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Introduction: Theory in context

Child abuse is unfortunately a common phenomenon: the 2016 *Crime Survey for England and Wales* found the following rates for self-reported experience of childhood abuse:

... 9% of adults aged 16 to 59 had experienced psychological abuse, 7% physical abuse, 7% sexual assault and 8% witnessed domestic violence or abuse in the home.

With the exception of physical abuse, women were significantly more likely to report that they had suffered any form of abuse during childhood than men. This was most marked with regard to any form of sexual assault, where women were 4 times as likely as men to be a survivor of such abuse during childhood (11% compared with 3%) (Office for National Statistics, 2016, p 1)

These high rates of self-reported abuse suggest that as many as one child in ten may experience some form of abuse during their childhood. Society has developed greater awareness of different types of harm, and increased requirements on those in contact with children in a professional capacity to identify it. There are demanding expectations that specialist practitioners will 'diagnose and treat' abuse: progressing through assessment of level of risk and type of harm, to finding solutions to keep children safe and providing or signposting helpful therapeutic interventions. Increasingly complex thinking about what constitutes abuse, and what we should do about it, is a feature of this area of work.

Safeguarding children progressed from a primary focus on physical abuse in the 1960s (Kempe, Silverman, Steele, Droegemueller & Silver, 1962; Helfer, Kempe & Krugman, 1968) to include contemporary awareness of sexual abuse, neglect, and abuse linked to

coercive and controlling behaviour towards children and young people. A contemporary working definition of child abuse will reflect our developing understanding of exploitative behaviour targeting children, forced marriage, female genital mutilation, and fabricated illness (UK Government, 2017; Rights of Women (nd); NHS (nd); UK Government, 2008). Any definition is a working definition, and must be viewed as provisional, because no definitive and lasting definition is possible. 'Child abuse' is a socially constructed idea, albeit one based on very real hurt and harm, and changes in our use of the term reflect changes in society. Greater cultural diversity and globalization have also impacted on safeguarding children, as children move between countries and cultures, sometimes under duress. Social work practitioners have to be aware of a wider range of indicators of harm than ever before, and have a wider range of strategies for assessment, intervention and support.

All safeguarding activity is grounded in a theoretical position about what children need, what constitutes adequate parenting and why specific responses to harm are useful and appropriate. Using a particular theoretical position involves adopting a related explanatory framework for understanding the world, and predictions about what will happen as a result of certain interventions or actions. Safeguarding social workers need to be able to use a range of different types of theory, with awareness of what sort of theory it is, and how evidence underpins the decisions they make in working with children and families.

Safeguarding social work operates within specific legal, organizational and professional frameworks that determine how theory may be used. Theories guide safeguarding actions but cannot on their own determine how social workers intervene or interact with service users. Social work values and service user preferences also shape interventions, as do resources and agency remit, but all actions need an explanatory framework that justifies ideas about how to intervene, and how to evaluate the success of interventions. Theories cannot exist in a vacuum: all need a supporting evidence base to show how they correspond with the real

experience of children. None of this should however prevent responsible, theoretically informed innovative practice.

All interventions to safeguard children **in England and Wales** must be undertaken in accordance with the statutory guidance: *Working together to safeguard children* (DFE, 2017b - due to be updated in 2018). This guidance does not presuppose any particular theoretical approach to be taken by the practitioner, but it sets standards for organizational response to concerns about the wellbeing or safety of a child. **Similar guidance is produced in many countries.**

The constraints within which children protective social work operates have positive, protective, benefits and some drawbacks. Guidance and operational requirements aim for consistent quality of response for all children, setting minimum standards for service delivery. Payne (2011) draws attention to the extent to which bureaucratic and administrative constraints limit social work action. Guidance and operational rules protect both children and workers, by defining as clearly as possible what needs to be done when children are at risk, but are unable to say what exceptionally good social work looks like. They leave open the possibility of restrictive interpretation of duties to children and families (Lipsky, 1980; Broadhurst, Wastell, White, & Pithouse, 2010). Reflective theory and evidence-informed practice counterbalances this. In practice, theory shapes practitioners' pursuit of certain types of knowledge: theories tell us what sorts of 'facts' are likely to be helpful in understanding what is happening, so they direct our attention to certain kinds of information. They act at the same time as a filter and a compass in dealing with the mass of information present in most inquiries into a child's welfare.

