

UCD SCHOOL OF APPLIED SOCIAL SCIENCE

Scoil an Léinn Shóisialta Fheidhmeannaigh UCD

WORKING PAPER SERIES

2014

Navigating Child Welfare and Protection in Ireland with the Help of the Fifth Province

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WP36

April 2014

UNIVERSITY COLLEGE DUBLIN

Coláiste Ollscoile Baile Átha Cliath

BELFIELD DUBLIN 4

Navigating Child Welfare and Protection in Ireland with the Help of the Fifth Province : Dr Valerie O'Brien

Abstract ¹

It is evident that attention to child welfare and protection has been intensifying in Irish society. This is seen in many spheres - political, social and cultural. Legalism, bureaucracy and procedures are recognised as key drivers of Child Welfare and Protection systems. As a result, both the children and families served and the professionals involved are becoming more frustrated. Specifically the intervention options that are available and being utilized are seen as limited. On a more positive note, the constraints of the system are being debated. There is a commitment at policy and practice level to creating a system in which partnership, strengths, and empowerment have a place alongside the dominant focus on risk, safety and protection. The extent to which the recalibration aspired to in the system can occur remains a major question, however.

This paper contends that an understanding of the major trends in child protection is vital for the systemic professional and supervisor, irrespective of the context in which they are working. Furthermore, it suggests that, through building on the earlier work of its developers, the Fifth Province model provides a useful conceptual and intervention framework for supervision and case consultations. The diamond-shaped diagrams which are the hallmark of the Fifth Province approach, as well as an appreciation of mandate and commissioning and a focus on the domains of law, policy, values and resources are among the concepts that offer the professional and supervisor an opportunity to re-appraise and give direction to this area of work.

The paper is divided into two sections

(1) An overview of child protection and welfare (CP &W) trends in Ireland

¹ Special thanks to Dr Imelda McCarthy and Dr Nollaig Byrne for their generous guidance and mentoring over the years and particular gratitude in this instance to Dr McCarthy and Ernst Salomon for the use of their unpublished paper.

(2) Key aspects of the Fifth Province model, including concepts that may be useful in CP & W supervision and consultation.

Section One: Overview of Key Child Welfare and Protection Trends in Ireland

Service Delivery

Up until 1 January 2014, child welfare services have been delivered as part of the health care system in Ireland since 1970. In the past decade, there has been an unprecedented degree of organizational change in health services delivery, with all the implications that major change processes of this type engender. With the setting up of the Health Service Executive (HSE) in 2004, the system changed from a region-based administrative system to a national health service. A decision was made in 2012 to separate child welfare services from the national health services (HSE) and to set up a National Child and Family Agency. The agency, TUSLA came into being on 1 January 2014.

A major target for the new Child and Family Agency is to provide consistent and standardized child care services across the country. A package of 'business processes' are being developed to enable this to happen (HSE 2009). There has been much debate about this departure prior to its roll out (Buckley 2009, IASW Special Interest Group, 2011, Featherstone et al 2012). On the one hand, the need to ensure standardization, transparency and equity in service delivery is welcomed generally. However, the challenge remains to retain sufficient flexibility to enable professional judgment to have a central place and to avoid the negative features associated with overly procedure-driven systems that have been identified elsewhere (Munro 2011).

A further concern is that the separation of child care from the health service, and the stand-alone nature of the new agency, will militate against achieving well coordinated, multi-disciplinary services. These factors have been associated in recent years with achieving better outcomes for children. Despite the political commitment (Department of Children and Youth Affairs 2012) and the strategies now in place to address many of the issues, implementation of key steps is at an early stage of development. There are some signs of progress, yet the possibility of failure, or at least failure to achieve the full potential of CFSA, may connect with two major factors, according to McKeown (2013) and Owen and Dietz (2012). Firstly, previous

attempts by the HSE to reform services for children and families largely failed. Secondly, relatively few structured change efforts achieve success. Most just get by, while the majority fail to reach pre-defined performance goals and objectives. The major structural changes underway will impact hugely on future developments of child protection and welfare in Ireland. The interconnection between this wider systems change and specific features of the system are now discussed.

Legislative basis

The turning point for legislative change regarding child protection is linked to the Children Act, 1908. This Act represented a notable shift from a punishment-centred ideology with regards to child protection, where parents were prosecuted, to a casework ideology where practice was based on the supervision of parent / child relationships in their homes (Smith, 2011). The development of child protection legislation was to remain firmly rooted in the principle of family autonomy. The principle of family autonomy and minimal State intervention, was further endorsed by the dominant social teaching of the Catholic Church. This principle became enshrined in the Irish Constitution in 1937, thus limiting State interventions (Raftery & O'Sullivan, 1999). The consequence of this limited approach was that the constitutional support of the rights of the parents was not matched by similar support for the rights and welfare of children.

