May 2017.

There were no amendments made to the participating children's semi-structured interview questions, as shown previously in Chapter 4. With fewer children attending CP conferences in LA1 than previously anticipated, follow-up questions such as "would you like to have been invited to your meeting" or "would you like to read your CP plan" were prepared in readiness to the child sharing that they had also not participated in either.

6.2 Inclusion Criteria - child participants

It was anticipated that fifteen children aged 8-12 years in total would participate in Phase Two of this study, the sample of 15 children divided into five children per participating local authority. All child participants would be on a child protection plan at the time of interview and all living at home with at least one parent. Children known to be experiencing trauma or chaos at the time of the research would be excluded from participating by the local authority. This exclusion was also extended to children who were living with another primary care giver / in a different address to their parents at the time of the research, for example children in temporary local authority care or respite placements.

6.3 Recruiting Local Authorities

Recruitment emails for Phase Two were sent to six local authorities who had adopted the following, different child protection social work frameworks:

- a) Signs of Safety, including redesigned Signs of Safety child protection conferences (Two LAs)
- b) Strengthening Families, including redesigned child protection conferences based on the SF model (One LA)
- c) Restorative practice and Strengthening Families, including redesigned, restorative child protection conferences based on the SF model (One LA)
- d) Child-centred, family focused with traditional child protection conferences (One LA)
- e) Child-centred, family focused with an imminent transition to Risk Sensible, with traditional child protection conferences (One LA)

6.3.1 Response:

The outreach emails provoked a variety of responses:

- a) One LA (Signs of Safety) failed to provide any response to the outreach email.
- b) One LA (using traditional child-centred family focused CP social work) expressed an interest in the research, but did not respond to any further information emailed to them.
- c) One LA (Signs of Safety) expressed an interest in the research and a Safeguarding manager confirmed their intention to participate. However, following several weeks of outreach, it proved impossible to liaise with the Gatekeeper within this LA and my emails remained unanswered. Due to the timeliness of this project, I decided not to pursue this LA's involvement any further.

Three LAs responded positively to the outreach email, each adopting the following social work frameworks:

- a) Restorative practice and Strengthening Families, including redesigned, restorative child protection conferences based on the SF model (hereby known as LA2)
- b) Child-centred, family focused practice, with an imminent transition to a risk based model and traditional child protection conferences (LA3)
- c) Strengthening Families, including redesigned child protection conferences based on the SF model (LA4)

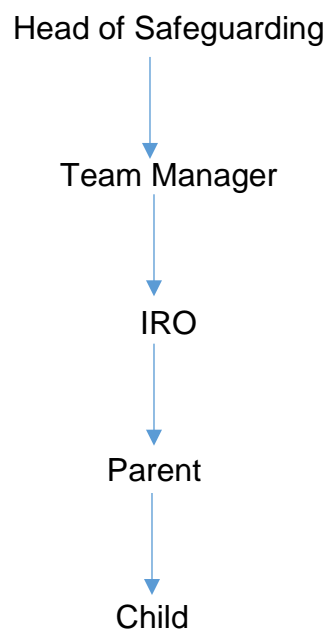
6.4 Levels of Gatekeeping

In order to obtain final, written intention of participation in this research study, each local authority required me to follow different pathways towards consent. This was in keeping with local decision making from within each LA, and not based on legislation, statutory guidance or the research proposal.

6.4.1 LA2

In LA2, the layers of gatekeeping were reduced due to the Head of Safeguarding directly consenting to the research. This provided me with quicker access to the sample of eligible participants, as shown in figure 6.1. While there was only one fewer layer of gatekeeping than in Phase One LA1, the speed of achieving permission to interview was much quicker due to the absence of the lengthy research governance process.

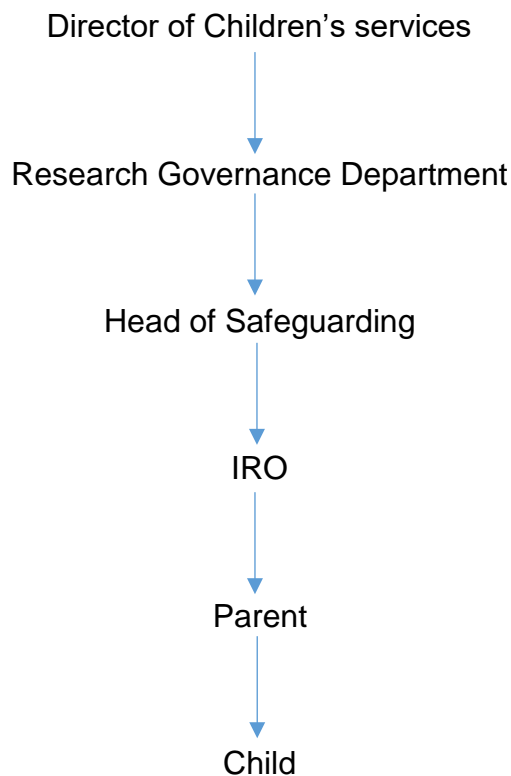
Figure 6.1: Levels of gatekeeping in LA2



LA3 and LA4

In LA3 and LA4, both the pathway for consent to research and the layers of gatekeeping were identical. The requirement of the research governance process added an additional (very lengthy) layer of gatekeeping to that of LA2, as shown in figure 6.2:

Figure 6.2:



The research governance process used by most local authorities is ultimately a duplication of university ethical processes, with an acceptance that research within local authorities is essential for growth, understanding and development. However, what was initially deemed ethical by LJMU's ethics panel was queried and dissected by LA3 and LA4. As a result consent to begin research was

dependent on several changes to the research methodology, the most pertinent being as follows:

6.4.2 Notifying social workers of child interviews:

To ensure SWs were not concerned about 'strangers' visiting children on their caseloads, the purpose of the research needed to be shared with practitioners prior to the start of the study. The LAs wanted to facilitate this in two different ways:

- In LA4, an email outlining the purposes of the research was to be sent to all LA4 SWs. The practitioners would therefore be aware that the research was taking place, but would not know whether a specific child on their caseload had participated.
- Following the recruitment of child participants In LA2 and LA3, their SW would be notified firstly of the research aims and, secondly, of the time, date and place of the child's interview. Consent to begin the research was dependent on this clause.

This request by LA2 and LA3 initially caused me concern. I wanted the child to be able to speak freely and honestly about their social work experience, without fear of reprisal or questioning from their SW. Following a discussion with my supervisory team, the following conclusions were drawn:

- a) The child participants are young and on CP plans; they are therefore vulnerable. Having a support system in place for the child, i.e. their SW, ensures their well-being is paramount
- b) Sharing the time and place of the interview with the child's SW ensures safety for both the child and the researcher
- c) The SW has a statutory duty to safeguard the child and therefore would need to deal with any unlikely repercussions or questions arising from the interview
- d) The SW will not be made privy to any of the interview responses therefore the child's voice will remain confidential
- e) It was deemed more important to hear the voice of the child than not hear it, due to restrictive gatekeeping requirements

The named SWs of all children interviewed within LA2 and LA3 were therefore notified of the research, prior to the interview. No issues have arisen from this information sharing. There were no further telephone calls made to the SWs following their notification; no safeguarding issues arose during the research interviews therefore no data was shared.

6.4.3 Video Recording

There was a mixed response from the LAs regarding the request to video record the child interviews:

- a) LA2 failed to respond to emails asking for clarification of consent to video record. All interviews within LA2 were therefore voice recorded only.
- b) LA3 consented to both video and voice recording of the child interviews.

- c) LA4 stipulated that video recording could not occur, and gave permission for voice recording only.

Despite LA3 consenting to the video recording of the interviews, the experience gained from the five child interviews held in LA2 prompted the decision to voice record all of the interviews. The reasons for this decision were:

- a) The children's attention span was very short. The setting up of a video camera would have reduced this attention span further.
- b) The children moved around a great deal during the interviews. During the research governance process, assurances were given that the recording would be focused on the creative resources only and not the child. Reflecting on the first five interviews, a static camera would have failed to record the activity accurately, due to the movement of the child and the resources, and may have also recorded the faces of the child and their siblings.
- c) The children in the first five interviews were able to answer all of the questions appropriately. The voice recorder therefore adequately captured the interview. A photograph was taken of the creative resources used during the interview to remind the researcher of each child's answers.

6.4.4 Presence of an advocate:

As part of the research governance process, LA3 stipulated that child participants must be offered the opportunity of having an advocate attend their interview. The advocate would be able to address any issues arising from the interview in a confidential manner and ensure that the child was comfortable

with the process. To ensure no bias within the interviews, and to hear the child's previous and current experiences of participation, the following steps were agreed with the local advocacy service:

- a) The parent consulted their child and decided whether they would like an advocate at their interview.
- b) If an advocate was required, the researcher made a referral for the child to the local advocacy service. The advocate was then invited to the child's interview.
- c) The advocate would not undertake any form of pre-interview visit; they would introduce the benefits of advocacy after the child's research interview. This ensured that the child did not take into account their new experience of advocacy within the interview, as this would not be a true reflection of their experience so far.
- d) The advocacy service were aware that the interview data was confidential to that child and could not be shared with anyone without the child's explicit consent.

Advocates were present at one interview within LA3; their presence had no influence on the data collection. Indeed, reflecting on best practice, the ability to link the child to an advocate as part of this research process was an important outcome.

6.4.5 Risk assessment

I adhered to the risk assessment written as part of LJMU's ethical approval at all times. My supervisors were aware of the time, place and date of all visits to participants' homes. There were no disclosures made by any of the children that

prompted information to be shared with their SWs (Children Act 1989; WTTSC 2015).

6.5 The Recruitment of Child Participants - LA2

In May 2017, I sent an outreach email detailing the research purpose and methods to the Director of Safeguarding within LA2. A face-to-face meeting was held in July 2017 and copies of the research proposal, participant information sheets and ethic forms shared. Consent to begin researching in LA2 was received in August 2017, with the conditions of strict confidentiality regarding LA2's participation in the study and the opportunity to have the findings shared with them. LA2 did not require my application to be submitted via the research governance process.

6.5.1 Eligible Children:

In September 2017, 527 children were the subject of CP plans in LA2. An anonymised list of children aged 8-12 years, on child protection plans and living at home with parents revealed that 154 children (29%) were initially eligible to participate in this research study (see table 6.1). Table 6.2 breaks down this age group data further to show the split between eligible male / female participants.

Table 6.1: Number of children in LA2 eligible for the research

	Number of children
Total number of children on a CP plan in LA2:	527
Total number of children aged 8-12 yrs on CP plan in LA2:	154

Table 6.2: The age and sex distribution of the 154 children

Age	Total number of children	Number of male children	Number of female children
8	27	13	14
9	36	24	12
10	34	18	16
11	33	17	16
12	24	14	10

With the number of child interviews being small-scale, it was important to recruit participants as broadly as possible in order to reflect the widest experiences. The identification of sibling groups within the sample therefore ensured that only one child, aged 8-12 years, from each family received an invitation to participate. The sample of 154 children belonged to 108 different families. As in Phase One, it must be noted that these families may have had multiple other children also on child protection plans who fell outside of the 8-12 age range therefore the family composition (as shown in table 6.3) may not be reflective of the actual family composition.

Table 6.3: Family composition within the sample

Number of children aged 8-12 years (subject to CP planning) within the family	Number of Families
1 child	72

2 children	27
3 children	8
4 children	1
Total:	108

6.5.2 Advocacy:

With LA2 having embedded restorative practice throughout their CP social work, the provision of an independent advocacy service was very important to them. Every child aged 5+ years, subjected to CP planning within LA2, is referred for an independent advocate with the aim of hearing the voice of every child. This differed to the in-house service offered in LA1, the team of 4 practitioners unable to service the needs of all eligible children within the LA. Figure 6.4 shows the number of children aged 8-12 years receiving advocacy at the time of the study.

Table 6.4 : Child's engagement in advocacy

Receiving Advocacy	Not receiving advocacy
54 children	96 children
Total: 150 children (4 files restricted)	

6.5.3 Attendance at CP case conference:

The anonymised data showed that very few children aged 8-12 years had attended their own child protection conference. Having this information early on in the research process was very useful; being aware that the child's responses to questions regarding meetings would be limited, more thought was given to exploring the child's desire to attend a CP conference.

Table 6.5: Number of children aged 8-12 years who have attended their own child protection case conference

Attended child protection conference	Did not attend child protection conference
4 children (2.7%)	146 children (97.3%)
Total: 150 children (4 files restricted)	

6.5.4 Preparation of the sample:

With such a small percentage of children (2.7%, four children from three families) having attended their own child protection conference, I decided to approach all three families regarding participation in this research. As Phase One findings revealed no examples of children in the sample age range having attended case conference, it was deemed important to hear and learn from these three families' experiences. It was therefore expected that the number of interviews conducted in LA2 may be >5, to ensure as broad responses as possible.

105 children from the 105 families were selected by initially plotting, then grouping, the children's ages. This ensured that children aged 8, 9, 10, 11 and 12 were specifically targeted for interview, rather than a random sample creating a possible 100% of participants being aged 12, for example. The 105 children were then divided into 'age (advocacy)' and 'age (no advocacy)' categories. This action made certain that the sampling would recruit as even a split as possible between children receiving / not receiving advocacy. Figure shows the breakdown of children's ages / advocacy / no advocacy.

Table 6.6: Number of children aged 8-12 years on a child protection plan with / without advocacy

Age	Children referred for Advocacy	Children not referred for advocacy
8 years old	11	14
9 years old	3	21
10 years old	7	12
11 years old	11	9
12 years old	5	12
Total:	37	68
	Total: 105 children from 105 families	

6.5.5 Outreach for interview purposes:

The anonymised list of eligible participants provided by LA2 included a unique person identifier number for each child. After screening for siblings, the identifier numbers of 108 children (105 children as previously discussed, plus the 3

children who had attended case conference) were assigned to the following groups for participant recruitment, with the aim of scheduling one child interview per group.

Table 6.7: Groupings for outreach

Groupings for outreach	Age Range / Advocacy / Meeting attendance
1	8 years old with no advocacy
2	9 years old with advocacy
3	10 years old with no advocacy
4	11 years old with advocacy
5	12 years old with advocacy
6	Aged between 8-12, attended conference

Due to the high numbers of potential participants within each age range, it was decided that recruitment would cease after six appointments were scheduled with six different parents. This would limit the possibility of over-recruiting; with the research aiming to interview at least five children per LA, scheduling six interviews would cover any last minute cancellations.

A LA2-based IRO made the outreach telephone calls to the parents of the potential child participants. This ensured a barrier between the confidential data, as required by LJMU ethics committee and myself as the researcher. It also allowed the IRO to briefly check the children's details and ensure that they were

still eligible to participate. The IRO explained the research purpose to the parent before requesting consent for me to contact the parent directly. The parent's first name and telephone number was shared with me only after parental consent was gained. Tables 6.8 – 6.12 detail the outreach process for each of the six groupings:

Table 6.8: Recruitment of 8 year old child (no advocacy)

Child	Outcome of telephone call to child's parent by IRO	Consent given for researcher contact?	Outcome following researcher contact
1	Parent spoken to	Yes	After receiving further information on the study, the parent declined the invitation to participate
2	Records showed that the child was not living at home with parents. No telephone call made		
3	IRO found computerised records confusing and unsure where child was living No telephone call made.		
4	No working telephone number on file.		
5	Telephone call made – no answer. No voicemail left.		
6	No working telephone number on file.		
7	Parent spoken to	Yes	Parent wished to contemplate their child's participation in the research
8	No working telephone number on file		
9	Case closed		
10	Parent spoken to	Yes	Appt made to meet parent and child

Following the scheduling of the appointment for child 10, their parent subsequently withdrew consent for the child's participation in the study. The parents of child 7 however did grant consent for interview therefore recruitment in this age group remained complete.

Table 6.9: Recruitment of 9 year old child, with advocacy

Child	Outcome of telephone call to child's parent by IRO	Consent given for researcher contact?	Outcome following researcher contact
1	Parent spoken to	Yes	Appt made to meet parent and child

Recruitment within this age group ceased once an appointment for interview had been made.

Table 6.10: Recruitment of 10 year old child, no advocacy

Child	Outcome of telephone call to child's parent by IRO	Consent given for researcher contact?	Outcome following researcher contact
1	Telephone ringing engaged		
2	Parent spoken to	Yes	Appt made to meet parent and child
Recruitment within this age group ceased once an appointment for interview had been made.			

Table 6.11: Recruitment of 11 year old child, with advocacy

Child	Outcome of telephone call to child's parent by IRO	Consent given for researcher contact?	Outcome following researcher contact
1	No working telephone number on file		
2	No answer, no voicemail left		
3	Child is not living at home with parents. No telephone call made		
4	Child is now 12		
5	Child is not living at home with parents. No telephone call made.		
6	No answer, no voicemail left		
7	Parent spoken to	Yes	Appt made to meet parent and child
Recruitment within this age group ceased once an appointment for interview had been made.			

Table 6.12: Recruitment of 12 year old child, no advocacy

Child	Outcome of telephone call to child's parent by IRO	Consent given for researcher contact?	Outcome following researcher contact
1	No working telephone number on file		

2	No working telephone number on file		
3	Child is not living at home with parents. No telephone call made		
4	Parent spoken to	Yes	Appt made to meet parent and child
Recruitment within this age group ceased once an appointment for interview had been made.			

Table 6.13: Recruitment of a child aged 8-12 who had attended their child protection case conference:

Child	Outcome of telephone call to child's parent by IRO	Consent given for researcher contact?	Outcome following researcher contact
1	Parent spoken to	Yes	Appt made to meet parent and child
Recruitment within this age group ceased once an appointment for interview had been made			

The child in table 6.13 above failed to attend their meeting with the researcher and the interview did not go ahead. Outreach was attempted to the remaining two families whose children had attended meetings, but neither responded to the telephone calls. It was therefore accepted that this research would not include any child aged 8-12 years who had experience of their own child protection conference.

6.5.6 Summary of participants:

In total, five children from LA2 participated in interviews for this research study. Before the interviews took place, LA2's anonymised data sheet showed that three of these children were receiving advocacy and two were not.

Table 6.14: Summary of LA2 participants

Interview number:	Age of child (years)	Referral for Advocacy?
1	8	No
2	9	Yes
3	10	No
4	11	Yes
5	12	Yes

The child's experience of advocacy would therefore be further explored during their interviews.

6.6 Recruitment of Child Participants - LA3

In June 2017, I sent an outreach email detailing the research purpose and methods to the Research Department (RD) within LA3. Before considering the research proposal in depth, the RD sought an expression of interest for their Director of Children's Services, this being received in August 2017. Following the convening of their research panel, a lengthy research governance process and appropriate amendments to the research methodology, permission to begin recruiting participants was granted in October 2017.

6.6.1 Sampling

The RD refused to supply me with any detailed information regarding children aged 8-12 years on child protection plans within their LA. Their participation in the study was wholly dependent on IROs identifying eligible children and sharing the details of the research with their parents; LA3 did not want to participate using the same methodology as LA2. There was no explanation provided for this decision. Whilst still a valid way to research, this methodology introduces the potential of bias. The development of my new model for participation within CP proceedings would be flawed if based on extremely excellent (or poor) case examples (Collier and Mahoney 1996). The methodology of LA3 could have created issues of bias for the following reasons:

- a) The ability to 'cherry-pick' child participants who are known to be secure / happy with their participation in their child protection proceedings
- b) The avoidance of children involved in complex, risky cases
- c) The avoidance of children on NQSW caseloads where practitioner experience of participation is limited
- d) The avoidance of children whose parents are known to be negatively vocal about their child's experience of participation

To enable the IROs to have a clear understanding of the research aims, I presented the methodology to the Head of Safeguarding and the IROs within a locality meeting in November 2017. The following process was agreed:

- a) Each IRO was given a hard copy and an electronic copy of a parent outreach letter with space for the parent to indicate their consent to be contacted by the researcher.
- b) The IRO would explain the research to the parents of children aged 8-12 years after their ICPC or review case conference and, if consenting to contact, the parent would fill in the bottom part of the letter. It was important to me that the research was presented to families after their case conference; I did not want to parents to feel obliged to consent, simply due to anxiety over the upcoming conference or a desire to 'appear willing'.
- c) The IRO scanned the consent form and emailed to the researcher, who then contacted the parent directly to further explain the research.
- d) If agreeable, appointments were made to explain the research to the child and obtain the child's consent, prior to the interviews taking place.
- e) As required by the research governance process (Department for Health 2005) the SWs involved with each child were advised by telephone or email of the impending interview.

6.6.2 Outreach to children

Two referrals were received from LA3. One referral was ineligible due to not meeting the inclusion criteria, however the other resulted in a successful interview.

Table 6.15: Outreach to child in LA3

Child	Consent to contact received	Interview date
1	10 November 2017	12 November 2017

6.6.3 Cessation of the research with LA3

Despite numerous telephone calls and emails to the Head of Safeguarding within LA3, no further referrals for the research were received from the IROs. Initially, LA3 was given a deadline for participation of December 2017; this was initially extended to February 2018 and again to April 2018. Despite the extensions, no further referrals from LA3 were received and the recruitment process ceased in May 2018. LA3 has not expressed an interest in hearing the outcome of the interview with Child One, which is disappointing.

Due to the full sample of children being interviewed in LA2, yet only one child in LA3, a dilemma arose regarding the structure of the findings. I felt very strongly that the voice of Child One from LA3 must still be heard; their voice should not be silenced due to LA3's lack of engagement in this study. It was therefore agreed that the findings for Phase Two will be written in two parts; LA2 and LA3.

6.7 Recruitment of Child Participants – LA4

In June 2017, I sent an outreach email detailing the research purpose and methods to the Research Department (RD) within LA4. After meeting with the researcher in June 2017, a formal expression of interest from their Director of Children's Services was received in July 2017. Following the convening of their research panel and very lengthy amendments to the research methodology completed, permission to begin recruiting participants was granted in July 2017. I attended a meeting with the Head of Safeguarding and IROs from LA4 in September 2017, prompting much discussion with the IROs regarding participant recruitment. The recruitment of children to this study was identical to that of LA3, although SWs were informed about the research via a generic email from their Head of Safeguarding, rather than myself.

Despite the positivity of the meeting, and the welcome extended by the Head of Safeguarding, LA4 simply disappeared from this study in September 2017. No referrals were received from the IROs and the Head of Safeguarding stopped returning my telephone calls and emails. LA4's participation in this research study therefore ceased.

6.8 Recruitment of Child Participants – LA5

In February 2018, I received communication via Twitter from a university-based SW / researcher, assigned to a regional teaching partnership. Their linked local authority was re-designing their child participation policy and she wished to seek ideas on how my new model of participation could be incorporated. As a result

of this communication, LA5 expressed an interest in taking part in Phase Two of this research study. Despite the late stage of the process, it was agreed with my Director of Studies that the participation of LA5 would surely enhance the findings, particularly due to the limited recruitment of child participants so far and the disappearance of LA4.

Full details of the research were forwarded to LA5, via their linked SW / researcher within the University team. I received a message later that week stating that the PSW from LA5 was keen 'but anxious', and requested a further telephone call to discuss. Their main anxiety was that the interviews with children would reveal the presence of poor practice and that the research would make them identifiable in any impending Ofsted inspection. After reassuring them of confidentiality, the following text message was received:

Sorry, Jo. It looks like it's a no. Really disappointed. I know you expect it in the research field but I am sorry to have wasted your time. So much fear of poor practice being exposed. It's a real shame. They are keen to have you come and talk though, if you'll still come...(Linked SW on regional teaching partnership)

6.9 The Fear Factor:

As previously discussed in Chapter 3, the Gatekeeper has the ultimate power to decide who proceeds 'beyond the gate' for access to their most confidential data. Collyer et al (2017:97) suggest that this gatekeeping role is woefully under-researched, particularly when they hold such a vital role in the process:

The gatekeeper is rarely portrayed as a fully social being with their own motivations and capacities for action...As a sociological concept, gatekeeping needs to be conceived not as the

performance of a role, but a process which produces the possibilities for action.

There are several peer-reviewed papers on gatekeeping issues within a health care (rather than social care) setting. In their research of clinical trials, Sharkey et al (2010) identified that disallowing participation in research violated the respect for persons, although recognised that their critics would balance this with the adherence to beneficence. Tromp and Vathorst (2016:31) found that gatekeepers, primarily due to “the fact that children are a vulnerable population susceptible to harm and exploitation in research and need to be protected”, selectively cherry-picked eligible child participants. White and Hardy’s (2008) study in gatekeeping within palliative care did positively identify that patients may benefit from participating in research by making a positive contribution to their community, although their paper discussed at length whether other sectors struggled with gatekeeping issues as much as they did.

Indeed, the Gatekeepers within LA4 and LA5 clearly had their own motivations and capacities for action, or rather non-action. For the research proposal to be initially accepted and welcomed with such relish in LA4, there must have been a reason as to why the Head of Safeguarding failed to respond to any further communication. I am still however unaware of what this reason is.

