ORIGINAL ARTICLE

CHILD & FAMILY
SOCIAL WORK WILEY

"Fighting the invisible system": A grounded theory study of the experiences of child protection social workers in England

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Abstract

This article reports on an exploration of social workers' perspectives on the social policy and agency processes that shape their experiences of working in child protection services. A qualitative constructivist grounded theory methodology was employed, and 17 qualified social workers and managers were recruited. Social workers described working within an oppressive system, balancing unrealistic demands placed on them, and struggling to restore balance and hope. They shared how this filtered into the work they do with families and the role that relationality and peer support has in surviving the work.

KEYWORDS
austerity, child protection, children's services, reflexivity, relationality, social work

1 | INTRODUCTION

When the Conservative Liberal Democrat Coalition came to power in 2010 and after the tragic murders of Victoria Climbé[1] and Peter Connelly,[2] the UK government commissioned Professor Munro (2010, 2011a, 2011b) to scrutinize and advise on reducing bureaucratic burdens in children's services. Report recommendations included increasing funding for early help, promotion of multi-agency working, and removal of timescales and prescribed practice. The intent was to reduce focus on following procedures and increase relationship-based practice. However, despite support for the recommendations, severe cuts to public services occurred due to austerity (Smith, 2019), with public services open to tender, delivered largely by private providers. Reduction of public expenditure included cutting 28% of funding for local authorities (LAs) (CIPFA, 2011). It may be unsurprising then that more than 20 years later, Munro's recommendations have not been attained (Featherstone & Gupta, 2018).

The perceived systemic failures in a number of high-profile child protection (CP) cases have legitimized regulation and monitoring of both LAs and workers themselves. Reactive government interventions such as Prime Minister David Cameron's "unequivocal message that professionals who fail to protect children will be held accountable" by criminal prosecution and imprisonment for wilful neglect (Naqvi, 2015, p. 1) embedded a discourse of blame and vilification (Stevenson, 2018). Furthermore, the publication of Serious Case Reviews, while aimed to increase accountability and care, has also introduced unhelpful public biases and a climate of fear, mistrust, and blame (Ayre, 2001). Public scrutiny has been fuelled by media coverage encouraging public moral panic and reinforcing negative perceptions of social work (Ayre, 2001; Edmondson & King, 2016; Jones, 2012). Pressures on social workers may have intensified further recently, after the tragic murders of 16-month-old Star Hobson[3] and 6-year-old Arthur Labinjo-Hughes[4] (Butler, 2021). Reports of social workers being "trolled online and spat at" demonstrate the negative public perception (BBC, 2021).

These developments have been against the backdrop of continuous under-resourcing. Due to the UK government's implementation of an austerity programme in 2010, funding cuts were seen in early

intervention and preventative services for families (Gill et al., 2011; HM Treasury, 2010). Simultaneously, the national increase in financial hardship likely stoked greater demand for CP services. This came in addition to already considerable strain on services at the time, with assessments and registered CP plans on the rise (Brooks et al., 2012). Most recently, the COVID-19 pandemic has drastically changed the environment for workers. There was a significant increase in CP referrals (Romanou & Belton, 2020; Sidpra et al., 2021), while workers experienced a reduction in peer or managerial support. Working virtually meant the role became even more administrative than relationship-based, leading to workers feeling deskilled in direct work (Silman, 2020). Workers reported feeling increasingly overworked, with partner agencies relying on them heavily to conduct face-to-face visits to assess risk, without sharing responsibility (Silman, 2020).

This culture of surveillance and fear has led to processes and practices that shape organizational culture, the actions of social workers, and ultimately the protection of children. A culture of pervasive and disproportionate accountability means practice is continually open to internal and external scrutiny (Whittaker, 2011). Inspection reports adopt a risk-averse stance, with recommendations strongly orienting towards process issues and compliance with standards (Hood et al., 2019).

The supervision of social workers has been found to be overcome with regulatory processes and performance audits (Morrison & Wonnacott, 2010), with an analysis of records highlighting that supervision was utilized for management oversight of practice and social worker accountability (Wilkins, 2017). Bartoli and Kennedy (2015) argue one-to-one supervision has become the vehicle for a dangerous "snoopervision virus" (p. 244), leaving children invisible in the CP process. Systemic shame and humiliation, embedded through administrative regulations, has been found to be an inherent part of practice at microlevels and macrolevels. Shame was reported to be embedded by publicly monitoring and ranking team performance and individually shaming workers to ensure timescales and paperwork were prioritized (Gibson, 2016).

The surveillance of workers' tasks, together with outward accountability, instils "the notion of being under constant scrutiny" (Gibson, 2016, p. 125). Notably, this can alter workers' behaviour towards avoiding blame and shame. Practitioners have been shown to use case notes to engage in defensive practice, a form of pre-emptive exoneration, to protect themselves (Cooper & Whittaker, 2014).

Most worryingly, when investigating parents' experiences of the CP system, the system was described as inherently shaming (Gupta & ATD, 2015); disempowering, judgemental, and inscrutable (Birmingham City Council, 2014); and uncaring, inflexible, and harmful (Smithson & Gibson, 2017). Parents felt that workers prioritized meeting the requirements of the organization (i.e., timescales and meetings). Some felt too scared to turn to children's services for help due to fear of punitive reactions (Gupta et al., 2016; Morris et al., 2015). Social workers report the negative impacts of working in this context, including low job satisfaction and retention (e.g., Antonopoulou et al., 2017; BBC, 2021). Amongst workers, burnout is a frequent complaint (Gibbons et al., 2011; Hussein, 2018; Ravalier & Boichat, 2018).