The pace of legislative change was slow and it was not until the Child Care Act was introduced in 1991, followed by the Children Act, 2001 that any significant change occurred in the system. According to Shannon (2005), an exception to this was the introduction of the Guardianship of Infants Act, 1964. This law represented a significant change through the introduction of the principle of paramountcy. This provided that, where conflict arose between parents and children, the best interests of the child must be the first and paramount consideration. Nonetheless, it was not until the constitutional referendum in 2012 that an opportunity emerged to strengthen children's rights as well as consultation and participation. The outcome of the 2012 ballot is the subject of a judicial challenge and thus the final conclusion of this referendum is still awaiting a court decision.

Legacy Issues, the Public and Politics

Legacy issues associated with the past treatment of children and their families by the child welfare system have been a recurring theme in Ireland for the past fifteen to twenty years (Raftery & O'Suillivan 1999). The focus on abuse of children within institutional settings (Ryan 2009) and the abuse of children by members of the Catholic Church (Murphy 2009; Keenan, 2011, 2012) have resulted in public outrage as well as debate on the country's failure to protect vulnerable children in recent years.

As well as legacy issues, public and political interest in child welfare has gained further momentum in recent years through examination of contemporary practices arising from perceived and dramatic failures to protect vulnerable children. Recent investigations and reports on individual child protection interventions continue to shock the country, e.g. the Roscommon Child Care Inquiry 2010. An in-depth examination of the cases of children who died while in the care of the HSE (or who died soon after leaving care) has been undertaken by Shannon & Gibbons (2012). The litany of failures and accompanying series of investigations/ reviews have led to a major focus on child welfare interventions (Morris 2011, Buckley & O'Nolan 2013). The issues of child abuse and children's rights have been routinely propelled by the latest scandal and continue to occupy a high position on the political agenda.

This has prompted policy changes (Department of Health and Children 2000, 2007), a revised focus on procedures through the updating of Children First (2011), recognition that frameworks must focus more on inter-agency collaboration, early intervention and prevention as well as major restructuring of the services (Buckley & O'Nolan 2013; DOCYA 2013b). The provision by the new Government in 2011 for the first time of a full cabinet position of Minister for Children with her own separate Department is heralded as an indication of the political commitment to making major changes in the child welfare system. Nonetheless the paradoxes of the system remain and have led to situations where professionals are:

'routinely publicly criticized BOTH for being over-judicious AND for incompetence in dealing with situations of disclosed and suspected abuse. Prejudicial over-reaction that a suspected abuse is indisputable without adequate corroborative evidence AND an apparent non-acknowledgment of the

seriousness of disclosed abuse are the most frequent complaints.' (McCarthy and Salamon, p. 2).

Ireland's child welfare system shares many similar trends to systems in other jurisdictions (Buckley 2008, Buckley et al 2011, Dale 2004, Ferguson 2007, Parton 2004, Spratt & Callan 2004). There has been a major emphasis within policy and practice on partnership, solution-focused and family-centered practice and commitment to family support. Where care is needed, there is acceptance that the children can have complex needs that warrant a range of responses, and that kinship placement is a preferred choice if possible (O'Brien 2002a, 2002b, 2002c, 2012a. 2012b). Paradoxically, there is evidence that the system is becoming more risk averse and is characterized by growing managerialism, legalism and reliance on tighter and tighter procedural approaches, certainty and prediction (Lynch & Burns 2012, Featherstone et al 2013).

It is useful to unpick the range of paradoxes, oppositions and polarities that are inherent in the system. A number of polarities that are a feature of the current system are presented in Figure 1. A systemic emphasis on taking a 'both / and' position, as opposed to an 'either / or' position, provides a useful lens to conceptualize these processes. It is contended that without such an analysis, the challenge facing professionals and supervisors remain, interventions are constrained and progress is impeded.

