# Making Sense of Each Other: Lived Experiences and Told Stories of Child Protection Social Workers and Asylum-Seeking Families

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<u>Contents</u>	Page
Dedication	ix
Abstract	ix
Acknowledgements	x
List of Figures	хi
List of Tables	xii
Abbreviations	xiii
CHAPTER ONE: INTRODUCTION	1
Introduction	1
My Professional Journey	5
Research Aims and Questions	6
Research Context and Background to Study	7
Migration as a Global Phenomenon	7
Definitions and Terminology	9
International and National Refugee Law	10
Refugees and Asylum Seekers: The Irish Context	11
FIGURE 6: MAJOR DEVELOPMENTS IN IMMIGRATION AND ASYLUM POLICY/PROCEDURES (1996-2009)	14
Direct Provision	17
Thesis Outline	19
Intended Contribution of Study	20
CHAPTER TWO: LITERATURE REVIEW	22
Introduction	22
Social Work, the Family and the State	22
CPWSW in Ireland	26
Issues of Care and Control	29
Dilemmas of Care and Control when Working with ASF	33
CPWSW with Families	42

Major Themes Identified: Positive Qualities	45
Major Themes Identified: Negative Qualities	47
Participation and Involvement in the Child Protection Process	47
CPWSW with ASF	50
Theoretical Frameworks Informing CPCWSW with ASF	53
Multiculturalism	53
Ethnocentrism and Cultural Relativism	55
Human Rights and Social Work: Practice Dilemmas	57
Anti-Racist Perspectives	59
Anti-Oppressive and Anti-Discriminatory Practice	60
Anti-Oppressive Practice: Strengths and Limitations	61
Gender and CPWSW	64
Gender and CPWSW with ASF	65
Cultural Competence	68
The Multidimensional Model of Cultural Competence	72
The Live and Learn Model of Cultural Competence	73
ASKED: A Process Model of Cultural Competence	74
The Ecological Model	75
Applying the Ecological Model to Work with ASF	77
Limitations of Existing Literature	78
Conclusion	79
CHAPTER THREE: METHODOLOGY	80
Introduction	80
Study Outline and Research Phases	80
Research Design and Strategy	83
Action Research	86
Action Research Cycles	97

Sampling and Access	88
Participants	90
Case File Analysis	91
Data Collection	92
Recording and Transcription	95
Data Analysis	96
BNIM Analysis	96
Framework Analysis	98
Familiarisation with Raw Data	100
Indexing	101
Thematic Charts	101
Descriptive Analysis	102
Explanatory Accounts: Associative Analyses	103
Ethical Considerations	103
Informed Consent	105
Confidentiality	106
Access	107
Conclusion	108
CHAPTER FOUR: AN IN-DEPTH BNIM CASE ANALYSIS	109
Introduction	109
Social Worker's Interview	111
Summary and Discussion	120
Asylum Seeker's Interview	121
Young Person's Narrative	122
Justification for Inclusion of Young People's Testimony	128
Summary and Discussion	129

#### CHAPTER FIVE: FINDINGS FROM SOCIAL WORKERS' NARRATIVES

Introduction

Theme 1: Trust / Mistrust

Age Assessment

Theme 2: Immigration

Theme 3: Cultural Differences

Communication

Theme 4: Racism

Theme 6: Empathy and the Impact of Personal Experiences on Practice

Theme 7: Training

**Theme 8: Interagency Collaboration** 

Theme 9: Resources

Theme 10: Review of Services for ASF

**Conclusion** 

#### **CHAPTER SIX: FINDINGS FROM FAMILIES' NARRATIVES**

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Introduction

Theme 1: Trust / Mistrust

Theme 2: Immigration

**Isolation and Lack of Support Network** 

The Impact of Direct Provision on Parenting

**Direct Provision and the Child Protection System** 

**Deportation** 

**Theme 3: Cultural Differences** 

**Language and Communication** 

Theme 4: Racism

**Theme 5: Legal Concerns and Cultural Practices** Theme 6: The Role of the Social Worker Conclusion CHAPTER SEVEN: FINDINGS AND PRACTICE IMPLICATIONS ERROR! BOOKMARK NOT DEFINED. Introduction Shared Theme 1: Trust / Mistrust The Challenge of Age Assessment Mistrust Due to Lack of Relevant Cultural Knowledge Mistrust Caused by Families' Asylum Status Mistrust Due to Adjustment to New Environment Summary **Shared Theme 2: Immigration Direct Provision Working with Immigration Officials** Deportation **Shared Theme 3: Cultural Issues Cultural Relativism Cross-Cultural Communication and CPWSW Language and Non-Verbal Communication Communication and the Use of Interpreters** The Need for Cultural Training **Narratives of Racism** Racism, Social Workers and Families **Cross-Cultural Foster Placements: Young People's Perspective** 

Cross-Cultural Foster Placements: Parents'/Guardians' Perspective

Gender

#### Conclusion

**Implications of Findings** 

The Conceptual Dimensions of Multicultural Social Work Practice

Implications at the Individual Level

Implications at the Organisational Level

Implications for Practice at the Societal Level

Implications for Practice at the Institutional Level

Implications at the Professional Level

**Study Limitations** 

**Recommendations for Further Research** 

CHAPTER EIGHT: CONCLUDING REFLECTIONS	132
The Insider / Outsider Dichotomy	132
Conclusion	138
Appendix A Ethical Approval - Health Service Executive (HSE)	140
Appendix B Ethical Approval - Queen's University Belfast (QUB)	141
Appendix C Information Sheet for Families	142
Appendix D Information Sheet for Social Workers	144
Appendix E Consent Form for Families	145
Appendix F Consent Forms for Social Workers	147
Appendix G Consent Forms for Social Workers (Consultation Groups)	148
Appendix H Consent Forms for Families (Consultation Groups)	149
Appendix I BNIM SQUIN For Social Workers and Families	150
Appendix J ASF Case File Synopses	151
Appendix K Articles of the Universal Declaration of Human Rights	156
Appendix L Ireland's Response to Refugees and Asylum Seekers (1935-2004)	157
Appendix M Issues Arising during Consultation Meetings with Social Work Managers, Social Work Representatives and Family Representatives	158
Appendix N A History of Mistrust: Why and Whom Refugees Mistrust	159

Appendix O A History of Mistrust: Why Refugees Are Mistrusted	161
References	162

To my Mother, and to Sarah, Rumbi and Christine

#### **Abstract**

Ireland has become an increasingly multi-cultural society since the mid-1990s, changing from a country of emigration to one of immigration. In response to this multiculturalism, the Irish Government embarked on several commendable initiatives. These changes have yet to be fully recognised within Child Protection and Child Welfare Services (CPCWS). The development of national guidelines in recent times has failed to provide adequate guidance for social workers on how to respond effectively to asylum-seeking families, a relatively new service user group for community care teams. Much of current Irish research sheds limited light on how social workers ought to respond to asylum-seeking children and their families within a child protection context. This study examines the experiences of social workers and asylum-seeking families. The first of its kind in this field in the Republic of Ireland, the study design is primarily qualitative with an overall action research orientation. Research data was collected by use of a Biographical Narrative Interviewing Method which formed the basis of the broader analysis using 'Framework Analysis.' The study highlights the need for appropriate and on-going culturally competent training for social workers in this area. Its findings illustrate the complexity of social work practice in this area and indicate the need for a clear and well-considered basis of recommendations for practice, and a coherent and focused approach to child protection and welfare work, that not only is centred on the child but also acknowledges both the cultural setting in which the child was reared, and the conflicted role of CPWSWs of care and control in mediating between the State and the family. These suggestions are rooted in the enhanced model of cultural competence developed from the study's findings and provide the basis for future research.