A picture therefore emerges of a highly bureaucratic, overly regulated, but simultaneously under-resourced system, within a culture of blame and vilification, with indicators of potential negative implications for both the protection of children and for social workers themselves. This aligns with the recent independent review of children's social care, which spoke to the high levels of bureaucracy, lack of resources, and structural issues. A push for a change in the current CP system towards a more child-/family-focussed one was strongly recommended (see MacAlister, 2022). However, what was missing from this review was the voice of CP workers and how they experienced the system they are working in.

When attempting to understand how CP work is experienced by workers, one must consider not only the internal organizational context but also the external structures within which the organization sits, the government, the media, the social policies, and the ways in which these interact. By doing so, research might generate findings that target core aspects of the problem, rather than position blame within singular workers, teams, or organizations. As noted, existing literature highlights the problematic organizational structural processes of CP and the impact this can have on both workers and families. However, by discussing these aspects independently, it becomes difficult to understand the holistic influences of CP and how this impacts workers experiences of the system. The present study intended to address this gap by examining the individual, organizational, and societal mechanisms that shape practice. This involved an in-depth exploration of the perspectives of workers and managers on the frontline, answering the question: What are child protection social workers' perspectives of the social policy and agency processes that shape and influence their work and their experience of their work?

2 | METHODOLOGY

A constructivist grounded theory methodology was utilized for inductive analysis of data generated via in-depth semi-structured interviews. Consultations with social workers and social work managers were utilized when designing the study and constructing the interview schedule and during analysis of the results. To ensure workers' experiences were centred, interviews and analysis did not focus on their competencies, decision-making, or the specifics of cases. Rather, the aim was to coconstruct an account of their experiences focussed on the emotional impact of their work and an understanding of the wider social and agency processes at play. Interview schedules explored areas aligned with Bronfenbrenner (1979) (see Table 1 and Figure 1) and how those areas impacted their work with families.

Ethical approval was granted by University of Hertfordshire Health and Human Sciences Ethics Committee. Informed consent was gained, and all identifying information was anonymized. All participants were given a debrief space and provided with resources for support.

A total of 17 qualified social workers with experience of working within CP services across England, aged 20–65 years old, were recruited via social media, and interviews were conducted over Skype, Zoom, or telephone (see Table 2). Using theoretical sampling (Charmaz, 2014), 11 participants were initially recruited and interviewed, with four further participants recruited to expand and enrich the developing model to research saturation and form an explanatory model (Charmaz, 2014).

TABLE 1 Questions from interview guide exploring social policy and agency processes.

Sample questions from interview guide	
Current children's services context	Q: How do you think the current children's services context impacts on your work? Prompt: Consider policy/practices/ professional autonomy? Q: Do you feel able to be the social worker you hoped to be? How/how not?
Organizational factors (processes, structure, and politics)	Q: Does the context you work in impact the work you do? Q: Do you think how things work in your organization impact your work? Q: How does your organization view your role? Your managers and colleagues from other disciplines?
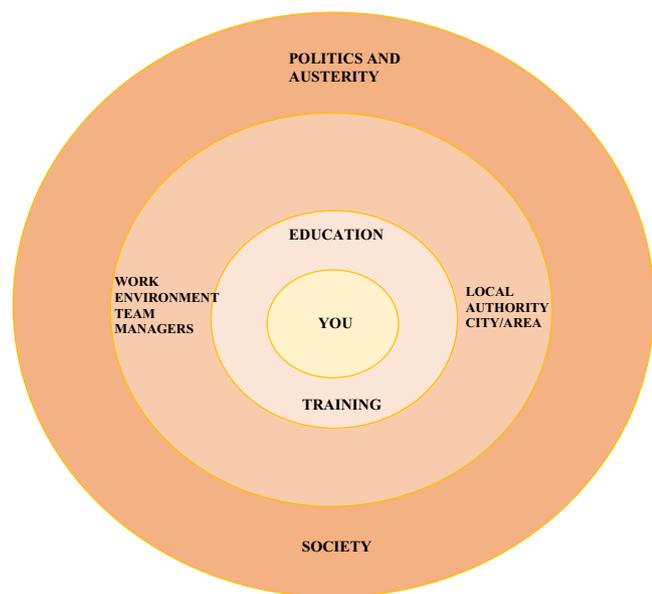
FIGURE 1 Ecological systems model introducing interview.

TABLE 2 Participant demographics.

No. of participants	Role	Years qualified
2	Assisted and supported year of employment	1
6	Social worker	1–5
2	Senior social worker/advanced practitioner	5–18
5	Team manager	5–11
1	Service manager	7
1	Head of service	40

Two final participants were recruited to obtain reflections on the model to enhance trustworthiness of results (Birt et al., 2016), and member checking was conducted through two participants being recontacted to discuss the model, ensuring it aligned with the experiences coconstructed in the interviews (Table 3).