Figure 1 :

Polarities Shaping Practices in the Child Welfare and Protection System : A

Continuum Perspective

Child Protection Focus	Child & Family Welfare Focus		
Investigative / Surveillance	Engagement / Supportive		
Risk Averse	Risk Sensitive (Sensible)		
Danger	Safety		
Legalistic / Bureaucratic / Procedural	Community Protection / Bottom Up / Judgment		
Family as Potential Threat / Pathology	Family as Protection / Strengths		
Professional Centered	Family & Child Centered		
Crisis Driven	Focus on Early Intervention		
Certainty / Predictive	Uncertain		

Current Activity Levels and Information Systems

While major change is occurring and there is discussion in respect of what system characteristics should be given priority and how to militate against what McCarthy terms the 'abuse of control' in the midst of 'control of abuse' (ref), there are nonetheless huge levels of ongoing activity in the system that has be managed. Examples of such activity are presented in Figure 2. The data presented contains referral rates to both child protection and child welfare system, the numbers of children admitted into care annually and the total number in the care system each year between 2006 and 2011. The data presented is far from exhaustive. Unfortunately, it is not possible to access the specific rate at which the yearly abuse and neglect referrals are substantiated. Nonetheless, the data gives an indication of the range of decision-making and interventions that are occurring within the system. While the level of data now available has improved hugely over the years, a major information shortfall remains in the system. This has been acknowledged by successive administrations and steps have been taken to address the issue. Nonetheless, it will take several years to

bring the information system to an improved level and in the meantime, this remains a major impediment to trend analysis.

 $\label{eq:Figure 2:} \textbf{Activity in Child Welfare and Protection System}$

Year	Child Welfare Referrals	Child Protection Referrals	Total Number of Children in Care System	Total Number admitted to Care per Year
2006	11,579	9,461	5,247	1,845
2007	12,715	10,453	5,307	2,134
2008	12,932	11,736	5,345	2,013
2009	14,875	12,013	5,674	2,372
2010	16,452	12,825	5,965	2,291
2011	15,808	15,818	6.160	2.218

Source: HSE, Review of Adequacy for HSE Children and Families Services, 2011 Department of Children & Youth Affairs 2013b

The Economic Crisis and its Impact

The economic crisis, which commenced in late 2007, after the period of biggest boom in Irish history, has led to huge levels of personal indebtedness, rising unemployment, emigration as well as dependency on social welfare and growing levels of poverty and inequality. These are classic factors, which generate need within child welfare systems. However, the dramatic deterioration of Ireland's economic situation over the last seven years is also a major determinant of the direction in which public services, including child welfare, will go in the years ahead. Up until Ireland exited the 'bail-out', much of our economic policy was determined by 'The Troika' - the combination of EU institutions, the European Central Bank and the IMF who provided funding to run the state. Notwithstanding the local political will, it is a major question if government will be able to channel adequate resources to child welfare and protection

to achieve the outcomes envisaged in the future and to manage the level of change. Meanwhile, the front-line professionals and managers are working to deal with the levels of complexity in the context of constrained resources that has been outlined in this section. The need for appropriate frameworks in order to manage complexity in a supervisory context have never been more pressing.

Section Two: The Fifth Province Model and Concepts that may be Useful in Supervision / Consultation.

The Fifth Province model is a framework that can assist in understanding the complex networks of relationships, processes and contexts involved in child welfare and protection. The Fifth Province model was developed from clinical research in the area of sexual abuse disclosure from the early 1980's (McCarthy 1991; McCarthy & Byrne 1988). It has been elaborated as an approach for working with complex systems with particular reference to family and state relationships, poverty, gender inequality and marginalisation (Hyden & McCarthy 1994; Byrne & McCarthy 1995, 1999, 2007; Byrne 1995, Flaskas et al 2005, McCarthy 2010a); intercultural issues (McCarthy & Byrne 2008); power (McCarthy 2010b), institutional abuse in the catholic church (Keenan (2011) and dialogical co-creations (McCarthy 2010a). While its roots are in the area of sexual abuse, it has been applied to the wider child protection and welfare arena through the work of Byrne & McCarthy 2007, McCarthy & Salamon (unpublished). It has also been applied within alternative care, especially the area of kinship care (O'Brien 1997, 2012b, 2012d) and adoption (O'Brien & Richardson 1999, Conway & O'Brien 2004). The Fifth Province model has gained considerable recognition in the systemic field (Hoffman, 1988; Hannah & McAdam, 1991; Tomm, 1992; Stroier, 1993; Anderson, 1997; O'Brien 1999, 2000, 2009, 2012b; Partridge, 2007; McGolderick & Hardy 2008.

The creators attribute the principal influences on their developing model to Milan systemic therapy, Bateson's application of cybernetics to understanding movement in systems, Maturana's focus on emotions and Irish mythology. The Fifth Province approach is a post-Milan clinical application that utilizes a cybernetic frame to conceptualize specific relational and thematic configurations in a context in which the therapist/researcher is a participant. The model challenged and extended the Milan use

of neutrality by developing a therapeutic approach for systems involving families and state agencies, where issues of social control were to the fore.

