Rehumanising ourselves and our services through radical relationality

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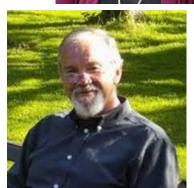
Research Team







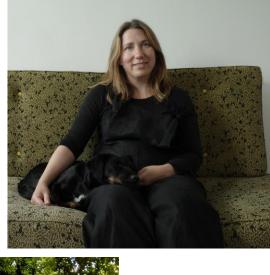




















Doctorate in Clinical Psychology







Research partners and collaborators

We have never become used to hearing parents talk about their experiences of their children being removed...

"I was mortified. I was mortified... I was in such hysteria, I couldn't breathe, I couldn't, I just couldn't believe what was happening and I mean, I was on the floor, on the ground, screaming, crying 'please don't take them'."

(Lucy)

"I think about her all the time, what's she's doing, what's she's doing at school? Or, you know cos when it was snowed in, I think she was probably off school?" (Isobel)

"They were taken on the Friday; I slept in their room for a good month... I slept every night in their room...Their bedding was still there, it was their smell, I don't know what it was... it was just their smell." (Sarah) "So it means when they get older, when they come find you, they'll always see, you'll have that box with all their birthday cards and everything all in there so they know you've been thinking of them, so obviously when they turn of age you can give them it..." (Rebecca)

It is also difficult to hear of the impact of child protection work for practitioners...

"I've had dreams, about families which I guess suggest that I'm thinking of, you know... and often that's around guilt, well guilt and anxiety, I guess. I had a dream... basically there was a mother with two newborn babies and I was like helping her with them and then one of them fall to it's death And then the mother fall with it and then I was left with the one baby..." (Marie)

"You don't look at life the way you used to, you may start feeling very negative about things, very untrusting, and you might start using negative behaviour patterns..."

(Alex)

"So, if sleep is starting to be disturbed then I know the balance has gone off kilter somewhere, so just looking after myself really" (Drew) "This work can really get into you" (Drew)

"this work could make you feel like the world is a crappy place" (Taylor)

Safeguarding in the UK: the Munro Report

- Professor Eileen Munro's 2011 independent review of child protection in England, prompted by several high-profile abuse cases, including the death of Baby Peter in 2007
- Due to the domination of prescribed work, "the centrality of relationship forming with families had been obscured"...
- The hope was to reduce the focus on following procedures and increase "relationship-based practice".
- Recommendations included:
 - Free services from the grip of managerialism and cut bureaucracy
 - Move from a focus on improving the procedures and the guidance to the social work skill and place more trust in professionals
 - Address workers' emotional wellbeing

Munro, E., 2011. Munro review of child protection: final report - a child-centred system, Department for Education, London (available online at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/175391/Munro-Review.pdf)

"If poor relationships are where things emotionally go wrong then healthy relationships are where things can be put right" (Howe, 2008, p.161)

Howe, D. (2008). The emotionally intelligent social worker Palgrave Macmillan.

Layered relational care and support



Managers, commissioner and funders



Research:

https://uhra.herts.ac.uk

- Dr Jade Weston (2013): <u>Care Leavers' Experiences of Being and Becoming Parents</u>
- Dr Nina Memarnia (2014): <u>Listening to the experience of birth</u> mothers whose children have been taken into care or adopted
- Dr Hannah Morgan (2018): <u>The Experiences of Birth Relatives who Engage in Person-Centred Counselling Following the Loss of their Children to Compulsory Adoption or Foster Care</u>
- Dr Hannah Wright (2017): 'Like a light in the dark': A mixedmethods retrospective evaluation of a psychotherapeutic counselling service for birth relatives of adopted children
- Dr Hannah Wright (2018): <u>Screening for Mental Health Difficulties</u> in Looked After Children referred to a Specialist CAMHS Team using the Strengths and Difficulties Questionnaire: a Mixed Methods Study
- Dr Lizette Nolte & Caoimhe Forbes (2020): Experiences of counsellors working in a therapeutic service for birth families of children taken into care or adopted
- Dr Charlie Brazil (2021): <u>Social Workers' Experiences of Working in Children's Services: a Grounded Theory Study</u>
- Dr Afrah Abdullahi (2021): 'Good Enough Parenting': Social Workers' Experiences of Assessing Parenting in Family Safeguarding Services