The failure to proceed past the Gatekeeper within LA5 was, I feel, predominantly due to fear. The PSW prioritised any impending Ofsted inspection over the ability to participate in the research, for fear of the LA

learning that the children were not being meaningfully involved in CP planning. Despite reassuring the PSW of the confidential nature of the research, concerns remained that a child's SW may let slip the LA's participation in the study (during the recruitment process), or that Ofsted / a member of staff may read a future publication linked to this study and identify LA5. LA5 had therefore already assumed that the feedback from the child's experience would be poor. This was a frustrating outcome; not simply for the study as a whole, more so the fact that LA5 were willing to assume poor practice yet not seek to make changes. LA5 later extended an invitation for me to attend a staff-training day and present the results of my research so far, for possible incorporation in to the development of their participation frameworks. This again was frustrating; LA5 wished to learn from the experiences of other LA service users but remained too fearful to participate and learn from their own. The irony of prevented participation in participation research is also noted.

A selective style of Gatekeeping was present in LA3. Despite consenting to the research, LA3 refused to share confidential data with me, leaving the IROs to select and recruit potential participants. As a result, only one child took part in the study. In a follow-up telephone call, the Head of Safeguarding stated that he had assumed the research was continuing smoothly and was unaware of the limited participant recruitment. There could be several reasons for this: the IRO's may have forgotten about, or decided not to prioritise the research; the parents of eligible children may not have consented to the study; there were no eligible children on the IROs' caseloads. However, I again suggest a link between the limited amount of participant referrals from LA3 and practitioner fear of having poor practice exposed. With the media quick to respond with

blame regarding child injury / death, and knowing the intensity and expectations of decision-making in CP, it is understandable that practitioners want to avoid scrutiny. Munro (1996) however is quick to respond to the SW 'blame culture', her research of inquiry report analysis concluding that SWs were not criticised in almost 50% of cases and encouraged SWs to accept that sometimes their practice might be wrong:

To change your mind in the light of new information is a sign of good practice, a sign of strength not weakness. (Munro 1996: 793)

Following their participation in the research study, the findings of Phase One and Phase Two were shared with the corresponding LAs. Both phases had produced a rich data set that reflected many examples of good practice and innovative social work. During the feedback meeting with LA2, however, the Head of Safeguarding felt uncomfortable hearing about the breakdown of a child's relationship with her advocate. The advocate had clearly stepped outside her advocacy role by enforcing a new, strict bedtime routine for the child, along with removing the television from her bedroom; the child was very cross. The Head of Safeguarding quietly asked for this information to be omitted from the research study findings. However, the children spoke appreciatively about many aspects of their social work provision, including the fact that all five of them liked, or even loved, their current SW. This strength of child / SW relationship is deemed the most crucial component of participation in CP social work (Cossar et al 2016) therefore this finding alone should prompt celebration within LA2. Changes to other aspects of the findings, such as repeated advocacy visits, the sharing of written information and attendance at meetings, are organisational issues / policy and procedures that can be altered; embedding a trusting

relationship is much more complex. LA2 should therefore feel reassured with this evidence of good practice and use the findings as a starting point for change, rather than attempting to erase the details of what needs changing.

6.10 Reflection on Phase Two's methods:

Six interviews with children were completed for Phase Two; five from LA2 and one from LA3. Whilst all were completed without any concerns raised by the children or researcher, the following reflections and suggestions for improvement can be made:

6.10.1 School holidays:

Four of the six interviews took place within the school holidays. Both LA2 and LA3 had insisted that none of the children missed school for the purpose of the research; holidays therefore seemed an appropriate time to meet the children but actually resulted in several challenges.

- a) Two of the participating children had been playing out prior to their interview, resulting in a constant stream of friends entering the room and trying to coax the child back out to play.
- b) One child's younger sibling (who was also off school) kept trying to pick up the toys and resources being used throughout the interviews, along with the voice recorder. This resulted in devoting a portion of the interview to replacing the resources and encouraging the sibling to leave the room.
- c) The unusually good weather was prompting one parent to speed up the child's interview so that the family could go out for the day.

d) With some of the children living in large families, it was very difficult to find private space within the home for the interview as all children were off school.

Whilst challenging, it must be noted that LA2 was a significant commute from the researcher's base. Interviewing within school holidays therefore allowed time for the commute and the opportunity to conduct more than one interview in a day.

6.10.2 Design of the child interview questions

As anticipated, certain sections of the interview questions were not applicable to most children. None of the children could answer questions on their experience of CP conference (due to their non-attendance) and few had any regular contact with extended members of their core group. This meant that the majority of the scaling questions also became redundant. The semi-structured design of the interviews however ensured that a more detailed focus was applied to other parts of the child's experience.

6.10.3 The age of the child participants

I found it much easier to interview Rebecca aged 12 years, than Casey aged 8 years. Rebecca's eloquence and ability to reflect was in clear contrast to Casey's more simple, monosyllabic answers. With this research being focused on how participation can be encouraged in social work practice with younger children, this served as a reminder as to why SWs overlook children like Casey; it is sometimes hard work to communicate with young children. The experience of interviewing Casey and Robert, as Phase Two's youngest participants, has made me determined to enhance the type and quality of my direct work with

children, on my return to CP social work practice. Casey's contribution to the findings were therefore just as important as Rebecca's.

6.10.4 Parental involvement

In four out of the six interviews, the children's mothers were keen to volunteer their opinion on the child protection process. On two occasions, overhearing a point made by their child, the mothers entered the interview room and wanted to clarify a situation. Adopting a technique of only saying 'Oh right...oh ok' when the parents spoke enabled an easy return of focus to the child. Interestingly, one parent entered at the end of the interview and spoke very negatively, in front of the child, about their SW; the child however had already shared that he had a great relationship with his SW, who he very much liked.

Chapter 7: Findings and discussion – Phase Two

7.1 Introduction

Chapter 7 introduces the reader to the five child participants from LA2 – Casey, Robert, Nathan, Arthur and Rebecca. The chapter begins with a brief biography of each child, before leading into each child's responses to, and discussion of, the interview questions and topics. The participatory experiences of each child allowed my new model for participation within CP proceedings to be tested and validated; this is discussed and illustrated further in section 7.5.

7.2 The Child's World

Casey, aged 8 years:

Casey is the second youngest child in a very large family; she lives with her mother and six siblings. She stated that her mother looks after her because "I don't really have a Dad anymore". Casey's interview took place in the school holidays. Several groups of children were already out on the streets playing and they were keen for her to go and play. Casey was able to name and describe around seven close friends of hers that she often plays with.

Robert, aged 9 years:

Robert is an only-child, living with his father.

He erm he's really nice to me. He cooks my food. He buys me pizzas when he gets paid. He buys me computer games. He gets erm a new computer for me. He gets everything...and at Christmas, I'm getting an electric scooter! (Robert)

Robert was very excited to show me the gifts that he had made for his father, as “he is the best dad in the world”. His father proudly displays these gifts on a bookshelf in the living room. Robert would talk to his Dad if he was worried about anything and identified himself as being his father’s best friend and support. Robert has extended family and adult friends living locally whom he visits every weekend, and accompanies them on family holidays.

His street is full of children; scooters, bikes and toy cars were in several front gardens. Robert could name several children that he played out with after school:

I’ve got a den down at the bottom. And we are like working there and everything...they just live down, do you know when you come into the street? Down at the bottom on that side, there’s a house with a wooden fence, isn’t there? Not the light one, the dark one. And there, that’s where they live. My Dad allows me to go around because I’m nine. (Robert)

Robert described himself as a cheetah “because I’m fast and I’ve got potential.

And I’ve got speed and everything...and I’m ferocious!”

Nathan, aged 10 years

Nathan lives with his mother, grandmother and younger brother. His mother is his main carer and the person he would turn to if he felt worried about anything.

When asked how his mother took care of him, Nathan stated:

Makes me food. Pay the bills. Give me a house. Buys me beds and stuff. (Nathan)

Arthur, aged 11 years

Arthur's interview took place in the school holidays. During the time spent with me, Arthur's friends were waiting at the door for him, desperately trying to encourage him to come and play. Arthur was dressed in 'ninja' gear, head to toe smeared in mud, and his face was covered for most of the interview with a balaclava; he wanted to remain in disguise. He enjoyed using different accents to answer the questions, along with the use of rap, gestures and 'street language'.

Arthur lives in a household with his mother, three brothers and two of his male extended family members. His Mum, who he would speak to if he was worried about something, primarily cares for him:

She cooks good food. She does our clothes. She buys us stuff. She pays for the stuff we do. The bills. (Arthur)

Rebecca, aged 12 years

Rebecca lives with her Mum, Dad and younger sister; her maternal grandmother also lives locally. She was excited to take part in this research particularly due to the toys involved, normally used for social work visits to younger children; "I've always wanted to do that!". Aged almost 13, she spent much time deliberating her use of the emoji cards and proudly displaying the stickers given to her at the end of the interview:

Oh, these are well cool! I can stick them on the back of my Mum's phone. I'm sorry, I'm like a child! (Rebecca)

She identifies her father as being her main carer, as he is the person who would tell her the consequences of her behaviour “coz Mum doesn’t like it...she doesn’t like telling us off or ‘owt”. If she was worried about something, Rebecca would choose to speak to her grandmother or father.

I find it easier when I’m talking to my Dad because he doesn’t shout at me or raise his voice. I find it easier with my Nanna and my Dad because of...none of them shout or ‘owt. [Mum] starts shouting and then I start shouting. (Rebecca)

7.3 Perception of Social Work

The children were initially asked to choose a toy / animal figure from the ‘treasure box’ to represent their social worker during the interview. Questions were then asked regarding each child’s individual social worker; this included an exploration of the child’s understanding of the social work role, their knowledge of their SW’s name and contact details, and how many SWs they had previously worked with.

7.3.1 What does a social worker do?

The child participants gave similar responses to this question, the most prominent themes indicating that SWs provide help and support:

They make sure that children are safe and look after them and everything. (Robert)

Help us. But I’m not quite sure. (Nathan)

Sort out the problems in the family. (Rebecca)

Help us. (Casey)

Helps us and helps Mum with her problems. (Arthur)

When choosing a toy to represent his SW for the activity-based interview, Arthur further stated:

I'm going to choose a horse [to represent the SW] because she helps us on our journey. (Arthur)

Despite not feeling sure about his answer to the question, Nathan clarified that his SW had told him what her role was, he just could not remember at that time. Only Robert, Rebecca and Casey stated that the SWs help their parents as well as themselves. When pressed on the theme of 'help', the children struggled to give examples of what exactly their SW has helped with. The four youngest participants could not think of anything specific, nor anything they had asked for help with. However, the oldest participant Rebecca was able to give a concrete example:

When my mum used to smack me. Like I didn't want to say it to my mum so I went and told me mentor. Then [social worker] came out and then I told her, like yeah. It got sorted out. (Rebecca)

None of the children spoke negatively about having a SW in their lives. Both Robert and Casey identified their SW as someone they could speak to if they were worried:

Because she'll make me feel happy and everything. (Robert)

Rebecca felt that her social work intervention had been a positive experience so far.

I believe things are better at home now...We're trying for the next conference in February to get me off child protection. I think we're doing it really, really good. (Rebecca)

Being the oldest participant, Rebecca was more able to deeply reflect on each of the questions asked than perhaps the younger children. She spoke about her understanding of the social care system and her place within it:

Obviously everyone says 'Oh, I'm on child protection' and stuff like that, and I'm like 'I don't care what I am, at least I'm upgrading myself, innit'. Like, if someone says 'you've got a social worker' I'd say 'yeah and I'm happy I have coz then I've got help, unlike you lot, because if something happens you wouldn't be able to go and express yourself...express it, would you?' So, I normally stand up for myself. (Rebecca)

7.3.2 Who is your social worker?

All of the five children were able to correctly identify and name their current SW. At the time of the interview, Casey had two SWs and was able to explain which days / times each SW would normally visit; she described herself as having these workers for a "long time".

7.3.3 Child-initiated contact with their social worker

The initial research (Dillon et al 2016) showed that the participating children and young people had scant access to their SW's contact details; all were therefore dependent on their parents to facilitate contact with their SW. In Phase Two of this new research, the findings were again similar.

Two children, Nathan and Robert, had their SW's telephone number stored in their own mobile phones. Whilst neither had needed to telephone the SW, Nathan had previously sent text messages that were answered, by his SW, in a

timely manner. Both children agreed that their parents supported their ability to liaise directly with their workers.

The remaining three children, Rebecca, Casey and Arthur did not have direct access to their SW's telephone number; all stated that they would need to ask their Mum for it.

I'd tell my Mum 'Mum, I need to speak to [social worker] and then she'd be like 'oh, I'll try and get hold of her' and I'll be like 'No, let me have the phone'. And she'd make sure that I'm phoning [social worker] to talk to her. (Rebecca)

None of the child participants were prevented by their parents from contacting or speaking to their SW. Again, Rebecca was firm in her opinion that she has a right to speak to her SW and would not be prevented from contacting her.

I wouldn't let them either. Because if she asked me an important question or she'll say she had to tell me something that was important, then it's out of hand to do that if you know what I mean. Coz you're taking the chance for me to say, or do anything about it, like. If you know what I mean. (Rebecca)

In Phase One's findings, three parents out of the four interviewed discussed how they would not prevent their children (on CP plans) from contacting their SW or being spoken to alone. In contrast, Parent4 refused to allow any direct contact between his child and their SW, without himself as an intermediary. Research by Ferguson (2016) indicated that resistance to SW visits by parents was sometimes so strong that it was testament only to the worker's skills and persistence that they gained entry to the home at all. I discussed this finding in depth with a social work manager within LA1, when sharing my research; her

personal opinion was that, should she be in similar circumstances, she would also disallow her child to have open access to their SW for fear of what her child may share. This is evident in practice where SWs praise parents for their honesty and partnership working, which can allow for joint decision-making and risk assessments. Alternatively, SWs criticise parental non-engagement, reluctance and obstruction, sometimes mirrored through the silent and uncooperative behaviour of older children, therefore expressing loyalty to their parents (Turney 2012; Ferguson 2016). Rebecca sums this concern up succinctly when asked if her Mum minding her contacting the SW privately:

Like if I phone them up and tell them about what my Mum's recently done, or blah-de-blah, she doesn't like it. Coz I'm blabbing on her then. (Rebecca)

I am unclear how this tension can be removed. It is my opinion that each child on a CP plan is given the means to contact their SW whenever / however they choose, given that the child is vulnerable and the child's voice pertinent in CP social work. This could be achieved with the use of newly designed information packs to be left with the child on the initial social work visit, with clear ways to contact the SW via telephone, text messaging or email. Lines of communication could be opened via school if the child finds the parents to be blocking their contact with SWs. Whilst SCRs continue to reflect on the child's voice being absent from their social work interventions, extra efforts to maintain contact with a child can be evidenced in safety plans and as part of best practice.

7.3.4 How many???

Each of the five children had worked with more than one SW. In total, Robert had worked with three SWs within the past eighteen months; he was eight years

old when children's services began working with his family. Robert spoke fondly about his first SW "because she always, like, played games with me". Both Nathan and Casey had worked with two SWs each, although Nathan also had a third when his regular SW went on holiday. When asked how it felt speaking to 'stranger' SWs, Nathan stated that it was hard.

It's a bit weird, but I can get used to it...I have to see people I don't really know and it makes it a bit weird. But it's ok sometimes.
(Nathan)

When asked whether Arthur had always had the same SW, he replied:

I've had more. About five or ten. Well, for the past few years we've had three social workers. Haven't we Mum? [calls Mum, who doesn't reply] (Arthur)

Despite being on a child protection plan for only ten months, Rebecca had already had three different SWs.

We've had...I don't even know! We've had [SW1], we've had [SW2] and we've had [SW3]. So three in ten months. Because [SW1] wasn't paying much attention. [SW2], or whatever her name is, I can't remember now, she like...she had to leave anyway so we only had her for a short time anyway. And we've had [SW3] for like three month. (Rebecca)

The Safeguarding manager at LA2 expressed disappointment when reading these comments, during my presentation of the findings to them. They assumed they had made substantial progress in the recruitment and retention of experienced SWs and were disheartened to hear of Rebecca's three different SWs within a ten-month time scale. As the field of child protection constantly changes in-line with updated social policy and research outcomes, a well-trained social work team providing child-centred participatory practice should remain a constant (Bagdasaryan 2012). However, increasing workloads, low pay, a lack of organisational communication and poor supervision are issues

often linked to the high turnover of SWs (Cho and Song 2017). In 2016, 4,440 child and family SWs joined the profession (Department for Education 2016) yet 4,200 SWs left, diluting participatory experience and leaving LAs consistently needing to retrain their new workforce. With relationship building, SW knowledge of children's rights and child development were identified as key skills lost on SW departure (Schofield and Thoburn 1996), the absence of an LA-adopted participatory framework leaves NQSW in the dark regarding best practice.

7.3.5 SW visits to the child

There is little research available based solely on the initial SW / child meeting. Many studies focus on the need for honesty, trust, respect and openness within longer-term relationships (Bell 2002, McLeod 2010, Barnes 2012, Cossar et al 2016) but few address how the SW explains their presence to the child in the first instance (Dillon et al 2016). In his research on home visits, Ferguson (2016:289) stated that two out of nine initial social work visits to the child did not include an introduction to the SW, or their role; "in these situations, the children would not have understood who was asking them questions and what the possible implications of their answers could be". Whilst the cyclic nature of my new 'Patterns of Participation' model promotes repeated consultations with the child and continuing explanations of the services provided, its starting point is firmly rooted in how / what information is initially shared with the child, as previously discussed in Chapter 5.

All of the participating children in Phase Two received home visits from their

SWs. The flexible and mobile nature of social work enables SWs to “move towards children to properly see, touch, hear and walk with them” by identifying the most appropriate method and place of direct work (Ferguson 2010:1101). The ‘home visit’ is not only a statutory requirement of a child protection visit, it is likely to be the place where the child feels most at ease (Winter and Cree 2016), enabling practitioners to spend quality time with the child whilst simultaneously assessing the child’s home environment for risk. The accessibility (or lack) of childhood toys, photos and games within a bedroom provide SWs with starting points for communication, hence the child’s room being the most popular place to see and speak to a child alone (Ferguson 2016).

All five children’s responses to questions regarding home visits were positive; there were no levels of worry or anxiety displayed. Interestingly, the three younger children reflected only on the fun things they do with their SW on their home visits, rather than the context (the protective nature) of the visit:

She says next time she comes she’s going to play games (Robert)

She tells me something or we do an activity or something like that...Er, we do like...we make stuff. We make keyrings. (Nathan)

They take us out places and they do games with us in school...McDonalds and the park sometimes. (Casey)

The two oldest children in this study, Arthur and Rebecca, discuss their home visits as being more ‘question-based’.

She kind of does the same thing that you’re doing with me. She asks me how I feel about stuff. (Arthur)

Rebecca enjoys her conversations with her SW.

Coz every time she comes out she like asks us about what's going on at school and stuff like that, and how is life, and stuff like that. And like, and like, she's just here to like realise what we feel like at home and stuff...I'm alright with it because I know I can trust her. I'm honest. (Rebecca)

It was very clear that Rebecca adored her SW and loved spending time with her; when asked what the SW's name was Rebecca replied "[name]. She's really pretty". When asked how they had become so close over the last three months, Rebecca stated:

Erm...like, I don't know. She...I don't know really. I just like...coz she talks to us and she understands what we're saying and stuff. Do you know what I mean? (Rebecca)

As well as home visits, Arthur, Nathan and Casey received visits at school from their SWs. Whilst not having a preference over where they are visited, both Nathan and Casey said that they liked school and acknowledge they have to miss it when their SW visits. Nathan is especially conscious of missing school as he is preparing for SATS. In contrast, Arthur laughed as he described his joy at missing lessons to speak to the SW.

In fear of being labelled as 'having a SW', Rebecca did not like school visits:

No, she doesn't come to school. I've asked her when my friends are round could you please take off the badge because it's really embarrassing. So she does, and I act like she's my Aunty. She goes 'come on [Rebecca] come into the home now!'...OK, Aunty [laughs]. OK, Aunty [social worker name]. (Rebecca)

Similarly, whilst feeling that he can be honest with his SW, Arthur was annoyed that social work visits took place in his playtime after school.

7.4 The child's experience of advocacy

All five participating children in LA2 were in receipt of an advocacy service, which was a very pleasant surprise; at the time of outreach, it was thought that only three children within the sample had been referred for advocacy. Robert was engaged with a well-known local provider of advocacy services and was the only child who recognised the name of the advocacy provider commissioned by the LA. He described his advocate's role as being "to make sure kids are happy and safe... basically the same as a social worker". Casey and Arthur were accessing advocates from other local, independent services whilst Nathan and Rebecca identified their advocate as the person who also conducted their family group meetings.

7.4.1 Advocate accessibility

None of the five interviewed children had contact details for their advocates. Robert stated that neither he nor his father had the advocate's telephone number and did not know where the advocate's office was. Rebecca and Arthur knew which service their advocates worked for but had no contact details, whereas Nathan did not know where his advocate's office was nor the service she worked for. With Casey being the youngest participant, aged 8 years, and having only seen her advocate once, she was unaware of their contact details or for which service her advocate worked. All five children were therefore

dependent on their advocates making contact with them, or having to ask their parent to contact the advocate on their behalf. I would argue that full contact details should be shared with children at all times, as evidence of best practice. Unless there has been some form of written records left with the child to write how they are feeling at specific moments in time, the child needs to be able to be listened to at a time convenient to them, not always the allocated time slot given by the SW / advocate. The irony of not being able to contact an advocate / participation worker due to lack of information sharing is also noted.

7.4.2 Relationship with advocate

Arthur, Robert and Nathan all described a positive relationship with their advocate, although Robert could not remember his advocate's name. Robert was adamant however that his relationship with the advocate was very good. Casey had seen her advocate only once and could not recall his name; she made no comment on whether she valued the advocate's role.

At the time of the interview, Rebecca was experiencing a poor relationship with her advocate. Alongside the role of collecting Rebecca's wishes and feelings prior to case conference, the advocate had implemented a new bedtime routine for Rebecca and her sister to encourage a more stable bedtime. This routine was causing Rebecca distress, as neither her advocate nor her mother had explained why her bedtime routine needed to change. Initially, she stated that the relationship was "really good" and seemed happy that the advocate was there solely to work with herself and her sister.

Like she wouldn't work with my mum. She wouldn't come out and see her and talk to her about what's going on and stuff. She'd be the first one to know what's going on at school and stuff like that. Say if I got in to trouble at school, she'd be the first one to know and she'd come straight out to see me. (Rebecca)

However, as the interview progressed, Rebecca shared her discomfort at the unfolding situation:

But I don't like the way she's moving the family too fast...like, she's took my TV away and stuff like that. But my mum...my mum said 'No, you're not taking my daughter's TV away'. Give me my TV back! (Rebecca)

Rebecca continued to use emoji cards to describe how she felt when working with her advocate. Rebecca felt she could not speak truthfully with her advocate (zipped-up-mouth emoji); she did not want to listen to what her advocate had to say (talk-to-the-hand emoji) and used the 'Poo' emoji card to describe how she really felt when working with her advocate. With the role of advocacy centred on "...listening and empowering a child or young person by helping them to represent their views, supporting them and protecting their rights through a child-led approach" (Thomas et al 2017:365-366) there seems to be a conflict of interest in Rebecca's advocacy service. As a result, Rebecca felt disempowered, confused and unheard; her mother intervened and spoke to the advocate on Rebecca's behalf.

7.4.3. Whose role is it anyway? The advocate's contribution to wishes and feelings

All of the children described their advocate as being a person who visits them before meetings to gather how the child is feeling and share information.

They ask what are my thoughts and then they say it at the meeting (Arthur)

Well, she tells us stuff, like if there's going to be a meeting or something. And stuff like that. (Nathan)

Casey, the youngest participant at eight years old, recalled her advocate asking her what she liked and disliked, along with what she wanted to change; "I remember saying I wanted to go to France". Casey did not know what her advocate did with this information, nor whom he shared it with.

As established in Chapter 5.2, s.53 (3) of the Children Act 2004 underpins the collection of a child's wishes and feelings, to "ascertain the child's wishes and feelings regarding the action to be taken with respect to him". Working Together to Safeguard Children (2015) guides practitioners and managers through good practice flowcharts, along with the newly published Ofsted guidance (2018) inspecting whether "children and young people are listened to...practice focuses on their needs and experiences and is influenced by their wishes and feelings (Ofsted, 2018:52). Casey's wish to visit France and Arthur's comments about 'sharing thoughts' offer an insight to the child's feelings and hopes, yet fail to seek their opinion on their child protection journey.

Rebecca stated that both her SW and advocate gather her wishes and feelings prior to a meeting, and both would share these at case conference. This duplication of work may be normal, due to the SW's need to complete best interest child protection reports for conference and the advocates need to obtain

the voice of the child. However, this is a laborious process for the child who has to repeat their thoughts and feelings several times. Arthur reflected on this when choosing a “talk to the hand coz the face ain’t listening’ emoji card to describe his feelings towards his advocate.

It’s when I have to say things over and over again...I get asked the same questions over and over again...But sometimes I make sure I do this [hides face]. Coz it’s the same stuff. (Arthur)

At this point in his interview, Arthur had started to appear restless. Despite wanting to press further on the issue of duplication of wishes and feelings work, I felt conscious of Arthur’s clear distress and annoyance about repeating himself; the topic of discussion with Arthur was therefore changed. The constant expectation for SWs to collect and assess information for risk management purposes often supersede the child’s right to be a child and is further aggravated with the incorrect application of wishes and feelings legislation.