Theories are generalized, abstract ideas about how the world works. They offer explanations and suggest causal relationships. They must be testable, and they must be falsifiable (Popper,

1959). Many theories of development link past events with the present, to explain or predict behaviour or mental state. Early theorists of human behaviour such as Freud, Thorndike, Pavlov, Vygotsky and Skinner (Greene, 2008; Parrish, 2014) and later developments based on them, explain behaviour in terms of prior experience, and suggest strategies for the resolution of problem behaviour in accordance with their diverse theoretical standpoints. Ideas derived from systems theory place more emphasis on interactions in the present (Dallos & Draper, 2015).

Theories in use in child protection social work today incorporate ideas from biology, psychology, sociology and learning theory. All offer, in one way or another, a ‘lens’ through which to understand the internal world of the child and their relationship to the social and familial world in which they live, and form the theoretical basis for evaluating signs of wellbeing and safety, or distress and harm.

Different types of theories

The social world is complex, and causal links may be equally complex. Similar outcomes may be reached by a variety of different ‘pathways’ and people with apparently similar histories may have very different outcomes. Research in social work often describes co-occurrences and clusters of phenomena. Examples of this type of research include research into the impact on children of parental addiction (Department of Health, 2011), outcomes of different kinds of care (Selwyn & Quinton, 2004; Selwyn & Briheim-Crookall, 2017), or patterns of repeated pregnancy among women who have lost a child to ‘care’ (Broadhurst, Shaw, Kershaw, Harwin, Alrough et al., 2015). Such research tells us a great deal about vulnerabilities and risk factors, although individual responses will be very diverse.

Qualitative research is valuable in providing a perspective on service users’ perspectives, drawing attention to people’s lived experience, and what these perspectives can tell us about

what is helpful and unhelpful. Robbins and Cook's (2017) qualitative research into the experiences of victims of domestic violence involved in the child protection system is an example of this approach.

Some research studies use large data sets, or meta-analysis of a number of studies, to use complex statistical techniques to identify 'latent factors' that on their own may not cause a problem but, in combination with other vulnerability-creating factors, may do so. Such quantitative research takes us closer to understanding cause and effect in complex situations through looking at the interaction of various risk or protective factors in contributing to a particular outcome, as with Spratt's (2012) analysis of the impact of 'multiple adverse childhood experiences'.

Theories used in social work may be said to be mostly *underdetermined*, which means there are often different theories that might be used to understand what is going on, and there are seldom instances when one can say that one theory is proved to be true and another false. Many social work theories are, therefore, better regarded as working hypotheses, which is why the choice of theoretical approach is □ a matter of personal preference and ethics, to an extent that appears unusual in other professions, such as nursing or dentistry.

Safeguarding children social work draws on an increasingly wide range of ideas of disciplinary and geographic influences. Sources of theory have always been broad, reflecting its wide range of roles, and work with a range of other disciplines. Cross-disciplinary ideas such as systems theory and attachment theory have proved very powerful influences, as have approaches developed in different countries, such as family group conferences from New Zealand (Barn & Das, 2015), and settlement conferences from Canada (Ministry of Justice, 2017). The former is based on the combination of two very powerful ideas in social work: the importance of culturally appropriate interventions, and the value to be placed on preservation

of birth families. It is underpinned by beliefs about ethical practice and the value of culture, as well as ‘responsibilization’ of wider families and communities, and a preference for negotiated over imposed agreements. Evidence about outcomes supports its continued use, but the theory underpinning its inception comes from values rather than empirical evidence of ‘what works’. Settlement conferences also emphasize negotiation over imposition. Both reflect a shift away from the idea that the proper role of the child protection/judicial process is to assess adequacy of parenting and remove children when parents cannot provide adequate parental care, towards using the child protection process to seek mediated alternatives to removal. Parents involved in child protection cases face a serious challenge to retaining care of their children once they enter the realm of the court (Welbourne, Macdonald & Bates, 2017), but there is growing interest in finding more collaborative ways to avoid a final child / parent separation where there may be the potential to do so (see also Harwin, Alrouh, Ryan, McQuarrie, Golding et al., 2016).