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# **List of Figures**

		Page
Figure 1	Number of Asylum Applications Received in Ireland (1992-2009)	2
Figure 2	Geographical Area of Research	4
Figure 3	Global Trends of Asylum Applications Lodged in 44 Industrialised Countries (2001-2010)	9
Figure 4	Top Six Countries of Origin of Asylum Seekers (2002)	12
Figure 5	Nationality of Asylum Seekers in Direct Provision (2005)	12
Figure 6	Major Developments in Immigration and Asylum Policy/Procedures (1996-2009)	14
Figure 7	The Process of Seeking Asylum in Ireland	16
Figure 8	The Triangular Relationship of State, Children and Parents	23
Figure 9	Ethnocentrism and Cultural Relativism	56
Figure 10	The PCS Model	61
Figure 11	Parallels between Elements of Four Conceptual Frameworks	72
Figure 12	The Ecological Model	76
Figure 13	Study Outline and Research Phases	81
Figure 14	Action Research Spiral	87
Figure 15	Data Analysis Process/Analytical Hierarchy Data Management	100
Figure 16	Core Themes and Subthemes Drawn from BNIM Panel Analysis	129
Figure 17	Interrelated Factors Leading to Mutual Mistrust	183
Figure 18	Factors Influencing the Attitudes of Social Workers and ASF	189
Figure 19	Culture and Cross-Cultural Communication	195
Figure 20	Narratives of Racism	208
Figure 21	Experiences of Cross-Cultural Placements	211
Figure 23	A Multidimensional Model for Cultural Competence	217
Figure 24	The Foci of Cultural Competence: Individual, Professional, Organisational and Societal	218
Figure 25	Part Insider/Outsider Bridge	231

# **List of Tables**

		Page
Table 1	International Human Rights Law	10
Table 2	International Refugee Law	11
Table 3	Characteristics of Child Protection and Family Service Orientations	
		36
Table 4 (Canada)	Models of Child Welfare (Sweden) and Child Protection	37
Table 5	Attitudes and Actions that Build Good Relationships	46
Table 6	Multidimensional Model of Cultural Competence	72
Table 7	Live and Learn Model of Cultural Competence	74
Table 8	The ASKED Model	74
Table 9	Some Common Contrasts between Quantitative and Qualitative Research	84
Table 10	Sampling Criteria and Rationale (Families)	90
Table 11	Sampling Criteria and Rationale (Social Workers)	90
Table 12	Study Population (Families)	90
Table 13	Study Population (Social Workers)	91
Table 14	Themes Emerging from BNIM Panel Analysis (Interview with Social Worker)	
		110
Table 15	Themes Emerging from BNIM Panel Analysis (Interview with Asylum Seeker)	
		121

#### **ABBREVIATIONS**

\_\_\_\_\_

ASF Asylum-Seeking Families

AS Asylum Seeker

AOP Anti-Oppressive Practice
ADP Anti-Discriminatory Practice

ARP Anti-Racist Practice

BDA Biographical Data Analysis

BNIM Biographic Narrative – Interpretive Method

CC Cultural Competence

CFNGPWC Children First National Guidance for the Protection

and Welfare of Children

CP Child Protection
CW Child Welfare
COO Country of Origin

CPSW Child Protection Social Work

CPWS Child Protection and Welfare Services

CPWSW Child Protection and Welfare Social Work/Worker

CWSW Child Welfare Social Work

CRC Convention on the Rights of the Child

CRQ Central Research Question
CSO Central Statistics Office

DKIT Dundalk Institute of Technology
FLAC Free Legal Advice Centres
HSE Health Service Executive
ICCL Irish Council for Civil Liberties
IDP Internally Displaced People
IRC Irish Refugee Council

ISPCC Irish Society for the Prevention of Cruelty to Children
MMCC Multidimensional Model of Cultural Competence

NCS National Children's Strategy

ORAC Office of the Refugee Applications Commissioner

PIN Particular Incident Narrative
PSW Principal Social Worker
QUB Queen's University Belfast
RAT Refugee Appeals Tribunal

SW Social Worker

SWTL Social Work Team Leader

SQUIN Single Question aimed at Inducing Narrative

TFA Thematic Field Analysis

UDHR Universal Declaration of Human Rights

UNHCR United Nations High Commissioner for Refugees
UNCRC United Nations Convention on the Rights of the Child

UK United Kingdom

# **Chapter One: Introduction**

#### Introduction

Ireland has become increasingly multicultural since the mid-1990s. The census of 2006 found there were 419,733 non-Irish nationals living in the Republic of Ireland, originating from 188 different countries. This demographic multiculturalism is not, however, reflected in childcare legislation or policies such as *Children First: National Guidelines for the Protection and Welfare of Children* (CFNGPWC) which was originally published in 1999 and was revised in 2011. As yet, there are no practice guidelines to assist Child Protection and Welfare Social Workers (CPWSW) in interventions with asylum-seeking families (ASF) from culturally diverse non-Irish backgrounds. While *Children First* mentions, among other "Special Considerations", separated children seeking asylum and children being trafficked (under the heading "Especially Vulnerable Children", 2011, p. 56), this does not include children who seek asylum with their parents or guardians. It is these children and their families who are the focus of this study.

Smyth and Whyte have argued that:

While similarities exist between the situation in Ireland and other peripheral European countries that have only recently become destinations for asylum seekers such as Norway and Finland, the disparity between the culture context in these countries and Ireland makes comparisons difficult. Information specific to the Irish context is essential to provide a basis from which to develop services and policies that are appropriate for this country and its refugee and asylum seeking population (2005, p. 8).

The present study aims to examine the experiences of CPWSWs and ASF in the Health Service Executive (HSE) for Dublin North-East, formerly the North Eastern Health Board areas comprising Louth, Meath, Cavan and Monaghan. The study investigates how social workers and families involved in specific interventions

interacted, and how those interventions were viewed from the unique perspectives of those involved in them.