Data analysis followed Charmaz's (2014) steps for constructivist grounded theory, with data collection and analysis occurring in a cyclical process and memoing used to develop the analysis (see Table 4 for overview of results).

3 | RESULTS

3.1 | The grounded theory model

Figure 2 shows the full model. This paper will focus on the first three categories, to allow for a comprehensive exploration of the experiences of workers. The final category focusses on participants' cocreation of practice implications, and this will be explored in depth in a future publication. Practice implications pertaining to the first three themes will be discussed in the discussion. Quotes have been selected that best illustrate each point, with pseudonyms chosen by participants have been used to protect their identity.

3.2 | Category 1: Balancing unrealistic expectations in an oppressive system

Participants identified the system as "oppressive," having to meet impossible demands with fear of retribution. The impact of this filtered down throughout hierarchical roles and onto families they worked with.

3.2.1 | Being controlled by demands

There was an identification of the dissonance between organizational expectations of workers and their capacity to manage bureaucratic demands. Many wished to prioritize time with families. However, the build-up of bureaucratic tasks prevented a deeper engagement with and understanding of families, which led to them questioning how they could sufficiently protect children.

Many workers expressed feeling as though they were being "set up to fail" (Alex, SW) by the expectations placed on them, as "the caseloads are such that people are bound to be burnt out and people just jump authority to authority, and so you can't get the stability, the consistency you need" (James, TM). All interviewees discussed being "trapped" in the processes of CP, the timescales, paperwork, and bureaucratic demands. Fear of punitive repercussions was believed to act as a driver for process-driven work.

These unrealistic expectations were seen to be further embedded by professionals outside of the LA system, who were described to envisage workers/managers as "miracle workers" (Lewis, TM).

TABLE 3 Steps of grounded theory (GT) data analysis.

Steps of GT	What this involved
1. Line-by-line coding	This involved fragmenting the data and coding each segment with a label that intends to capture the essence of what is being expressed.
2. Reviewing codes	The initial codes that were generated across the first round of interviews were reviewed, and the most central and frequent ones were pulled into more focussed codes. Memos were utilized throughout this process to help illuminate the processes constructed from the codes.
3. Continuing analysis	The developed codes were used to analyse the remainder of interviews in a cyclical process. As the interviews were analysed against these codes, the codes were refined and developed, thus engaging in a constant comparison across all data sets and across stages of analysis. Line-by-line coding was returned to if focussed codes did not adequately account for sections of the data.
4. Categorization	The established focussed codes were synthesized into provisional categories and subcategories. This process involved clustering focussed codes together under overarching conceptual descriptions, to begin to capture what was happening in the data. All focussed codes were printed out and physically grouped and regrouped together as relationships were constructed. In some cases, a name was developed to capture a theoretical description of the data. In others, existing codes already had the power to illuminate key processes and could then be elevated to category/subcategory status.
5. Elaborating on categories	At this stage, theoretical sampling occurred, with a sole focus on interviewing managers, to further elaborate on categories. This final stage of analysis involved conceptualizing how categories related to one another on a theoretical level. The purpose was to integrate the data that have been constructed in order to tell a coherent, comprehensible, and analytical story (Charmaz, 2014). An integral part of this process was to utilize written memos and develop new memos that began considering hypotheses about the processes involved in workers' experiences of child protection and how these related.
6. Choosing the final model	The final model chosen was the one in which theoretical codes and concepts accounted for the data and helped "weave the fractured story back together" (Glaser, 1978, p. 78). The draft model was shared with two final participants, to ensure categories provided an adequate and meaningful coconstructed response to the research question. As these interviews did not generate any new theoretical leads, it was decided that the categories were approaching theoretical saturation, and the process of data gathering came to an end (Glaser & Strauss, 1967).
7. Member checking	The final model was then shared with two past participants as part of member checking, to ensure it aligned with the experiences that were coconstructed.

TABLE 4 Social processes of the grounded theory model.

Core categories	Subcategories
Balancing unrealistic expectations in an oppressive system	Being controlled by demands
	Filtering down of pressure and punitive culture
	Passing the buck of blame and responsibility
Struggling to restore balance and hope	Fighting the system
	Assimilating in a broken system
	Detaching or burning into ashes
	Appreciating rare moments of relationality
Craving relationality from the system	Needing safe contained reflexive support
	Cultivating own support
Needing embedded action	Requiring reflexivity for safe practice
	Wanting more collaborative working
	Needing action to combat stigma
	Needing people "at the top" to be connected to the groundwork

Participants described being perceived as having more power than they do, enabling other professionals to avoid holding risk and difficulty, thus positioning them as "having a magic wand" (Alex, SW).

Feeling controlled by demands filter into supervision practices, whereby workers experienced supervision as "formula-led" (Princess, SW), "process-driven" (Daisy, SW), and with "no space for learning" (Shirin, SW). Many experienced supervisions as irregular, without enough time to focus on the magnitude of their cases. This left discussions of their own well-being at the bottom of the agenda or experienced as a quick tick-box exercise.

Feeling controlled by demands was believed to be caused by the narrative that timely data[5] and meeting performance targets equated to good work.