Birth families' experiences of child protection services... 'they didn't care', 'I did not feel like a person'

"They could've helped ... but they just didn't wanna.... They didn't care, they didn't wanna help. To me it felt like it was just about getting him into care, they didn't care, sort of, how that impacted on me or anything" (Alice)

"I was handed a leaflet." (Eve)

"I had like different workers as well, different social workers" (Rebecca) "Apparently ...they couldn't believe I was a normal person. ...what did they expect some sort of monster to come into the room...? I'm just human. I don't have like horns and things like that you know!" (Eve)

"I did not have anyone in my corner"

Social worker experiences of working in child protection services...

"It's very much driven by stats... sticking to plans and time frames.., which doesn't really go hand-in-hand with building client relationships" (Alex, SW)

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

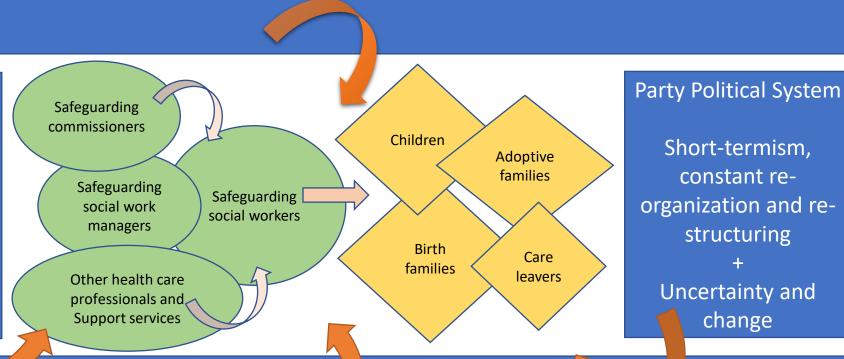
"I think we have put social workers in positions where they can't do the things that we need them to do and where we can't provide them with the help they need to do it" (Linda, HoS)

Neoliberal politics in health and social care:

Increasingly underfunded and "undernourished" services, dehumanising managers, workers and service users

Dominant discourses:
Social discourse re safeguarding
shifting from child welfare to child
protection (Children Act 1989) =
defensive practice

Social discourses re disadvantage shifting to meritocracy, individualization, vilification



UK: continuar dismantling of the welfare state and austerity' policy since 12

Exacerbated by COVID-19 pandemic; global economic downturn (including fuel crisis); and for UK, Brexit

A punitive system, focused on surveillance and rationing of stripped away resources + uncertainty and change

Organisations which might themselves be traumatised and operating in survival mode are rigid and inflexible

Treisman, 2020



"RADICALLY" ... Relational ...

"... for are we not of interest to each other?"

Elizabeth Alexander, Ars Poetica #100: I believe, American Sublime, 2005

"It is in the shelter of each other that the people live"

Pádraig Ó Tuama (2016)





What worked well for practitioners...

"So you may want to ask [your colleagues) this is what's happening, what do you guys think?" (Taylor)

"I think they care for their practitioners as much as the practitioners care for their clients." (Drew)

"...the personal supervision is about how are you feeling?
You particularly worried about anything in your cases?
How are they impacting you? How are you and your
personal life..." (Courtney)

"I think (my manager) has always had this thing, 'oh, let's take care of you guys', so we always get scones at our meeting, [there is nice hand cream in the bathroom]... that's nice, it's those little touches..."

(Taylor)

"I think it's reassuring that I'm not the only one, struggling with the with the workload and having complex cases for sure. I think most of my colleagues, if a really, if a really serious situation happened, which everyone outside a social worker probably be horrified, or even really upset about, we would somehow find something to giggle about, you know, and laugh. And I think that's really needed, you know, to have that humour." (Courtney)

What worked well for birth families...

"They make you feel... you're not on your own (pause), they make you feel like, you know, you're the family, you're not, you're not just, like, 'oh, it's you'... they don't make you feel like that. 'Oh yeah, come in! Would you like a cup of tea?' you know they make you feel welcome."