7.5 Information sharing and decision-making

The findings from Phase One highlighted a lack of consistent practice regarding the sharing of CP information with children. Whilst there is a need for individually designed, age-appropriate practice (Archard and Skivenes 2009), practitioners need local (or statutory) guidance to follow, to ensure a uniform approach. With SWs recognising gaps in their own practice regarding the joining up of the participatory circle (section 5.8), the child participants were asked for their experiences at meetings / case conferences and the sharing of subsequent reports.

7.5.1 Attendance at Case Conference

None of the child participants interviewed in Phase 2 had attended their own child protection conference. This was not surprising, as LA2 had already informed me that only children aged 12+ years were invited to case conference. Despite being aged 12, however, Rebecca had still not been invited to her child protection case conference. She had met with her IRO prior to conference, who had listened to Rebecca's wishes and feelings and shared materials explaining the purpose of the meeting. Interestingly, this now totalled three people (IRO, SW and advocate) who had conducted home visits to Rebecca for the purposes of collecting wishes and feelings.

Robert stated that he was not allowed to attend his child protection case conference and would not wish to go, regardless of invitation. When asked why this is, he replied:

Because they need to talk about child protection and everything. And that'll just make me angry and I'll just lash out...because I don't need protecting. I've got my Dad and everything. My Dad's the best dad in the world. (Robert)

It seems that Robert's opinion on the need for safeguarding differs to that of his SW; this may be due to a lack of clear information sharing with Robert or insufficient understanding due to his young age. In a few short sentences, Robert communicates anger and denial about the need for CP social work intervention, loyalty to his father and praise for the way his father cares for him. At nine years of age, Robert's father means the world to him. This is therefore a good example of the complexities of balancing the reasons for social work, and

the justification of risk assessment, with the fact that Robert thinks his father is amazing.

7.5.2 Awareness of their child protection plan

Despite being the subject of child protection planning, the children had a different understanding of the phrase 'child protection plan'. The youngest participant, Casey, had not heard of the phrase before but was able to guess its meaning, and her response was similar to that of Arthur.

Is it like looking after a child and trying to protect her? (Casey)

So, it's a plan of what we're trying to do and it protects me.
(Arthur)

Nathan was the only child to be confused by the phrase "child protection plan", stating that "I think I've heard of it, but I don't know what it means".

None of the participating children had either seen or read their own child protection plan, in any format. Whilst Robert states that he is not bothered by this, Rebecca feels strongly that she should be allowed to read the plan designed to safeguard her.

Like, it makes me feel like they don't trust me. Because if they don't trust me to read it or owt...but it also makes me think it might be something that I'm not allowed to know. Something upsetting and they don't want me to get upset. Coz if it was upsetting and my mum would tell me and like...I'm in a good mood...like coz if I'm in a bad mood, it's even worse coz I'll start punching walls and everything like that. (Rebecca)

Rebecca is succinctly describing the conflicting discourses of participation, the clash between protectionism (Vis et al 2012) and the child as a social actor (Sanders and Mace 2006, Polkki et al 2012; Cossar et al 2016). When asked why seeing her plan was so important to her, Rebecca replied “because I want to know what I have to succeed and I might be able to succeed it”. A similar opinion was given by a child in Dillon et al (2016), that if he had known what was in his own CP plan he may have been able to contribute and support his parents. Whilst Sanders and Mace (2006) warns us regarding the victim (child) morphing into the role of solution-finder, being part of the process may enable Rebecca to feel enlightened, empowered and less anxious. Her fear of what may be on the plan may be more severe than the impact of what is actually on her plan.

I’m too young to read it so like they have said like...if I’m still on it when I’m like 15, I get to take part in everything...the Chair. The chair said.... (Rebecca)

7.5.3 Attendance at Core Group meetings

Out of the five child participants, only Arthur had attended his core group meeting. He recalled that the meeting took place in a formal meeting room and that he attended for about five / ten minutes, in the middle. Arthur did not know all of the people seated around the table, although recognised family members and some teachers from his / his sister’s school. His late entrance meant that he had missed the introductions, leaving him to share his opinions in front of strangers. This may be intimidating and frightening for an adult, let alone a child (Jackson et al 2017; Pert et al 2017) but Arthur none-the-less felt that his voice was listened to. He recalled people looking at him as he spoke, but could not give an answer as to ‘what changed’ as a result of being heard.

Nathan stated that he 'wasn't bothered' about attending his core group meetings and that his advocate would tell him what happened. Casey was not aware that her mother and SW even went to core group meetings, whereas Rebecca (aged almost 13 years) stated her parents prevented her from attending her own core group meetings "so they can say stuff they don't want to say in front of me". The move by some LAs towards the Strengthening Families model, for CP case conference, encourages practitioners to share confidential / private information prior to the meeting therefore allowing for a more inclusive discussion during the meeting. Core groups could indeed adopt a similar approach and concentrate more on feelings rather than facts (Bell, 1999b) with real attempts to obtain a subjective view of the child's experience; Rebecca could describe what life is really like for her, rather than practitioners trying to assume. Like Nathan, Rebecca is informed about the decisions / actions arising from core group, although this is by her SW rather than her advocate.

None of the children were given any written information from core group meetings. They have not received any child-friendly versions of the core group minutes, nor the action plan designed to safeguard and support them. The children therefore have no accessible written information available to reassure them in times of worry or anxiety and are therefore dependent on the words (and opinions) of their parent in between SW visits.

Along with the lack of child-friendly child protection plans, this finding is the most consistent to emerge throughout the entire study. None of the five SWs, four

parents or six children interviewed had created, or read, child protection documents that could be used appropriately to inform children. I argue that this practice needs to be amended urgently. The secrecy surrounding children on child protection plans and the lack of Children on CP councils / support groups can leave children isolated and unclear of what is happening. Leaving children with clear, reassuring statements of the support in place for their family is not scary; however leaving an abused child with no information and no methods of communication with protective adults is frightening.

7.5.4 The Family Group Conference – food, fun and family

Out of the five child participants, three of them (Rebecca, Nathan and Arthur) had experienced a family group conference; all of their experiences were very positive. Arthur described FGC as:

So it's when the whole family gets together like and there it is. They try and help other family members. (Arthur)

As in Bell and Wilson's (2006) study, focusing on the attendance and experience of 30 children during 12 FGC in the north of England, the feedback showed that Arthur's favourite part was the food:

Like, what I did is I had some pasta bake. And I started playing games. I joined in for some of it [the FGC] but not all of it. (Arthur)

Arthur's prioritising of the FGC agenda as a) food b) games and c) the actual meeting is a stark reminder of the simplicity of the process through the eyes of the child. Nathan recalls his FGC being in a formal meeting room, with a large number of immediate and extended family members present. The only person

Nathan did not recognise was his advocate's line manager, although this person introduced himself to Nathan. Icebreakers were used at the beginning of the meeting, where people had to introduce the person sitting next to them, including Nathan. In a similar assumption previously made by Arthur, following his experience at core group meetings, Nathan felt that his fellow FGC attenders were listening to him because they were looking at him.

We talked about stuff that's going to happen, and what's going to stop, and what's going to improve. (Nathan)

Both Rebecca and Nathan spoke for themselves within their FGCs although both also had support from their advocates and SWs.

I felt secure and that, to tell the truth and what I felt and stuff (Rebecca)

In contrast to core group meetings, the children were encouraged to stay for the entire FGC. Nathan and Rebecca were happy to take part in all of the meeting whereas Arthur decided just to attend part of it. None of the children displayed any negativity regarding the FGC process or their inclusion within it. These small-scale findings therefore align with Bell and Wilson's (2006) findings, concluding that child participation in FGC should be encouraged due to the increased value and involvement experienced by the children.

7.6 Joining up the circle...and starting again

With s.53 (3) of the Children Act (2004) stating that wishes and feelings should reflect the child's opinion of the impact of social work provision, it is logical that the child is revisited, spoken to and sought opinion from after each decision-

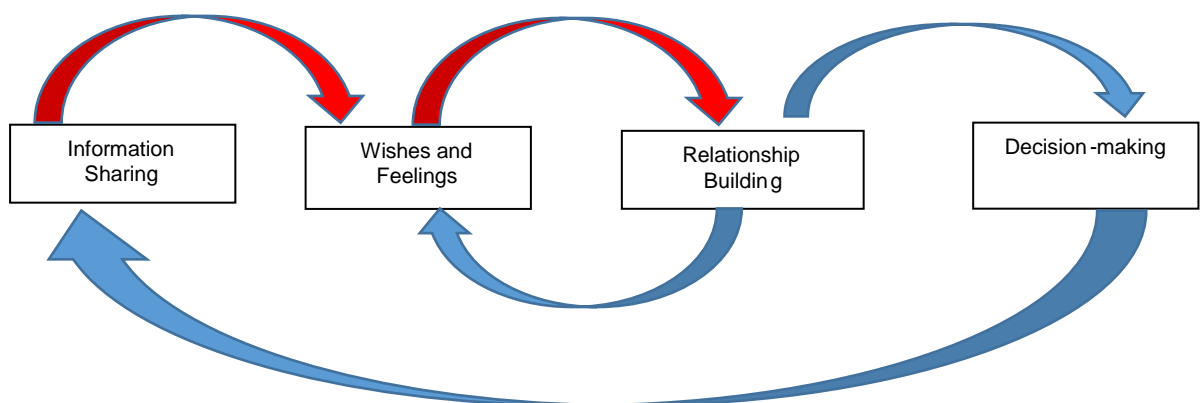
making forum within their CP journey. However, this research discovered that the children's experience of participation varied. Most children had experienced a break / void in their participatory cycle yet practitioners still expected the child to resume wishes and feelings work on their next visit.

Out of the five children interviewed from LA2 only two, Arthur and Robert, stated that their advocate returns to visit them again, straight after a meeting.

We talk [before the meeting]. And when they go to meetings they come back and see me and tell me what's happened and everything. Because I'm not allowed to go to the meeting. (Arthur)

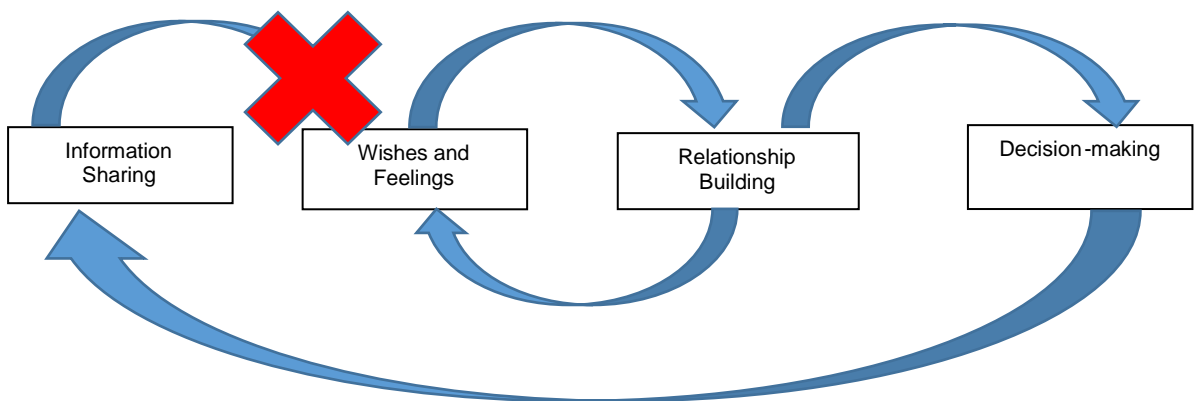
Arthur is encouraged to give his opinion on the meeting outcomes when the advocate returns to share information with him. The full cycle of information sharing, wishes and feelings, building relationships and decision-making is complete; the invitation for Arthur to comment on the shared information allows the cycle to begin again.

Figure 7.1: Arthur's complete participatory cycle



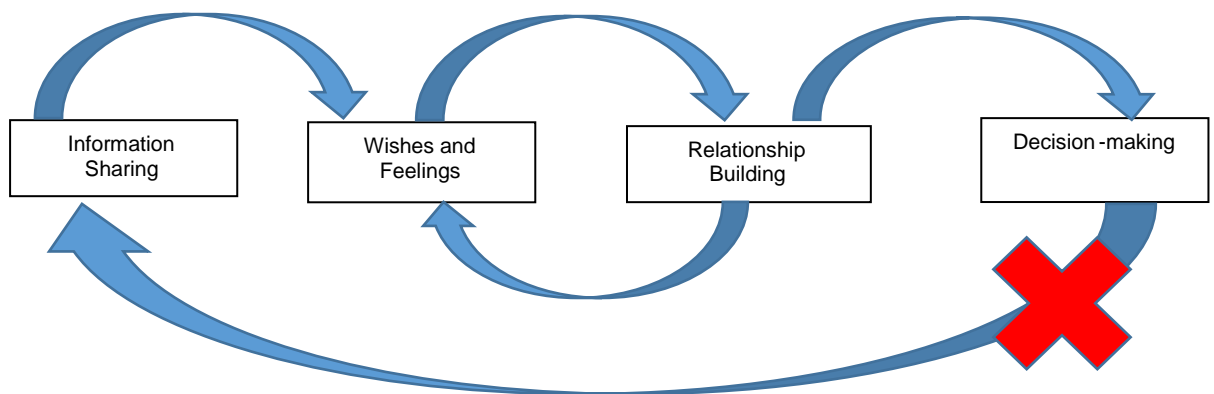
Robert, however, stated that his advocate tells him the outcome of the meeting, with no opportunity to comment on the decisions made on his behalf. At this point, Robert's cycle of participation is broken and presents as thus:

Figure 7.2: Robert's broken participatory cycle



For Rebecca, Casey and Nathan, the cycle of participation is also broken. Despite sharing information that captured a snapshot of their wishes and feelings, no aspect of CP decision-making was reported back to them by their advocate. With no opportunities to voice opinion on these decisions, nor suggest alternative ideas, their sharing of wishes and feelings has become inconsequential or tokenistic. The participatory model in this instance would look like this:

Figure 7.3: Rebecca, Casey and Nathan's broken participatory cycle



7.7 Relationship Building

To explore the relationship between the child, their parent(s), their SW and their advocates, the children chose a representation of all core group members using the dolls, animals or name cards provided. Four children chose dolls / animals that had similar features to their parents or workers, i.e. blonde hair, black skin, or “big and tall” (Robert, on choosing a giraffe to represent his father). Arthur did not want to engage with any of the toys to represent himself and instead chose to write his name on card. Each child then received squares of paper, displaying the following statements:

- Listens the most?
- Speaks the most?
- In charge?
- Makes changes?
- Makes the most decisions?
- Writes things down for you to read?

The child placed the card in front of the core group member (SW, child, parent and advocate) who they felt the statement most applied to, and discussed further with myself.

7.7.1 Who listens the most?

Robert, Nathan and Casey chose themselves as the core group members who listened the most. However, Nathan was unsure whether he was happy with his ratio of listening to talking; he stated that he was only 'sometimes' happy that he listened more than he spoke. At eight years of age, Casey stated that she listened to both her SW and her mother, and knows they listen in return:

Because when I'm talking, they don't talk when I'm talking. (Casey)

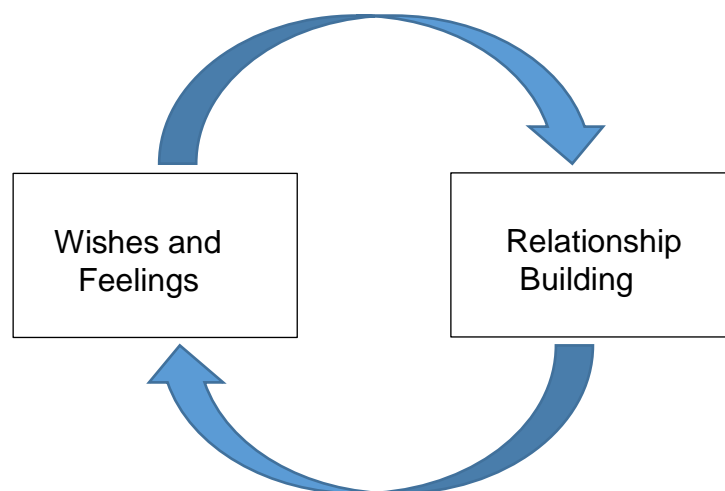
This is the third example of the importance of body language / presence to emerge within these findings so far; Casey, Arthur and Nathan have all stressed the importance of good eye contact and focus when the children are talking.

Both Arthur and Rebecca identified their SW as being the core group member who listened the most; Arthur did not wait to be asked, simply placed the card immediately in front of the SW. Rebecca felt that her SW listens to her opinions and takes time to explain why situations have happened, or why certain decisions have been made. Despite recognising that her SW has authority within this involuntary situation, Rebecca feels confident enough to question her decision-making.

I feel like I could challenge her but I don't need to...coz she'll explain to me why she's saying what she's saying. Or I'll get what she's saying and I'll be like 'oh, it's ok now I understand'.
(Rebecca)

This mutual trust is the foundation of the relationship between Rebecca and her SW, a quality that Rebecca states was missing in her relationship with her previous two SWs. With Rebecca experiencing a break in the participatory cycle following decision-making forums, her ability to be listened and responded to by her SW re-emphasises the central (and, perhaps, the heart) of the new model. This 'cycle within a cycle' is the SW / advocate visits, the direct work, the development of trust, honesty and friendship with the child. Between the six weekly core group meetings and the six-monthly CP conference meetings, this small circle of participatory practice is completed several times, and moves the larger participatory cycle from a short-term experience in to a longer-term relationship.

Figure 7.4: The cycle within a cycle



7.7.2 Who speaks the most?

The research found that all participating children were very accepting of the presence of their SWs within their lives. Their responses were factual and measured; even when Rebecca was discussing her disagreements with her advocate she spoke calmly and reasonably. Despite Robert's opinion that his SW and child protection plan is not needed, he spoke very highly of his SW and enjoyed his interactions with her. It is therefore not surprising that Robert feels that, out of all the core group members, he gets to speak the most and he is very happy about this.

Because no one like ignores me or anything. They listen to me and I listen to them....they're all honest. (Robert)

Robert's overwhelmingly positive relationships with his SW and child protection process make me question his anger for being on a child protection plan. It must be considered that Robert is simply repeating the frustrations as voiced by his father, as his brief angry statements do not correlate with the positivity of his social care experience. In such a small family of two, Robert clearly identifies him and his father as being partners, as well as being protective over each other. His engagement with both the SW and advocate ensure that he is in the ideal position to have his feelings heard and explored further, therefore angry statements in this context can be explored.

Arthur agrees with Robert that he is the person who speaks the most within his core group, and he states this is important.

Coz they need to find out what my mum's problem is. Yeah? And so I go and talk to them. Yeah? (Arthur)

This interesting choice of words demonstrate that Arthur gives his opinion on the issues within his home, in this case his mother's alcohol use. Giving Arthur the opportunity to define the issue and share the impact of this with the SW allows for a more accurate assessment of risk. From the perspective of participation, the child has been encouraged to voice their opinion on issues affecting them, rather than the SW predefining their concerns in an adult voice (Pinkney 2011). Arthur also stated that he is encouraged to speak about himself also, not simply about his mother's issues. He feels listened to.

Nathan, Casey and Rebecca identified the practitioners as the core group members who speak the most. Nathan felt that his SW is justified in this respect, as she needs to share information with himself and his family. He states that everything the SW says makes sense and that he does get enough time to talk also. Rebecca stated that her advocate speaks the most and would prefer it if the advocate listened more than she spoke.

Like she doesn't listen but she'll try and get me to get her point of view of what she's saying. (Rebecca)

7.7.3 Who is in charge?

The question 'who is in charge' explored whether the child identified one core group member as being dominant, or having power over the others. Four children identified their parent as the person in charge.

[Mum] owns...well, she doesn't own the house but she pays for most stuff in the house and she's my mum so... (Nathan)

Rebecca identified both her father and her grandmother as being 'in charge' of their family "because they've got most of the control". Arthur's answer to 'who is in charge' was deep and eloquent for an eleven year old. Coz it's kind of her problems, so she's got a SW for some help. She's got to fix it. So basically, she's in charge if she wants to be. (Arthur)

Reflecting on this further, Arthur continued to state:

I can't be in charge of the household, but I can be in charge of myself.
(Arthur)

Robert identified himself as being in charge of his family and core group. When asked why he felt this, he stated:

Because it's like...I get to tell people what to do and everything.
It's so fun. (Robert)

Whilst child protection proceedings would not normally be described as 'fun', there is an air of confidence and understanding in Robert's statement. It is clear throughout his interview that he feels listened to by his SW. When digging deeper however on Robert's assertion that he is in charge he laughs and concedes, "Dad would say he's in charge".

7.7.4 Who makes the most decisions?

The question "who makes the most decisions?" prompted similar replies to "who is in charge?" All of the five children indicated that their parent makes the most decisions out of the core group members.

Because he's the oldest and he makes sure I'm safe. (Robert)

Rebecca again indicated that both her father and her grandmother were the main decision-makers in her life, although pointed out “they don’t work together, though”; it was clear that her father and her grandmother have a very strained relationship.

Arthur stated that whilst his mother is the main decision-maker, this comes with a responsibility to make an informed choice:

So she decides to do all of the things. She decides when the social worker comes (Arthur)

7.7.5 Who makes the most changes?

The child and family’s presence in CP proceedings is involuntary; the local authority has assessed via s.47 of the Children Act (1989) that the threshold for child protection has been reached. Changes will be expected in order to safeguard the child and promote well-being, therefore the children were asked to consider which core group member instigated the most changes to their families.

Robert was firm in his belief that his father was the only person who could make changes to his family circumstances.

Because he’s the oldest. Same as ‘makes the most decisions’. It’s just the same. He gets to decide everything for himself. (Robert)

Whilst Nathan and Casey agreed that their parents made the most changes within their family, there was an element of scepticism about why these changes were required. Nathan was not sure why his mother made changes to their routine, but commented that his SW was influential in these changes also.

Well, coz [social worker] needs to tell us stuff that's going on and things we need to do to make it better. And stuff like that. (Nathan)

Casey, the youngest participant, was succinct in her response and her understanding of why her mum needed to make changes within their family routine.

She's told to. From the social worker. (Casey)

When asked what sort of changes the SW is requesting, Casey replied 'the tidying, sometimes'. It is interesting however to muse whether this perception of untidiness, and the requirement to clean, belongs only the SW. Growing up in a home with six siblings, this environment (and its level of cleanliness) may be all that Casey has known. Casey elaborates further on this, when choosing her SW as the core group member who speaks the most, stating that the SW asks "about how I've been and how do you want to make your house better". Again, the SW is implying that Casey's home conditions need to be improved, yet Casey shares no opinion of this during her interview. The question remains whether Casey has simply been told what is needed to change, or whether her opinion on these changes has been sought. With hindsight, I could have asked Casey what her opinion was regarding her home conditions, to obtain further insight into Casey's understanding of her child protection planning.

Both Arthur and Rebecca feel that their families are asked to change by practitioners; in Arthur's case, this is his SW, whilst for Rebecca this is her advocate. Rebecca is very unhappy with some of the changes that have been made, primarily because she does not understand the reasoning behind them.

She [the advocate] changes things that I don't want her to change...she wants our family to be her family. That's what my personal idea thinks. She wants our family to turn into her family. (Rebecca)

There is a clear juxtaposition here between the label 'advocate' and the work that the advocate is doing with Rebecca. It appears that the advocate is occupying more of a young person / family support role, than solely dealing with children's rights and encouraging meaningful participation. The two roles do not align.

7.7.6 Who writes things down for you to read?

In Phase One of this research within a different LA, the SWs and parents identified a lack of child-friendly resources being used to explain the child protection process to children. There were no examples of child-friendly child protection plans being prepared and parents / SWs were not sharing the minutes of case conferences or core groups with the children. The children taking part in Phase Two were therefore asked whether core group members share any written material (either child or adult oriented) at all with them to read.

None of the children gave examples of their SW writing down information for them to read, or sharing / leaving written work with the child following a visit. Arthur was the only child who stated that his SW "sometimes" writes things down "because I like reading" but he was unable to give me an example of what this written material was.

Nathan, Casey and Robert firmly stated that their SWs never write information down for them nor share written material with them. All three children were however adamant that this does not bother them at all. Whilst Nathan stated that no one leaves any written information with him at all, Robert does receive written information from his advocate concerning issues discussed within the child protection meetings. The advocate reads out this information to Robert; he feels he understands all of the information shared with him. Both Casey and Robert were happy to just listen to people speaking.

Whilst the SWs are not explicitly recording information to be shared exclusively with the child, Casey and Rebecca commented that their SWs do write down information during their visits. In Casey's example, the SW would record information in "Mummy's book" which appeared to be a journal / diary in which her mother records telephone numbers and appointments. Rebecca gave an example of how her SW accurately records her voice during their meetings:

She like writes down all the things I'm saying to her. And she'll rephrase it and I'll correct her...I think she goes and reports it to the...to erm...what's his name again? To the conference thing...the conference Chair. (Rebecca)

Like Arthur, Rebecca prefers having written material in front of her. Her advocate will write down points about the work she is undertaking with the family and her parents will also share written opinions of "the problems and the salvations and stuff". In Arthur's core group, his advocate will share written information with him.