> I think the KPIs are the biggest demands and that's just the thing that's on you, all the time. So unfortunately, at times it becomes less about doing meaningful work and more about ticking boxes. (Lisa, SM)

Many workers described services not having enough staff, speculating whether employing less staff was a money-saving tactic. Managers agreed, adding a perspective of the LA as a business that is allocated limited funding and must evidence spending outcomes and justifications for what they need. Data have become a priority, as commissioners want to see performance outcomes of LAs, to continue providing funding. Providing such data is an expectation of their managerial role. Rather than eliminating this, managers discussed the need for simplifying and streamlining processes, to aid employees in working more efficiently. However, there was an acknowledgement of the challenge to capture the content of the work professionals do with families.
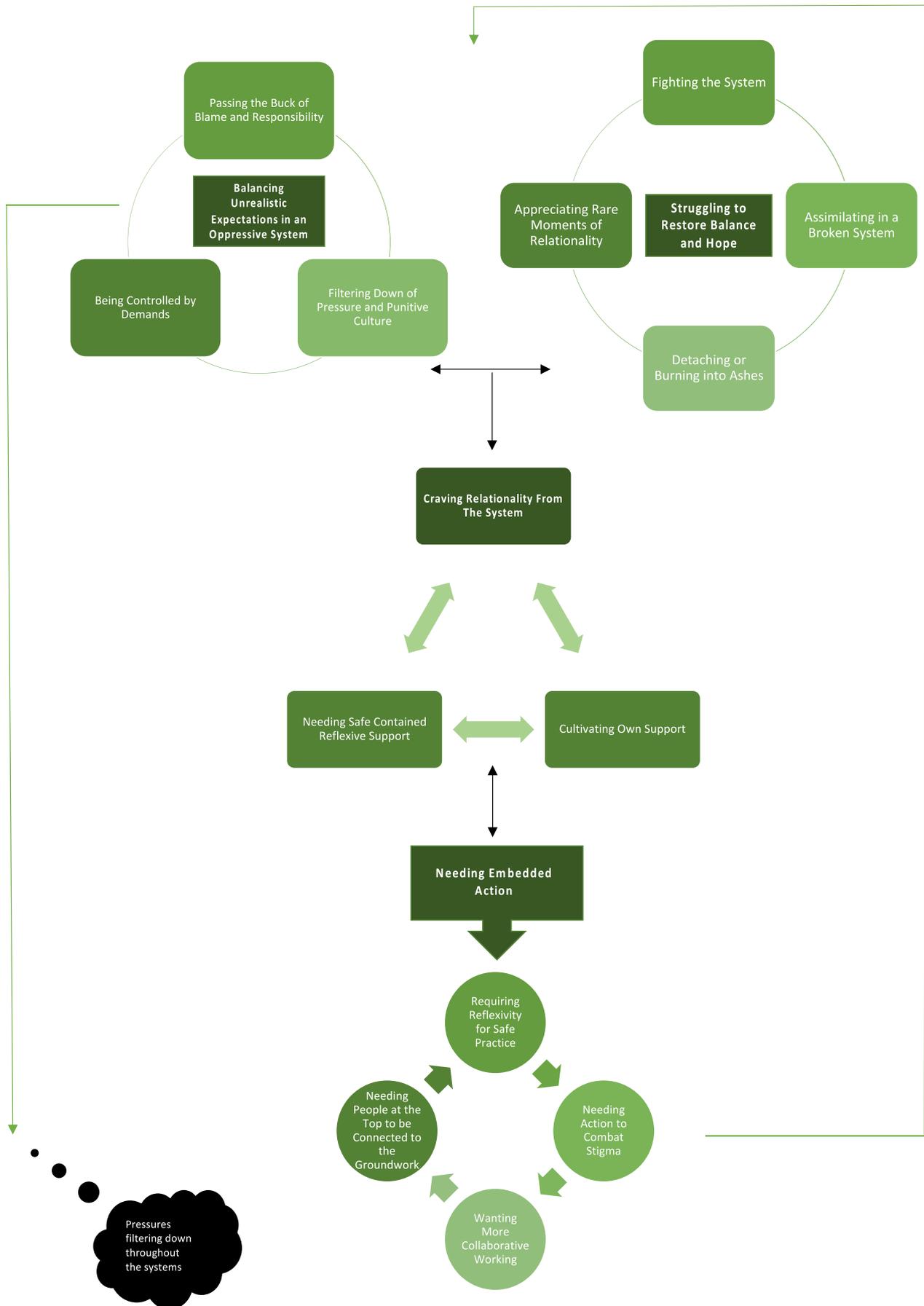
FIGURE 2 Grounded theory model.

> Data can tell you that we're not doing things, but it can't tell you that what we are supposed to be doing is being done well. (Linda, HoS)

There was a powerful sense that there were more demands than resources available. Workers felt they were taking on multiple professional roles, and staff morale was being sacrificed to save money.

A Service Manager (SM) discussed having to prioritize money when in senior positions, as one's responsibility is no longer for the individual worker but, rather, the workings of the holistic system, the Key Performance Indicators, and budgeting.