Theory, ethics and social context all interact to influence the organizational structures within which social work operates, set the objectives for social work intervention and shape the process of social work assessment and intervention, down to the micro-level of influencing the content of conversations with service users.

Reflexivity and the inescapability of theory

Social work professionalism is allied to reflexive practice (Sheppard, 1998). Reflexivity involves awareness of self and others in the real world, as well as making links to theoretical constructs. Use of theory is inescapable, as we make choices at every moment in social work practice, and every choice is based on explicit or implicit (not articulated or examined) theories about how the world works. Reflexive practice entails an intellectual effort to explore the links between theory and practice, and the social, organizational and personal

factors which make a practitioner choose one course of action over another. Reflexivity may suggest different ways of working, or even identify new challenges that may not have been recognized as problematic before, such as service users' negative self-perception (Butler, Ford & Tregaskis, 2007).

Reflection is *constitutive* of the social world as well as descriptive: we create reality as we live it and think and talk about it (Houston, 2015; see Chapter 5). We need to be reflexive to understand this process, instead of seeing knowledge as representing some form of 'objective truth' (Houston 2015, p. 245). Theorising about social work involves considering ourselves in context as social actors, as well as linking abstract theory to our everyday world.

Social work is defined by the International Federation of Social Workers as embedded in a changing world, and responsible for making change happen. It is:

...a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing. (IFSW, 2014)

Reflexivity can be a means to self-actualization and the pursuit of life projects: Beck's 'reflexive modernization' (Beck, 1992). We are all subject to the constant pressure of social and organizational change, and affected by power relations in society. Without reflexivity, we have limited capacity to consider how structures that create and sustain power influence ourselves and others. Without theory as an underpinning, we have no defensible strategy nor valid mandate for seeking change. Without reflexivity, theory can only be applied

mechanistically: which is to say without awareness of the social structures that create and sustain power, and our own role in that socially complex environment.

The idea that what we do in everyday life is based on proto-theories or working hypotheses about how the world works is inherent in key theories underpinning social work. A basic premise of attachment theory (see Chapter 13) is the idea that everyone builds a framework of constructs about how the world works in terms of human interactions, especially intimate ‘family’ relationships, and how the individual fits into that social and emotional world. In essence, we all start to develop theories about the way the world works from our first days of life (Howe, 2011). Piaget also studied how children develop an understanding of the relationship between cause and effect and other ‘natural laws’; again from very early in life (Piaget, 1930). We cannot be ‘atheoretical’, we can only use theories consciously and reflexively; or with the risks of bias and unethical practice that accompany unreflective action.

In safeguarding children, many very powerful social structures converge to influence what we may do, and how we can do it (Payne, 2011), and affects how our actions are judged by others both inside and outside the profession. Parliament, courts, service managers, inspectorates and the media all influence practice. The defensibility of practice (especially when things go wrong) is an interesting and complex area, linked to both evaluation based on outcomes (a consequentialist approach to responsibility), and evaluation of actions taken based on the availability of a well-founded rationale for actions taken (a principle-based or deontological approach to evaluating practice).

Agencies need a theoretically-informed approach to service evaluation and development that enables them to identify risks and put in place a robust service response to reduce the risk of re-occurrence (Department for Education 2017a, p. 3). When things go wrong, information

gathering has failed, or decisions have been made without taking due notice of that information or weighing it accurately (Department for Education 2017).

The limits to theory: complexity and wicked problems

There are problems that are so complex that it is difficult to theorize about them, or theories seem inadequate to deal with the problem, sometimes referred to as ‘wicked’ problems. Child abuse is characterized as a ‘wicked’ problem (‘wicked problems’ on Wikipedia gives a brief definition and history of the idea of wicked problems, and suggests further reading:

https://en.wikipedia.org/wiki/Wicked_problems).