If there's anything important going on, [advocate] tells me what it is.
(Arthur)

7.7.7 The child's feelings towards their core group members

Following their perceptions of the roles and responsibilities of core group members, the children considered how they felt when working / communicating with their SWs.

The children overwhelmingly chose emoji cards representing 'like', 'love' or 'happiness' towards their SWs. None of the children reported any negative feelings or distress about their SW's visits or interactions. Robert firmly stated that he was happy with everything that his core group were doing with him and that he could not think of anything that he would change. When asked which worker, out of his SW, advocate and family support worker, Nathan prefers to work with, he replied:

All of them. I like them all. (Nathan)

For Casey, the SW's choice to play games with her each visit makes her feel comfortable and prompted her to choose the happiest, most loving emoji in the pack of cards to represent her feelings towards her SWs.

This finding is perhaps the most refreshing part of Phase Two. With relationship building being recognised as of paramount importance in nearly all similar research studies, the simple fact that all participating children from LA2 expressed such positivity regarding their SWs is excellent.

Following the exploration of their feelings towards their immediate core group members, the children were asked to choose photos from a pack of cards representing possible extended members of their core group. Whilst practitioners such as teachers, school nurses, health visitors, and police officers are often present at CP conferences and core group meetings, none of the children identified them as being part of their support network. Robert stated that he has never discussed his social work intervention / child protection issues with his teacher and has never seen his school nurse. The only extended core group members he identified were plain-clothed police detectives; his experience of working with the police was positive. Casey identified her doctor as an arm of support however stated this was only when she was ill; there were no links made to child protection medicals made by any of the children. Arthur identified his baby brother's health visitor as being the only extended core group member that supports them. Nathan did choose his teacher as a person of support, but stated that they would never attend any sessions with the SWs. Reflecting on my practice as a CP SW, the school contact was primarily a pastoral manager or the safeguarding lead; only Rebecca however identified any school member of staff as being part of their extended core group.

I tell [my teacher] things myself because I feel like I should, in case I feel down in class and then they can talk to me about it.
(Rebecca)

As well as practitioner members of the core group, the children considered their feelings about themselves and their immediate family members / parents. The children took much time in deliberating their feelings; both Rebecca and Casey spread the whole pack of emoji cards over the floor before deciding which emoji best represented their relationships. All of the children chose loving and smiling

emojis to represent their feelings towards their parents. Rebecca gave an explanation for every emoji card used to symbolise her relationship with her family, particularly her Grandmother.

I love her. I love her to pieces (Rebecca)

As well as the positive emotions shown towards family, some children used the cards to portray negative emotions. Nathan, for example, chose the 'poo' emoji card when describing how he feels about himself; he did not explain whether this was a joke. When describing herself, Casey chose a person with a zipped up mouth; "I don't know what to say". Rebecca used the 'poo' emoji card to describe her relationship with her advocate, which she had already explained was poor.

I was trying to say that she stinks and make a joke out of it [Rebecca is laughing hard].

Whilst clearly trying to make a joke, Rebecca continued to place further negative emoji cards in front of her advocate, such as the 'zipped up mouth' and the 'talk to the hand'. There was clearly a barrier between Rebecca and the advocate at the time of the research.

Yeah. I don't like [advocate]. (Rebecca)

Rebecca's explanation of the emoji cards chosen representing her relationship with her family was thoughtful and considered.

That one for my Mum. And that one. [cards placed in front of Mum show a wide range of emotions from a broken heart, to frustration, to anger, to upset, to love]. That one because we have arguments. That one for my Mum because I cry to her. Er...there's loads for my Mum by the way. That one for my Mum because I get angry, That

one for my Mum because she doesn't get like all teenager stuff. Er...that one for [sister], like 'what you doing?' it's like confusion. That one for Dad coz sometimes he gets me really upset. That one for Nanna, coz she makes me giggle. (Rebecca)

Whilst each LA follows different guidelines for attendance of meetings, Rebecca's inability to attend her own within LA2 frustrated me. She presented as eloquent, knowledgeable and determined, with an ability to reflect and comment on the social work provision. The IRO's refusal to invite her, along with her parents' unwillingness to let her attend, further silences her voice despite there being little opportunity for her to experience trauma or upset.

Chapter 8: Findings and discussion – Phase Two - LA3

The IROs in LA3 identified only one child (Tom) as eligible to take part in this research study. With this thesis scrutinising the impact of the child's voice in child protection proceedings, it was important to me that Tom's account was not ignored simply due to the low participant recruitment in LA3. Instead, Tom's opinions about his social workers, his child protection plan and his contribution to proceedings were written up in Chapter 8 as a standalone chapter. LA3 followed a traditional child-centred, family focused approach to children's social work yet, at the time of the research, were preparing to move to a risk identification model similar to Signs of Safety.

8.1 The Child's World – Tom (LA3)

Tom is ten years old and moved to LA3 a few months ago with his mother. Born in a small seaside town, Tom's family have moved house seven times, each move being a great distance away from their previous home. Their perpetual relocations have led to a variety of Tom's pets (five dogs and one cat) having to be rehomed each time the family moves, which made him feel sad. Tom no longer sees his cousins anymore, due to distance, but feels happy about making friends at his new school.

Tom's mother is his main carer, and the person he would speak to if he were worried about something. His mother now has a new partner; Tom calls him 'Daddy' as he has never met his birth father. However, there appears to be issues regarding this new relationship also:

And do not say that I cannot be around [name]. Which is Daddy. No. Even though he had the security check, they've still said he's bad! [bangs toy down] (Tom)

Throughout the interview, Tom shared further details of negative childhood experiences, all of which were discussed in an angry tone of voice.

If they say because...that...that....in [town name] one of my mum's partners had their parents, and they said that I'm a damn ass devil's child. Because I'm not...I'm angry and angry at sometimes. I may be strong behind my back, instead of in front, but I am not a damn ass devil's child. Because if I were, I would have super powers and I would have horns like the devil. And I don't have red skin. And I don't. And I would kill everyone if I were the devil's child but I don't. I don't kill anyone. (Tom)

The only time Tom's voice softened was to discuss his love and affection for his mother, whom he clearly adored.

8.1.1 The child's perception of social work

When asked about the role of a SW, Tom's answer revealed that he had spent time in foster care as a child:

SWs took me away when I was five....The SWs took me away to foster. Then I came back when I was seven...It made me angry. It made me want to hate social [workers]. (Tom)

Tom's SW had explained to him why this move needed to happen, but Tom only recently understood that it was linked to keeping him safe. At the time, he did not understand.

[Tom] So I just got angry at social and then every time I go to sleep I just think of weapons to kill social [workers].

[Researcher] Have you told any of your SWs about how you feel?

[Tom] No because they never asked me.

When Tom was describing situations of anger and frustration, he chose many different examples of how he would hurt the person who was frustrating him, and demonstrated this by banging / hitting the toys. He described how he stuck up for children being bullied at school (by throwing a ball at the bully's genitals) and how he would like to kill SWs (because they took him away from his mother aged five, and put him in foster care). Tom, however, was able to rationalise and justify why he was feeling so cross, which enabled me understand his experiences.

[Tom] Every game I play with lego in, I pretend the other bad guys are SWs and it's like 'cut them heads off!'

[Researcher] Oh. Why are you so angry with SWs?

[Tom] Because SWs took me away from my mother.

[Researcher] Right. I understand that.

[Tom] And also they never listen to my feelings. They...they...they always bring up my past! And I didn't want to bring up my past. So...so every time they bring up my past I just get angrier and angrier and angrier. Up to a certain point where there's only a little bit left where if the SW brings up any past again, it's filled and I'm going full rage!

[Researcher] I can understand that.

[Tom] And when I was a kid I broke every toy in my room when I see a SW. I hate SWs!

Tom's experience and frustration with repeating 'the past' was also present in Arthur's (LA2) interviews. Both Tom and Arthur had worked with numerous SWs, presumably with differing levels of experience and different caseload numbers. From experience, there is no easy or manageable way to map / log the child's wishes and feelings on the computer records; most are recorded in case notes, drawings uploaded to the 'external file' section or in a specific box on the CAFA. A visual / written record left with the child may be more appropriate for longer-term CP journeys. A file, or folder, could contain child friendly copies of child-protection plans, introductory notes from new SWs with their contact details on, diary sheets, eco maps, child friendly genograms etc. This file would then become the starting point for each SW home visit, using the previous work as a starting point instead of returning to the beginning of the child's experience. SWs could then take photographs of the child's work to upload to their computerised files instead of taking the completed work away to scan in; this work invariably is left in social work in-trays, or filed in paper records.

Tom stated that he had never told his SWs about his strong feelings towards child protection work "because they never asked me":

**[Researcher] What could a SW do to make you not hate them?
How can we make it better for you?**

[Tom] Not take me away. Listen to my feelings. And not bring up my past.

Despite Tom's insistence that SWs should not have removed him from his family, the lack of an explanation for this decision-making was at the heart of Tom's anger:

I just think that rules are bad. They never explain me about rules. They just place rules down and I don't know what they're meant for. (Tom)

When asked to consider his feelings when spending time with his mother, his 'dad', and his SW, Tom took to the entire pack of emoji cards straight out of the researcher's hands, carefully considered each and chose the following emotions:

The SW [places an angry face]. [Places 'cheeky monkey' card in front of himself and does a monkey impression]. [Places love heart in front of Mummy and Daddy]. (Tom)

The fact that Tom had been on a CP plan for a very long time clearly shows that SWs consider Tom to be at significant risk of harm. Although not asked direct questions about his child protection plan, Tom spoke openly about grave situations that had impact on his life:

[Researcher] So out of Mummy and Daddy, who looks after [child] the most?

[Tom] Mummy. Because my real Daddy...my real Daddy...tried to kill me.

[Researcher] Jeepers, are you ok now?

[Tom] Mmm hmmm. When I was a baby.

Despite having been on a CP plan for as long as he can remember, Tom is fiercely loyal to his mother and apports no responsibility to her parenting for his presence in CP. He listed significant risks of harm to himself in a matter-of-fact manner, yet blamed SWs for unwanted intervention; Tom also stated that his 'anger issues' were the reason for the CP plan. His family's transient lifestyle

may have contributed to this one-sided understanding; the lack of opportunity to build a relationship with one SW has allowed his mother to assume the role of main information-sharer, leading to an incomplete understanding of the situation by Tom. Tom is firm in his opinion however that SWs had never taken time to explain, or help him understand, the purpose of the intervention.

8.1.2 Relationship Building

The lack of communication between Tom and his SWs is the main theme to emerge from his interview. Referring back to the 'Revolutionizing participation in CP' model, the cycle of participation has broken down at every stage for Tom due to transience, SW turnover, poor SW practice and trauma experienced by his removal in to foster care. However, the smaller, more basic points of relationship building have also eluded Tom:

[Researcher] Can I ask you some questions about SWs?

[Tom] Mmm hmmm....

[Researcher] Do you know who your SW is at the moment, do you know their name?

[Tom] No.

[Researcher] No, you've just got a new one, haven't you?

[Tom] None of the SWs told me names.

[Researcher] Has a SW been out to see you in this house?

[Tom] Yes. Been here once.

[Researcher] And you can't remember her name?

[Tom] No. Because they never told me.

Although Tom's frustration with SWs is evident, his response to the question "What you think a SW does?" aligns with the responses of all LA2 child participants:

Hmmm. They help. (Tom)

Tom's social work visits take place both at home and at school. He prefers to receive visits at home, as he feels more relaxed, safe and calm than when at school. Tom has never tried to contact his SW by himself; he recalled his mother often telephoning them but stated "they didn't come". Both Tom and his mother agreed that they had worked with many different SWs:

[Researcher] How many SWs do you think you've had in your life?

[Tom] [thinks and counts] 20

[Researcher] Do you think it's that many? Coz your mummy did just say that you've had SWs ever since you were born, didn't she?

[Tom] That's why every SW...the reason why they left us is because I threaten to kill them. But I hate social!
[whimpers]

Tom refers to himself and his behaviour as being the reason for his child protection plan. For a ten-year-old child, he spoke clearly and rationally, yet his understanding and opinions, primarily shaped by his mother, has left a clear void in understanding his CP plan. Tom also views himself as being in charge of the family:

[Researcher] What about this one? Out of Daddy, Mummy, [child] and the SW, who is in charge?

[Tom] [places card in front of himself]

[Researcher] That's amazing. Tell me why you're in charge.

[Tom] Because I have always been the Alpha.

[Researcher] What does that mean?

[Tom] It's basically when you're the man of the house and you're in charge of whatever...whenever people comes you get to tell them what...what they have to do.

[Researcher] Ok. And, if I asked your mum who was in charge of the family, who would she say?

[Tom] Me and her. [shouts to his mother] Mummy, me and you are in charge!

8.1.3 Attendance at meetings

Tom has never attended, nor been invited to, any of his CP case conferences, family group conferences or core group meetings; he is very unhappy about this.

[Tom] That's why I've been angry and angry at social.

[Researcher] Ok so are you telling....are you saying that you'd like to go?

[Tom] Yeah. I would like to go to see what they say about me

8.1.4 Information sharing

The lack of communication between Tom and his SWs has affected the type and level of information shared with Tom. This role falls solely to Tom's mother, as does the explanation for the reasoning and purpose of Tom's CP plan:

[Researcher] So you know when your mum goes to the meetings, how do you find out what's been said?

[Tom] My mum tells me.

[Researcher] Your mum tells you. Does the SW ever come and tell you?

[Tom] SW takes mummy to meeting.

[Researcher] Yeah.

[Tom] Mummy...mummy comes back, takes me in to room, in to bedroom, speaks to me, feelings, I get angry. Then I, then I calm down. Then I go to sleep. Then mummy stays up then mummy goes to sleep...and SW goes to social office.

[Researcher] Does the SW ever come back after a meeting and talk to you about what was said in the meeting?

[Tom:] No. Only Mummy.

[Researcher] So how do we know then they're listening to what you want in the meeting?

[Tom] Because my mum tells them what I want.

[Researcher] Yeah?

[Tom] But before Mum can say, they interrupt mother. That's why I don't like them, nobody interrupts my Mummy!

Tom feels that his mother is very honest with him when sharing the decisions made on Tom's behalf. However, the absence of the child / SW relationship has created a one-sided version of events; Tom's limited understanding of this risks posed to him, coupled with his loyalty towards his mother, has resulted in anger and frustration. When asked whether anyone had prevented him communicating

with his SW, Tom replied that he had been consistently told by 'everyone' not to listen to SWs as they did not listen to Tom.

[Researcher] Out of Daddy, [Tom], Mummy and the SW, who listens the most?

[Tom places card in front of Mummy]

[Researcher] Mummy does? Ok tell me why does Mummy listen the most?

[Tom] Because My Mum brought me up by herself and I never had a proper Daddy. But that's why my mummy listens to me more than SWs. SWs don't know what it takes for me to kick off and what it takes for me to get angry and find weapons. Anything in my hand is classified as a weapon. This [picks up a toy] is a weapon because I could throw it at people. And anything in my hand is a weapon.

[Researcher] Yes, absolutely. So...when Mummy's listening to you, how do you know that she's listening?

[Tom] Because she looks at me. And...and that she says 'ok [child], we'll try and figure this out'.

[Researcher] That's awesome!

When asked to consider who speaks the most, Tom indicated his mother and stated "she always tells me the right things to do...the SW doesn't listen to me". Tom was unable to give an example of something that a SW has done for him and his family that was a good experience; he was however very vocal about the changes and rules instigated by the SW that impact on his life.

[Researcher] So what sort of changes has the SW said?

[Tom] I can't be around anybody without having a police check. I can't....I can't have friends without having a police check. I can't go over to friends' houses...I can't do anything fun.

[Researcher] I know. I know.

[Tom] That's why I hate them!

[Researcher] Why are they saying that though [child]? Tell me why.

[Tom] I know they're trying to keep me safe but I know my friends, they haven't done anything wrong. Coz if they have they would have got up and spoke to me about it. But they haven't.

Children on CP plans are prevented from spontaneous sleepovers and playdates until the LA has checked and authorised the safety of the playmate's immediate family; as well as ensuring child safety, it demonstrates parental ability to be honest and work transparently with children's services. Interestingly, Tom makes reference to his peers as potential perpetrators of harm, rather than their parents, which aligns with Tom's assumption that his CP plan is based on Tom's actions / anger issues / behaviour rather than his mother's.

Tom's insistence that he is the root / cause of the child protection concerns further underlines the absence of a child / SW relationship; Tom is receiving information from his mother only, which could lead to bias, untruths and misunderstanding.

[Researcher] Tell me about the decisions your SW makes?

[Tom] She only makes decisions for Mummy. No me me
[said in baby voice]

[Researcher] So the SW tells Mummy what has to be done?

[Tom] Mmm Hmmm. Then I....then Mummy speaks to me and I listen to Mummy.

Tom has never had an advocate or a participation worker; he had not heard these terms before and needed to receive an explanation of their roles. Due to the strength of Tom's feelings towards SWs, and his limited understanding of his child protection plan, a referral for advocacy would certainly allow Tom's voice to be heard. On the insistence of LA3, Tom had accepted the presence of an advocate during his interview; the advocate listened to Tom's frustrations first-hand and then explored how advocacy could help him, straight after the interview. Whilst initially concerned that the presence of an advocate may affect the child's voice, the ability to immediately link a child (who was adamant that he was not being listened to) with an advocate was invaluable.

The lack of communication in Tom's CP journey extended to both verbal and written information; the SWs had not written down anything for Tom to read. Tom had never seen any minutes of meetings nor read his child protection plan. When asked about his plan, Tom had a visceral reaction to the phrase 'child protection plan':

[Researcher] Now have you ever heard of the words 'child protection plan' before?

[Child whimpers and runs off, hides underneath the chair cushions]

[Researcher] Oh, are we ok? Are you ok? Do you not like those words? Or are you just being your doggy?

[Tom] I don't like them [said in frightened voice]

[Researcher] Oh ok.

When trying to explore child protection plans further, Tom continued to react strongly saying “don’t say anything with the ‘P’ word in!” and remaining hidden under the chair cushions. It was at this point that I decided to end the interview, in agreement with the advocate, due to Tom’s discomfort. The advocate’s ability to view this reaction was very useful and I felt reassured that this could be further explored after I had left the interview and the child behind.

Chapter 9: Theoretical framework and discussion

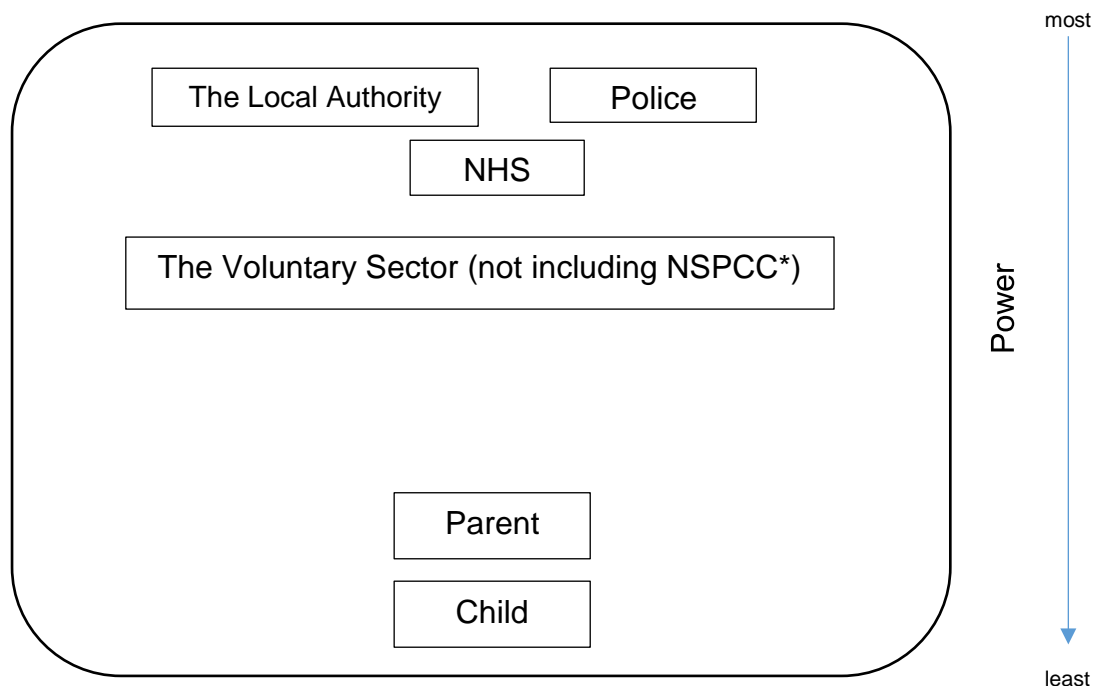
9.1 Introduction

The writings of Bourdieu are consciously complex. In child protection social work, the child and their circumstances are unique, often lacking in clarity and requiring a subjective view. For SWs, the dominant discourse is safeguarding; once the likelihood of harm is established, the family are offered appropriate support. In some cases, identifying, predicting and analysing risk of harm is straightforward for SWs. Working Together to Safeguard Children (2015) publishes flowcharts for s.47 enquiries (Children Act 1989) ensuring that practice is ethical and lawful; each SW recommendation signed off and authorised by at least two senior managers within children's services. However, Bourdieu (1990a:52) encourages further thought, stating that "false clarity is often part and parcel of the dominant discourse, the discourse of those who think everything goes without saying...". Whilst SWs have assigned the risk of harm as the dominant discourse, the deeper layers and lived experiences of the child and family create alternative, competing discourses from a service user perspective. The presence and influence of indifference, habitus and *illusio* within the social space of child protection requires SWs to "accept that discourse can and must be as complicated as the (more or less complicated) problem it is tackling demands..." (Bourdieu 1990a:52). In these circumstances, Bourdieu (1990a) does not believe in the virtues of 'common sense' and 'clarity'; what is common sense to practitioners may be an alien concept to those with whom we work.

9.2 Social space and the field of CP

As established in Chapter 3, the field of child protection comprises of the following actors and agencies: the child and their family, local authorities (including children's services, education, domestic violence, housing, drug and alcohol services, and legal team), the NHS, the police and the voluntary sector. The closer the agents appear within the social space is representative of commonalities, connections and capital (Bourdieu 1989), each field using high / low positioning to signify influence and power. Figure 9.1 demonstrates my interpretation of the field of child protection:

Figure 9.1: The field of Child Protection



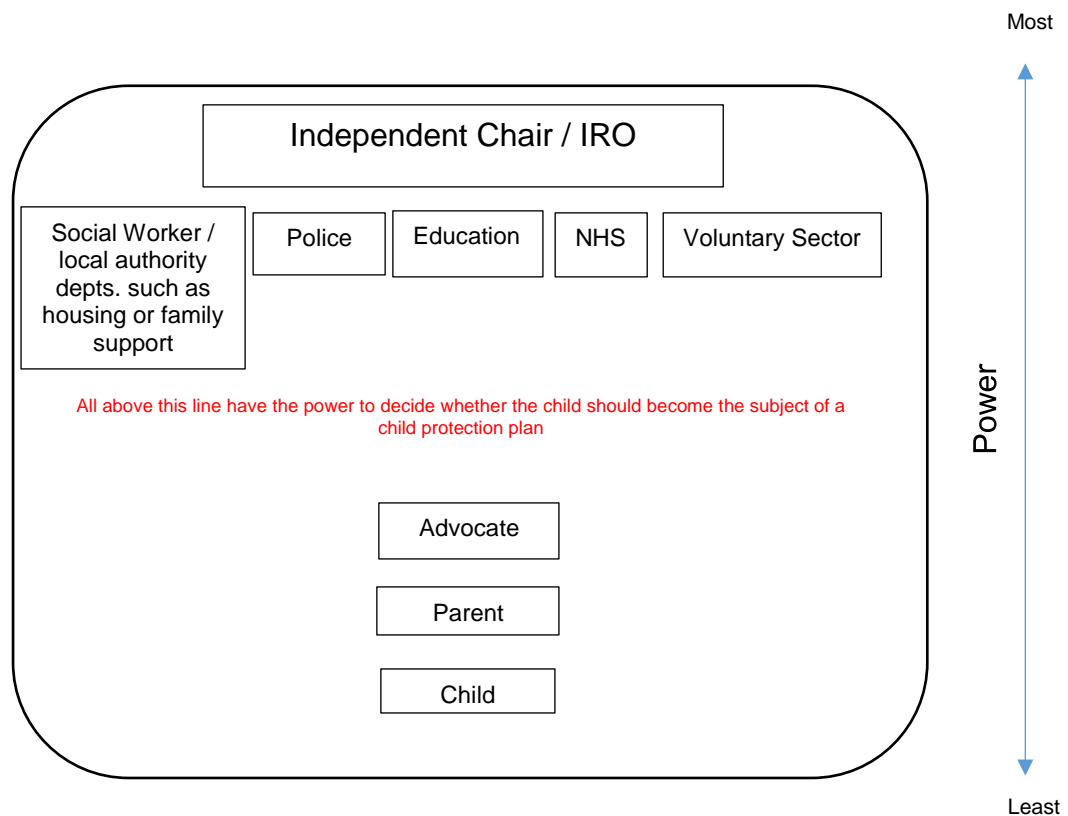
*the NSPCC holds statutory powers to investigate concerns under s.31 of the Children Act (1989)

Both law (Children Act 1989) and statutory guidance (Working Together to Safeguard Children 2015) underpin the dominance of the local authority and the police in the CP field, assigning both agencies with huge amounts of social, economic and cultural capital. In some s.47 enquiries (Children Act 1989) the family are not known to children's services; either there have been no previous referrals or the family may be new to the area. Child protection social work therefore initially exposes children and parents to new language and rules, without an intense level of prior explanation. The subsequent period of assessment following s.47 enquiries allows for deeper exploration of the presenting issues but the initial uninvited, and often unwelcome, SW / police visit can leave children and their parents feeling confused and powerless (Dillon et al, 2016). The authority to pursue s.47 enquiries without parental consent, along with police powers to remove children deemed at risk of immediate significant harm (s.46 Children Act 1989), further underline the family's lack of capital, connections and commonalities.

