



PSDP—Resources and Tools: Assessing the applicability of research to work with a child, young person and family

Introduction

This learning tool provides you with a template that practitioners can use to evaluate how well research findings, whether from a review or a single study, fit with the circumstances of work with a child, young person or family.

In the first section of the tool, a blank template is provided which provides a structure for critically reflecting on how research findings might apply to work with a child, young person or family.

It can be helpful to ask staff you supervise to work through the template prior to a supervision session and then consider their findings as part of the wider discussion about ongoing work with a child or family.

You may wish to suggest a particular research study yourself, tailored to the learning and development needs of a particular supervisee. Alternatively, it can be useful to have a discussion in supervision about how supervisees access and draw on research in their practice, and ask staff members to identify a research study themselves.

However you choose to use it, the template and ensuing discussion provide useful opportunities to engage in a reflective discussion in supervision, which explores some of the challenges and benefits of using research findings in practice.

In the second section of the tool you can see a completed template, which explores whether or not findings from a research study are helpful in relation to a hypothetical example of work with 'Billy' (a 15-year-old boy).

Section one: assessing the applicability of research to a family

This tool is intended to help you assess how well research findings – whether from a review or a single study – fit with the circumstances of the particular child and family you’re considering.

Research findings	Areas of similarity / difference with your child and family
What is known about the theoretical perspective of the study / authors?	
What is known about key aspects of the policy context e.g. mandatory / voluntary regime, underpinning ideologies or policy intents, agencies involved?	

Research findings	Areas of similarity / difference with your child and family
<p>What is known about the study setting e.g. institutional, geographical, time period?</p>	
<p>What is known about the study population e.g. what details of the demographic such as ethnicity, gender, age and disability have been collected? Is it representative of the wider population? How is the seriousness of problems defined and measured?</p>	

Research findings	Areas of similarity / difference with your child and family
<p>What is known about the service or intervention (if relevant) e.g. duration / number of contacts where provided, agencies involved?</p>	
<p>How is the research helpful for practice, e.g. for which children are the findings most applicable? Which children are at higher or lower risk? Is this affected by gender, socioeconomic status, sexuality or ethnicity?</p>	

Section two: the relevance of research to work with Billy

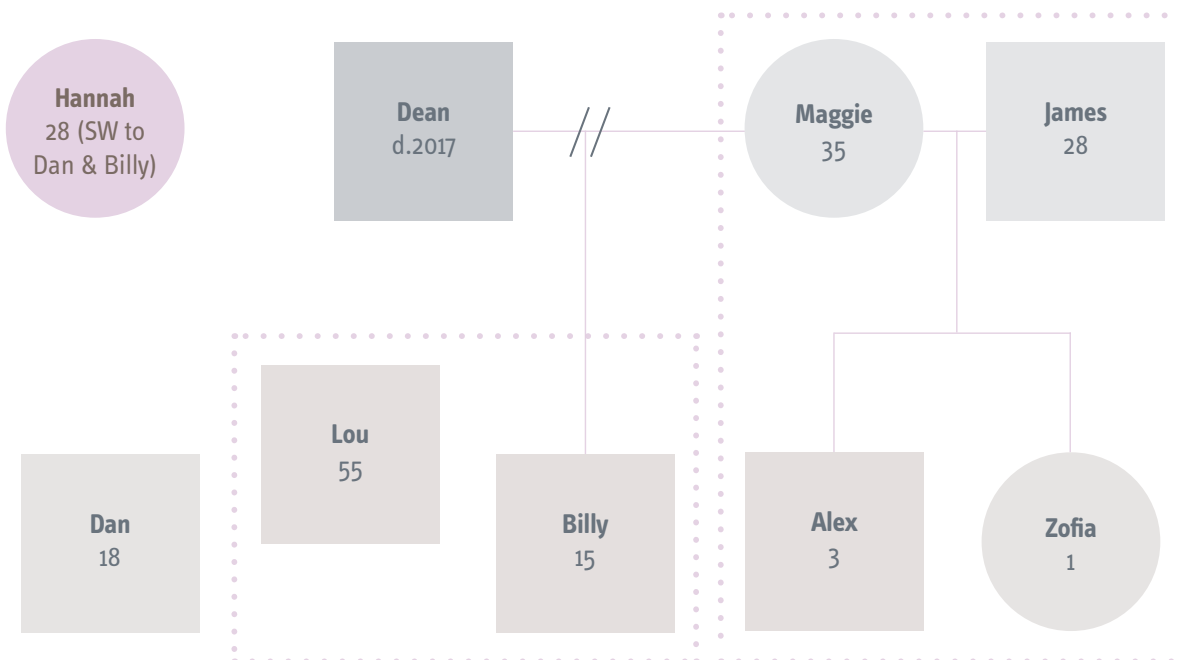
'Billy' is a 15-year-old, White British boy who doesn't practice any religion. Billy experienced neglect while living with his mother, 'Maggie', and father, 'Dean' (both of whom are also White British), who abused drugs and alcohol at the time. Billy was accommodated by the local authority soon after Dean went to prison and Billy was found at home alone on a number of occasions.