The publication of *Children First* introduced a modern national policy for Child Protection (CP) in the Republic of Ireland. However, there has been no published research on the outcomes of CP interventions in cases involving ASF, despite the extraordinary upsurge in asylum applications in Ireland between 1990 and 2003, the scale of which is shown in Figure 1 (below).

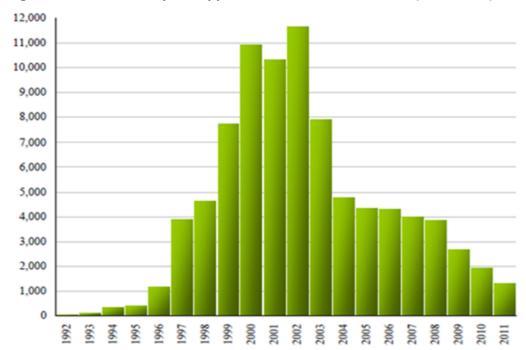


Figure 1: Number of Asylum Applications Received in Ireland (1992-2011)

Source: Office of the Refugee Applications Commissioner (2011, p. 58)

Children First warns that 'child abuse is not restricted to any socio-economic group, gender or culture' (2011, p. 12). While this message is important, the omission from the document of any specific guidance on how to intervene with ASF from diverse cultural backgrounds raises questions about the implication of such recognition in practice. Similarly, the National Children's Strategy (NCS) acknowledges that children from ASF have "additional needs", and notes that "there remain considerable barriers to the participation in Irish society of children

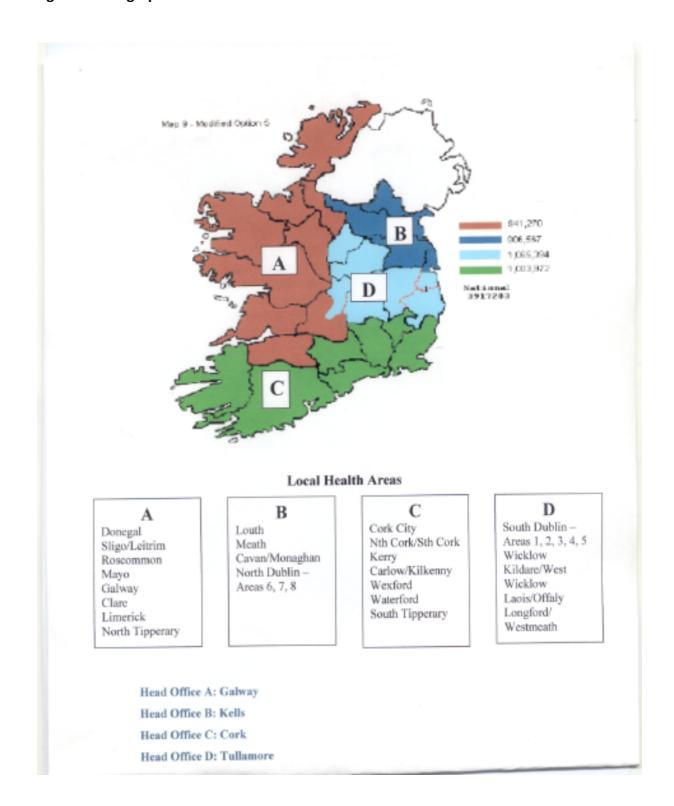
from ethnic minority groups, including travellers. Their specific needs must be identified and addressed to the same extent as every other child, but in a way that respects their ethnic and cultural diversity" (2000, p. 70). Christie, however, argues that "although The National Children's Strategy states that...children from minority ethnic communities such as refugees and other immigrants have special needs...the absence of discussion of the 'special needs' results in these children being defined as the abstract 'Other' as yet 'unknowable' in the social work policies and practices" (2010, p. 201).

In Ireland the response of social workers to issues of cultural diversity within child protection, itself an extremely procedural and legalised activity, perhaps has led to the use of childcare legislation in circumstances which may have defeated the statutory duties referred to in Section 3. The Child Care Act, 1991 as amended. The Act is the primary legislation regulating child care policy in Ireland. It provides the legislative basis for dealing with children in need of care or protection, and the promotion of the child's welfare. It also places a specific duty on the HSE to identify children who are not receiving adequate care and protection and, in promoting their welfare, to provide child care and family support services. This Act underpins the basic principle that the welfare of the child is of paramount importance.

This research highlights the challenges faced by social workers and families, and considers the implications for what may need to be done to ensure a culturally sensitive and appropriate approach for practice, so as to ensure that the balance required by Section 3 is achieved in CP interventions involving culturally diverse service users.

Area B on Figure 2 (below) indicates the geographical area in which this research was undertaken.

Figure 2: Geographical Area of Research



**Source: Health Service Executive (2005)** 

#### My Professional Journey

The decision to study the experiences of CPWSWs and ASF was shaped by my own personal and professional background, and by my long-standing interest in issues of diversity. Born in Zimbabwe, I trained and qualified in social work in Ireland before leaving to practice social work in Zimbabwe. Prior to coming to Ireland in 1988, I worked in L'Arche, an international organisation for people with learning difficulties. I was local director of L'Arche. When I took the young adults out from the centre people often looked intently at me and at them. I found the young people to be uninhibited, sometimes speaking at the top of their voices with great laughter and, hence, people would stare at them. Most people would move away if we sat next to them on public transport, and we would have the whole space to ourselves. There was an obvious stigma attached to people with learning difficulties in Zimbabwe. I have often been surprised by how people look at anyone different from themselves, and, over the years, I have observed different reactions. Sometimes people come close in order to understand those that are different and sometimes they keep their distance. This seems to be true of people who are different within their own culture and is even more marked when people come from a different culture.

When I came to live in Ireland over twenty years ago in order to do voluntary work for L'Arche, it was a very different place from today. Ireland then was a monoculture with the exception, perhaps, of people from the travelling community. I was the only black person on my degree programme at University College Cork, and one of only three black students on campus. On the streets people would stop and look at me as something unusual. A fellow student in my year remarked, "'Pennies for black babies'; how did I ever know that you would come here to thank me?" At the time I did not understand what she meant but she later explained the reference to fundraising and missionary work in Africa, which at that time provided the only context in which most Irish people were familiar with that continent and its people.

Having obtained my Master's Degree in social work, I returned to Zimbabwe to start professional practice as a social worker. When I returned to Ireland in 2002 to take up a post as a CPWSW in the HSE, I found a more diverse Ireland. There were African shops, Chinese shops and diverse religions. In my new work the presence of families from other cultures was evident, as were the challenges involved in working with those families. When, for example, immigration officers or the Gardaí arrived at the office with an unaccompanied minor, often of African origin, my colleagues frequently asked what age I thought the child was, and often I was not sure myself. Having seen time and again the problems experienced by CPWSWs in working with ASF it was evident to me that there was a gulf between workers and families when it came to this area of practice, and I began to wonder what impression both social workers and families had of each other, based on their experience of interaction. I also saw a need to chart the problems that arose in practice as a result of cultural, social and linguistic issues in order to contribute to knowledge and practice in this complex area.