> Money is a massive … So you're asked to do more with less money … The higher you go up, it just becomes, you have to look more at the bigger picture … It's just about, as a whole, the big picture is, you're not doing so great, explain it and the councillors[6] don't wanna hear, "Oh, this social worker's got fifteen cases." They don't care. So that's the struggle. (Lisa, SM)

3.2.2 | Filtering down a pressurizing and punitive culture

Participants reported that, as part of the balancing act, they must also manage exposure to organizational blame and shame. Workers and managers were exposed to tremendous pressure, feeling constantly "under a microscope" (Princess, SW). Again, this was believed to filter down into the experiences of families.

A punitive approach by managers and the organization was commonly spoken of. This filtered down, as workers spoke of seeing their managers face pressures, which were then imparted onto them.

> Our manager has even come out of a management meeting crying … she's offloaded and said, "The management meeting has been horrendous. The stats. We've got to improve the stats." So then that becomes pressure for us to get all those visits all done. (Sabrina, TM)

There was a sense amongst managers that they had to be a buffer, to receive blame from upper management, whilst empathizing and protecting their workers. To avoid this, one participant left the managerial role to return to being a worker.

Organizational structures embedded within the routines of workers were sometimes seen as vehicles for punishment. Team meetings were used as spaces for "being told off" (Lucy, SW); and competitions were set up by management, where teams with the lowest statistics had to "buy the other team lunch" (Alex, SW), a financial implication for workers who were unable to meet the demands of the service.

There was an awareness of pressures felt throughout the hierarchy. All managers described trying to protect their workers from the risk-orientated pressures and punitive culture, "the heat from the higher ups" (Lewis, TM) whilst also "fighting fires" (Lewis, TM)

themselves. Managers also expressed working beyond their capacity, impacting the support they could offer workers. These pressures filtered into the approach workers took with families too.

> The way [senior management] work trickles down into the whole atmosphere, the whole procedures and also what you take into families' homes … It must be really difficult to then not become punitive with families because you know that your job is on the line. (Daisy, SW)

To avoid blame for not meeting unrealistic demands, many participants reported that their practice became risk-averse, process-driven, prioritizing bureaucracy thus reducing meaningful time spent with families.

3.2.3 | Passing the buck of blame and responsibility

Participants spoke of feeling controlled by fear of blame, leveraged by other professionals who positioned workers as the sole protectors of children they worked with.

> No one wants to be held accountable for the fact that you know, they could be to blame for something that goes wrong, so it's like there's so much it seems to be covering your back or expecting so much just in case something bad could happen. (Alex, SW)

Many workers challenged the dominant narrative of professionals working together to protect children. They felt sole responsibility, carrying the burden of "protector" in society, at risk of losing their jobs, and being scapegoated by the media. Contrastingly, workers also felt positioned as powerful, able to hold all anxieties of the professional network whilst managing any conflict.

> You'd go to [network] meetings and stuff and they would, the ownership would be put totally on you to come up with a solution or to figure out what's happened or to make things better … they didn't wanna be involved in any conflict—it had to be you. (Shirin, SW)

Participants reported to experience this passing of responsibility within their own organizations too, sometimes at the cost of relationships.

> If you've got staff that are not performing, then it may just get to a point where you're just like, you know what, I just need to go very task-focused and then the relationships go out the window, and that's the way you protect yourself. (Lisa, SM)

Passing the blame was coconstructed by participants as a personal protective mechanism, for managers to avoid burnout.

You burn out. You burn out. ... They just become disillusioned with the role that they're just like, "I can't be bothered. I'm getting battered so you're just gonna have to get battered." (Lisa, SM)

There was a desire for collective responsibility, to lessen the burden of being positioned as a sole protector, with the hope that this may prevent organizational blame and public outcry when unrealistic expectations are not lived up to.

3.3 | Category 2: Struggling to restore balance and hope

Participants described oscillating between the subcategories of "fighting" and "assimilating" below, and these filtered down into work with families.

3.3.1 | Fighting the system

Participants described challenging the status quo, advocating for, and aligning themselves with families over CP processes that felt oppressive. Workers described resisting "doing to" families but rather working alongside them therapeutically, despite the authoritarian nature of the role. Managers joined workers in this, promoting therapeutic modes of working and resisting system anxieties by holding onto the notion of "safe uncertainty" (Lewis, TM).[7]

Another way workers discussed fighting the system was by "jumping through hoops" (Lucy, SW) to get the resources they needed for families. Interestingly, a Head of Service (HoS) resonated with this, sharing the ways they "jump through hoops too," to get decisions verified to provide resources to workers. Workers craved clarity over the finances of the LAs they worked within, why processes existed, and why certain decisions were made. One manager emphasized the importance of providing workers with answers as part of the role to enable workers to confidently fight their position.

Acts of resistance had personal implications, as some were branded "troublemakers for trying to do the best for families" (Skyler, TM) and others accused of "colluding with the families" (Alex, SW). Being "on constant hypervigilance to fight the invisible system" (Skyler, TM) was experienced as draining and demoralizing and destabilizing for the work with families too. To fight systems and be listened to, workers had to provide solid justifications to management and "maintaining that high level of practice came at the cost of my own health" (Skyler, TM).

3.3.2 | Assimilating in a broken system

Workers and managers spoke of feeling irresolute to what they viewed as the unhelpful aspects of the role. At times, it was easier to assimilate, "churning through cases ... pushing them through the system" (Sofia, SW), "cracking on" (Jessica, TM) to get the work done.