Dean's involvement in Billy's life was inconsistent depending on where he was living and whether he was getting support for his alcohol and drug use. Maggie has maintained regular contact throughout the time that Billy has been a child looked-after.

Maggie has had two other children in the last three years and they have continued to live with her and her new partner, 'James', with very little support required from Children's

Services after an initial period of assessment. Maggie is planning to seek work in the next six months. There are no longer concerns about her abusing drugs or alcohol and she has been discharged from support services for two and a half years. James - who identifies as Black British and is proud of his Caribbean heritage - works full time as a chef.

Billy has been in foster care since the age of five and has lived with his current foster carer, 'Lou' since he was eight years old. Lou's wife died before Billy came to live with him, and he has an adult daughter who lives abroad and visits at Christmas. Lou usually goes to visit her once a year, during which time Billy stays with friends of the foster family. 'Dan' used to live with Lou and Billy but has recently moved on to a semi-independent flat. He and Billy keep in touch via gaming and social media and meet up in town on the weekends.



They both have Hannah as their social worker.

Hannah had been supervising Billy's contact with his mother since she became the allocated worker six months ago, she collects him from school and takes him to Lou's afterwards. In a supervision discussion four months ago she explored the idea that contact could become unsupervised. She has begun an assessment of this which has progressed well over the last twelve weeks. Last week, Billy had a planned, unsupervised weekend visit to his mother's house for his baby sister's first birthday.

The plan had been for Billy to live with Lou until he was at least eighteen. In the last four weeks, Billy has been expressing an interest in going home to live with Maggie. This has meant that the assessment Hannah has been doing is beginning to take a different path.

Lou was supportive of discussing unsupervised contact but is not in agreement with the idea of Billy leaving his care. This week he has raised lots of concerns about Billy's recent behaviour and suggests there is a pattern of it becoming worse the day after he has been to see his mother.

Lou has raised concern about the way Billy and his stepdad argue on the phone and the impact this could have on the young children in the house if Billy were to go and live there. Lou says that Billy comes home hungry saying that they've only eaten unhealthy food. Lou has asked that Maggie doesn't come to the beginning of the next review meeting so that he can talk freely to the Independent Reviewing Officer (IRO).

Dan has recently left the foster home at eighteen. He has moved onto independent living. Hannah has been disappointed with Lou's support for this plan and doesn't fully trust what is being said about Billy as a result.

With Billy in mind, I am going to read Ankersmit L (2016) 'The reunification partnership: engaging birth parents and foster carers as collaborators in restoration casework' Australian Social Work 69 (3).

What does this research study say?

This is a quantitative study which explores the working relationship between foster carers and parents during reunification practice.

The paper highlights that collaborative working is fundamental in achieving good outcomes for children but there may be barriers created by traditional child protection practice that affect collaborative working between parents and foster carers. These exist in the wider systems, too.

Based on in-depth interviews with six social workers, the findings describe differing levels of motivation for building this relationship. Some social workers were sceptical or dismissive of the significance of it within the 'team around the child' while others actively promoted it.

Four key contributors to collaboration were identified as a result of the research study:

Trust in the process and people

Carers and parents enter the reunification process with mistrust, fear and suspicion of the system and each other based on previous experiences and assumptions. Workers need skills to 'roll with resistance' in order to move from a child protection approach towards a strengths-based, reunification framework. Some participants noted that a change of worker or inviting the carers into the planning process was helpful.

Motivation and willingness to collaborate

Social workers felt that parents would be motivated to collaborate once trust was established. They felt that, initially, carers were not generally motivated to collaborate and carers responded to a desire to protect the children from harm and / or to keep them in their care. Social workers reported that there was little requirement in the practice context to guide or creatively develop this and some workers were unmotivated to explore this as part of their role. Carers' motivation and willingness was linked to an openness to practitioner guidance, a belief in people's ability to change, recognising parents as worthy of their roles, and accepting different ways of parenting.