In the final chapter I reflect in more detail on my experience of conducting research within the insider/outsider paradigm.

#### **Research Aims and Questions**

The initial questions this study sought to answer were informed by my own experiences whilst working as a CPWSW and shaped by the aims and objectives of my research.

#### Research Aims

- (a) To explore the experiences of CPWSWs in their work with ASF.
- (b) To explore the experiences of ASF working with CPWSWs.
- (c) To examine the implications of these research findings for practice.

#### **Research Questions**

- (a) What are the experiences of CPWSWs in working with ASF?
- (b) What are the experiences of ASF in working with CPWSWs?

#### Research Context and Background to Study

This study has been designed and conducted and is here presented at a time when, from a research perspective, little has been published about how CPWSWs interact with ASF in community care in Ireland and elsewhere. Although the need to develop positive policy and practice in this area has been frequently highlighted (see for example Parker, 2000; Christie, 2002; Aymer and Okitikpi, 2003), the evidence which might inform these developments is relatively weak (Mitchell, 2003). Similarly, while the views and outcomes of differing approaches to ethnicity have been extensively theorised in social work literature (see for example Ahmad, 1990; Walker, 2002; Thompson, 2006; Dominelli, 2008), little attempt has been made to test empirically the response of the profession to cultural differences now present in Ireland. In the literature of social work, the shift in Irish society from one of emigration to one of immigration over the period of the study has been well documented by many authors, including Lorenz (1998), Cullen (2000), Christie (2002) and Lentin (2002), who highlight the impact this change from a homogenous to a heterogeneous population has had on Irish society. Many scholars have written on the shift from homogeneity to diversity; Lorenz (1998) attributes it to globalisation, noting that there is more movement between populations than ever before, while Fanning argues that "the Irish case differs from that of the UK and other European countries with histories of post-colonial immigration where prior cultural relationships as well as purely economic interdependencies pertain" (2011, p. 66).

# Migration as a Global Phenomenon

Global trends of displaced people or those seeking asylum during the period 2000 - 2005, are of interest to this study because it is during this time that the number of those seeking asylum in Ireland rose considerably. It is therefore important to draw a correlation between global statistics and local statistics of those seeking asylum during this period.

At the start of the year 2002, the number of people of concern to the United Nations High Commissioner for Refugees (UNHCR) was 19.8 million. They included 12 million refugees (61%), 940,800 asylum seekers (5%), 462,700 returned refugees (3%), 5.3 million internally displaced persons (IDP) (25%), 241,000 returned IDPs (1%) and 1 million others of concern (5%) The global refugee population of 12 million remained virtually unchanged from the previous year, with half a million people fleeing their countries during 2001. At the end of 2001, Asia hosted the largest refugee population (48.3%), followed by Africa (27.5%), Europe (18.3%) North America (5%), Oceania (0.6%) and Latin America and the Caribbean (0.3%) (UNHCR, 2002, p.12).

The countries that the UNHCR terms "low-income countries" or developing countries receive the greatest proportion of the world's refugees. Additionally, the available statistical evidence indicates that most asylum seekers flee to neighbouring countries, thereby remaining in their region of origin. In 2002 the developing regions hosted 7.2 million refugees, or 68% of the global refugee population; in contrast, the developed region is said to have hosted 3 million refugees, 28% of the world's refugee population. In other words, as well as receiving the majority of refugees, the developing countries also supply the greatest proportion of the world's refugees (UNHCR, 2002).

700,000
600,000
500,000
400,000
200,000
100,000
2001 2002 2003 2004 2005 2006 2007 2008 2009 2010

Figure 3: Global Trends of Asylum Applications Lodged in 44 Industrialised Countries (2001-2010)

Source: The Office of the United Nations High Commissioner for Refugees (2010)

# **Definitions and Terminology**

The words "asylum seeker" and "refugee" are sometimes used interchangeably. Internationally, refugees and asylum seekers are defined as people who have had to leave their own country because of fear of persecution. The word "refugee" was introduced into the English language by the Huguenots who sought sanctuary in the United Kingdom in the late 17<sup>th</sup> century, and is derived from the French *se refugier*, to seek shelter (Rutter, 2006, p. 17). The current study adopts the internationally recognised definition of asylum seeker provided by the United Nations Geneva Convention relating to the Status of Refugees (1951), Article 1 (A) (2). The Convention defines a refugee as a person who,

owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a social group or political opinion, is outside of his or her nationality and is unable, or owing to such fear, unwilling, to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable, or owing to such fear, is unwilling to return to it.(UNHCR 2011,p.5)

Hamilton et al notes that "The Geneva Convention does not guarantee a right to asylum, merely a right to seek asylum. Article 33 of the Convention is of particular relevance in this regard because it contains the principle of non-refoulement which forbids the repatriation of any persons to places where their lives or freedoms could be at risk. While this principle does not guarantee a right to permanent residence, it provides an asylum seeker with a limited right to remain in the jurisdiction until their claim is determined" (2011, p. 44).

The Office of the UNHCR is the governing body mandated by the United Nations to coordinate international issues relating to problems of displacement and asylum. The right to seek asylum is laid down in Articles 1-30 of the Universal Declaration of Human Rights (UDHR), which allows everyone the right to seek and to enjoy asylum from persecution in other countries. An asylum seeker obtains recognition as a refugee if the receiving country accepts that he/she meets the United Nations' definition of a refugee. Global migration patterns have relevance for Ireland in that they have contributed to inward migration in Ireland (see Figures 1 and 7).

## **International and National Refugee Law**

As Tripodi has noted, "Immigration and Refugee policies provide a legal context for social work practice with these populations. These policies include international law and national laws" (2002, p. 53). International refugee law is incorporated into various human rights treaties (see Tables 1 and 2).

Table 1: International Human Rights Law

1	Universal Declaration of Human Rights (1948) (UDHR)
2	Convention on the Prevention and Punishment of the Crime of Genocide (1948)
3	Convention Relating to the Status of Stateless Persons (1954)
4	Convention on the Elimination of All Forms of Racial Discrimination (1965)
5	Covenant on Civil and Political Rights (1966)
6	Covenant on Economic, Social and Cultural Rights (1966)
7	Convention on the Elimination of All Forms of Discrimination Against Women (1979)
8	Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or

	Punishment (1984)
9	Convention on the Rights of the Child (UNCRC) (1989)

Source: Tripodi (2002, p. 55)

**Table 2: International Refugee Law** 

1	Convention Relating to the Status of Refugees (1951) (GENEVA CONVENTION)
2	Protocol Relating to the Status of Refugees (1967)

Source: Tripodi (2002, p. 55)

The fundamental human rights document is the Universal Declaration of Human Rights (UDHR; see (Appendix K). It specifies thirty basic rights to which all people are entitled. Article 14 of the Declaration deals with the right to enjoy asylum and fundamental freedoms. As Tripodi explains, "Refugees have certain specific rights under refugee law which are codified in the Convention and Protocol Relating to the Status of Refugees. These documents provide the international definition of refugees" (2002, p. 57).