The name 'Fifth Province' is drawn from Irish mythology and the work of Hederman and Kearney (Kearney et al 1989; McCarthy 2005). According to McCarthy (2010b), the myth is that

'the fifth province was situated right in the centre of the country where the four provinces were thought to have met. It was said that it was a pagan Druidic site where kings and leaders from the other provinces came to settle their conflicts and reconcile their disputes through conversation and talks. Arms were left aside as people came together to speak and receive counsel. It was a place of dialogue where all opposing and contrasting views could be held together, heard and voiced in a non-violent way' (p.2).

Thus, as a metaphor, the Fifth Province is an ethical disposition that speaks to the possibility of openness (McCarthy 2010a).

Concepts of the Fifth Province Model: Diamonds, Commissioning and Clarifying Contextual Domains

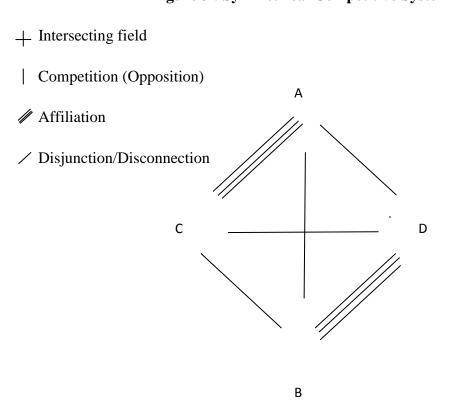
The main Fifth Province concepts discussed in this paper and previously discussed in O'Brien 2014a are the two structural formats of symmetric and complementary configurations of relationships, depicted on diamonds, together with commissioning, an understanding of the place of polarities and questions that assist in explicating contextual domains.

The Diamonds

Following Bateson's 1980 description of complementary and symmetrical interaction in systems, together with symbols influenced by the work of Minuchin (1974), two diamond structures were developed by the Fifth Province associates within which relationships, themes and discourses could be mapped (McCarthy 1991, 2010c; Byrne et al 2002). These are symmetrical competitive systems and complementary cooperative systems, as illustrated in Figures 3 and 4.

A symmetrical competitive system is a description of a social field, which has an ambivalent structure of opposition and contradiction. This is evident in the divergence of discourses and the mutually opposed position of participants. The diamond shape used to denote a symmetrical competitive system is in the form of A:B::C:D (Figure 3). An example of this system in a child protection context is court proceedings, where statutory agencies (A) are aligned to the child for the purpose of protecting the child (C) while the parents (B) are also aligned to the child (D) in their claim that they have been able to offer sufficient protection. In this instance, both family and professionals are invoking the court to adjudicate in their favour.

Figure 3: Symmetrical Competitive System

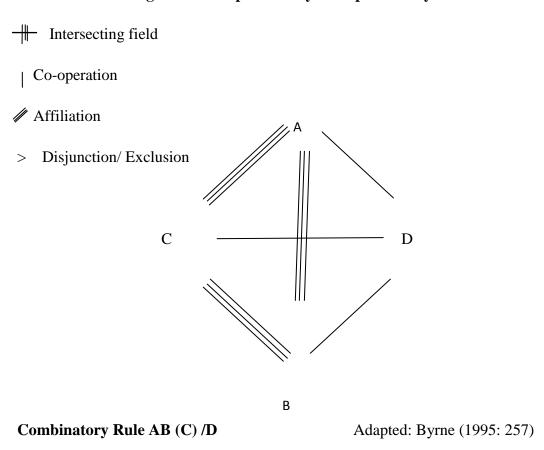


Combinatory Rule A:B::C:D

Complementary co-operative systems refer to systems that have an ambivalent structure of contrast and exclusion. According to Byrne, in the complementary system, 'a combinatory rule operates that establishes a tripartite field of affiliation with the fourth pole excluded' (1995: 256), as illustrated in Figure 4. The issue of exclusion based on difference or inequality has implications for intervention particularly if, by the intervention, the voice that is already silenced continues to be silenced or

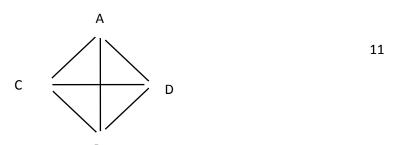
marginalised. Likewise if the intervener aligns with the silenced voice to the exclusion of the other participants, the intervention may be disqualified, leading to either a removal of the intervener from the system, or the system may change to a symmetrical competitive system. An example of this system in child protection is one where the parent/s involved in allegations of abuse is marginalized (D) and there is a structural /aligned relationship between extended family (A) and statutory agencies (B) in respect of the protection of the child (C).

Figure 4: Complementary Co-Operative System



In addition to the diamond structures used to depict a symmetrical competitive system and a complementary co-operative system, a **'rough diamond'** is also used to illustrate the connection of themes and relationships to one another and is useful in the mapping of unfolding processes. It is illustrated in Figure 5 and applied specifically to child protection risk and assessment in Figure 6.