Within the social space of child protection other smaller fields emerge, for example the child protection case conference. Practitioners attending a CP case conference are often familiar to one another; SWs establish working relationships with school pastoral managers, police CP conference attendees, school nurses and IROs. Parents may have established relationships with one or two conference attendees, such as family support workers, but would unlikely be familiar with the conference chair / IRO, school nurse or police representatives. However, my research has so far demonstrated that children may not have any established relationships with extended core group members and relative strangers make decisions on their behalf (Kennan, Brady and

Forkan 2018). Therefore, in the field of the child protection case conference, the child has the fewest connections and commonalities. My interpretation of the CP case conference field is demonstrated in figure 9.2 below:

Figure 9.2: The field of the CP case conference



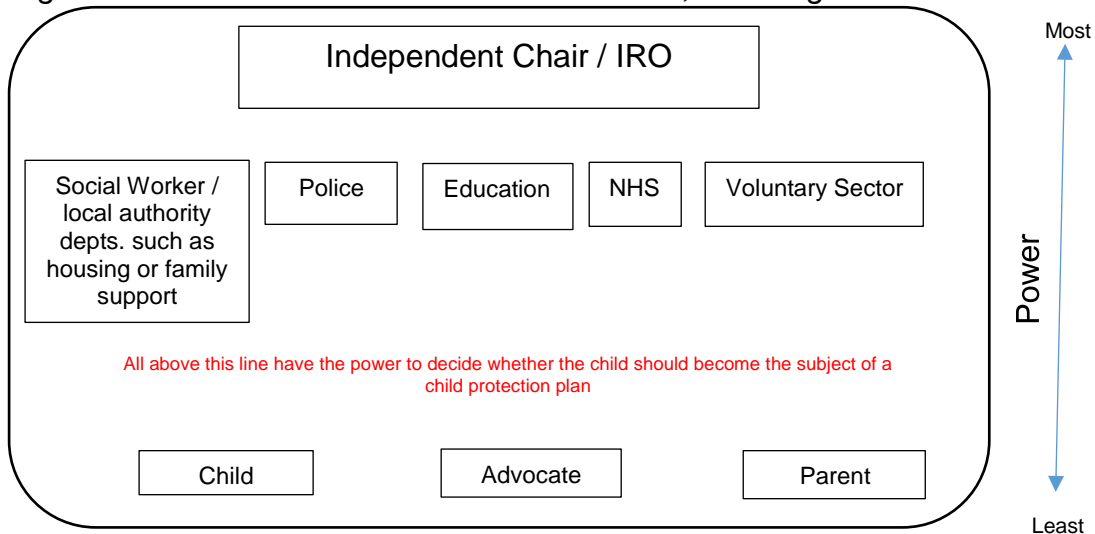
Flemmen (2013) interprets Bourdieu’s structure of social space as continuous; there are no breaks or boundaries. However, in the field of the CP case conference, the child, their parents and the advocate are not allowed to participate in decision-making; the local authority and their multi-agency partners will always retain this power thus creating a boundary. Indeed, in Phase One of this research, PWs discussed an ICPC where no evidence of ‘significant harm’ was present yet all professionals around the table still voted

for the instigation of a CP plan. As a result, children (and their parents) remain unheard and practitioners fail to assign weight to their opinions, perpetuating a negative cycle of practice until the child's voice disappears entirely (McCafferty 2017). The dominant discourse of safeguarding permits this poor social work practice, emphasising the power (or wealth) of the practitioner and placing them as the expert in the field of child protection. Parent1, for example, when asked who has the most power in the triad of SW, parent and child, quickly identified the 'practitioner as expert':

The SW. Then it's the SW and then it's the SW. Me and my kids are just nowhere. The SW will say something and the SW will get what they want. We get nothing. Don't even get listened to.
(Parent1)

The presence of a boundary (Flemmen 2013), however, should not mean that this field becomes void, as the purpose of participatory practice within child protection is to involve and empower the child as much as is feasibly possible. The use of my 'Revolutionizing Participation' model ensures the clear flow of information between practitioner and child, allowing the child to understand and give opinion on proceedings. The increased number of cycles around the new model adds weight to the capital held by the child, enhancing their relationships with practitioners and their familiarity with decision-making forums. The advocate then becomes solely a mouthpiece for the child's voice, and both child and advocate present as equals within the CP case conference field, as shown in figure 9.3:

Figure 9.3: The field of the CP case conference, following successful advocacy



To add further complexity to the field of CP case conference within LA1, the PWs / advocates in LA1 remain in the meeting for the sharing of confidential police intelligence, whilst the child and their family must leave. With an advocate’s role being to emphasise the child’s wishes and feelings, their remaining in the room unwittingly increases their level of cultural capital; they are now aware of information that the child and their family are not. The LA1 PWs spoke passionately about trying to re-address this imbalance of power experienced within case conferences, and the redistribution of capital to vulnerable young people through advocacy and creative direct work (Feldman, Strier and Schmid 2016). However, this research revealed accusations of ‘conference coaching’ levelled at PWs, from attending practitioners, arising from a judgmental stance; in their defence, PWs state they simply explain etiquette and processes as a means of empowering the family to participate fully and ‘play the game’. This example of good practice is eloquently summarised in McGhee and Waterhouse (2017), stating that “in child protection, SWs are

intermediaries akin to that described by Levi-Strauss as between the 'powers above and humanity below' (1978:27).”

The fact that child protection social work proceedings commence with an involuntary investigation by SWs and police, often without the knowledge of the parent or the child, consistently reaffirms the imbalance of power. Whilst this duty to intervene in private and family life is enshrined in law (Children Act 1989), it would be rare for practitioners to spend time reflecting on this power dynamic following an intense s.47 investigation, even when concerns are unsubstantiated. There is simply no time and, in my NQSW experience, 'navel gazing' was not encouraged in supervision and was a sign of weakness. Smith et al's (2017) research noted the precedence given to evidence collection over social work relationship building with children during police interviews. SWs are not normally present for police interviews; they either wait outside the interview room, with the child's siblings, or watch the interview from their live communications room. Such interviews often lead to decisions of 'no further action' yet the experience of reliving an emotional experience may be traumatic for the child (Smith et al 2017), and one that is never again addressed by the SW due to the closure of the case. On SW visits where "children should, wherever possible, be seen alone..." (WTTSC 2015), the initial visit to the child is often undertaken without any previous knowledge or existing relationship with the child (Dillon et al 2016) which is clearly an odd situation.

I try and remember as well it's weird that a stranger walks in to your house and takes you off on your own and talks to you. (SW2)

It was interesting to note that the SWs in Phase One with the longest and most varied experience (SWs 1, 2 and 3) identified the parent as the most powerful in the field of CP, whilst the more newly-qualified SWs (SWs 4, and 5) identified themselves as having the most power. SW5 felt that the power imbalance between SW and service user can be lessened by only asserting power when necessary, although I am not certain that this 'dangling of power' adds any weight or volume to service user capital:

There's always an imbalance of power. But it's how you try not to use that on a constant basis. It's about picking the time, the right time, to say 'Hang on a minute, you know...your child is on a child protection plan. The local authority has got concerns and you need to do this'. And not giving them options, so... (SW5)

The 'dangling of power' between actors and agencies within the field of child protection can be illustrated through Bourdieu's linguistic habitus (Aguilar and Sen 2009: 432). Differences in articulation, accents, and even the use of silence at appropriate parts of the process can influence and elevate the actor's positioning in the field (Aguilar and Sen 2009), along with the ability to understand social work jargon. Whilst powerless in and of itself, power is ascribed to language when used in certain ways by certain people (Webb et al 2002). The overuse of acronyms and buzzwords such as LAC and CIN frustrate both service users and practitioners, particularly when the acronym has derogatory connotations (e.g. LAC = lack, CIN = sin etc.). Bourdieu (1990b:30) describes language as "a system of objective relations which makes possible both the production and the decoding of discourse", acceptable for those rich in capital within the CP field, but oppressive to those not. Amongst social work service users, there remains an acceptance of this dominance, with dominated

people complying because 'it's just the way it is' (Bourdieu, 1999). For example, Phase One findings indicated that parents struggled to understand the formal language used on CP reports:

If you want a parent to stop hitting their child, write on the plan 'you must not hit your child!' It does not need to say discombobulation and all that crap. (PW1)

PW1 also recalled their work with a parent who was negatively labelled in reports as an 'aggressive mother', whereas the parent simply had a very loud speaking voice. Our bodies, and our voices, are therefore instruments within cultural capital (Garrett 2007a).

Bourdieu's (1999) 'Weight of the World' research into social welfare and deprivation revealed a *doxa* among dominated groups; people were unaware of their oppression or imbalance of power yet knowledgeable about the struggles that their families faced daily. *Doxa* permeates everyday language and thought processes, often via the media. People begin to repeat slogans, statements or sentiments as facts, or internalized truths, until they become real and accepted. The most feared, yet often unspoken, *doxa* of child protection is the implicit knowledge that social workers 'take children'. Whilst a CP plan provides appropriate levels of support for children and families, many still view social work intervention as a precursor to removing children.

And that over-rides every other thing before you start any piece of work, that is always in a parent's head. 'I've got SWs therefore they're going to take my kids'. So there is an implied power just from that. (SW4)

The continued negative reporting in the media regarding SW intervention

(headlines describing SWs as baby snatchers or 'adoption to order', plus the many 'name and shame your SW' Facebook groups) encourage 'child removal' to become a societally accepted subtext (Fram 2004). This implied threat questions the validity and accrual of service user capital in the field of CP. If the parents' decision to accrue capital is solely based on 'playing the game' as a coerced player, the rules and game etiquette must be transparent.

Ultimately, the parent is the one who can make the decisions that either makes the social worker come and go [laughs] and obviously they have the ultimate power over their children... You know like how that parent... yes, they can change, they can alter their life and that would make the social worker go away. And they can alter the way they parent and that would maybe address some of the issues with the children and stuff like that. But that's a different kind of power, isn't it, from what social workers have, in the sense that my subjective view and analysis of the situation can actually alter their life. And the child's life. Forever. (SW2)

9.3 Sharing the power and increasing volume of capital

Research conducted by Kriz and Roundtree-Swain (2017) concluded that workers within the field of child protection were more likely to respect the opinion of children who engaged and showed respect for the workers. This is a concerning outcome. Whilst workers should indeed celebrate their positive and participatory relationships with children, social work should respect the right to self-determination (i.e.: for the child not to participate, if they so choose) and focus on identifying the strengths in every relationship (BASW 2018).

Consideration was given to issues arising from this research that would hinder or promote the child's upward progression, and accrual of capital, in the field of child protection. The following suggestions can therefore be made:

a) Despite five out of the six child participants knowing the names of their SWs, only two had the knowledge / ability to contact their SW directly without needing their parents as an intermediary. None of the children in LA2 had contact details for their advocate. This incongruous practice not only fails to provide the child with a means to share safeguarding concerns, it limits the child's ability to ask questions or seek clarification about decisions made on their behalf. The child's volume of cultural capital remains low, wholly dependent on the child's ability to remember their questions, thoughts or feelings at the time of the next (often unannounced) social work visit. I therefore recommend that giving the child a business card / a sticker / an emoji / a photograph of the SW with all their contact details becomes standard practice; it is not sufficient to leave these details with only the parent.

b) Both phases of this research produced no examples of child friendly child protection plans or core group minutes shared with children aged 8-12 years, at any stage of the child protection process. All of the participating children (except Robert) lacked clarity and understanding about their own aims and goals, as defined for them by their SW, their parents and their IRO. The development of a 'child information pack' could fill this gap in practice. SW details could be included as standard, along with journal / diary sheets, a child-friendly version of their CP plan, child-friendly core group action planning and all direct work facilitated with the child during home visits. This pack could remain with the child throughout SW turnover / transfers to other LAs / de-escalation to CIN. Along with ensuring the positive attribution of cultural capital to the child, and alleviating opportunity for 'self-blame' (Winter 2010), this pack may be utilised

within all four sections of the 'Patterns of Participation' model: information sharing, wishes and feelings, relationship building and decision-making. Ideally, these resources would be co-produced with children who have experience of child protection proceedings.

c) There has been no evidence of any children aged 8-12 years taking part in their own child protection conference within any of the three participating LAs. At the start of this research project, this was the aspect of participation that most intrigued me; I could not understand how a child was unwelcome at a meeting designed to safeguard them. However, because of this research, I have concluded that attendance at meetings is a very small part of the participatory cycle. If the child wishes to attend, provisions must be made to facilitate this; it is my opinion that all meetings should be designed to welcome the child, therefore eliminating the element of surprise (or lack of planning) if the child does present. With two children within Phase Two of this research having no desire to attend their CP conferences or meetings, the default standard of 'the child is welcome' will always provide instant accommodation for the child, should their opinions change.

d) Whilst LAs continue to utilise differing formats and frameworks for CP conferences, there will remain a disparity in the quality and level of participation offered to the child. Whether the child attends or not, emphasis must be given to the quality of the information shared with the child following each decision-making forum, and the action of the child's wishes and feelings regarding their social work intervention. We are reminded by McCafferty (2017) that Article 12

of the UNCRC (1989) states that children need to be able to give a view, not a '*mature*' view therefore SW need to stop inflating the age at which they presume a child is capable.

e) There was evidence within the child interviews that a lack of understanding about CP procedures and decision-making led to feelings of anger and upset. Both Tom and Rebecca had intense feelings of anger towards practitioners due to the lack of clarity around why their routines were changing, and their subsequent loss of voice and control. Whilst clear explanations, and the seeking of feedback, can be used to ensure that the child gains cultural capital, there appears to be a fine line between 'covering old ground' and 'sharing new knowledge'. Arthur and Tom both firmly agreed in their desire to move forward and not having to repeat themselves constantly or listen to recollections about past decision-making. Again, the use of a 'child information' pack that can be referred to when the child wishes will prevent SWs (or their stand-ins) from duplicating previous work

f) In LA1, PWs must recognise their ability to accrue capital, and further oppress families, by remaining in case conference during the sharing of police intelligence. It is my opinion that the PWs must show allegiance to service users and insist on leaving the case conference with the family at that point of proceedings. This will ensure that the PWs remain wholly unbiased and privy to information volunteered by the family only. The sharing of police information prior to the start of a meeting, as observed in a Signs of Safety CP conference, is an alternative way of ensuring that a child and their family are not blatantly

excluded from their own CP conference. I also recommended that the PWs do not read any case notes belonging to the family prior to their visit, instead encouraging the MARF to be of an appropriate standard.

9.4 Habitus

Bourdieu's concept of habitus is extremely transferable to the field of child protection. As a "system of perception and appreciation of practices" (Bourdieu 1989:19), these deeply engrained social structures are pervasive yet not controlling (Houston 2002). Parenting practices and choices can stem from habitus, underpinned by deep-rooted beliefs of how one should behave (Aguilar and Sen 2009) and an unconscious acceptance that 'this is how we do it'. However, parents can become consciously aware of habitus when it no longer sits comfortably with circumstances (Topper 2001) and power imbalances become noticeable. Habitus then allows us to make changes to our circumstances, to adapt and strategize in response to different situations, giving us in turn a 'feel for the game' (Houston 2002). Interestingly, Garrett (2007a:367) states that Bourdieu interprets habitus as static, which does not align with the "interactive, strategical and relational" nature of Bourdeusian practice. Indeed, Fowler (2004) maintains that the force of habitus can be resisted and altered following reflection; it is this moulding of habitus that is pertinent within the field of child protection, from both agency and service user perspective, to reach a mutually agreed understanding of the CP plan. The pathway to 'mutual agreement', however, may be fraught. Hester's (2011) "Three Planet Model" likens separate, professional habitus to gravitational pull, forcing practitioners into conflicting roles due to different organisational

structures and work approaches. The result is a 'black hole' through which children and families fall (Hester 2011).

Donovan, Rose and Connolly (2017) describe habitus as the internalisation of extended experiences, containing chronological layering. The children with extensive child protection involvement will have stronger, and more defined, layers of habitus (or experiences) than children who had short, sharp social work intervention. The paper-based social work chronology, designed to inform the court of all previous referrals, decision making and actions, is an excellent example of the layering of habitus. Visually, in court, this presents as a black and white written document. However, each entry on the social work chronology can be imagined as a real colourful experience, lived and interpreted by the child, and individually imprinted as habitus upon their field of child protection. From this Bourdieusian perspective, it becomes incredibly clear that no two fields of CP will be the same for any child. Habitus is unseen; a sense of being influenced by the child's lived experience (Bourdieu 1990b; Donovan et al 2017).

Following the initial analysis of data, Tom's (Child participant – LA3) transcript was scrutinised a second time to draw out his life experiences and associated feelings; this enabled the exploration of the underpinning structures and dispositions (Bourdieu 1990b) that shape and define Tom's habitus, as previously displayed in figure 3.1 in Chapter 3. These structures layer thickly over Tom's CP field, producing emotions and expectations that influence Tom's participatory journey.

At the time of Tom’s participation in this research, his experience of social work was wholly negative following his placement in foster care as a young child. Tom’s habitus (and ensuing actions) will therefore continue to perpetuate his disadvantage on his CP journey unless the balance of power is re-examined by his SW (Fram 2004). Tom’s unique habitus and field of child protection can be visualised as demonstrated in figure 9.4:

Figure 9.4: Tom’s habitus and social field of child protection

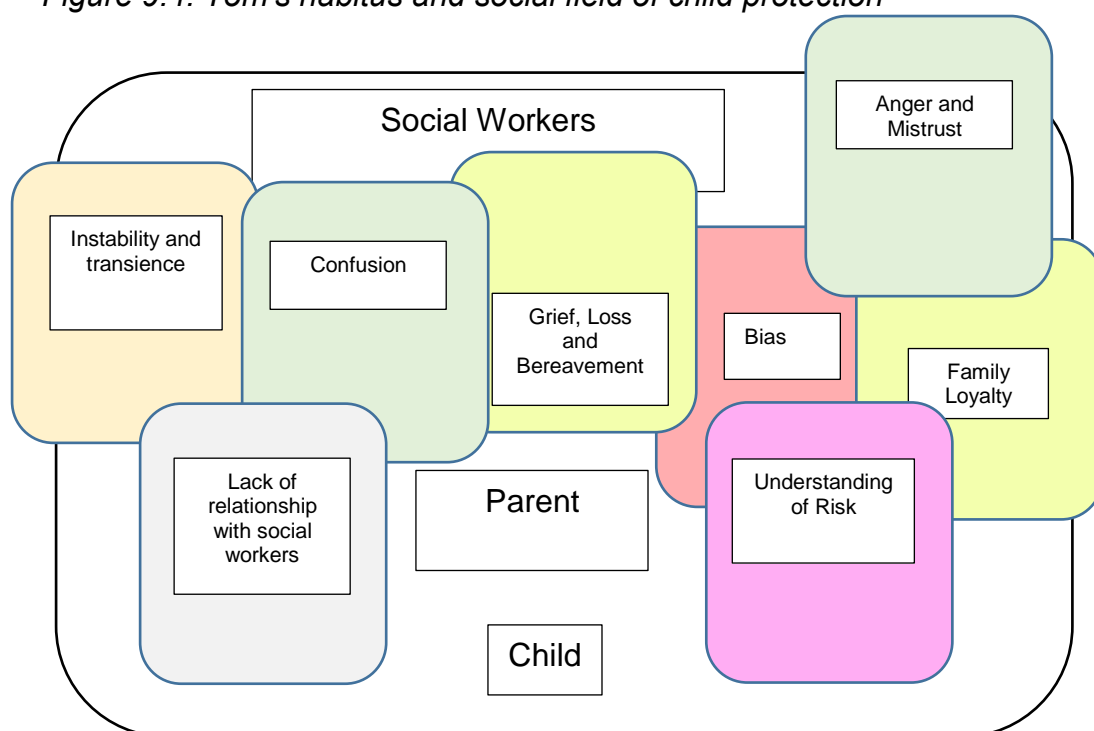


Figure 9.4 reveals a startling example of habitus, just one example of potentially 550 children on CP plans in LA3. With NQSWs receiving limited education in university, nor in practice, regarding ‘what to do when you remove a child’, this example affirms the absence of ‘child removal checklists’ due to social work not taking place in a vacuum (Bourdieu 1989). The complexity of each child’s situation can be easily overlooked as the SW follows the dominant discourse of

safeguarding and the often-heralded 'clear-cut' notion of child protection as being solely safe from harm (McGhee 2017). It is therefore my opinion that reflecting on a child's habitus during social work assessments would intricately enhance a SW's understanding of the child's world and the impact of habitus on their voice. Similarly, the SW should acknowledge their own habitus and how this may impact on their learning and practice.

From a practitioner perspective, habitus allows people of privilege (i.e. SWs) to act in ways that maintain privilege (Fram 2004). I recall a conversation with SW2 (LA1), after her interview once the voice recorder was turned off, where she spoke enthusiastically about her next meeting at a local public school "because they have nice cakes". Bourdieu (1990a:131) describes habitus as "a sense of one's place' but also a 'sense of the other's place'", allowing actors and agencies to make judgements based on social conditions. The field of CP therefore becomes a game, or even a battleground (Houston 2002). Actors and agencies use different language, actions and emotions to advance in the field yet Houston (2010) warns practitioners to not envisage the CP field (or battleground) as a game of chess; this likens the process to organised strategy, devoid of human agency, instead of an attempt to secure trusting relationships. Evidence of this can be found in the experience of SW1, in LA1, who was accused by a parent of 'sending all your soldiers in', creating a visual of a lone pawn cornered on the chessboard by the knights and rooks instead of an acknowledgment of service provision.

9.5 The feel for the game

For two of the parents within LA1 (Parents 2 and 3), their involvement in 'the game', or *illusio*, was considered worthy and of benefit to them and their children. The other two parents (Parents 1 and 4) however were angered by the *illusio* and considered themselves as coerced and involuntary players.

Practitioners interviewed in LA1 reflected on this dynamic, particularly regarding aspects of their practice that influenced or changed the rules of 'the game' without realizing the impact on the service user. Some examples of these emerging from this research are:

- a) Parents not understanding the etiquette, processes or language used within CP conferences, yet severe consequences implemented if parents fail to adhere to the CP plan. Service users are expected to advance their knowledge of jargon and social work law, rather than CP practitioners amending their use of professional language.
- b) Despite core groups being held within ten working days (WTTSC 2015) of case conference, statutory social work visits can be up to four weeks later. Parents cannot play 'the game' equally if they are uninformed of the rules or the game strategy, nor linked in with the appropriate support services in a timely manner.
- c) The sudden nature of s.47 enquiries (Children Act 1989) thrust children and parents in to the *illusio* without warning. Whilst their parents are the main players, the child's actions and opinions should affect and influence 'the game'.