# Refugees and Asylum Seekers: The Irish Context

Prior to 1995 Ireland had limited experience of hosting asylum seekers and refugees. In fact, as a consequence of famine and economic hardship generally, Ireland was a net emigration country until the 1990s. Nevertheless, immigration into Ireland is not a new phenomenon.

In 1951, prior to Ireland becoming a signatory to the 1951 Geneva Convention, there were some 840 refugees in the State. In the years following 1956, the year in which Ireland actually signed the Convention, Ireland received "Programme Refugees" on a number of occasions. In 1956, Ireland accepted 530 refugees from Hungary; between 1973 and 1974, a group of 120 refugees came from Chile; 212 programme refugees were invited from Vietnam in 1979; Ireland received 26 Iranian Baha'is in 1985 and most recently 917 programme refugees came from the former Yugoslavia between 1991 and 1997 (Smyth and Whyte, 2005, p. 25).

Most of the participants interviewed for this study arrived in Ireland from Nigeria between 1999 and 2005, during which the number of people seeking asylum increased significantly (see Figure 1). As Figures 4 and 5 indicate, Nigeria was the top country of origin (COO) for asylum seekers during this period (2001 – 2005), and Nigerian nationals predominated amongst asylum seekers in direct provision in 2005.

Nigeria 29.6%
Romania 8.9%
Somalia 8.5%
Sudan 4.7%
Iran 4.7%
Georgia 3.5%
Other 40.2%

Figure 4: Top Six Countries of Origin of Asylum Seekers (2005)

Source: Office of the Refugee Applications Commissioner (2005, p.36)

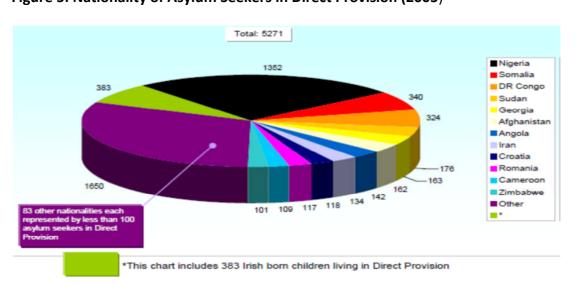


Figure 5: Nationality of Asylum Seekers in Direct Provision (2005)

Source: Reception and Integration Agency (2005, p.22)

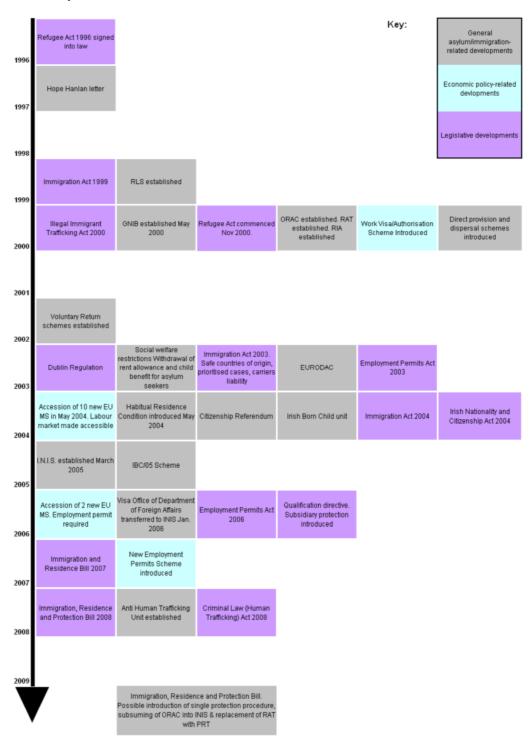
The 2006 Census indicated that there were 420,000 non-Irish nationals living in Ireland, constituting 10% of the total population. Although the full range of COOs for this immigrant and ethnic minority population is diverse, 82% came from just ten countries. According to the Central Statistics Office (CSO), China, Germany, Latvia, Lithuania, Nigeria, Poland, the UK and the USA all had over 10,000 nationals living in Ireland (CSO, 2008).

Quinn (2009) characterises the recent history of Irish migration into the following five useful phases:

- 1. A history of sustained net emigration prior to the early 1990s.
  - Increasing immigration from the mid-1990s to early 2000s, driven by returning Irish nationals. Dramatic increases in the number of asylum applicants.
- 2. 2002-2004. New peaks reached in non-EEA immigration flows and numbers of asylum applicants during 2002. Asylum applications fall quickly from 2002 peak and stabilise at a much lower level from 2004.
- 3. 2004-2007. Substantial part of non-EEA immigration flows converted to EU flow after accession in 2004. New highs reached in overall immigration, driven by nationals of the enlarged EU.
- 4. 2007/2008. Reduced but still significant net immigration, largely resulting from decreased flows from new EU member states (Quinn, 2009, p. 15).

Quinn's analysis is useful in understanding immigration trends in relation to asylum seekers. It not only explains statistics relating to inward and outward migration but also gives an overview of the causes of fluctuating immigration trends. Figure 6 (below) gives a breakdown of developments in immigration and asylum seeking between the years 1996 and 2009. It also highlights some legislative developments.

Figure 6: Major Developments in Immigration and Asylum Policy/Procedures (1996-2009)



Source: Quinn (2009), p.21

Immigration has been decreasing since 2008, resulting in a return to net outward migration from Ireland for the first time since 1995 (CSO, 2009). Between 2008 and 2009 the majority of outward migrants were nationals of new EU accession