Figure 5: Rough Diamond



The creators incorporated the imagined Fifth Province into the four-way diamond figure to position the team and guide the inquiry. Placing the team at the central confluence where continuum lines form the central point of the diamond figure was thought by the creators to bring forth for them a 'fifth province' within a therapeutic setting. The team were implicitly and explicitly part of all possible triangular configurations (McCarthy 1991: 126). The themes, as presented on the diamond, are 'intended to facilitate the exploration of standpoints as opposed to the premature capture and resolution of the opposing elements' (Byrne and McCarthy 1995: 49). McCarthy's (2010c) work expands on the format where she says that the diamonds are play-things and 'not carved in stone'. They are 'socially situated constructions, which are produced in the inter-weave of conversations between participants... they serve mainly as temporary scaffoldings to support work in complex situations' (p 1). Four important concepts, ambivalence, position of the intervener, potential for negativity and holding contradictions and oppositions have emerged as crucial guides in their model to avoid the potential for progressive escalation. In extreme instances however, difficulties may nonetheless result in relational cut-off and the breakdown of the relational system.

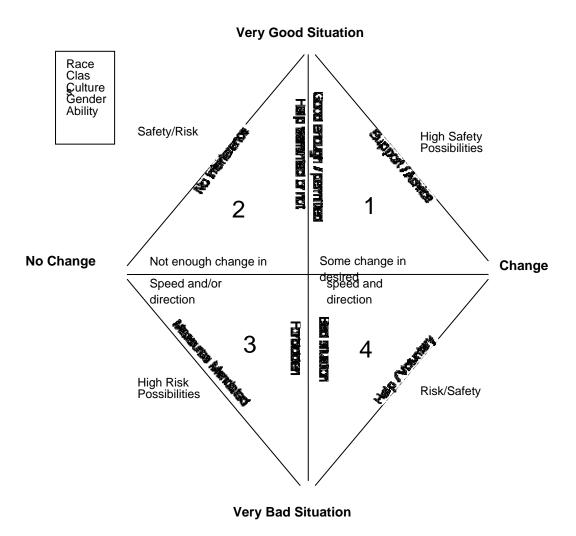
The Work of McCarthy and Salamon

In McCarthy and Salamon's approach to child protection consultation, 'diamond maps are used to act as holding frames for ideas, scales and questions in relation to the often contradictory and opposing expectations and dilemmas associated with child protection mandates.....' p 3. The diamonds can be used to

- deconstruct fixed states ('either/ or' scenarios as presented in Section One) through introducing continuums and scales and
- introduce possibilities (more or less scenarios) by way of clarifying and creating the means by which protective actions and change may happen.

In their work, they use a Risk-Safety Assessment Diamond to elaborate four different domains including the dilemmas and possibilities for intervention in situations of child protection.

Figure 6: McCarthy & Salamon: Risk - Safety Assessment Diamond.



Source McCarthy and Salamon (unpublished).

A number of further concepts inspired by the model that may be useful in supervision /consultation contexts when dealing with child protection and welfare work are now presented and discussed. They are

- (1) Navigating an Understanding of Self in Context
- (2) A Quadrant Analysis L Explicating Domains of Influence and Action
- (3) Clarifying Commissioning, Help giving. Taking Measures and Assessment
- (4) Themes, Continuums and Building Diamonds to Aid Assessments

Navigating an Understanding of Self in Context

Irrespective of the specific context in which professionals work, the following questions may be useful as a starting point in supervision (or as part of self-reflexive processes).

What kind of professional do I want to be?

What are the ideas that underpin this aspiration / vision and what are the experiences that have been instrumental in its development?

What are the ideas in the field that are shaping this vision?

Are there other ideas or knowledge that have been ignored, negated, or not attended to in this elaboration?

If client/s and professional colleagues that I work with were asked, what might they say about how this aspiration appears vis-a-vis their experiences of my work?

What are the opportunities and constraints that are enabling this vision to occur?

While these questions are applicable across a range of settings, and can be used to facilitate conversation towards building an understanding of context, a further excavation is needed when the professional holds mandated responsibility. The level of responsibility may be clearer for the professional if working in a front line child protection service. However, many do not work in such settings and yet they may also carry responsibilities regarding child protection. The 'commissioning concept, drawn on the work of Salamon et al 1991, Salamon 1994a and McCarthy and Salamon (unpublished), outlined later is designed to facilitate this exploration.

A Quadrant Analysis - Explicating Domains of Influence and Action

A key requirement in the supervisory context is to understanding the inherent contradictions and conflicting ambitions of the child protection and welfare system. This entails clarifying and appraising the different contextual spheres, domains of action and the relational fields involved within which meanings are constantly constructed, negotiated, accepted and negated.