However, the nature of an unannounced s.47 enquiry (Children Act 1989) can present a child / parent with a game that they have never played before; all other players are strangers and hold more knowledgeable / capital in processes and procedures than the child / parent does. Consideration must be given to the model of participation used in these circumstances; using a linear model of information sharing, wishes and feelings then case closure may leave a child anxious following unsubstantiated intervention. Adopting the cyclical 'Revolutionizing Participation' model would ensure that, once the *illusio* had ended, the child is informed about the gameplay, the reasons for each strategical move and the outcome.

d) In LA1, SWs admitted that they were uncertain of the roles and methods of their in-house participation team. With advocates being worthy players and allies within CP (helping the child advance within the field) poor communication and understanding of practice may reduce the child's ability to progress. With none of the four parents in LA1 being aware of the presence of the PT, children on CP plans are inadvertently held back due to limited social work knowledge and practice. It must however be noted that despite the PWs lack of power in the field of CP, their relationships with colleagues and their lack of independence can lead to tactical play e.g. having a 'word' in the IRO's ear or tipping off the SW about small issues.

e) Participation in the game of CP needs to happen within timescales laid down by both social policy (WTTSC 2015) and the assigned IRO. Whilst Munro

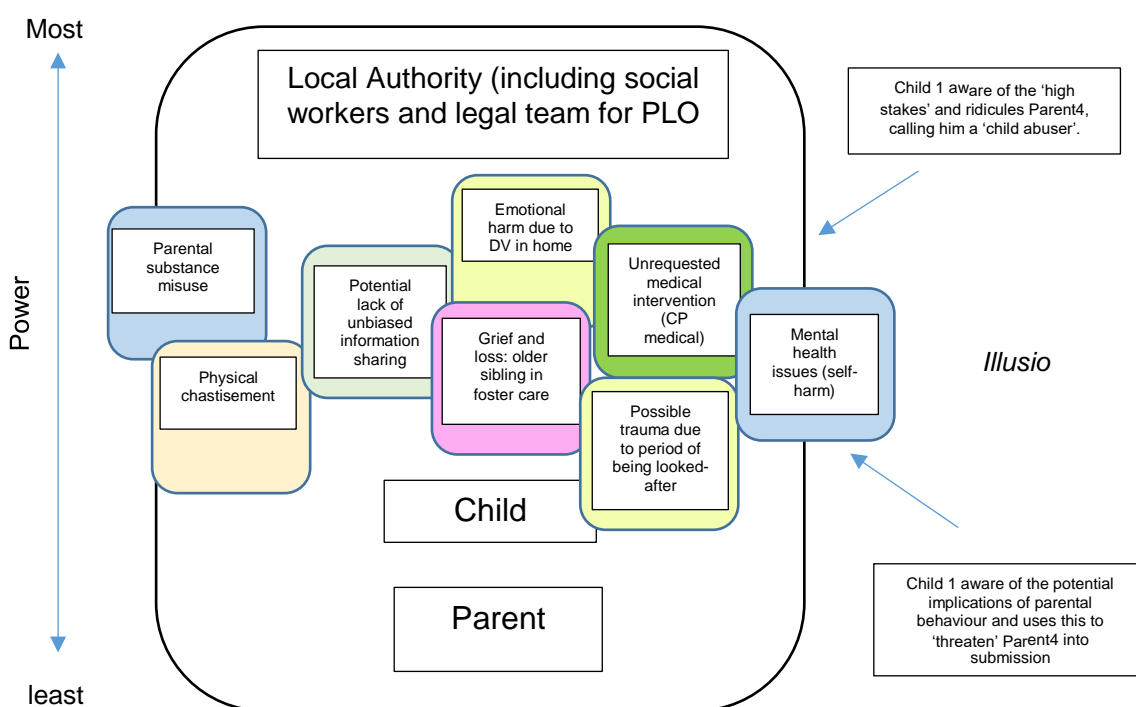
(2011) acknowledged that parents need time to make changes to their parenting, and threw out specific timescales for assessment, the threshold of CP indicates that significant risk of harm is present, and change must happen now (or else). This creates a visual of a chessboard clock, being hit and reset after each player makes a move, yet SW2 insightfully took issue to children having to respond to SWs at a time that suits us, not them. There has been significant media coverage of delay in children's social work over the past six years, with the Government's (2012) Action Plan for Adoption stipulating the need for speedy decision-making. SWs are therefore under pressure to make decisions that compliment these new timescales and eradicate delay yet, under Article 9 of the UNCRC, children have the right to live with their parents. It is therefore pertinent to conduct thorough assessments and examine whether change is achievable in the child's timeframe.

Whilst the above examples highlight *illusio* from the perspective of the parent and practitioner, more thought is needed on the child's perspective of *illusio*. Using the narrative of Parent4, it becomes possible to visualise the field of child protection, the habitus and the *illusio* for his 12-year-old daughter, who is assessed as being at risk of significant harm and threatened with imminent care proceedings. Her habitus, or experiences, influence her participation in 'the game'. Parent4 deems his daughter as holding more power than him, due to his daughter's knowledge of the game's strategy, and her perceived ability to 'get him in trouble'. As a result, he faced vitriol from his children:

My kids was very well behaved before they were in care, now I feel like my kids are in control of me. Not me in control of my kids. And that's not the way it's supposed to be. You're supposed to be in control of your kids. I get called 'child abuser'...this is by my kids.
(Parent4)

It becomes possible to visualise Parent4's daughter's CP field, habitus and *illusio*, which is displayed in figure 9.5:

Figure 9.5: The *illusio* of Parent4's daughter



It is assumed that the child, in this case, has learned the dominant discourse of safeguarding, and the ascribed language, from their SW. However, Parent4's use of the phrase 'they've got nothing on us no more' (when referring to SWs' assessment of risk) suggests that he views their game as about to end; not so for the SWs who remain firmly in PLO with the family. Parent4 therefore demonstrates indifference. He no longer knows why the game is still in play, nor why he is considered a player, despite one child remaining in the care of the

local authority with whom he has had no contact for one year. Indifference also emerged in the narrative of SW3, whose relationship with a parent failed following the parent's minimization of risk, claiming that "this is normal teenage behaviour...this is what I did when I was a child...this is just life on a council estate". This indifference may indeed play a part with Parent4's daughter, depending on the previous experiences of her peers, extended family and community within the field of CP.

9.6 Government and bureaucracy

Whilst the Media continues to vilify SWs for their role in removing children from their parents' care, there is little understanding that SW power is delegated from the Local Authority Social Services Act (LASSA) as a means of discharging its social work function (HM Government, 1970). Bourdieu (1991:212) succinctly summarizes statutory power:

If I, Pierre Bourdieu, a single and isolated individual, speak only for myself, say 'you must do this or that, overthrow the government or refuse Pershing missiles', who will follow me? But if I am placed in statutory conditions such that I may appear as speaking 'in the name of the masses'...that changes everything

The ultimate decision-making on each case remains with children's services management, the local authority legal team and the family court. Decisions to place children on child protection plans, for example, are made in multi-agency settings; these are led by an impartial case-reviewing officer (IRO) and underpinned by s.47 of Children Act (1989). Sandwiched between the enormity

and richness of the local authority, and the vulnerable microcosm of the family, the field of bureaucracy further complicates statutory power (Webb et al 2002). Whilst aiming for equality and social justice, the bureaucratic issues facing today's SWs – poor pay, high staff turnover, budget cuts, timescales over innovation, high caseloads – impact heavily on service users. The wildly debated topic of hot-desking for SWs has resulted in a spatial reduction in office space due to austerity measures. This has direct implications on SW's mental health and professional identity, whilst reducing the opportunity for SWs to discuss practice with their colleagues; in Bourdieusian terms "...spatial distance then acts to affirm social distance" (Smith et al 2017:10).

The SW is indeed responsible for their day-to-day management of cases, yet social work managers are responsible for the amount and types of cases allocated to each SW. Most LA's recruiting NQSWs now stipulate a maximum caseload of around 18 children for SWs in their ASYE year. A survey conducted by Community Care (Stevenson 2018) interviewed 640 NQSWs, 82% of whom were promised a protected caseload by their employers yet 49% were not experiencing this. In Phase One of this research, SWs from LA1 used describing words such as 'coping' and 'flustered' when referring to their caseloads, with some indicating that the LA1 model of working across all thresholds (from duty and referral, through to adoption) was not working for them. SW4, for example, had 12 more children on her caseload as a NQSW than she was promised at interview, resulting in political and social pressures in both a professional and personal context (Donovan et al 2017). This is a concerning outcome when recent research concluded that newly qualified SWs

are less confident in speaking to children than their more experienced peers (Woodman, Roche et al 2018). Garrett's (2007b:371) Bourdieusian depiction of the 'left hand' (social work practice) versus the 'right hand' (budget and finance restrictions) depicts an internal tension, despite the inability to view the left hand's intentions as "unambiguously benign because this would mask the regulatory intent and practice of some of these interventions".

The widening chasm of spatial and social distance remains evident in CP social work practice. The shift from community social work to city centre office-based practice distances the social worker from the structures of poverty (the 'system') within that particular community, and the service user from accessible, knowledgeable service provision (BASWTalk 2018). Whilst parents seek help to provide for their families they are often met with a judgmental stance, focused on scrutinizing what the parents' 'can't do' as opposed to what is preventing them 'doing' (Featherstone et al 2018). The current Conservative government focus on austerity, with capped benefits, universal credits and reassessment of incapacity payments, sees SWs fighting structural poverty whilst simultaneously meeting middle-management targets (Shennan and Unwin, 2017). The irony of the Conservative manifesto statement stating "the days of something for nothing are over" (2015:25) has led to a "16.85% average increase in referrals for emergency [free] food, more than double the national average of 6.64%" in areas where Universal Credit has been rolled out (Jitendra, Thorogood and Hadfield-Spoor 2017:2).

Growing evidence linking poverty and deprivation to child protection intervention has been published within the last five years (Bywaters et al 2015; Bywaters et al 2016; Davidson et al 2017) yet social work policy and practice have, so far, failed to address this issue. The 'insatiability of a risk monster' forces social workers to focus on parents as risk-takers and poor choice-makers, as opposed to victims of an unfair and unequal society (Featherstone et al 2018). Until the CP gaze shifts from the behavioural approach to the 'system', with opportunity to tackle root causes (Featherstone et al 2018) there will remain a disconnect between the economic and social aspects of the family and their parenting (Bywaters et al 2015).

Workshops and masterclasses for Child Protection Reform, provided by Professor Andy Bilson and Professor David Tobis, begin at the University of Central Lancashire in April 2019, encouraging practitioners to design and implement reform strategies. Along with the implementation of a new social model for CP (Featherstone et al 2018), it is clear that practitioners and academics are intent on challenging deep-rooted and unequal structures of the CP system.

Chapter 10: Revolutionizing social work

For every actor entering a social field, Bourdieu (1998) states that a commitment and passion for the field, and the game, is a prerequisite. There is, however, nothing stopping the game-players from revolutionizing the game and achieving better outcomes for all involved.

They may want to overturn the relations of force within the field, but, for that very reason, they grant recognition to the stakes, they are not indifferent. Wanting to undertake a revolution in a field is to accord the essential of what the field tacitly demands, namely that it is important, that the game played is sufficiently important for one to want to undertake a revolution in it. (Bourdieu 1998:78)

It can be argued that the adoption of varying child protection social work approaches / frameworks / risk assessment models within local authorities signify that CP social work is currently in a state of revolution. Restorative practice, for example, within social work assumes that all practitioners and service users are socially interconnected, with communication being at the heart of the relationship. It is an organizational culture, rather than a framework, accepting the person for who they are in order to work in partnership with them. Dumbrill's (2006) study of parents in CP concluded that parental perception of power was the main factor shaping their perception of the service, and identified two strands of power: power over, and power with. With power being more easily shared when joint decisions of service provision are made, it is easy to understand why an increasing number of LAs are following a restorative approach.

The challenge of building partnerships with parents suspected of abusing their own children, whilst maintaining a statutory role and legal authority, led to the creation and implementation of Signs of Safety (Turnell and Edwards, 1999). Restorative practice frameworks and the Strengthening Families model also focus on collaborative working with parents and families to allow for joint decision-making, which can help lessen the power divide between the LA and the family. With parents being the main barrier, or gatekeeper, to their child and the SW (Aldridge, 2013), working in partnership with families can reduce the feelings of persecution and promote inclusivity (Darlington et al 2010; Appleton et al 2015). There remains however a conflict between the involuntary nature of child protection proceedings and the promotion of partnership working, SW4 from LA1 in her interview using the word 'direct', as in 'we direct families'; this suggests an undertone of threat and insistence, rather than signposting and informed choice. SW5's description of her 'power to bollock' a teenage father for his poor parenting was acknowledged by herself as a poor example of restorative practice. In this situation, SW5 had decided that her 'power over' the service user would yield more positive results than a more gentle, partnership-based approach. It is clear that, in these examples, parents may view a child protection plan as "a coercive requirement to comply with 'tasks' set by workers than a conjoint effort to enhance their children's welfare" (Buckley, Carr and Whelan 2011:101).

The choice of social work approach belongs to the local authority; there is currently no statutory stipulation concerning the choice of a local approach or model, however the cost of implementing such programs remains pertinent.

With the purchase of the Signs of Safety franchise model for example costing upwards of £100,000 (for the template alone), followed by a multi-million pound 'embedding and training' package, revolutionizing the *illusio* does not fit in austere times; a balance needs to be found between innovation and affordability.

10.1 Rewriting the *illusio*: a practical response

Whilst the rules of participation in the game of CP are enshrined in law (Children Act 1989) and statutory guidance (WTTSC 2018), this thesis has demonstrated that their interpretation and facilitation within social work practice remains inconsistent. The disparity between instruction and practice may be linked to the skewed translation of 'wishes and feelings' legislation, where focus remains on the child's desires in general rather than "the action to be taken with respect to him" (s.53 Children Act 2004). Updated statutory guidance remains vague; it is unclear how NQSWs are expected to 'know' how to embed participation when instructions remain scattered throughout WTTSC (2018) as opposed to presented in one clear section. The recording of wishes and feelings within social work assessments, no matter how accurately obtained, are inconsequential if the child has not been properly informed of the reason for social work intervention, nor offered a response (or an action) to their opinions. There is no clear directive of this however within easy reach of the SW; academic research papers or textbooks are not often not accessible to practitioners once leaving university. The absence of clear participatory guidance has created opportunities for SWs and PWs to practice as they so choose; this is evident within the narrative from the SW interviews, and the

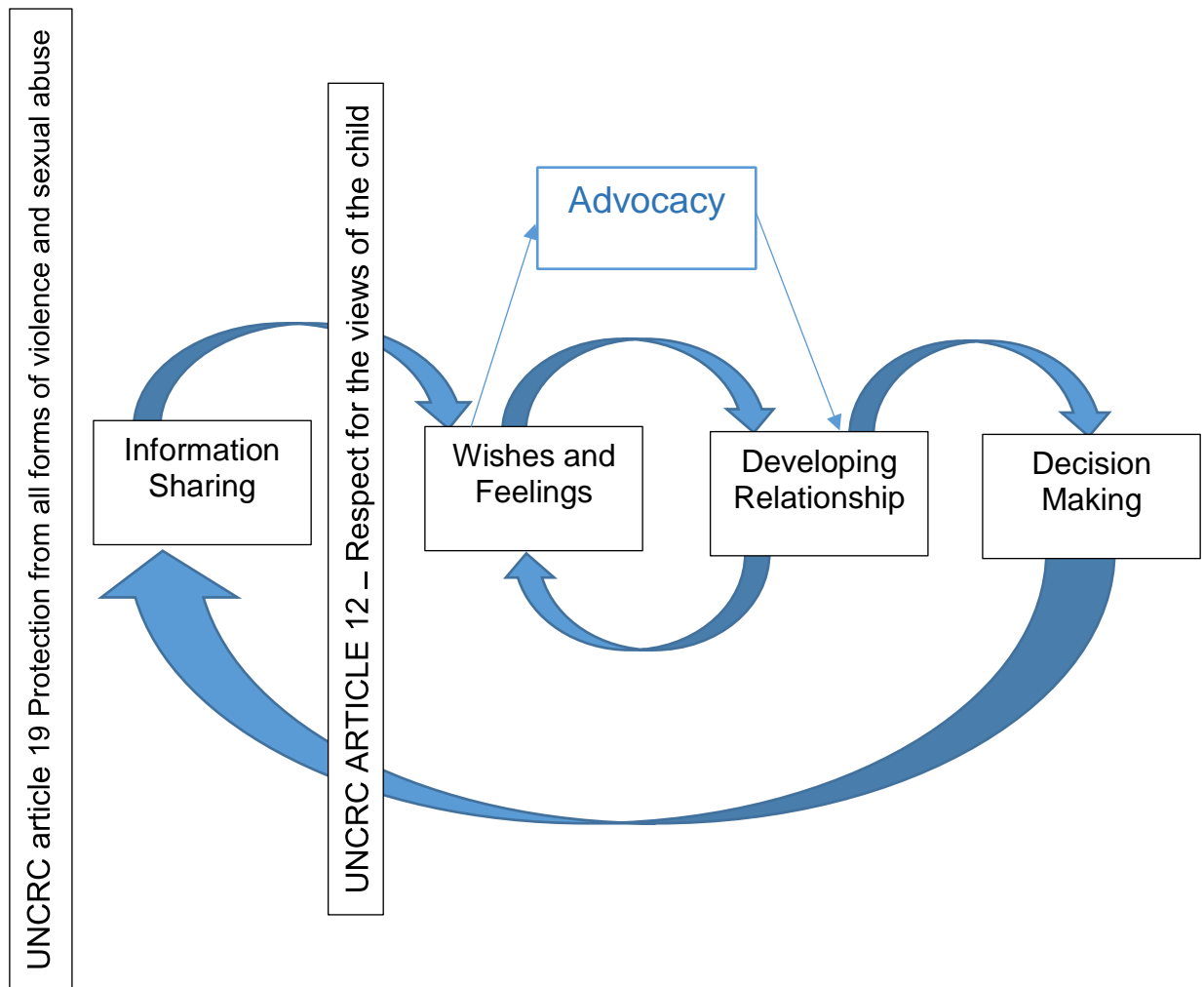
decision made (for example) by the PWs to read confidential case notes (without family knowledge or consent) prior to their visit. Each practitioner is practicing participation differently; this, combined with the differing CP models used by different LAs, emphasizes that every child on CP is having a different (rather than tailor-made or unique) experience.

10.2 A new way of thinking; 'revolutionizing' participation in CP

The most prominent theoretical framework for youth participation, constructed by Hart (1992: see figure 3.2), identifies eight hierarchical ladder-rungs that a child must climb in order to achieve the highest level of participation. In later years, Treseder (1997) flattened the ladder's hierarchies and Franklin (1997) changed the order of participatory goals. In 2001, Shier's hierarchical participatory framework identified the minimum and optimum levels of child participation, along with indicating the point at which the UNCRC (1989) is endorsed, however "the rhetoric of participation does not sit easily within statutory CP services, particularly when the child is an involuntary high-risk client" (Dillon et al 2016:75). SWs find it difficult to upwardly progress a child beyond level three of Shier's (2001) Pathway to Participation (see page 48) due to the identified level of risk towards the child and the reliance on adults in the safeguarding process. Whilst the voice of the child is routinely recorded in CP child and family assessments, the safety and welfare of the child remains paramount and often cannot be given due weight in decision-making. The linear models of Hart (1992) and Shier (2001) are therefore focused on collective, public decision-making, rather than decision-making in individual children's lives (Thomas 2007).

The findings from both Phase One and Two of this research include many examples of innovative social work practice. There remains, however, inconsistencies regarding age appropriate information sharing, child friendly CP documents and a child's presence in decision-making forums. The use of 'independent' advocates, and their accessibility to all children on CP plans contrasted within participating LAs; the children in LA1 were cherry-picked for advocacy, whilst LA2 offered advocacy for all. These inconsistencies, or voids, in participation in CP proceedings need to be filled, or rather 'joined up'. The consistent repetition, or revolutions, of meaningful participatory practice add weight to the capital, commonalities and connections held by the child, thus creating a continuous loop of both communication and action. Participation in CP social work becomes 'revolutionized', as demonstrated in figure 10.1 :

Figure 10.1: 'Revolutionizing' Participation in Child Protection



In Chapter 5.8, I considered a question posed by Thomas (2007): 'Is this model suitable for the child, or does it meet an external agenda?' Following the discussion and analysis of children's experiences of participation throughout Chapters 7 and 8, I can unequivocally state that this new practice model is suitable for children. Whilst simple in its nature, it is underpinned by CP and children's rights legislation, and provides direction for good social work practice; it should not be viewed as 'just more paperwork' in what was once a creative and innovative job. Bourdieu (1999) urges social workers to give hope and

confidence, to fight for the oppressed and to fight against administration and bureaucracy; without this fight, the dichotomy between participation and protection continues to widen. With SWs expected to follow the policy directive, the buzzwords of participatory practice must not become “self-mystifying fictions that technocracy uses to give itself a bit of soul” (Bourdieu 1999:190). It is therefore important to finish this thesis with the voice of a child:

They speak to mum...and, also sometimes they give Mummy this plan...and me and Mummy have to follow it. And I don't like following the plans. I just like to follow my dreams!

(Tom, aged 10 years, LA3)

References

Adcock, M. and White, R. (1985) *Good-enough parenting; a framework for assessment* London: British Association for Adoption and Fostering (BAAF)

Aguilar, J.P. and Sen, S. (2009) Comparing Conceptualizations of Social Capital. *Journal of Community Practice*, 17 (4), 424-443.

Aldridge, J. (2015) *Participatory research: Working with vulnerable groups in research and practice*. Bristol: Policy Press.

Aldridge, L. (2013) *Involved by Right; Improving Participation for children and young people in Child Protection Conferences*. Daphne: Royal Borough of Kensington and Chelsea.

Alfandari, R. (2015) Evaluation of a national reform in the israeli child protection practice designed to improve children's participation in decision making. *Child & Family Social Work*, 1-9.

Appleton, J.V., Terlektsi, E. and Coombes, L. (2015) Implementing the Strengthening Families Approach to Child Protection Conferences. *British Journal of Social Work*, 45 (5), 1395-1414.

Arbeiter, E. and Toros, K. (2017) Participatory discourse: Engagement in the context of child protection assessment practices from the perspectives of child protection workers, parents and children. *Children and Youth Services Review*, 74, 17-27.

Archard, D. and Skivenes, M. (2009) Hearing the child. *Child & Family Social Work*, 14 (4), 391-399.

Arnstein, S.R. (1969) A Ladder Of Citizen Participation. *Journal of the American Institute of Planners*, 35 (4), 216-224.

Bagdasaryan, S. (2012) Social work education and Title IV-E program participation as predictors of entry-level knowledge among public child welfare workers. *Children and Youth Services Review*, 34 (9), 1590-1597.

Bailey, S., Thoburn, J. and Timms, J. (2011) Your shout too! Children's views of the arrangements made and services provided when courts adjudicate in private law disputes. *Journal of Social Welfare & Family Law*, 33 (2), 123.

Balsells, M.Á., Fuentes-Peláez, N. and Pastor, C. (2017) Listening to the voices of children in decision-making: A challenge for the child protection system in Spain. *Children and Youth Services Review*, 79, 418-425.

Barnes, V. (2012) Social work and advocacy with young people: rights and care in practice. *British Journal of Social Work*, 42 (7), 1275-1292.

BASWTalk (2018) *Protecting Children: A Social Model* [online], Available at <https://soundcloud.com/basw/podcast-ep4> [Accessed: 10/04/19]

Beckett, C., McKeigue, B. and Taylor, H. (2007) Coming to conclusions: social workers' perceptions of the decision-making process in care proceedings. *Child & Family Social Work*, 12 (1), 54-63.

Begg, I. (2004) Participation rights in Norway. In: Crimmens, D. and West, A. (ed.) *Having their say: young people and participation : European experiences*. Lyme Regis: Lyme Regis : Russell House.

Bell, M. (1999a) *Child protection: families and the conference process*. Aldershot: Ashgate.

Bell, M. (1999b) Working in partnership in child protection: the conflicts. *British Journal of Social Work*, 29 (3), 437.

Bell, M. (2002) Promoting children's rights through the use of relationship. *Child & Family Social Work*, 7 (1), 1.

Bell, M. and Wilson, K. (2006) *Research note: Children's Views of Family Group Conferences*. Oxford: Oxford University Press: 671.

Berrick, J., Dickens, J., Poso, T. and Skivenes, M. (2017) Parents' involvement in care order decisions: a cross-country study of front-line practice. *Child Fam. Soc. Work*, 22 (2), 626-637.

Berrick, J., Dickens, J., Pösö, T. and Skivenes, M. (2015) Children's involvement in care order decision-making: A cross-country analysis. *Child Abuse & Neglect*, 49, 128-141.

Bessell, S. (2011) Participation in decision-making in out-of-home care in Australia: What do young people say? *Children and Youth Services Review*, 33, 496-501.

Bouma, H., López, M., Knorth, E.J. and Grietens, H. (2018) Meaningful participation for children in the Dutch child protection system: A critical analysis of relevant provisions in policy documents. *Child Abuse & Neglect*, 79, 279-292.

Bourdieu, P. (1989) *Social Space and Symbolic Power*. Blackwell Publishers

Bourdieu, P. (1990a) *In other words : essays towards a reflexive sociology*. Polity Press.

Bourdieu, P. (1990b) *The Logic of Practice*. Cambridge: Polity Press.

Bourdieu, P. (1991) *The Political Ontology of Martin Heidegger*. Cambridge: Polity Press.

Bourdieu, P. (1998) *Practical reason : on the theory of action*. Polity Press.

Bourdieu, P. (1999) *The Weight of the World : social suffering in contemporary society*. Polity Press.

Bourdieu, P. and Wacquant, L.J.D. (1992) *An invitation to reflexive sociology*. Chicago ; London : University of Chicago Press.

Boyatzis, R.E. (1998) *Transforming qualitative information : thematic analysis and code development*. London: Sage Publications.

Boylan, J. and Braye, S. (2007) Paid, Professionalised and Proceduralised: Can Legal and Policy Frameworks for Child Advocacy Give Voice to Children and Young People? *Journal of Social Welfare and Family Law*, 28 (3-4), 233-249.

Braun, V. and Clarke, V. (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2), 77-101.

Braun, V. and Clarke, V. (2013) *Successful Qualitative Research*. London: Sage.

British Association of Social Workers (BASW), *Code of Ethics* [online] <https://www.basw.co.uk/about-basw/code-ethics> [Accessed 12/10/2018]

Bruce, M. (2014) The Voice of the Child in Child Protection: Whose Voice? *Social Sciences*, 3 (3), 514-526.