Some described being reactionary and directive with families, due to frustration over lack of changes with families or worry about a child's safety. Some workers expressed being less likely to do difficult things for families, such as get extra resources, due to bureaucracy. When making decisions, it was sometimes easier to agree with management, even if workers disagreed—linked to fear of accountability. Others described assimilation as easier sometimes, particularly if not challenging the system provided more headspace to focus on direct work with families.

There was elements of the work you don't agree with so you were almost fighting it, but the problem is, that was just exhausting, so for me to keep the balance I just have to accept and let go and know there are elements that I may not agree with, and just focus on the family and the work I can do. (Alex, SW)

3.3.3 | Detaching or burning into ashes

This push and pull between "fighting" and "assimilating" had a detrimental effect. All participants spoke of detaching from the work or burning out. Workers expressed feeling consumed by thoughts of risk, noticing the knock-on impacts of the role on their personal lives. Levels of patience and empathy for families were described as reduced, and some workers found themselves doubting their own capabilities, "questioning if I had what it takes" (Alex, SW). Managers discussed trying to mediate burnout amongst staff, by "sharing the load" (Steve, TM) where possible, reminding workers to prioritize their own well-being and offering a space for support.

I think that's the only problem with having people that can crack on, is that then the burden is huge and that's what you've got to protect them from. (Lewis, TM)

When reflecting on how to manage burnout, some workers discussed putting in more boundaries, "finishing work on time, switching my laptop off" (Elizabeth, SW). However, other workers left their team, the service, or changed roles completely.

Two managers wondered if becoming emotionally detached was a coping mechanism, to avoid burnout, "otherwise if you're taking on everybody's cases and everybody's stress then you're just going to burn yourself out. There needs to be a balance" (Steve, TM).

3.3.4 | Appreciating rare moments of relationality

When reflecting on supportive mechanisms the system could offer, relationships were always central. When trying to restore balance and hope, it was relationality that kept workers going. Relationality referred to the moments of honest, compassionate, and authentic communication and true connection, a feeling of safety, validation, and understanding.

> My manager now, I feel like she does care about me, like she really does, she values me as a person ... it's a rare find I'd say. (Alex, SW)

Feeling valued came from positive feedback from peers, having open lines of communication throughout hierarchies, and when requested funding for learning and development was awarded. Participants expressed feeling particularly sustained and valued when families expressed gratitude. However, these moments of connection and relationality were not readily available or equally provided for all workers/managers. All workers who discussed experiencing relationality caveated this with feeling "lucky to have it" (Lucy, SW). The rare moments were experienced as coming from individual workers/managers, rather than being embedded "in the system." Wanting to be valued came with craving an understanding and acknowledgement of the positioning of workers as having no room for error, without disproportionate accountability, which was experienced as unfair. Workers wanted to be seen as fallible humans, and they wanted to see families in this way too.

These rare moments of connection were described as too scarce to mediate detachment/burnout.

3.4 | Category 3: Craving relationality from the system

Participants reflected that relationality was at the core of their positive working experiences but was not readily available, impacting their capacity to manage the demands of the role.

3.4.1 | Needing safe contained reflexive support

Individual supervision was identified as the main place of organizationally embedded support. Participants who described supervision as effective described having a safe and open supervisory relationship, whereby they were encouraged to be reflexive. Participants valued having a space to consider the emotional impact of their work; however, this space needed to feel safe and containing. This was described as feeling emotionally safe enough to share emotions and reflections about their work, subsequently knowing what steps to take within their direct work with families.

> Coming into supervision basically saying like, I'm really struggling ... open up to someone and cry, and hoping that actually I would get support and actually I got the opposite, I got "well I don't know if you've really got it in you to be a social worker." (Alex, SW)

Having support could make stressors and demands more manageable. Yet, some workers described supervision as insufficient, as there was a lack of secure and regular supervision slots, questions about workers' well-being were experienced as a "tick-box"

exercise, and the core focus was on case management and direction. This impacted workers' learning and development, a view shared by managers too.

> I can't remember having good reflective supervision as a manager. It was very much task-focused ... I mean, you don't even get management training. (Lisa, SM)

Managers described working at full capacity, which impacted their ability to provide ad hoc support. Workers described delaying seeking support from managers due to assuming their lack of capacity. Many described feeling let down by their supervisor, particularly when having to advocate for having their own supervision. Workers expressed wanting more avenues for support, and one worker considered creating their own personal "safety plans" (Alex, SW) to provide to managers, to ensure their support needs met.

Supervision seemed to be most easily accessed when workers were explicitly told and shown that they can approach management when needed, formally and informally.

3.4.2 | Cultivating own support

As organizational support provisions were experienced as insufficient, participants discussed cultivating their own support networks. Workers set up their own peer supervision spaces, used trainings as a space for peer support, and utilized personal resources. This included gaining emotional support from family/friends and accessing personal therapy. This was shared by managers too.

> My sense of support mainly has been drawn from the way I inhabit those informal support networks, rather than my formal line management structure. (James, TM)

Participants depended on peer camaraderie. There was a dependence on team and peer relationships, making the demands more manageable. When discussing ways of cultivating support, there was a sense of disappointment amongst participants that the responsibility to cultivate and access support was on them, rather than it being embedded within organizational structures.