Four key domains/ quadrants are presented in Figure 7, which represent Law, Policy, Resources and Values. Specific orientating questions to facilitate exploration of each domain are also contained. This builds on the work of McCarthy 2002 and McCarthy and Salamon's earlier work in child protection consultation (2002).

When using the framework outlined in Figure 7, consideration of each individual domain is helpful in the first instance and then the inter-relationship between the domains as a source of action and constraint can be explored. Key aspects of each domain are discussed below as an illustration.

Law: Attention to the legal context requires the professional to have a good working knowledge of law and regulation, as well as a realization that, even in this context, judicial adjudication may vary. Attention to how a question is constructed and asked will bring forth different answers. Nonetheless specific actions required or expected will be clarified by an exploration of the question: 'What **must** I do in the legal context?'

Policy: A key question to assist the influence of policy on the work is 'what **should** I do?' This requires the professional to be aware of the relevant policy, standards and best practice frameworks that are in existence. Within organizations these may be written but, in other instances, they may not be and instead have been handed down as part of an oral culture. In child protection and welfare, attention to what is required by statutory agencies, the professionals own agency (may or may not be the same) and the terms of agreement if services are provided on a contracted-out basis is important. For example, there is no mandatory reporting in Ireland, nonetheless employees of the Health Service Executive (HSE), TULAS, Education and Justice statutory services are bound to comply with Children Protection Guidelines (Children First 2011) based on specific agency guidance in place. If a professional is working in private practice or the voluntary sector but if the work being undertaken has been contracted out by the statutory agency, it is crucial that expectations are clarified re the remit and limitations of guidance.

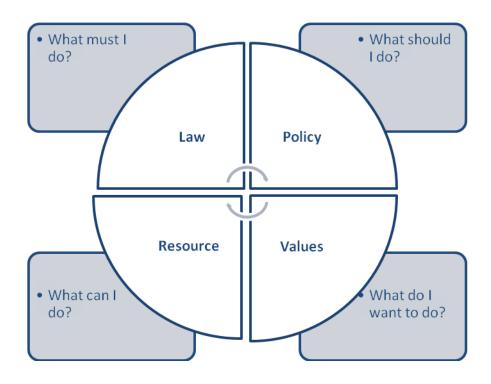
Failure to adhere to policy and guidance can lead to agency disciplinary action (as well as complaints by clients / family members to the professional's own registration / professional body). Therefore failure to consider adequately 'what one should do?'

can lead to difficulties for the professional and can also leave children in vulnerable situations.

Resources: The third quadrant considers resourcing issues and the question 'what can I do?' drives this exploration. The limit of available resources is a recurring theme as discussed in Section One together with the impact of ongoing staff shortages, service restrictions and cuts to budgets being felt acutely. Meanwhile, there is renewed focus on value-for-money, and an emphasis on processes that are accountable, transparent, quality-focused and outcome oriented. Nonetheless, long waiting lists, exclusion of prior populations from service delivery, service re-organization and stringent meanstesting results in high levels of frustration for both clients and professionals alike. Therefore, what the professional can actually do needs to be clearly articulated.

Values: The fourth domain is values and the relevant question is 'what do I want to do? A clash between the professional's aspiration and the existence of limitation / restrictions in other domain/s is a regular feature of the working context. Examples of such clashes may be wanting to protect the child (Value) but not having adequate evidence to convince the court (Law); wishing to provide a service to families (Value) (e.g. couple work may be indicted) but the agency does not provide this intervention and the only available service is 50 miles away and the family do not have transport (Resources) or the agency does not provide this service even if skills are present (Policy); wishing to work in a more creative way (such as providing wrap around services to all family members) (Value) is simply not possible as other professionals involved are more intent on adhering to standard approaches rather than being open to innovation and pioneering new formats of intervention (Value).

Figure 7: Domains of Influence and Action



This framework has potential to be utilized at different stages of the work, thus enabling a focus on time and space. Complexity of process and dynamic change are often present when working with child protection and welfare cases. It is not uncommon for professionals and family members to get caught into dominant narratives such as the 'damaged child' or the 'abusing or neglectful parent' and 'the protective professional', while narratives such as 'positive parental capacity' the 'resilient child' and 'the enabling professional' may become more marginal in the work. Ongoing attention is thus needed to examine the emerging evidence base for all claims.