Knowledge about the process and each other

Social workers identified that knowledge impacted on the ability to trust and collaborate. For example, carers' views of parents may be formed on the basis of outdated or incomplete information about the family. Getting to know each other, sharing parenting knowledge, additional training and a shared approach to case planning were all seen as positive contributors to an improved knowledge base for reunification work.

Agreement with the plan

All of the social workers interviewed felt that collaboration required a level of agreement with the plan for reunification and that an absence of this agreement could be a significant barrier to collaboration. They recognised that agreement could be built through conversations about specific issues with a goal to reaching shared agreements between parents and carers about what was in the child's best interests.

The author also offers some suggestions made about how practice could be shaped in line with these findings. This includes promoting reunification as a specialism with social workers and foster carers selected because of their particular interest or skill in this area of work.

This tool is intended to help you assess how well research findings – whether from a review or a single study – fit with the circumstances of your particular work with a child, young person or family.

Research findings	Areas of similarity / difference with your child and family
<p>What is known about the theoretical perspective of the study / authors?</p>	<p>An academic in social sciences based at a university in Australia.</p>
<p>What is known about key aspects of the policy context e.g. mandatory / voluntary regime, underpinning ideologies or policy intents, agencies involved?</p>	<p>The research was conducted in Australia. I don't know much about the similarities and differences between social work practice in Australia and the UK. The paper says that foster carers and parents may never meet. That is the same as in my child's network (although not true of all children's experiences).</p> <p>I assume that the intention would be for children to live with family rather than in state care, the same as in the UK. The discussion of this as a specialist area of practice suggests this to be the case.</p>
<p>What is known about the study setting e.g. institutional, geographical, time period?</p>	<p>They interviewed six workers from five localities, some were rural, some urban some coastal and inland. The workers all had a particular interest in reunification practice (called restoration in this study). They had at least five years' social work experience.</p> <p>I'm not clear when the interviews took place but the article was published in 2016</p>

Research findings

What is known about the study population e.g. what details of the demographic such as ethnicity, gender, age and disability have been collected? Is it representative of the wider population? What is known about access to and levels of service use? How is the seriousness of problems defined and measured? Is it a clinical / community sample?

Areas of similarity / difference with your child and family

The sample size is very small. The social workers were selected because of their interest in the area of work. They were self-selecting. Social workers were interviewed because they were accessible to the researchers. Therefore children, family and foster carers' views have not been sought or analysed.

There is no data about the ethnic classification of the workers, children or families. There is also no information about whether the workers were discussing families where reunification was more or less likely or how complex the situations were. This would be hard to rationalise with a small sample as there are no standardised measures of risk or complexity in this work and the social workers were possibly reflecting on their work with more than one family.

Research findings	Areas of similarity / difference with your child and family
<p>What is known about the service or intervention (if relevant) e.g. duration / number of contacts, where provided, agencies involved?</p>	<p>The study looked at social worker’s perceptions of the parent / foster carer relationship (through interviewing social workers).</p> <p>The study was with social workers from a local government agency rather than a private or voluntary agency.</p> <p>There was a lot of variation in the way individual workers practiced and whether they expected foster carers to collaborate with family. The article does not detail a particular practice framework.</p> <p>Social workers reported elements of their own practice designed to promote collaboration whereas some disregarded or were skeptical about it.</p> <p>The article summarises some key themes that contribute to foster carers being able to collaborate with families for reunification practice (trust in the process and people, motivation and willingness to collaborate, knowledge about the process and each other, and agreement with the plan).</p> <p>Thinking about these themes might help me consider whether I can identify any barriers for the foster carer and overcome some of his resistance in relation to work with Billy.</p> <p>The article makes suggestions for what could be done to overcome barriers in some thematic areas e.g. to develop and share knowledge. It also identifies that not all workers see collaboration as important or feel that it is their role to promote it. This identifies an area I could explore a bit more on my own or in supervision to see how to help the team around Billy work best for him. I wonder what the other people in the team around Billy would say about reunification and collaborative working with his mum and stepdad e.g. the IRO and supervising social worker? I wonder how foster carers are prepared for this type of work e.g. at recruitment stage or in their own supervision (see summary of learning below)?</p>

Research findings

How is the research helpful for practice e.g. for which children are the findings most applicable? Which are at higher or lower risk? Is this affected by gender, socio-economic status, sexuality or ethnicity?

Areas of similarity / difference with your child and family

The article focuses on what factors help or hinder collaborative working where there is a plan for a child to return to live with their birth families after foster care placements.