At the core, importance was placed on working relationally. Participants needed and valued being in a relationship with their colleagues and their managers and saw this as being crucial to manage the demands of the work, physically and emotionally. These relationships were also described as crucial for safe working, to challenge each other on practice without causing rifts.

Participants described valuing working relationally with families too; "not finger wagging but really being committed to relation work ... looking for strengths, looking for exceptional circumstances where the family did much better than they're doing at the moment" (James, TM). Building and nurturing relationships with families, working in a humanistic way, and finding ways to provide families with the

opportunity for connection were seen as crucial to engage families. This allowed for more collaborative working, coming alongside families and telling them "let's do this together" (Princess, SW).

However, the system was not always set up to enable this type of working. Workers expressed frustration at wanting to go deeper with families, to remain "committed to the relational work" (James, TM); however, balancing unrealistic expectations in an oppressive system restricted this.

4 | DISCUSSION

The ways in which workers experience the system are central to how it is conceptualized as oppressive. *Balancing unrealistic expectations*, whereby the demands placed on workers[8] outweigh workers' capacity to complete these tasks, alongside having to manage the pressure of the role under a microscope, shaped their experiences of their role. A crucial aspect of these findings is how unrealistic expectations, scrutiny, pressure, and a punitive culture filter down; an experience shared throughout the hierarchical system and believed to be felt by families they work with.

Findings also highlighted a further demand placed on participants, feeling positioned by society and colleagues in other services as the sole protectors of children. This allows other professionals who work with the family to pass responsibility of CP over to them. Holding sole responsibility subsequently links to holding all accountability for actions and decision-making, despite clear central guidance (HM Government, 2018) specifying CP is everyone's responsibility, requiring collaboration amongst professionals. Workers can feel set up to fail due to their perceptions of limited authority on one hand and being seen as all-powerful on the other.

The findings powerfully displayed the struggle of workers at all levels of the system to sustain themselves and keep going against the odds. Throughout the oscillation between fighting the system, assimilating, or "burning into ashes," participants appreciated *rare moments of relationality*. Participants expressed feeling energized when experiencing moments of connection and mutuality with managers, peers, and particularly, with families. Although helpful for the short term, these rare moments were insufficient to mediate the challenges they experienced.

Within the dynamic CP context, the findings suggest participants value and crave supportive relationships from the system. Supervision is seen as key and sometimes the only place to access support. Participants value supervision as a supportive reflexive space to consider the emotional aspects of their work, rather than being a task-/action-oriented exercise. However, managers discussed the challenges of being consistently emotionally present for workers, due to their own lack of capacity and support. All participants described having to cultivate their own support and cherish the culture of peer support in CP. Valuing relationships filters down to working with families too, and participants described this as central to working effectively. However, building and nurturing these relationships is challenging, as the majority of their time is spent on bureaucratic demands.

4.1 | Implications

Over a decade ago, Munro (2010) recommended shifting focus from procedures to ensure the promotion of centring relationship formation with families. Several academics have since suggested that a radical paradigm shift is urgently needed from risk management to relational support for families (e.g., Bilson et al., 2017; Cottam, 2018; Featherstone & Gupta, 2018). Despite the fight for improved training, support, and practice for workers (e.g., Munro, 2010, 2011a, 2011b; Social Work Reform Board, 2012), this study shows that these changes are not experienced by workers in CP services at the time of the research.

4.1.1 | The implications of unrealistic expectations

The current study adds further support to past research, highlighting how organizational factors negatively impact workers' experience of their role (Antonopoulou et al., 2017; Hussein, 2018) and their ability to safeguard children (e.g., Cooper & Whittaker, 2014; Whittaker, 2011). This was exacerbated by the view that other professionals were abrogating responsibility for CP and leaving it to social workers. The negative spiral of workers being held personally and solely accountable if a child is harmed leading to workers engaging in defensive practice to protect themselves comes at the cost of focussing on the families (Cooper & Whittaker, 2014) and lessens the likelihood of decision-making being informed by ethical guidelines, theoretical models, and clinical judgement. Due to these factors, workers found the system they work within as oppressive. Social Work England, the regulating body for the profession, state that a key aspect of social work training and identity is anti-oppressive practice. Yet, if workers are experiencing the system as oppressive, how can they implement anti-oppressive practice on the frontline with children and families?

4.1.2 | The burden of struggling to restore balance and hope

Workers' attempts to restore balance and hope was in some ways moving and inspirational; however, the oscillation between striving to keep going and fighting the system, and moving into detachment/burnout or assimilation in order to survive, was both distressing to witness and worrying. Reynolds (2011) describes burnout as "spiritual pain that we hold when we are forced to work against our ethics" (p. 28). If one can postulate that burnout is "spiritual pain," then it appears understandable, even somewhat obvious, that workers' well-being will be at continuous risk whilst working within the current organizational structure and political context (Forrester et al., 2008). This makes the lack of relational support structures highlighted in the study, and previously (Hunt et al., 2016; Littlechild et al., 2016) ever more problematic, and begs the question as to how these structures are replicated in work with families.