Buckley, H., Carr, N. and Whelan, S. (2011) 'Like walking on eggshells': service user views and expectations of the child protection system.(Report). *Child & Family Social Work*, 16 (1), 101.

Butler, P. (2017) Children's social care services 'set to reach breaking point'. *The Guardian* [online], Available at: <https://www.theguardian.com/society/2017/may/11/childrens-social-care-services-set-to-reach-breaking-point> [Accessed 15/05/19]

Bywaters, P., Brady, G., Sparks, T., Bos, E., Bunting, L., Daniel, B., Featherstone, B., Morris, K. and Scourfield, J. (2015) Exploring inequities in child welfare and child protection services: Explaining the 'inverse intervention law'. *Children and Youth Services Review*, 57 (C), 98-105.

Cabiati, E. (2017) What would you learn to improve your work in child protection? Social workers' continuing education requests. *Social Work Education*, 36 (3), 257-272.

Campbell, L. (1997) Family involvement in decision making in child protection and care: four types of case conference. *Child & Family Social Work*, 2 (1), 1-11.

Cashmore, J. (2002) Promoting the participation of children and young people in care. *Child Abuse and Neglect* 26, 837-847.

Charles, V. (2017) *Child 11*. Manchester Local Children's Safeguarding Board.

Cho, Y.J. and Song, H.J. (2017) Determinants of Turnover Intention of Social Workers. *Public Personnel Management*, 46 (1), 41-65.

Choate, P.W. and Engstrom, S. (2014) The "Good Enough" Parent: Implications for Child Protection. *Child Care in Practice*, 1-15.

Christensen, P. and James, A. (2008) *Research with Children: perspectives and practices*. London New York: Routledge, Taylor and Francis Group.

CIPFA (Chartered Institute of Public Finance and Accountancy) (2011) *Smart cuts? Public Spending on Children's Social Care* London: NSPCC.

Collier, D. and Mahoney, J. (1996) Insights and Pitfalls: selection bias in qualitative research. *World Politics*, Vol. 49, No. 1 (Oct 1996), pp. 56-91 Cambridge University Press.

Collings, S. and Davies, L. (2008) 'For the sake of the children: making sense of children and childhood in the context of child protection. *Journal of Social Work Practice*, 22 (2), 181-193.

Collings, S.G., R. Llewellyn, G. (2016) Negotiating with Gatekeepers in Research with Disadvantaged Children: A Case Study of Children of Mothers with Intellectual Disability. 30, 499-509.

Collins, T.M. (2017) A child's right to participate: Implications for international child protection. *The International Journal of Human Rights*, 21 (1), 14-46.

Collyer, F.M., Willis, K.F. and Lewis, S. (2017) Gatekeepers in the healthcare sector: Knowledge and Bourdieu's concept of field. *Social Science & Medicine*, 186, 96-103.

Commins, S. (2016) Restorative Justice Practice: Rejection or Reflection of Social Work Values? *Irish Probation Journal*, 13, 194-207.

- Connolly, M. and Masson, J. (2014) Private and public voices: Does family group conferencing privilege the voice of children and families in child welfare? *Journal of Social Welfare and Family Law*, 36 (4), 403-414.
- Cossar, J., Brandon, M. and Jordan, P. (2016) 'You've got to trust her and she's got to trust you': children's views on participation in the child protection system. *Child & Family Social Work*, 21 (1), 103-112.
- Coyne, I. and Harder, M. (2011) Children's participation in decision-making: Balancing protection with shared decision-making using a situational perspective. *Journal of Child Health Care*, 15 (4), 312-319.
- Curtis, L., Moriarty, J. and Netten, A. (2010) *The Expected Working Life of a Social Worker*. Oxford University Press: 1628.
- Darlington, Y., Healy, K. and Feeney, J.A. (2010) Challenges in implementing participatory practice in child protection: A contingency approach. *Children and Youth Services Review*, 32, 1020-1027.
- Davidson, G., Bunting, L., Bywaters, P., Featherstone, B. and McCartan, C. (2017) Child Welfare as Justice: Why Are We Not Effectively Addressing Inequalities? *British Journal of Social Work*, 47 (6), 1641-1651.
- Department for Education (2012) *An Action Plan for Adoption: tackling delay*. London: Crown.
- Department for Education (2015) *Working Together to Safeguard Children*. London: HMSO.
- Department for Education (ed.) (2016) *Children's Social Work Workforce in England 2016*. London: Crown.
- Department for Education (2017) *Evaluation of the Safeguarding Children Assessment and Analysis Framework*. London: Crown.
- Department for Education (2018) *Working Together to Safeguard Children*. London: HMSO.

Department for Education and Skills (2004) *Providing advocacy services for children and young people*. London: Crown.

Department for Health (2005) *Research governance framework for health and social care; second edition*. Department for Health and Social Care, London.

Dickens, J., Masson, J., Young, J. and Bader, K. (2015) The paradox of parental participation and legal representation in 'edge of care' meetings. *Child & Family Social Work*, 20 (3), 267-276.

Dillon, J., Greenop, D. and Hills, M. (2016) Participation in child protection: A small-scale qualitative study. *Qualitative Social Work*, 15 (1), 70-85.

Donovan, J., Rose, D. and Connolly, M. (2017) A Crisis of Identity: Social Work Theorising at a Time of Change. *British Journal of Social Work*, 47 (8), 2291-2307.

Doughty, J. (2016) More judicial guidance for local authorities in care proceedings. *Journal of Social Welfare and Family Law*, 38 (2), 202-204.

Dumbrill, G. (2006) Parental experience of child protection intervention: A qualitative study. *Child Abuse and Neglect* 30 (1), 27-37.

Dumbrill, G.C. (2010) Power and Child Protection: The Need for a Child Welfare Service Users' Union or Association. *Australian Social Work*, 63 (2), 194-206.

Emirbayer, M. and Williams, Eva M. (2005) *Bourdieu and Social Work*. The University of Chicago Press: 689.

Enosh, G. and Ben-Ari, A. (2016) Reflexivity: The creation of liminal space researchers, participants, and research encounters. *Qualitative Health Research*, 26 (4), 578-584.

Featherstone, B., Gupta, A., Morris, K. and White, S. (2018) *Protecting children : a social model*. Bristol : Policy Press.

Feldman, G., Strier, R. and Schmid, H. (2016) The Performative Magic of Advocacy Organisations: The Redistribution of Symbolic Capital. *British Journal of Social Work*, 46 (6), 1759-1775.

Ferguson, H. (2010) Walks, Home Visits and Atmospheres: Risk and the Everyday Practices and Mobilities of Social Work and Child Protection. *British Journal of Social Work*, 40 (4), 1100-1117.

Ferguson, H. (2016) What social workers do in performing child protection work: evidence from research into face_to_face practice. *Child & Family Social Work*, 21 (3), 283-294.

Ferguson, H. (2017) How Children Become Invisible in Child Protection Work: Findings from Research into Day-to-Day Social Work Practice. *British Journal of Social Work*, 47 (4), 1007-1023.

Finlay, L. (2002) Negotiating the swamp: the opportunity and challenge of reflexivity in research practice. *Qualitative Research*, 2 (2), 209-230.

Flemmen, M. (2013) Putting Bourdieu to work for class analysis: reflections on some recent contributions. *British Journal of Sociology*, 64 (2), 325-343.

Flick, U. (2014) *An Introduction to Qualitative Research*. London: Sage.

Forrester, D., Westlake, D. and Glynn, G. (2012) Parental resistance and social worker skills: towards a theory of motivational social work. *Child & Family Social Work*, 17 (2), 118-129.

Fowler, B. (2004) Mapping the obituary: Notes towards a Bourdieusian interpretation. *Sociological Review*, 52, 148-171.

Fram, M. (2004) Research for Progressive Change: Bourdieu and Social Work. *Social Service Review*, 78 (4), 553-576.

France, A. and Haddon, E. (2014) Exploring the Epistemological Fallacy: Subjectivity and Class in the Lives of Young People. 22, 305-321.

Franklin, A. and Sloper, P. (2005) Listening and Responding - Children's Participation in Health Care within England [article]. *The International Journal of Children's Rights*, 13, 11-29.

Franklin, B. (1997) The ladder of participation in matters concerning children. In: Boyden, J. and Ennew, J. (ed.) *Children in Focus: a manual for participatory research with children*. Stockholm: Grafisk Press.

Garrett, P.M. (2007a) Making social work more Bourdieusian: why the social professions should critically engage with the work of Pierre Bourdieu. *European Journal of Social Work*, 10 (2), 225-243.

Garrett, P.M. (2007b) The Relevance of Bourdieu for Social Work. *Journal of Social Work*, 7 (3), 355-379.

Gibson, M. (2015) Shame and guilt in child protection social work: new interpretations and opportunities for practice. *Child & Family Social Work*, 20 (3), 333-343.

Green, J. and Thorogood, N. (2009) *Qualitative methods for health research (second ed)*. Thousand Oaks CA: Sage.

Greene, S. and Hogan, D. (2005) *Researching children's experience : methods and approaches*. London : Sage, 2005.

Greig, A., Taylor, J. and MacKay, T. (2013) *Doing research with children : a practical guide*. Los Angeles; London: SAGE

Gupta, A., Burhardt, H. and ATD4th World (2016) In the Lion's Den: Families' experiences of social work practice in a risk-averse child protection system. *Families, Relationships and Societies*, Volume 5, Issue 1, Pages 153-172.

Haringey Local Safeguarding Children Board, (2009) *Serious Case Review: Baby Peter* [online], Available at: http://www.haringeylscb.org/sites/haringeylscb/files/executive_summary_peter_final.pdf [Accessed 14/3/2018]

Hart, R. (1992) *Children's Participation: From tokenism to citizenship*. Florence: UNICEF International Child Development Centre.

Healy, K. (1998) *Participation and Child Protection: The Importance of Context*. OXFORD UNIVERSITY PRESS: 897.

Healy, K. and Darlington, Y. (2009) Service user participation in diverse child protection contexts: principles for practice. *Child & Family Social Work*, 14 (4), 420-430.

Healy, K., Darlington, Y. and Yellowlees, J. (2012) Family participation in child protection practice: An observational study of family group meetings. *Child & Family Social Work*, 17 (1), 1-12.

Healy, K., Harrison, G., Venables, J. and Bosly, F. (2016) Collaborating with families in differential responses: practitioners' views. *Child & Family Social Work*, 21 (3), 328-338.

Hester, M. (2011) The Three Planet Model: Towards an understanding of contradictions in approaches to women and children's safety in contexts of domestic violence. *British Journal of Social Work*, 41, 837-853.

Hill, M. (2005) Ethical Considerations in Researching Children's Experiences in: Greene, S. a. H., D (ed.) *Researching children's experience*. 2nd edition ed. London: Sage.

HM Government (1970) *Local Authority Social Services Act*. Crown.

HM Government (1989) *Children Act*. London: HMSO.

HM Government (1998) *Data Protection Act*. London: HMSO.

HM Government (2003) *Every Child Matters*. London: Crown.

HM Government (2004) *Children Act*. London: HMSO.

- HM Government (2014) *Children and Families Act*. London: Crown.
- HM Government (2017) *Children and Social Work Act*. London: Crown.
- Holland, S. (2001) *Representing children in child protection assessments*. London: Sage.
- Hood, A. and Waters, T. (2017) *Living standards, poverty and inequality in the UK: 2017-2018 to 2020-2021* London: The Institute for Fiscal Studies
- Houston, S. (2002) Reflecting on Habitus, Field and Capital. *Journal of Social Work*, 2 (2), 149-167.
- Houston, S. (2010) Further Reflections on Habermas's Contribution to Discourse in Child Protection: An Examination of Power in Social Life. *British Journal of Social Work*, 40 (6), 1736-1753.
- Jackson, S., Kelly, L. and Leslie, B. (2017) Parental Participation in Statutory Child Protection Intervention in Scotland. *British Journal of Social Work*, 47 (5), 1445-1463.
- Jelicic, H., Gibb, J. and La Valle, I. (2012) *Involved By Right: the Voice of the Child in Child Protection Conferences*. London: National Children's Bureau.
- Jitendra, A., Thorogood, E. and Hadfield-Spoor, M. (2017) *Early warnings; universal credit and foodbanks*. London: Trussel Trust.
- Keddell, E. (2014) Theorising the signs of safety approach to child protection social work: Positioning, codes and power. *Children and Youth Services Review*, 47, 70-77.
- Kennan, D., Brady, B. and Forkan, C. (2018) Supporting children's participation in decision making: A systematic literature review exploring the effectiveness of participatory processes. *British Journal of Social Work*, 0, 118.

Križ, K. and Roundtree-Swain, D. (2017) We are merchandise on a conveyer belt: How young adults in the public child protection system perceive their participation in decisions about their care. *Children and Youth Services Review*, 78, 32-40.

Laming (2003) *The Victoria Climbié Inquiry*. London: HM Government.

Lansdown, G. (1995) *Taking Part: Children's Participation in Decision Making*. London: Institute for Public Policy Research.

Lévi-Strauss, C. (1978) *Myth and meaning*. Buffalo, New York: University of Toronto Press.

Lord, B. (1992) Case conference and decision making in child protection. In: Calvert, G., Ford, A. and Parkinson, P. (ed.) *The Practice of Child Protection: Australian Approaches*. Sydney: Hale and Iremonger.

Marshall, K. (1997) *Children's rights in the balance: the participation - protection debate*. Edinburgh: Stationery Office Books.

Mateos, A., Vaquero, E., Balsells, M.A. and Ponce, C. (2017) 'They didn't tell me anything; they just sent me home': children's participation in the return home. *Child & Family Social Work*, 22 (2), 871-880.

McCafferty, P. (2017) Implementing Article 12 of the United Nations Convention on the Rights of the Child in Child Protection Decision-Making: A Critical Analysis of the Challenges and Opportunities for Social Work. *Child Care in Practice*, 23 (4), 327-341.

McGhee, J. and Waterhouse, L. (2017) The Lady and the Pram: Women in Child Protection. *British Journal of Social Work*, 47 (6), 1652-1668.

McLaughlin, K. (2007) Regulation and Risk in Social Work: The General Social Care Council and the Social Care Register in Context. *The British Journal of Social Work*, 37 (7), 1263-1277.

McLeod, A. (2010) *'A Friend and an Equal': Do Young People in Care Seek the Impossible from their Social Workers?* : Oxford University Press: 772.

Morgan, D.L. (1997) *Qualitative Research Methods: Focus groups as qualitative research*. Thousand Oaks, CA: SAGE Publications, Inc.

Muench, K., Diaz, C. and Wright, R. (2016) Children and Parent Participation in Child Protection Conferences: A Study in One English Local Authority. *Child Care in Practice*, 1-15.

Muir, M. (2017) *Serious case review: Child B*. Staffordshire: Staffordshire Safeguarding Children Board.

Munro, E. (1996) Avoidable and unavoidable mistakes in child protection work. *British Journal of Social Work*, 26 (6), 793.

Munro, E. (2001) Empowering looked-after children. *Child & Family Social Work*, 6 (2), 129-137.

Munro, E. (2011) *The Munro review of child protection: a child-centred system*. Education, D. f. London: The Stationery Office Ltd.

New Economy (2015) The English Indices of Deprivation 2015: Results for the North West October 2015 [online]

<http://www.neweconomymanchester.com/media/1570/the-english-indices-of-deprivation-2015-results-for-the-north-west.pdf> [accessed 8/4/19].

New South Wales (1998) *Children and Young Persons (Care and Protection) Act no: 157*.

Ney, T., Stoltz, J.A. and Maloney, M. (2013) Voice, power and discourse: Experiences of participants in family group conferences in the context of child protection. *Journal of Social Work*, 13 (2), 184-202.

Nowell, L.S., Norris, J.M., White, D.E. and Moules, N.J. (2017) Thematic Analysis: Striving to Meet the Trustworthiness Criteria. *International Journal of Qualitative Methods*, 16 (1).

NSPCC. (2017) *Serious Case Review No: 2017/C6864* [online video] Available at <https://learning.nspcc.org.uk/case-reviews/recently-published-case-reviews/> [accessed 14/03/2018]

O'Kane, C. (2008) The Development of Participatory Techniques. In: Christensen, P. and James, A. (ed.) *Research with Children*. London: Routledge, Taylor & Francis Group Third edition.

O'Mahony, C., Parkes, A., Burns, K. and Shore, C. (2016) Representation and participation in child care proceedings: what about the voice of the parents? *Journal of Social Welfare and Family Law*, 1-21.

Office for Standards in Education (2008) *Learning Lessons, Taking Action: Ofsted's Evaluation of Serious Case Reviews 1 April 2007 - 31 March 2008*. London: Ofsted.

Office for Standards in Education (2011) *The voice of the child; learning lessons from serious case reviews*. London: Ofsted.

Office for Standards in Education (2018) *Framework, evaluation criteria and inspector guidance for the inspection of local authority children's services*. Online: HM Government.

Parkinson, P. (2001) The child participation principle in child protection law in New South Wales. *The International Journal of Children's Rights*, 9 (3), 259-272.

Parton, N. (2014) *The Politics of Child Protection: Contemporary Developments and Future Directions*. Red Globe Press.

Pert, H., Diaz, C. and Thomas, N. (2017) Children's participation in LAC reviews: a study in one English local authority. *Child & Family Social Work*, 22, 1-10.

Pillow, W.S. (2003) Confession, catharsis, or cure? Rethinking the uses of reflexivity as methodological power in qualitative research. *International Journal of Qualitative Studies in Education*, 16 (2), 175-196.

Pinkney, S. (2011) Participation and Emotions: Troubling Encounters Between Children and Social Welfare Professionals. *Children & Society*, 25 (1), 37-46.

Pölkki, P., Vornanen, R., Pursiainen, M. and Riikonen, M. (2012) Children's Participation in Childprotection Processes as Experienced by Foster Children and Social Workers. *Child Care in Practice*, 18 (2), 107-125.

Probst, B. (2015) The Eye Regards Itself: Benefits and Challenges of Reflexivity in Qualitative Social Work Research. *Social Work Research*, 39 (1), 37-48.

Richards-Schuster, K. and Pritzker, S. (2015) Strengthening youth participation in civic engagement: Applying the Convention on the Rights of the Child to social work practice. *Children and Youth Services Review*, 57 (C), 90-97.

Roche, J. (1995) Children's rights: in the name of the child. *Journal of Social Welfare and Family Law*, 17 (3), 281–300.

Rogers, M. (2013) *Daniel Pelka Serious Case Review*. Coventry: LSCB.

Sæbjørnsen, S.E.N. and Willumsen, E. (2015) Service user participation in interprofessional teams in child welfare in Norway: Vulnerable adolescents' perceptions. *Child and Family Social Work*, 1-11.

Sanders, R. and Mace, S. (2006) Agency policy and the participation of children and young people in the child protection process. *Child Abuse Review*, 15 (2), 89-109.

Schofield, G. and Thoburn, J. (1996) *Child Protection: the Voice of the Child in Decision Making*. London: Institute for Public Policy Research.

Seim, S. and Slettebø, T. (2011) Collective participation in child protection services: partnership or tokenism? *European Journal of Social Work*, 14 (4), 497-512.

Sewpaul, V., Matthias, C. and Cheney, K.E. (2013) Killing them softly? Using children's rights to empower Africa's orphans and vulnerable children. *International Social Work*, 56 (1), 92-102.

Sharkey, K., Savulescu, J., Aranda, S. and Schofield, P. (2010) Clinician gatekeeping in clinical research is not ethically defensible: an analysis. *Journal of Medical Ethics*, 36 (6), 363.

Shemmings, D. (1996) *Involving children in child protection conferences*. Norwich: UEA Monographs.

Shemmings, D. (2000) Professionals' attitudes to children's participation in decision-making: dichotomous accounts and doctrinal contests. *Child & Family Social Work*, 5 (3), 235-243.

Shennan, G. and Unwin, P. (2017) *Social workers, service users and austerity - a common cause*. Online: BASW. 2017.

Shier, H. (2001) Pathways to participation: openings, opportunities and obligations. *Children & Society*, 15 (2), 107-117.

Sinclair, R. (1998) Involving Children in Planning their Care. *Child & Family Social Work*, 3 (2), 137-142.

Slettebø, T. (2013) Partnership with parents of children in care: A study of collective user participation in child protection services. *British Journal of Social Work*, 43 (3), 579-595.

Smith, M., Cree, V.E., MacRae, R., Sharp, D., Wallace, E. and O'Halloran, S. (2017) Social Suffering: Changing Organisational Culture in Children and Families Social Work through Critical Reflection Groups—Insights from Bourdieu. *British Journal of Social Work*, 47 (4), 973-988.

Stevenson, L. (2018) 49% of ASYE social workers promised a protected caseload don't have one, a survey finds *Community Care* [online], Available at: <http://www.communitycare.co.uk/2018/06/13/49-of-asye-social-workers-promised-a-protected-caseload-dont-have-one-survey-finds/> [Accessed: 08/08/18]

The Conservative and Unionist Party (2015) *Strong Leadership, a clear economic plan, a brighter more secure future*. London: St Ives PLC.

Thomas, N. (2007) Towards a Theory of Children's Participation. *The International Journal of Children's Rights*, 15 (2), 199-218.

Thomas, N., Crowley, A., Moxon, D., Ridley, J., Street, C. and Joshi, P. (2017) Independent Advocacy for Children and Young People: Developing an Outcomes Framework. *Children & Society*, 31 (5), 365-377.

Timms, J.E. and Thoburn, J. (2006) Your Shout! Looked After Children's Perspectives on the Children Act 1989. *Journal of Social Welfare & Family Law*, 28 (2), 153-170.

Timpson, E. (2014) Social Care Reforms, London, 11 June 2014 of Conference.

Tobis, D. (2013) *From Pariahs to Partners: How parents and their allies changed New York City's child welfare system*. New York: Oxford University Press.

Topper, K. (2001) Not So Trifling Nuances: Pierre Bourdieu, Symbolic Violence, and the Perversions of Democracy. *Constellations*, 8 (1), 30-56.

Toros, K., Lasala, M.C. and Tiko, A. (2017) Assessment of the developmental needs of children in need: Estonian child protective workers; case reflections. *Child & Family Social Work*, 22 (2), 843-852.

Toros, K., Tiko, A. and Saia, K. (2013) Child-centered approach in the context of the assessment of children in need: Reflections of child protection workers in Estonia. *Children and Youth Services Review*, 35 (6), 1015.

Tregeagle, S. and Mason, J. (2008) Service user experience of participation in child welfare case management. *Child & Family Social Work*, 13 (4), 391-401.

Treseder, P. (1997) *Empowering Children and Young People*. London: Children's Rights Office and Save the Children.

Trinder, L. (1997) Competing constructions of childhood: Children's rights and children's wishes in divorce. *Journal of Social Welfare and Family Law*, 19 (3), 291-305.

Tromp, K. and Vathorst, S.V.D. (2015) Gatekeeping by Professionals in Recruitment of Pediatric Research Participants: Indeed an Undesirable Practice. *The American Journal of Bioethics*, 15 (11), 30-32.

Turnell, A. and Edwards, S. (1999) *Signs of safety : a solution and safety oriented approach to child protection*. New York ; London : W.W. Norton.

Turner, N. and Almack, K. (2016) Recruiting young people to sensitive research: turning the 'wheels within wheels'. *International Journal of Social Research Methodology*, 1-13.

Turney, D. (2012) *Improving child and family assessments : turning research into practice*. London: Jessica Kingsley.

UN General Assembly, (1989) *Convention on the Rights of the Child* [online], http://353ld710iigr2n4po7k4kgvv-wpengine.netdna-ssl.com/wpcontent/uploads/2010/05/UNCRC_PRESS200910web.pdf [Accessed 14/02/2017]

Välba, E., Toros, K. and Tiko, A. (2017) Family engagement within the context of assessment in child protection practice: The case of Estonia. *Child & Family Social Work*, 22 (4), 1506-1514.

van Bijleveld, G.G., Dedding, C.W.M. and Bunders-Aelen, J.F.G. (2015) Children's and young people's participation within child welfare and child protection services: A state-of-the-art review. *Child and Family Social Work*, 20(2), 129-138.

Vis, S.A. and Fossum, S. (2013) Representation of children's views in court hearings about custody and parental visitations — A comparison between what children wanted and what the courts ruled. *Children and Youth Services Review*, 35 (12), 2101-2109.

Vis, S.A., Holtan, A. and Thomas, N. (2012) Obstacles for child participation in care and protection cases-why Norwegian social workers find it difficult. *Child Abuse Review*, 21 (1), 7-23.

Vis, S.A. and Thomas, N. (2009) Beyond talking - children's participation in Norwegian care and protection cases. *European Journal of Social Work*, 12 (2), 155-168.

Wachtel, T. (2016) *Defining Restorative Online*
https://www.iirp.edu/images/pdf/Defining-Restorative_Nov-2016.pdf
https://www.iirp.edu/images/pdf/Defining-Restorative_Nov-2016.pdf
Accessed 12/12/2018.

Waksler, F. (1991) *Studying the Social Worlds of Children: sociological readings*. London: Falmer Press.

Webb, J., Schirato, T. and Danaher, G. (2002) *Understanding Bourdieu*. London : SAGE.