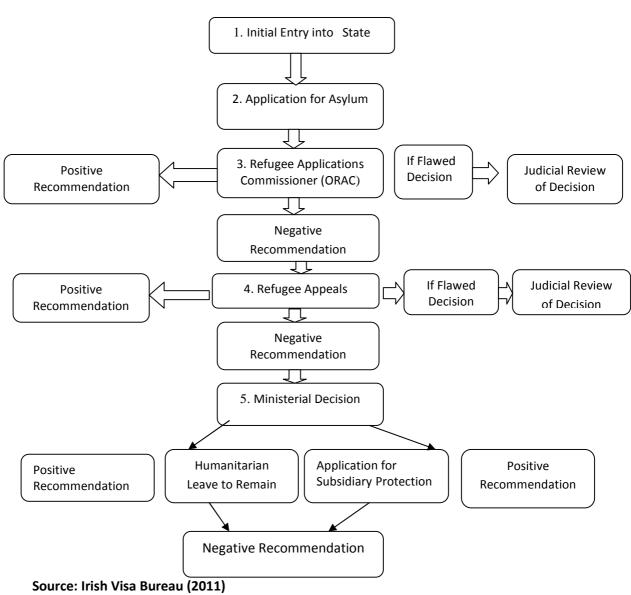
states (CSO, 2009); between 2009 and 2010, however, most outward migrants were Irish nationals (CSO, 2010). While inward migration of all non-Irish national groups has been declining (CSO, 2009; 2010), there is little evidence that immigrant families are out-migrating. If for no other reason than to meet the needs of these families, it is important that immigration remains on the Government's political agenda, and that policies and practice guidelines be developed for working with ASF and other culturally diverse groups. Asylum seeking is driven by global instabilities; as long as there continue to be wars and natural disasters around the world there will continue to be people who are displaced and who seek asylum. Despite the current decline in inward migration, social workers must be equipped with an understanding of asylum issues and the skills to deal with such people and their families.

The following description of the process of seeking asylum in Ireland is adapted from online information provided by the Irish Visa Bureau.

In order to meet the requirements for seeking asylum in Ireland, a foreign national who arrives in Ireland may inform officials that s/he intends to apply for asylum and has the right then to be admitted into the State. The person should present him/herself at the first opportunity to the Office of the Refugee Applications Commissioner (ORAC), an agency of the Department of Justice, Equality and Law Reform; this is a body which is independent of the Minister in its exercise of all its functions under the Refugee Act. The applicant is granted leave to enter and remain in the State until there is a final determination. Unless granted such permission it would be illegal for one to enter the country. Asylum seekers have ten days leave to appeal a decision made against them. This is considered, without interview, by a member of the Refugee Appeals Tribunal (RAT), a statutory independent body. Applicants refused entry to Irish asylum procedures on the basis that they entered through a 'safe third country' as outlined in the Dublin Convention are deported back to that country. Once they have started the asylum claim process the applicants are called asylum seekers. If they are successful they are then called refugees. Section 12 of the Refugee Act requires each asylum

application to be examined by an ORAC official who decides if the application is 'manifestly unfounded'. Manifestly unfounded decisions can be appealed to the RAT within seven days. A RAT member makes a recommendation to the Minister whose office makes the final decision. An applicant who receives a negative recommendation can appeal this decision within fifteen working days to the RAT. The applicant can also apply for 'humanitarian leave to remain'. If the applicant is successful they will be granted refugee status with the same rights as every other citizen and, in due course, can apply for citizenship. This process is depicted schematically in Figure 7 (below).

Figure 7: The Process of Seeking Asylum in Ireland



#### **Direct Provision**

With effect from 10 April 2000, the direct provision and dispersal system became official Government policy. The system significantly curtails social welfare payments and entitlements for asylum seekers, and imposes conditions that would seem to violate the rights of asylum-seeking children as enshrined in the UNCRC which, whilst ratified by Ireland, is not incorporated into Irish domestic law. A report published by the Free Legal Advice Centres (FLAC) describes the entitlements of asylum seekers prior to the introduction of the system of direct provision:

Until late 1999, asylum seekers in Ireland were eligible for the same welfare support as other persons in the State...By late 1999 some 6,500 asylum seekers were living in private rented accommodation... the demand for private rented accommodation had reached acute levels, particularly in Dublin... [and] not only were asylum seekers being placed in unsuitable accommodation, but many resorted to sleeping rough (O'Connor, and Edmond 2003, p. 8).

When the system was introduced in 1999, the Minister for Justice, Equality and Law Reform described it as a matter of "extreme urgency", commenting that the number of applications for asylum was "spiralling out of control" (FLAC, 2003, p. 8). He also expressed concern that "the welfare scheme must not act as a pull factor for non-genuine asylum seekers". According to a 2003 FLAC report, the introduction of the system of direct provision in Ireland coincided with a policy change in the UK, as a consequence of which all cash payments for asylum seekers were replaced with vouchers of £35 per week to be spent in designated stores. "The Minister was of the view that if Ireland did not have a similar scheme up and running by that time, the country would be overwhelmed by the numbers of asylum applicants" (FLAC, 2003, p. 9).

The system of direct provision has been subject to constant criticism since its introduction, mainly because of the restrictions it imposes on asylum seekers. Most of these are seen as a violation both of human rights and of existing international and local legislation and conventions in relation to asylum seekers. Reviewing the direct provision system ten years after its inception, FLAC concluded that "the system needed substantial overhaul in order to meet the international human

rights standards to which the State had committed itself...[moreover,] the scheme fails to comply with the constitutional rights to fair procedures and due process guaranteed to everybody in Ireland" (FLAC, 2009, p. 15). Fanning and Veale described the system as producing "child poverty" and "social exclusion" (2001, p. 12). If this description is accurate, the system is in violation of the UNCRC, and in direct conflict with the Social Partnership Agreement (2006-2015), the National Plan for Social Exclusion (2007-2016), and the Ten Year Framework, the latter of which imagines

[a]n Ireland where children are respected as young citizens with a valued contribution to make and a voice of their own; where children are cherished and supported by the family and the wider society; where they enjoy a fulfilling childhood and realise their potential (2007, p. 30).

Among the goals stated in this policy document are the following:

- 1. Every child should grow up in a family with access to sufficient resources, support and services to nurture and care for the child, and foster the child's development and full and equal participation in society;
- 2. Every child should have access to world-class health, personal social services and 'suitable accommodation';
- 3. Every child should have access to quality play, sport, recreation and cultural activities to enrich their experience of childhood.

As FLAC has observed, however, these guidelines do not apply to children of ASF:

Since the introduction of Direct Provision 10 years ago the weekly direct provision payment to asylum seekers of €19.10 per adult and €9.60 per child is the only social welfare payment never to have increased. Despite being some of the poorest people in Irish society, direct provision residents are not included as a target group in antipoverty and social inclusion strategies (2009, p. 8).

According to Fanning et al., "the system of Direct Provision was introduced following the introduction of a similar system in Britain and was intended to stave off the perceived numbers of asylum seekers coming to Ireland" (2001, p. 30). In their paper 'Beyond the Pale', the authors highlight the social exclusion to which asylum-seeking children are subjected as a consequence of this system. Fanning

agrees: "[T]he current welfare stratification of immigrants, in particular asylum seekers, sits uneasily with Ireland's obligations under the UN Convention of the Rights of the Child which was ratified by the Government in 1991 and applies to all children within the jurisdiction of the states" (2009, p. 79).