4.1.3 | The need for relationality

Social workers and managers in this study knew how issues identified could be addressed. In every interview, across all levels of the system, there was a tangible craving for relationality; for positive relationships with managers, colleagues, and families; for feeling valued and supported; and for giving and receiving compassion and care. This is not a new finding (Coffey et al., 2004; Eborall & Garmeson, 2001; Huxley et al., 2005; Jones, 2001) or a new recommendation (e.g., Bilson et al., 2017; Cottam, 2018; Featherstone & Gupta, 2018; Munro, 2010, 2011a, 2011b; Social Work Reform Board, 2012). Research consistently shows relational reflexivity as a core component of the supervisory relationship (Szwarc & Lindsay, 2020; Wilkins & Antonopoulou, 2019; Wilkins & Jones, 2018), with supportive managerial and team relationships (Hussein et al., 2014) and supervisory relationships (Bogo & McKnight, 2006; British Association of Social Workers, 2011; Carpenter et al., 2012) and support for ongoing learning (Morrison & Wonnacott, 2010; Saltiel, 2016) shown as critical for worker retention, reduction in reported burnout, and increase in job satisfaction (Carpenter et al., 2012). As we can see, relationality is at the heart of the role and is essential for these complex systems to function effectively and sustainably.

To enhance relationality on an organizational level, a strong and safe team environment for relationship building and support should be fostered. This could take the form of providing regular reflective peer spaces for collaboration and case discussions to promote and embed reflexivity. Supervision is another context in which workers/managers should be able to access regular, consistent, and reflexive support. Supervision should take place within a culture of learning and development, with a balance of case management and reflexivity, and a supervisory relationship that features emotional safety, growth, and empowerment. Clear supervision guidelines and training is imperative to ensure managers have a strong skillset to deliver quality support.

On a government level, the current state of the CP system requires a radical shift (MacAlister, 2022). Considering the current findings and the longstanding retention crisis (Samuel, 2023), change must happen alongside government recognition that increased funding, improved relational supervision and support, and time for reflexivity are urgently required.

On a wider level, it is crucial for the government to consider challenging the current adversarial CP system and interrogate the assumptions informing the current CP structures, which are believed to enhance neoliberal values and oppressive beliefs (Parton, 2014)—see MacAlister's (2022) recommendations. The system needs to consider approaches towards coproduction, collective working, and thus advocating working towards a social model of CP (Featherstone et al., 2018).

4.2 | Evaluation of the research

4.2.1 | Strengths

The research permits new insights coconstructed by participants with roles across the system hierarchy. This highlights how similar challenges are experienced across hierarchies. Clinical implications are offered, grounded in the data, with a particular focus on the need for deep relationality, shared across all levels of the system. The robust implementation of constructivist grounded theory, the rich description of data collection and analysis, and the quality and quantity of data add credence to the research.

4.2.2 | Limitations

Sample characteristics constitute a limitation, as the majority of participants were female, and many identified as White British, potentially limiting a variety of standpoints. However, this may be representative of the CP workforce in England, as recent statistics show 85% of children's workers in the UK identified as female and approximately 66% of workers identified as White (DfE, 2018). Nonetheless, it remains important for further research to ensure diversity during recruitment. Also, many participants were qualified for 5 years or less, potentially limiting the scope of experiences. However, the researcher found no major differences when undertaking theoretical sampling with participants with longer experience working in CP.

4.3 | Concluding comments

This research explored the accounts of 17 workers and managers to demonstrate how they experience working in CP and the ways in which the systemic structures and sociopolitical discourses impact the work they must do and the ways they are able to do it. The study highlights the relationships between limited resources, bureaucratic practices of regulation and monitoring, other professions not sharing the CP burden, and intense public scrutiny and vilification. Participants spoke of the impact on themselves and the potential impact on families.

The struggle for staff in CP services to find hope within a system lacking relationality highlights a pressing concern about staff well-being. Future research is vital to further illuminate the very real implications for both professionals, children, and families, of an under-resourced, undernourished, and unsustainable CP system, and work towards an ethical and radically relational CP system should be our urgent collective priority. To do so, the economic, structural, and organizational constraints must be addressed without delay.

CONFLICT OF INTEREST STATEMENT

The authors have no conflict of interest to declare.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

ENDNOTES

[1] Victoria Climbé was an 8-year-old girl who was murdered in England by her carers (great aunt and partner), and the findings of an official inquiry (see Laming, 2003) highlighted the ways in which Victoria was failed by multiple agencies responsible for her care.

[2] Peter Connelly was a British 17-month-old boy who was murdered by his mother and partner in 2007. Peter suffered more than 50 injuries within an 8-month period, despite being seen multiple times by health and social care.

[3] Star Hobson was a 1-year-old child who was abused and murdered by her mother's girlfriend in England in 2020. Star had been seen multiple times by health and social care.

[4] Arthur was a 7-year-old boy, who was abused and murdered by his father and partner in 2020 during the pandemic. Arthur was open to children's services; however, the abuse was not identified by professionals.

[5] Including Key Performance Indicators, keeping to timescales of visits and paperwork.

[6] Participant is referring to government councillors who play a substantive role in decision-making about the funding allocations of social care.

[7] Safe uncertainty is defined as holding a position of "authoritative doubt" in social work, to encompass both expertise and uncertainty, coined by Mason (1993, p. 194).

[8] High caseloads, rigid timescales for visits, magnitude of paperwork, and other bureaucratic tasks.

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