"When you're walking off ward and you've got your bags and you haven't got no baby yeah? Then what do you want to see in front of you? Someone that's offering you a hand going 'come on, it's going to be alright' (tearful). Cos that's what s/he does for me, that's what [counsellor] did for me (crying)." (Lara)

..."knowing that there's someone who's there for you, even when you're in, like you're in your darkest days, you've got someone there that's actually willing to talk to you, so yeah, that helps." (Rebecca) "s/he's like my professional friend! (laughs)" (Lara) "... But also somebody to come out and possibly visit me every couple of weeks to actually see how I was getting on and offer some sort of support... just emotional support and just to know there's someone out there that knows what's happened to me and look after me in a way, but there was nothing."

(Kate)

Safeguarding in the UK: the MacAlister Report

- "once in a generation opportunity to reset children's social care..."
- "What we need is a system that provides intensive help to families in crisis, acts
 decisively in response to abuse, unlocks the potential of wider family networks to raise
 children, puts lifelong loving relationships at the heart of the care system and lays the
 foundations for a good life for those who have been in care."
- "we must identify and remove the barriers which needlessly divert social workers from spending time with children and families... ...reducing repetitive administrative tasks which do not add value"
- "providing stable professional relationships for children and families"

"Recognising that it is loving relationships that hold the solutions for children and families overcoming adversity... drawing on and supporting family and community..."

Josh MacAlister (2022)



Our radical suggestion:

- A return to a focus on family wellbeing, rather than solely on child protection
- Well resourced services
- Enough time and space to think, reflect and collaborate
- Enough time and space to do the work well, spending the necessary time with families
- Nurturing and kind systems
- "Small acts of resistance"













Research references

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Summaries of some research and orientation:

SUPPORTING BIRTH PARENTS CHILDREN HAVE

JOANNE ALPER

FOREWORDS BY DR JOHN SIMMONDS OBE AND





We would love to hear from you ©

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Our non-radical radical conclusion... (1)

- An urgent need for culture change moving from a defensive system to a radically relational one, de-bureaucratising and re-humanising of processes and structures (see e.g., Wilson, 2015)
 - A supportive, nurturing organisational context, good teamwork, supervision and where useful, personal therapy, and maintaining a balance between work and life
 - Solidarity teams (Reynolds, 2011): Reflective peer spaces for collaboration and discussions to promote and embed reflexivity; building *a community of care*
 - Reflective practice and the self of the practitioner, cultivating self-awareness and reflection (see Abdullahi, 2021): appreciating the interplay between personal and professional experiences for practitioners
 - Mentorship scheme: where experienced workers offer ongoing peer support to less experienced colleagues

Our non-radical radical conclusion... (2)

- Connection between services attending to context (e.g., benefit claims, housing, employment, contact with the child, letter box letters, relationships with social services, etc.)
- A collaborative consultation model (see e.g., Fredman, Papadopou and Worwood, 2018): encourages teams to build connections across agencies and to collaborate on developing a collective understanding
 - Team formulation (see Hartley, 2021; Johnstone, 2013) and a trauma-informed approach
 - A relational-collaborative approach to risk management (see Aggett & Messent, 2019).

Our non-radical radical conclusion... (3)

- Considering our service structures
 - Wright et al. (2022): Birth relatives do take up support if the right service is offered by the right agency at the right time (see also Morgan, et al., 2019)
- Seeing recovery as relational (Price-Robertson et al., 2016): it is "through social relationships" (p.7) that we are able to redefine our experience
 - Flexible, responsive services, e.g., re engagement (e.g., a "pending" system and 'sidling up to' meeting) and endings

Our non-radical radical conclusion... (4)

- A dignifying and humanising relationship, described as 'offering human connection' and validating and contextualising experiences.
 - 'Bending the frame' (Eversole, 1997) and offering a "critical friendship" (Cox et al., 2017)
 - Narrative therapy (White & Epston, 1990; White, 2007): invites "therapists (to) play on the same 'team' as parents" (Syrstad and Ness, 2019, p. 209); enabling restoration of dignity and a preferred sense of self, and developing rich, multistoried narratives of lives, allowing them to be something other than just defiant persons or failing parents (Syrstad and Slettebø, 2019)
 - A trauma-informed approach, where responses are viewed as reasonable reactions to trauma and hardship