The relevance of the system of direct provision for this study is twofold. Firstly, in order to contextualise this study, an understanding of the formal system through which asylum seekers are accommodated in Ireland is essential, and secondly, the participants in this study were all resident in direct provision centres. It is therefore within this context that the social work interventions with the families in this study took place.

As Fanning has observed, "the advocacy role of social workers with asylum seekers, who have lesser rights than Irish citizen clients, could be more problematic [...]clients who experience lesser rights and entitlements are likely to present more challenges to social workers than citizen clients" (2009, p. 71). Specifically,

Asylum seekers in direct provision do not have the right to work, to attend full-time education/training or to travel outside the state without the permission of the Minister for Justice, Equality and Law Reform. Children of asylum seekers are entitled to free primary and post-primary education. They are not entitled to free third level university or college education (FLAC, 2003, p. 6).

#### **Thesis Outline**

The thesis is divided into eight chapters. Chapter one has introduced the study by first outlining the research rationale and then providing detailed background information on national and global trends in asylum seeking and the implications of these trends. A critical analysis of the literature is presented in Chapter Two, which is broadly broken into three interrelated sections. The first of these introduces the chapter by discussing the role of social work as mediation between the State and the family in general, and in the specific context of interventions with ASF, including the dilemmas arising from the nature of the social worker's care and control role.

The second part of the literature review evaluates research into the nature both of relationships between CPWSWs and families in general and of social work interventions with ASF specifically, followed by a discussion of the range of related theoretical frameworks informing CPWSW with ASF. The chapter concludes by highlighting the gap in existing literature and identifying the contribution made by the current study. Chapter Three explains in detail the methodology adopted for the study. It discusses the research design and techniques used in selecting participants and collecting data, and the methods used to analyse the data. It concludes by looking at ethical considerations. Chapters Four, Five and Six present the voices of the study participants, with both social workers and families separately illuminating their experiences. A discussion of the findings from these narratives is undertaken in Chapter Seven, which synthesises the relevant literature into the different themes that emerged from these accounts. The second part of the chapter draws out the implications flowing from the data collected so these may inform the consideration of recommendations for the development of more effective practice guidelines. Chapter Eight concludes the study by looking retrospectively at my relationship with the research, both during the work and after its completion. The contribution of this thesis is discussed with reference to the two original research aims set out in Chapter One. The implications and limitations of the study are considered as are suggestions and ideas for further areas of research.

# **Intended Contribution of Study**

Numerous studies have explored social work with asylum seekers, particularly with unaccompanied minors (see for example Christie, 2002; Mitchell, 2003; Joyce and Quinn, 2009), while others have focused on social work with refugees and asylum seekers in general (e.g., Parker, 2000; Chand, 2005; Dunkerley et al., 2005). Very few have focused on the experiences of CPWSWs and ASF; none has been conducted in Ireland.

This study departs from most previous work and many other studies of the nature and process of child protection by examining in depth the experiences of CPWSWs and ASF. As a result, it provides insight into the participants' own perspectives, and enriches our understanding of the varied experience of families and social workers within an Irish context. In so doing it points to what changes need to be considered to underpin effective practice. For me, the heart of the research has been the opportunity to create space for social workers and families to articulate their experiences. The study unearths some issues arising from social work interventions with ASF. It identifies ways in which these may be addressed in a more culturally sensitive and relevant way in order to avoid potential weaknesses in current CPWSW practice with such families. Social work with ASF is still in its early years in Ireland for reasons already discussed. These interventions are complex, not only because of the innumerable issues evoked by forced migration, which are not readily understood by CPWSWs, but also because of the issues which arise from the resettlement of individuals into a wholly new environment that differs culturally, socially and physically from their countries of origin. Above all, the status of ASF, and the policies governing the assessment of claims for asylum within the system of direct provision, results in isolation and disenfranchisement and greatly reduces opportunities for absorbing the new values and norms.

The findings of this study show that working with ASF requires not only an understanding of quite varied cultural and linguistic issues, but a commitment by both social work managers and policy-makers to embrace the diversity that such families bring with them, and to seek ways to integrate this diversity into existing ways of working. The broad range of themes considered in this thesis all point to the need for change in practice with ASF to accommodate the diversity evident from their stories. Though not linked to a single theoretical framework, the study's findings highlight the need for better, more culturally sensitive and appropriate CWSW practice.

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# **Chapter Two: Literature Review**

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### Introduction

This chapter reviews the literature relevant to the study. Because of limited research on this subject in Ireland, the review draws from international literature on CPWSW with ASF. The unit of analysis in this study is the family; therefore, in order to contextualise the review, the role of CPWSWs in mediating between the State and the family forms the basis of the review. Other aspects of the literature review as identified in the introductory chapter will also be discussed.

It is widely acknowledged in the literature that CPWSW represents one of the broadest and most challenging practice fields in the human services and that practice in this area is highly stressful (Buckley, 2003, Munro, 2008; Lonne., 2009; Munro, 2011) and difficult (Forsberg and Kroger, 2010; Tehrani, 2010;), in large part due to the uncertainty which pervades all aspects of child protection work. As Munro points out, "Even defining what counts as acceptable parenting and what is abusive or neglectful is problematic" (2011, p. 20).

## Social Work, the Family and the State

This section of the literature review explores the role of CPWSWs in mediating between the State and the family, firstly by discussing the role of the State in family life generally and secondly by examining the specific role of social work in relation to asylum-seeking families.

Emphasising the importance of studying in a holistic way the contextual relationship between the State, children and the family, Dencik contends that "in order to answer the question of how fish can swim upstream against the current, it is not enough to study dead fish on land, or in a laboratory...we must study the fish in its own element to be able to say anything at all about the movements of the fish"

(1989, p. 163). He argues that "much of the research on the family has been conducted in such a way that it has been ripped out of its social context...research into the lives of children in the modern family cannot be limited to just the children, or just the family" (Dencik, 1989, p. 164). Frost's description of the complex interrelation between children, their families and the State illustrates Dencik's point:

The State exercises power over adults through forms of governance regulation and law. In some States adults also exercise power over the State...The State exercises considerable power over children. Children have no redress except through acts of resistance and occasionally through the courts. Adults exercise power over children through the deployment of resources, through physical strength and punishment and through emotional power (Frost, 2011, p. 8).

The present study uses Dencik's triangular formulation of the relationship between the family and the State to reflect on the role of social work both with families in general and with asylum-seeking families specifically.

The State

Families

Children

Figure 8: The Triangular Relationship of State, Children and Parents

Adapted and modified from Dencik (1989, p. 164)

As Frost has observed, although the terms 'State', 'Family' and 'Child' are "familiar and their meanings [are] often taken for granted they are problematic and challenging...and hotly contested in both academic and popular discourse....none of these concepts can be seen as unitary with a single meaning" (2011, p. 4). Frost urges caution when using these terms, arguing that using them "in an uncritical way conceals the diversity and complexity within them" (2011, p. 1). It is therefore

important to explore some of the meanings attributed to these terms in order to clarify their application within the present study.