For reunification to be successful for Billy and his family, there are lots of other factors that I need to take into consideration such as family history and the other relationships in the family.

I am particularly keen to find out if there are any factors which might make risks / success rates different (e.g. how long the child has been in care, ethnicity, whether or not parents work).

This research doesn't give me any help with these aspects so I would need to look at different research to help me answer these questions.

Without quantitative data, it is not possible to say whether there is a link between barriers and unsuccessful reunification efforts. Without hearing from children and families, it's not possible to hear about their experiences or to measure whether the service was successful in other ways (e.g. fostering better relationships, people agreeing with the outcome even if reunification does not happen).

I can use the themes in the research to explore Lou's resistance. It is not clear from the paper whether there would be different themes if the data analysis had focused on foster carers who are resistant or how likely it is that barriers can be overcome. I could look to see if there are some other papers that might help with that.

Summary of learning

I found it really helpful to think about how children, parents and foster carers (and social workers) might have some barriers from their previous experiences of being expected to work together during child protection. Reading the article brought home to me the disconnect between Billy's two 'homes' and that there is absolutely no collaboration right now. It feels like, whether he goes home or not, Billy needs the adults in his life to have better communication. The article also highlighted to me that it is my role as the allocated worker to help that happen and that it is unlikely to happen on its own!

I found the four themes helpful (trust in the process and people, motivation and willingness to collaborate, knowledge about the process and each other, and agreement with the plan)

I know that Lou doesn't **agree with the plan**, but I wonder how much **knowledge** he has about the things that I am testing out and looking for in my assessment. Could I be more transparent with everyone about this? The assessment has changed things and now the assessment has changed nature too. Perhaps I need to acknowledge this a little more. Maybe he worries about what would happen next or doesn't know what that would mean for him and Billy. Lou planned to be Billy's foster carer on a long-term basis and I wonder what information or skills he and his supervising social worker have or need to develop to support this assessment and a reunification plan.

Maggie will be **motivated** to collaborate in order to have Billy come home to her, and she has recently had some more positive experiences with Children's Services. But the article highlights that there still might be trauma there from previous experiences. She won't want to let Billy down so how well will she feel able to keep collaborating even if there are hiccups? I feel like Lou is withdrawing from collaborating, or sabotaging things, so that the plan doesn't progress.

Trust seems to be the central issue. I am a relatively new person in Billy's team and I have brought a lot of talk of changes. I think I need to build up some trust with Lou but also between Lou and others. He and Maggie don't have much knowledge of each other and very little reason to trust each other as they have been so separate. I need to work with Lou's social worker a bit more so that I can understand things from his perspective a bit better and so that I can make sense of what he is telling me. There are lots of issues around power and use of authority between the individuals in the team around Billy and some more open discussion and better relationships could go a long way to making it more balanced.

Finally, I think that the article lacked the child and family's perspective and didn't comment on any aspect of the social GRRRAACCEESSS (a model which describe aspects of personal and social identity which include gender, geography, race, religion, age, ability, appearance, class, culture, education, ethnicity, employment, sexuality, sexual orientation and spirituality – Burnham, 2013) or how these might affect collaboration between the relevant parties.

I think I might share with Billy that I read this article and ask him what he thinks about the themes and if he agrees with them or would add his own. I think he'd like that.

I wonder how he would describe the cultures and codes of conduct in the different families he shares. I wonder what he would want James' role in his life to be and how he interprets James' parenting of him and his siblings. I wonder if he has any opportunity to talk about what it means to be coming back into his family which now has so many new members and that he and his siblings have different fathers, skin colour and experiences. I'm not sure what all of this means for James either and I'd like to spend some time with him as part of the assessment.

Other ways you can use this tool

You could use the template provided in this tool as a way of structuring team-wide discussions at a team meeting or in group supervision.

You could develop the focus of the discussion further to create a record of research that the team finds most useful and, in so doing, evaluate where the strengths and weaknesses are in the wider team in relation to using research findings in practice.




We want to hear more about your experiences of using PSDP resources and tools. Connect via Twitter using #PSDP to share your ideas and hear how other practice supervisors use the resources.

References

Ankersmit L (2016) 'The reunification partnership: engaging birth parents and foster carers as collaborators in restoration casework'. *Australian Social Work* 69 (3).

Burnham J (2013) 'Developments in Social GRRRAACCEEESSS: visible-invisible, voiced-unvoiced' in Krause I (ed.) *Cultural Reflexivity* London: Karnac.

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