Weld and Greening (2013) Three Houses exercise. In: Bunn, A. (ed.) *Signs of Safety in England: an NSPCC commissioned report on the Signs of Safety model in child protection*. Online.

Westlake, D. and Forrester, D. (2016) Adding Evidence to the Ethics Debate: Investigating Parents' Experiences of Their Participation in Research. *British Journal of Social Work*, 46 (6), 1537.

White, C. and Hardy, J. (2008) *Gatekeeping from palliative care research trials*. Routledge. 16: 167-171.

Wilkins, D. and Whittaker, C. (2017) Doing Child-Protection Social Work with Parents: What Are the Barriers in Practice? *British Journal of Social Work*, 0, 1-17.

Wilkinson, R. and Pickett, K. (2009) *The Spirit Level: why more equal societies almost always do better*. Harmondsworth: Penguin.

Winter, K. (2009) Relationships matter: the problems and prospects for social workers' relationships with young children in care. *Child & Family Social Work*, 14 (4), 450-460.

Winter, K. (2010) The perspectives of young children in care about their circumstances and implications for social work practice. *Child & Family Social Work*, 15 (2), 186-195.

Winter, K. and Cree, V.E. (2016) Social Work Home Visits to Children and Families in the UK: A Foucauldian Perspective. *The British Journal of Social Work*, 46 (5), 1175-1190.

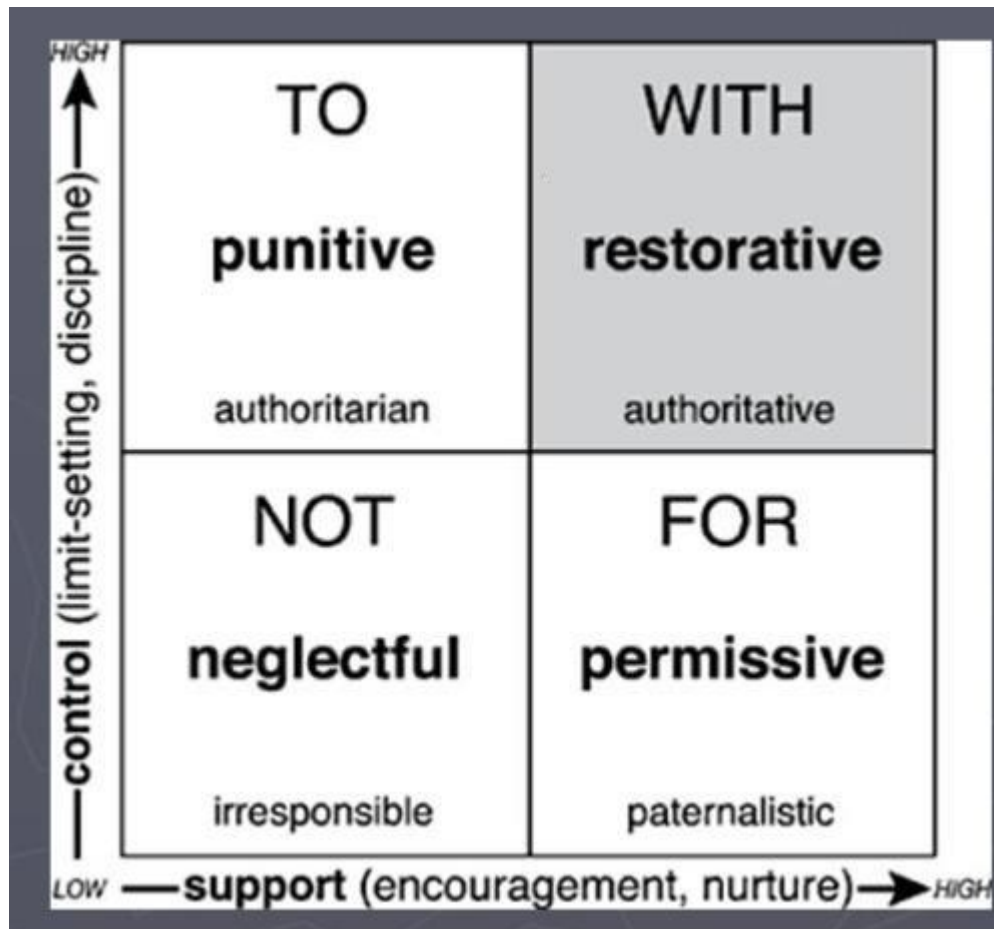
Woodman, E., Roche, S., McArthur, M. and Moore, T. (2018) Child protection practitioners: Including children in decision making. *Child & Family Social Work*, 1-10.

Woolfson, R.C., Heffeman, E., Paul, M. and Brown, M. (2010) *Young People's Views of the Child Protection System in Scotland*. Oxford University Press: 2069.

Young, S., McKenzie, M., Schjelderup, L., Omre, C. and Walker, S. (2014) What Can We Do to Bring the Sparkle Back into This Child's Eyes? Child Rights/Community Development Principles: Key Elements for a StrengthsBased Child Protection Practice. *Child Care in Practice*, 20 (1), 135-152.

Appendices

Appendix 1: The Restorative Model



(Wachtel, 2016)

Appendix 2:

Semi-structured interviews with children - questions

1. Child - child to choose a doll / animal / name card to represent themselves

Tell me about [name]

Who lives with [name]

Who is friends with [name]

Who looks after [name]

Who visits the home to speak to [name]

How easy do you find it when speaking to the adults who visit you at home / school to talk to you?

If you could choose one person who you find the most easiest to speak to whenever you're feeling worried, who would that be?

2. Parents

Shall we choose a doll / animal / name card for your Mum / Dad?

Tell me about your Mum / Dad [child will have said above who lives in the home with them]

What does your Mum / Dad do to take care of you?

What things / activities do you do with Mum / Dad after school and on weekends?

Are there any grown-ups helping your Mum and Dad? Who are they?

3. I know you have a social worker.

Do you know what a social worker does?

Shall we choose a doll / animal / name card for your social worker?

What is your social worker's first name?

What does your social worker do with you? And what else...?

Do you know why you have a social worker?

Do they visit you? Where?

Are you on your own with the SW or are other people there too?

Does the social worker have an office that you go to?

How do you contact your social worker? Do you have their telephone number or email address? Who gave you these contact details?

Have you ever telephoned your SW by yourself? Did they answer?

Have you ever asked your SW to do something and they've been able to help you?

Have you ever asked your SW to do something and they've said no, they can't?

Has anyone ever told you not to speak to your social worker?

Are your parents happy to meet with the social worker?

Are you happy to meet with the social worker? Use scaling question...

Have you had more than one social worker?

4. Do you have an advocate / participation worker? If so:

What is your PW's name?

Shall we choose a doll / animal / name card for your participation worker?

What does your PW do with you?

Do you know why you have a PW?

Where do they visit you?

Does the PW have an office that you go to? - How do you contact your PW?

Do you like speaking to your PW? Use scaling question...

5. Interviewer to place the representations of the SW / parent / child and advocate in a line, on table in front of child

Ask child whether they spend time together as a group. Where? When? What for?

Who is in charge? Child to place a 'token' (likely to be a coloured disc of paper with the words 'in charge' on) in front of the person they feel are in charge.

Explore further. Why does the child feel this way? The same 'token' exercise is to be used for the following questions:

Who speaks the most? What about? When do you speak?

Who listens the most? How do you know they are listening? Who listens to you?

Who makes decisions? What decisions? If the child does not indicate themselves, ask whether they get to make any decisions. - Who writes things down for you to read?

Who would you tell if you were worried about something?

Give child a mixture of cards showing 'emojis' with different emotions. Child to be asked to choose emotions from pack of emojis to describe how they feel when they talk to SW and parents and place these emojis next to the representation of that person. Interviewer to explore these emotions further with the child.

6. Other people – build up picture of Core Group

Which other people are supporting or listening to you?

School teacher?

MOSAIC?

Nurse?

Police officer?

Other?

Get child to personalise the cards and add names and places where the person 'lives'. This will identify whether the child knows where these professionals are located and how to contact them

Use emoji cards to describe how child feels when they talk to these people

Out of the people on the table, who do you think listens to you? You can choose as many cards as you like

Place cards in order – who listens to you most, who listens to you least

7. Gesture to all of the people. Have you been to any meetings where some or all of these people are there too?

If yes, which people were also at the meeting?

Any new people that we need to draw / get figures for that went to the meeting?

Did you know everyone who was at the meeting?

Where was the meeting? Can you describe the room to me and where people were sitting?

Do you get to speak here?

Do people listen to you? How could you tell that people were listening to you?

In the meeting, are you asked to make decisions or choice about what happens to you?

How do you feel when you are at the meeting – use emoji cards with emotions?

Have you ever heard of the words “Family Group Conference”? If so, can you describe to me what this means?

How many meetings do you think you have been to?

Do you like going? Use scaling question....then ask ‘What would make you like it more?’

Do you understand everything that people are saying at the meeting? Use scaling question...

8. Written records:

Has anyone shared with you written details of what your social worker and parents are working on?

Have you ever heard of a child protection plan? If yes, has someone shared any details with you?

Does anyone give you any written work that is prepared just for you, so that you can understand it?

After you have been to a meeting, do people come out and talk to you about what happened? Do they give you any written notes of the meeting to read?

Have you got anything anywhere that has been written down by your social worker and given to you to keep?

Are you given anything to read before going into a case conference?

Appendix 3:

Semi-structured interviews with social workers - questions

1. Knowledge:

How do you interpret 'participation'?

How do you interpret the term "Wishes and Feelings" as stated in Children Act (1989 and 2004)?

How would you incorporate a child's rights in to your assessments?

2. Practice:

Do you see and speak to the child alone? Where would this normally happen?

What methods / activities do you use to ensure that you have listened to the child and how you record and share this?

How does the relationship with the child's parent affect the work you do on behalf of the child?

Do the parents encourage your work or produce obstacles to prevent you seeing and speaking to the child? Any examples of either?

Does the length of involvement with a family enhance / influence your ability to listen to the child?

3. Information sharing:

How do you decide what information is appropriate to share with the child?

How do the child's parents feel about you sharing information with the child?

Would the children you work with know that they were on a CP plan?

If asked, would the child know why they are subject to a CP plan?

Written records - How do you share the conference / core group / CP plan / assessment with the child?

4. Attendance at meetings:

Who decides the venue for core group? And for ICPC? Who decides the layout of the venue?

Who decides the timing of the meeting and is there a usual time for meetings?

Are efforts made to have meetings outside of school hours?

Who decides whether a child will attend ICPC? Core Group? How is this decision made?

Would you or have you overruled the presence of a child at a meeting? Why?

Can you give any examples of when a child attended ICPC? Core group? Who supported child during this time?

Would the child know everyone around the table at Core Group? At ICPC? How can we prepare a child for this?

How do you think the child's presence at a meeting influences the decision making?

In what format do you share the child's voice at CP conference if the child is not present?

5. Power:

Has the child challenged any of your decision-making or shown distress as to the choices made?

Were there opportunities to negotiate these decisions?

In the triad of child, social worker and parent...who has the most and the least power?

How can this power be shared more equally with the child?

With regards to the parent, how do you think their participation is affected due to the stat nature of CP work?

6. Participation Workers:

What is your interpretation of the role of the participation team / worker?

The PW collects the child's views independently, to ensure the child's voice is heard and rights upheld. So...

How does the role of the PW sit alongside your role?

How do you incorporate the work the PW does within your own assessments?

How do you balance the voice of the child (via the PW) with your own 'best interest' assessments?

If a PW is involved, do you still see and speak to the child alone?

In your experience, does the PWs ability to independently collate the child's views enhance detract from your assessment of / work with the child? Can you give examples?

Do children have the right to refuse the input of a PW?

Are you allowed to refuse the involvement of a PW? Under what circumstances would it not be appropriate for a PW to become involved?

Have the child's parents brought an advocate of their own to any meeting / ICPC?

7. Environment:

How long have you been a qualified social worker for?

How much training have you had since qualifying on direct work with children?

Any specific training on Wishes and Feelings / participatory work?

How many children are currently on your caseload?

Do you feel you get enough time to evidence good practice concerning participation?

Appendix 4:

Focus Group with Participation Workers - questions

1. Knowledge:

How would you define the following three words: Participation, wishes and feelings and children's rights?

2. Practice:

What is the role of the Participation Worker?

Do you see and speak to the child alone? Where does this take place?

Hearing the child's voice...are you simply ensuring the voice is heard or do you work in the 'best interests of the child'. Do you simply report verbatim what the child has said?

Can you explain about how you approach your direct work with children and families? What about families / children who are difficult to engage...what strategies do you use to ensure the child's voice is heard?

Do children have the right to refuse the input of a Participation Worker?

How successful is your referral process that is currently in place? Can you tell me about it?

There seems to be a lot of children on CP plans...currently around 237. How do you meet the needs of all these children?

3. ICPC

Do you encourage your child to attend their core group meetings? Their CP conferences? Have they chosen to attend? Who supports the child during this time?

Of the case conferences you attend, what is the rough percentage of conferences where children attend also?

In my research with parents, all have told me that none of their children aged between 8-12 have been invited to case conference, therefore have not attended. Does this surprise you?

In what format do you share the child's voice at CP conference if the child is not present?

How child-friendly are your resources?

How child friendly is the ICPC?

Who decides the venue for core group? And for ICPC? Who decides the layout of the venue?

Who decides the timing of the meeting and is there a usual time for meetings?

Are efforts made to have meetings outside of school hours so that children can attend?

4. Parents:

Have the parents encouraged your approach or produced obstacles to prevent you seeing and speaking to the child? Any examples?

How often do you think a parent influences what a child tells you? Any examples of this?

Is it usual for parents to have their own advocate at case conference, whilst you are supporting their child?

In LA1, you follow a strengthening families approach, through restorative practice which is based on working with families, rather than for families. Have you witnessed this in case conferences, where parents are able to influence / negotiate outcomes?

What about children influencing outcomes?

5. Information sharing:

How do you decide what information is appropriate to share with the child?

How do the child's parents feel with regards to you sharing information with the child?

Would the children you work with know that they were on a CP plan?

If asked, would the child know why they are subject to a CP plan?

6. Written records:

How do you share the conference / core group / CP plan / assessment with the child?

7. Power:

In the core group of child, social worker, participation worker and parent...who has the most power and the least power?

In the relationship between yourselves and the child's social worker, are power dynamics evident?

Tell me about the relationships that you build with the social worker? Good examples? Challenges?

What about your relationship with the parent? I am aware that sometimes your role is to smooth things over when the parent complains that the child has not been listened to?

How can this power be shared more equally with the child?

8. Environment:

What are your backgrounds? What training have you had on direct work with children?

How many children are currently on your participatory caseload?

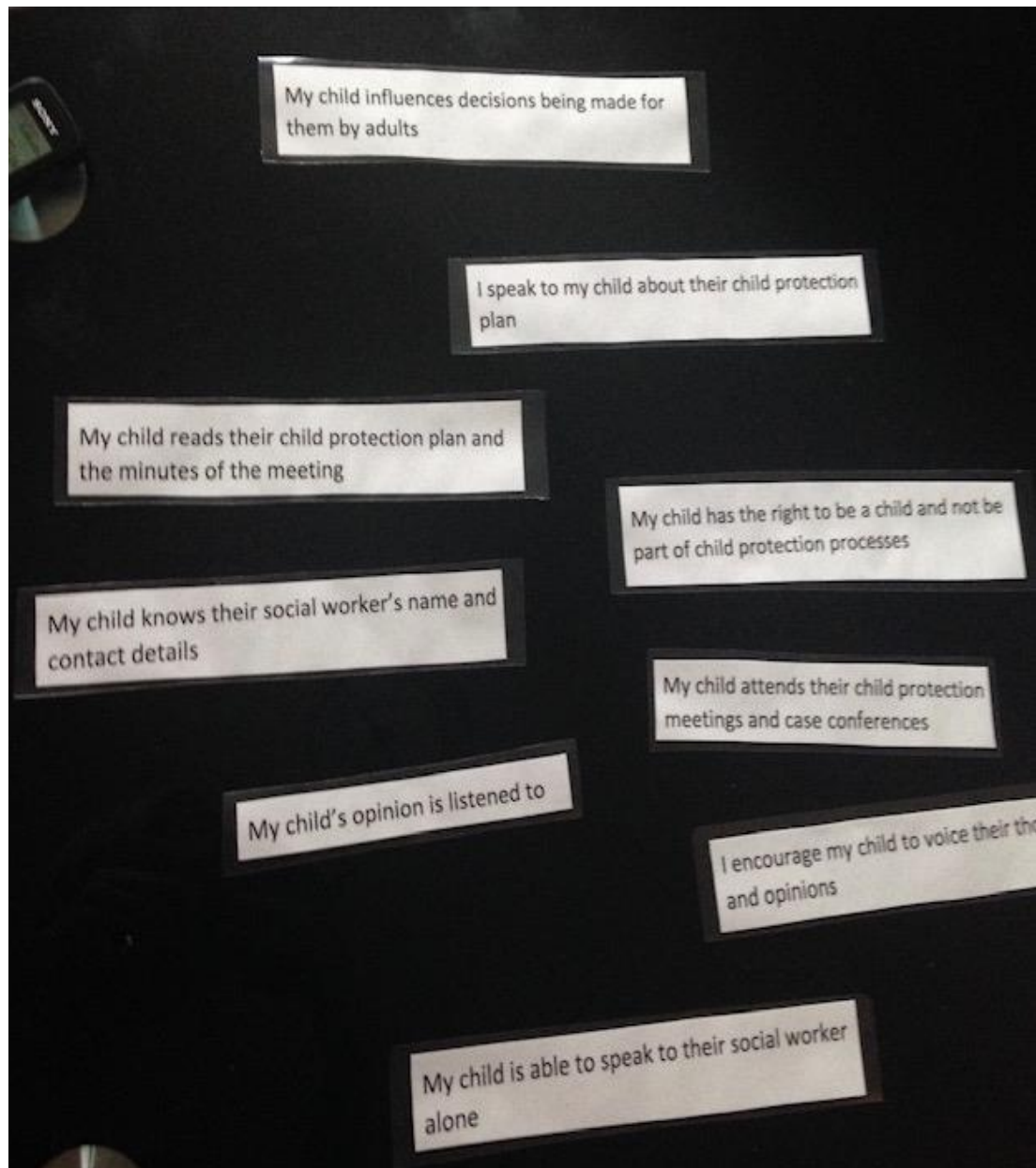
Do you feel that the service to the child is enhanced by the participatory model adopted by your local authority? Benefits? Challenges? Funding?

Ideas for service improvement?

Do you feel that your role is respected by all at case conferences?

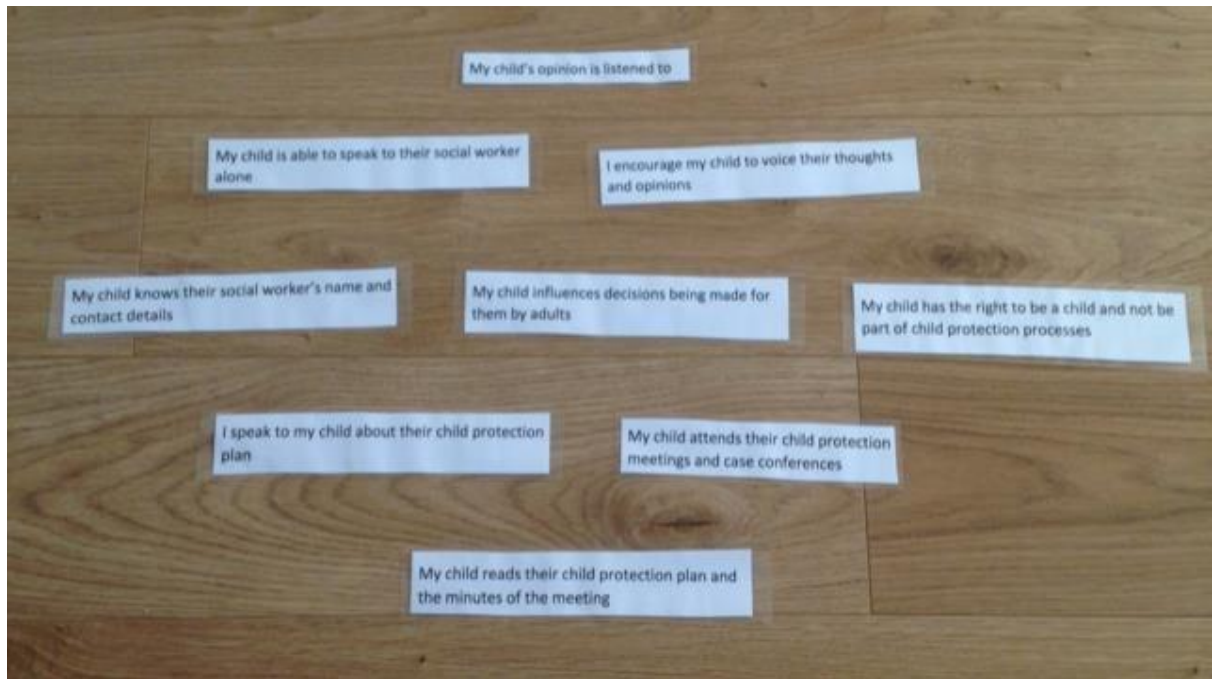
Appendix 5:

Parent4's diamond ranking exercise



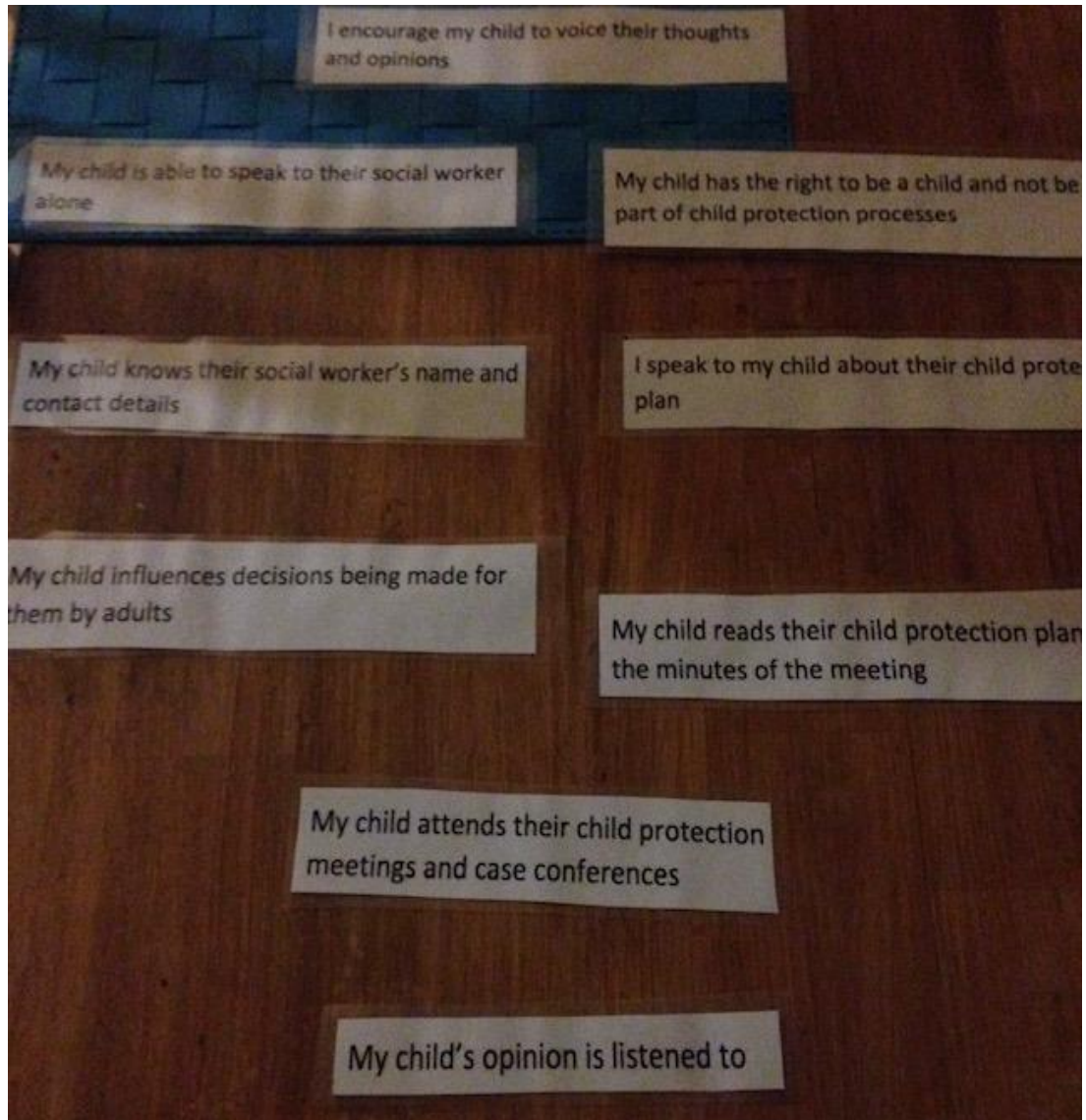
Appendix 6:

Parent2's diamond ranking exercise



Appendix 7:

Parent1's diamond ranking exercise



Appendix 8:

Parent3's diamond ranking exercise