The analysis can enable the professional to unpack narratives and dilemmas that may be present and, in the process, different options for action may become clearer. The framework can also be used to appraise the agendas of different participants such as the child, parent(s), professional(s) and other extended family members. As part of supervisory/reflective conversation the following questions may be of assistance:

What are the difficulties I am experiencing? Which domains are most involved? What is the relationship between the domains that may be most pertinent at this point in time? What actions may be useful to navigate the best way forward, including who do I need to talk to and about what?

Clarity re Commissioning, Help Giving, Taking Measures and Assessment

These concepts build on the AGS work in respect of commissioning (Salamon et al 1991) and the work of the Fifth Province model and has been elaborated in McCarthy and Salamon (2002) & McCarthy & Salamon (unpublished) work. Commissioning refers to the need for clarity regarding whose service the professional is working within. Questions in supervision that may be helpful to establish clarity re commissioning and the hierarchy of parties involved are as follows:

Who is asking you to do what for whom?

On what basis are you doing what for whom? and

Who is expecting you to do what and for whom?

A focus on the relationship between the commission and commission-giver thus enables professionals to consider 'who they are working for, on what terms and with what potential consequences if actions are taken or not taken?' For example, if the professional is working within an agency that carries a child protection mandate, then the professional is working primarily in the service of the State (primary commission giver) and may secondarily offer support and help to those who use social services (secondary commission giver), but only if the client agrees to the service being given. If the person or family does not agree to the service offered, they may 'become target persons in relation to interventions'. As a result of this analysis McCarthy and Salamon deem it important to define clearly the terms, 'help giving' and 'taking measures'.

'Help' refers to actions taken with the prior agreement of the client. It involves changing an undesirable and/ or forbidden situation according to agreed parameters. For an intervention, premised on co-operation, to be classified as 'help' there needs to be prior agreement for the actions to be taken in the future both by the social worker and the service user/ client. All un-agreed (though perhaps well-intentioned)

protective actions on the part of the social worker we refer to as 'taking measures' (pg 3)

This analysis enables professionals to understand contradictory and sometimes unexpected processes that may arise when working with cases. Many professional have had the experience of working hard to provide a service to the client only to find the client becoming angry and dismissive about their actions and complaining about the intrusion, sometimes quite unexpectedly. Therefore it is crucial for the professional to distinguish situations when they have a mandate for support / therapeutic assistance and when they are operating from a basis of controlling/ taking measures. McCarthy and Salamon's 'Risk and Safety Assessment Diamond' presented in Fig 6 illustrates a number of situations that may arise when the professional is navigating within the child protection and welfare arena.

Clarity regarding mandate however has the potential to become more confused when the professional is working outside a specific child protection agency. In this instance, it may be useful for the professional to be first aware of the agency's protocols (policy) and secondly to make these clear to the client. A discussion regarding the limits of confidentiality, co-operation and in what situations the professional may be compelled to take action (take measures) is important. In recent times, the implications for working with cases of historical abuse where the alleged abuser is still alive present many clinical and ethical challenges for professionals working across a range of settings. A focus on domains, commissioning and commission-givers can assist the supervisory conversations in these cases.

Assessment, Commissioning and Intervention

Assessment is a core skill required when working with cases of child protection and welfare. While assessment of the wider system, is provided for by domains of influence and action outlined in Figure 7, four situations that may require attention in an individual child protection case are:

- 1. Assessment as to whether a situation of concern is permitted or forbidden and to what extent it is viewed as a risk and by whom (high or lower risk).
- 2. Assessment of the situation for the child depending on developmental stage in terms of impact (high or low consequences).

- 3. Assessment as to how change can/ may be achieved if it is desired, requested and/ or necessary and the extent and timeframe within the change needs to occur (high change and low change).
- 4. Assessment of the capacity of the parents and the extent to which there is capacity for change i.e. capacity based on abilities and capacity in relation to resources needed to ameliorate a concern i.e. addiction/ homelessness etc (high and low capacity).

The themes of concern, change, capacity, impact and risk outlined in Figure 8 are core to assessment and should be seen as operating on a continuum from high to low (Low should not be confused with No, as there is usually stringent gate keeping by which cases enter a 'child welfare and protection' description. To facilitate an assessment /appraisal, these themes can be mapped on a series of diamonds and one such diamond is outlined in Figure 9 for the purpose of illustration.

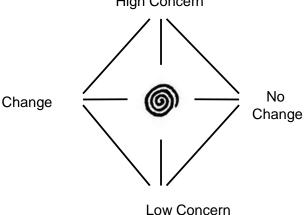
The themes are selected and mapped on 'x and y axis' in the first instance. Different types of scaling questions can then be used to assess the current situation, while future-orientated questions can be used to give an appraisal of where the supervisee would like to get to in terms of change. McCarthy and Salamon suggest that scales allow one to avoid fixed positions and dichotomous thinking and to move (slowly) across a range of possibilities on the continuum. Furthermore, they suggest that future-orientated questions can also be referred to as QRG's (Qualified Realistic Guessing Questions) and can be used for the purpose of appraising future options.