Successive approaches at tackling it at a policy level have arguably failed because it is a multi-factorial complex social problem with many contributing causes. At the level of society and the individual, its causes are contested, and as a result there are multiple possible ways of approaching it. More than one approach may be needed at the same time to deal with the multiple contributing causes, but this makes identification of causal mechanisms problematic. Linear solutions, trying one thing at a time, are unlikely to be successful and may make the problem worse. Young et al (2014) argue that since we have no authoritative solutions to child abuse, we should involve families more in seeking solutions to their own problems.

The same complexity exists in the child protection system: it is ‘...complex and it is not possible to predict or control it with precision. This should lead to the recognition that the unintended will happen’ (Munro, 201, p. 135). Linear thinking attempts to link cause and effect in a relatively simple linear way, while non-linear ‘complex causality’ (see Chapter 15) takes account of variation through time and subtle differences between families, workers and cases, to understand why accurate prediction is not possible. A more dynamic and flexible way of thinking is needed. Social workers must be able to work with high levels of uncertainty, look more widely than the family itself and, when assessing risk, consider the

dynamic nature of risk, interacting influences on the child and family, and what causes child safety to fluctuate, or stabilize (Stevens & Hasset, 2007).

Theories and hypotheses: keeping an open mind in a dynamic world

Theories in social work provide an overarching structure for understanding the social world, evidence describes aspects of the world. One's theoretical perspective suggests which questions to ask, shaping inquiry, whether in a child protection investigation or research.

Understanding what is happening in a family is achieved by gathering evidence, which the social worker makes sense of by imposing order on it: structuring it in accordance with existing theories about how the world and families, in particular, work (Sheppard & Ryan, 2003). This section considers how important it is for child safety and wellbeing that social workers are critical practitioners in testing their ideas against 'reality' as they observe the family.

Instead of being a dynamic reflexive process, assessment can become stuck and resistant to change (Munro, 2010). Without a reflexive, critical approach, practitioners may be vulnerable to 'confirmation bias': continuing to interpret evidence according to their initial ideas about a family, and slow to re-evaluate initial perceptions. This is dangerous if the initial assessment (a provisional hypothesis based on partial evidence) was hopeful and positive, but later information challenges that view. Hypothesising about what is happening in a family needs to be a dynamic process in which practitioners challenge their own thinking, and supervision should enhance this.

Optimism is a two-edged sword in social work: belief in the capacity of people to make positive change is an essential attribute of social workers, as a core part of the role is to promote positive change: it becomes problematic when professionals retain an attachment to optimism once *reasonable* hope is past. This 'toxic optimism' (Duchinsky, Lampitt & Bell,

2016, cited in Kettle & Jackson 2017) can be distinguished from theory-informed work towards positive goals, grounded in a realistic assessment of family strengths and challenges.

Doing child protection work involves asking people to change. Change is stressful: it involves giving up established habits of behaviour and learning new ones. Those changes may be very difficult to make, as they may involve giving up long-ingrained behaviour, possibly learned inter-generationally, which may have value for the person. It may be something that helps them cope with problems, including the stress of having responsibility for others. The fact that some parents seek ways not to engage with the process of change is not surprising.

The phrase ‘disguised compliance’ is sometimes used to describe parents who are not complying with services attempting to change the way they parent, but pretend they are (NSPCC, 2010). An accurate term would be ‘disguised noncompliance’, since what is being disguised is clearly noncompliance, not compliance. Having clarified this, the concept is relevant to the use of theory in child protection, since the underlying idea is that social workers should not take appearance of co-operation at face value, but maintain attention on indicators of safety and parental change. This must be informed by theories of child development and by empirical observation: ‘hypothesis testing’ around the direction of change, or lack of it. Past child death inquiries reflect the fact that parents who have the potential to seriously harm children may have the ability to hide their resistance to change (London Borough of Haringey, 2008) while deflecting attention from their children (Ferguson, 2017). Putting this in context, social workers engage with thousands of families a year (Bilson & Martin, 2017), and work with many of them over extended periods, during which time things improve enough that child protection plans are stepped down, cases are closed, and while some children are re-referred to children’s services, many are not.

Intervention with them has, one can only assume, been at least partly, if not wholly, successful. Compliance, in terms of changing behaviour, has occurred.