Figure 8 : Polarities of Themes may be Central to Assessment in Child Protection and Welfare

High CapacityLow Capacity (can be ameliorated or not)
High Concern Low Concern
High Change Low Change
High Impact Low Impact (Consequences)
High Risk Low Risk (Levels of Safety)

In supervision, it is useful to build up a sequence of diamonds using two different themes per diamond, e.g. capacity and concern; capacity and risk, concern and change, change and risk, capacity and risk etc. and to use scaling questions usually from 0 (lowest) and 5 (highest) to denote current understanding of the situation. Through the construction of the diamonds, a fuller assessment of the situation is enabled to develop. In the conversation, it is important to draw attention to the basis (evidence) for the judgment being used and to also pay attention to differences in views among various stakeholders. When there are such differences, the differences and what accounts for this becomes the subject of further exploration, and attention to power hierarchies in the constructions are very important.

Fig 9: Example of Diamond Depicting Concern and Change
Variables (Adapted McCarthy & Salamon 2002)
High Concern



The construction of the diamonds occurs as part of the supervision conversation and attention is also paid to the emotional field that the supervisee, other professionals and the family are operating within. It is also necessary to attend to the emotional field of supervision. It is common in the child welfare and protection field that a wide range of emotions (many negative ones) may be present and specifying which emotions are dominant and marginal is important.

Towards the end of supervision, the sequence of diamonds drawn are reviewed and some of the following questions may be useful to enable the supervisee to clarify action that they are thinking of taking or perhaps need to take:

What now needs to happen to be more assured that the child is safe etc?

What do you need to see happening to convince you that this action is the correct/helpful/needed one etc?

Who else needs to be convinced?

What do you now need to do in respect of this situation?

Who else do you need to involve and are you clear regarding who is commissioning you to do what and for whom?

In the final instance, attention to where clinical responsibility lies is reviewed and attention is given to clarifying the supervisee's internal line management structure. Once again a focus on commissioning enables this analysis to take place and the supervisee is helped to clarity the difference between consultation discussions and internal clinical decision-making structures / expectations. A distinction between the parameters of external and internal supervision is most important in this analysis.

Conclusion

Through this paper, it has been argued that systemic professionals need to understand the child protection and welfare arena, irrespective of their work setting. Through a detailed discussion of trends, it shows a field that is characterized by high levels of complexity. However it is suggested that the Fifth Provence approach offers a methodology to enhance both understanding and interventions. The approach, in particular

- provides a conceptual lens, which illustrates the socio-political context of family/ state relationships as operating simultaneously within the public and private domain.
- contributes a method of analysis where, through use of diamond-shaped structural maps, emerging themes can be mapped through a representation of alignments and non-alignments.
- This scaffolding enhances an understanding of the polarities, contradictions / oppositions and ambivalences inherent in the work.

 Provides a number of frameworks and concepts to assist professional's positioning and reflexivity, provides different types of systemic questions to enable issues to be opened up placing emphasis on the importance of clarity re commissioning objective/s and assessment parameters.

While a range of concepts and analysis are offered, it is important to hold these concepts lightly and to keep the focus on reflective, respectful, partnership and relational practice while staying very tuned into the ethical, cultural, political and policy considerations that are at the heart of child protection and welfare work. This idea fits with the recent call among researchers and professionals (Connolly 2007, Munro 2011, Buckley & O' Nolan 2013) that a more 'relationship-based' intervention model, based on the principles of partnership, respect and collaboration and where the child is protected, is needed urgently. The Fifth Province can facilitate inclusive collaborative relational conversations among the participants in the child protection and welfare context. However, supervision and consultation needs to be central to this work if the aspirations are to be realised.

A Final Thought

Looking back since my first introduction to the Fifth Province model in 1987 (as part of Family Therapy Professional Training), I can say that it has been the most beneficial and frequently used approach which I have employed in my clinical, supervisory, research and consultancy work (O'Brien 1997, O'Brien 1999; 2000, 2001; 2002, 2009, 2012b; O'Brien and Richardson 1999; O'Brien & Lynch, 2002; Conway & O'Brien 2005). I especially value the possibilities it offers for understanding dynamics, processes and complex systems. At its simplest, the diamond structure provides a method to freeze-frame a situation, allowing the therapist/supervisor/ consultant and researcher to gain greater understanding of their own position as well as the position of others. At a more complex level, through an understanding that all is not 'written in stone', it creates possibilities for understanding, intervention and reflections.

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