Motivational Interviewing (MI) is an approach which aims to help people find their own reasons for changing problem behaviour (see Chapter 20). MI is ‘a collaborative, person-centered form of guiding to elicit and strengthen motivation for change’ (Miller & Rollnick, 2009, p. 130). A more collaborative approach to practice may reduce resistance (Wilkins & Whittaker, 2017).

Parents may have been asked to do things they may want to do, but do not believe they are capable of doing and are afraid to say so. There may be factors that make co-operation difficult, such as the influence of a dominant controlling partner, depression, or addiction. Thinking about barriers to change is important, in cases of noncompliance. Theory can help to consider what the personal, social and structural barriers are to change. Persistent lack of change is, however, a signal that another approach is needed, whatever the reason for lack of change.

Both ‘optimism’ and poor reflection and re-appraisal may be linked to the sheer emotional intensity of doing child protection work, leading to unsafe assessments based on partial or biased observations (Ferguson, 2017). Maintaining professional curiosity and creativity requires commitment and energy that are arguably more likely to be engaged when practitioners have good quality support themselves. Thinking about one’s work analytically is an active, intellectually demanding process, and changing the way one thinks is demanding for professionals as well as families.

Trauma and resilience

Child protection work inevitably links to theories about trauma and loss. Abuse causes trauma: even in those cases in which a victim does not experience abuse as distressing at the

time that it happens, later recognition that what was done to them was wrong may cause hurt and distress. Parents involved in child protection processes may have been victims of traumatic events themselves: if not in childhood, then as a victim of abuse as an adult. A high proportion of families in which children are abused are also families in which another adult is being abused, and that abuse is also a probable cause of harm to the child, as identified in law (Children Act 1989, s. 31) and by research (Bowen, Heron, Waylen & Wolke, 2005; Holt, Buckley & Whelan, 2008; Women's Aid 2012/13).

Trauma is defined both by the events that cause it (situations that carry a high level of perceived threat) and the individual response to that situation:

Individual trauma [results from] an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being (SAMHSA, 2018).

Responses to trauma depend upon the nature of the traumatic events, the circumstances under which they occurred, including the level of support available to the person experiencing the trauma, and the resilience of the person. The US Child Welfare Information Gateway (2015, p.2) says: '...The field is still in the beginning stages of gathering evidence about what is required to implement a trauma informed approach to child welfare, and what the outcomes of such an approach may be'. The age of the child, the frequency and severity of trauma, and the relationship between the child and the person responsible for the trauma (for example, carer, stranger, peer) will affect the individual response of the person. Abuse that takes place in a familiar place at the hands of people known to the child is likely to be qualitatively different from abuse by strangers, or taking place in a strange place, even an unfamiliar country and culture in the case of some trafficked children and young people. Whatever the

context, any events that cause a child to experience a high level of threat, especially when it is repeated, are likely to require support with recovery.

Single traumatic events may also trigger an acute trauma response, overwhelming the child's ability to cope for a period, which may be long lasting. Repeated traumatic events may lead to more complex trauma responses that affect emotional responses and relationships, including with carers.

Resilience factors can moderate the impact of the trauma. While safeguarding social workers need to be aware of theories to help them support families through the crises that may have brought them to need help, or the crisis of a protection intervention, they also need to be aware of the impact of trauma in many such families, particularly when family members have experienced repeated trauma. Once a child is in a stable supportive environment, recovery can begin. The aim becomes the healing of past trauma and the child's development of confidence in herself and the world around her. Social workers need to be able to engage with another area of theory relating to resilience to do this. There is insufficient space in this chapter to do justice to this essential aspect of safeguarding practice. Useful introductory material is available at NCH (2007), Pearce (2011) and Hart, Heaver, Brunberg, Sandberg, Macpherson et al. (2014).

Conclusion

The theories and theoretically derived approaches to working with children and families in safeguarding and child protection are varied, encompassing both overarching theories such as attachment theory, and evidence and theory-based approaches linked to a specific methodology, such as crisis intervention theory. Evaluative, outcome-based research can tell

practitioners how successful certain approaches and techniques are in bringing about positive change, keeping children safe, or leading to positive outcomes. To be truly accountable, one has to be able to say not only what one did, but also why one did it, and how the approach taken to keeping children safe fits with a theoretical understanding of the wider social world within which children live.

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