Heywood offers a useful starting point when defining the State, which he describes as:

The apparatus of government in its broadest sense...that set of institutions that are recognisably 'public' in that they are responsible for the collective organisation of social existence and are funded at the public's expense. The virtue of this definition is that it distinguishes clearly between the State and civil society....the State comprises a diverse range of institutions of government bureaucracy, including the military, police, courts, social security systems and social welfare agencies. The State is sovereign...in that it stands above all other groups in society and its authority is legitimised by legislation and ultimately backed up by coercion (Heywood, 2000, pp. 86-87).

Heywood draws a distinction between the State and civil society: "Whereas the State operates through compulsory and coercive authority, civil society allows individuals to shape their own destinies" (2000, p. 17). By contrast, Frost (2011) describes the modern western State as being made up of those bodies and agencies that govern society through their legal mandate at local, regional and national levels. Defined in this way, it can be argued that because the State comprises a number of different agencies and institutions, there is potential for conflict between its various elements, which do not necessarily act in harmony towards a mutually agreed end. The official inquiry into the Victoria Climbie case (Laming, 2003) and many other official inquiries relating to children and families in Ireland and the UK highlight conflicts involving either institutions within the State or employees of the State within agencies and institutions, including paediatricians, social workers, the police, and the courts. In earlier work Frost (1990) uses the term 'State forms' rather than 'the State' in order to indicate the diversity that exists amongst the State's constituent parts. Even within the same State organisation conflicts and disagreements may arise. For example, within a single social work agency differences may arise between managers and practitioners and between practitioners in different specialised fields such as those responsible for child protection services and those responsible for fostering and adoption services.

In the same way as there are various State forms, there are also various 'family forms' and it is widely accepted that no single definition encompasses these (Hendrick, 2003; Connolly et al 2006 and Connoly and Ward 2008; Kirton, 2009; Frost 2011; Adams, 2012). Frost's observations are again instructive in this regard:

Families vary historically, geographically and socially. Families have a range of different structures — a two-parent family, a one-parent family, a polygamous family or an extended family all of which are very different in the way that they exist and practice as a family. Thus when referring to 'the family' we can be referring to very diverse structures and profoundly contrasting lived experiences (Frost, 2011, p. 5).

Frost's observations are shared by Connolly et al., who argue that "the meaning attributed to family is fluid, and is dependent on who is doing the defining" (2011, p. 76). Noting that "[f]amilies are diverse and family formations increasingly complex," Archard offers what he calls a 'bare' definition of the term as an "essentially [...] stable multi-generational association of adults and children serving the principal function of rearing its youthful members" (2003, p. 69). Adams (2012), however, argues that while Archard's definition provides a useful starting point, it does not capture the ever-changing nature of family. "For example it does not take into account that while marriage continues to be a popular institution the number of marriages has been dropping over the past three decades; that the divorce rate has also risen significantly during that time, bringing with it a rise in the number of remarriages; and that lone parenthood...too has been characterized by a significant rise, partly as a result of the increased divorce rate" (Adams, 2012, p. 94). Adams further points to the diverse and changing meaning of family depending on social context, arguing that "what counts as the 'norm' for the family in one period of time will not necessarily be seen as the 'norm' in another period of time" (Adams, 2012, p. 12). He cautions against disregarding the diversity and changing nature of the family, which he believes can lead to rigidity, and against being judgemental in one's expectations of families or of particular individuals from certain family backgrounds.

As these scholars indicate, the terms 'State' and 'family' can conceal the true complexity and diversity of the structures they define. Bearing this in mind the term 'State' will be used in this thesis to indicate that set of agencies, including social services, which are recognisably 'public'. The terms 'family' or family life' indicate a situation whereby at least one adult is caring permanently for at least one child. This study departs from the traditional definition of a family as a unit comprised of married parents who are living together with children in favour of Adams' (2012) conception of the family as a 'diversity of familial forms'. The families interviewed for this study was composed of an adult, parent or guardian and one or more children to whom they were related in some way, albeit not necessarily within a nuclear family structure.

## **CPWSW** in Ireland

Research by Skehill (2004) on historical developments of CPWSW in Ireland offers useful insights for understanding the context within which social work with families is practised today. It highlights not only the role of CPWSWs in mediating between families and the State but also the unique relationship between the State, the Family and the Church. While there are some similarities between the development of social work in Ireland and those in the United Kingdom and other Western countries, numerous scholars have observed that CPWSW in Ireland in the mid-twentieth century operates in a significantly different context (see for example Rafferty and O'Sullivan 2002; and Skehill 1999; 2001; 2003; 2004). According to Skehill, "the State played a relatively minor role in matters of the social...this was especially the case when it came to issues relating to the care and protection of children and intervention with families" (2010, p. 274).

Differences in how the Irish State intervenes with families have also been attributed to (a) the relationship between the Catholic Church and the State and (b) the way in which the family is perceived within the Irish Constitution. Prior to the 1970s when the Health Boards were established, CPWSW was undertaken in an *ad hoc* manner by a variety of voluntary agencies mostly under the influence of the Catholic

Church, particularly the Irish Society for the Prevention of Cruelty to Children (ISPCC), the Catholic Protection and Rescue Services of Ireland, the Saint Vincent de Paul, and the Family Welfare Section of the Catholic Social Welfare Bureau (Skehill, 1999). By contrast, until the introduction of the Health Act in 1970, the Irish State played a minimal role in governing child welfare practices.

Socio-spiritual Catholic discourses remained powerful throughout the early and mid-20<sup>th</sup> century...[W]hile individuals were dealt with in terms of deserving and undeserving status, this was based not on liberal, but on spiritual principles and adherence to Natural Law and its associated norms and morals. Those deemed respectable and deserving were helped whilst those whose objective status outweighed their potential subjectivity, were left to the more limited child and family services provided by the statutory authorities (Skehill, 2004, pp. 331-332).

Skehill attributes the unique development of CPWSW in the Republic of Ireland to the social context of Philanthropy in the 19<sup>th</sup> century and argues that "as Ireland was primarily a rural society which did not modernise until the 1960s, the social and cultural context of social work was very different...it was the Catholic church rather that the State which was dominant in the sphere of interventions with children and families" (2004, p. 131). It was not until the implementation of the Child Care Act (1991) that the role of the State in child welfare and protection in Ireland was clearly specified. Various authors (Buckley, 1997; Ferguson and O'Reilly 2001; 2004; Buckley, 2002; 2003;) have observed that the nature of CPWSW under State regulation became more distant relative to the relationship-based direct work with families and more focused on risk management and surveillance of families.

No discussion of the role of CPWSW in mediating between the State and the family in Ireland can fail to acknowledge the significance of the Irish Constitution, which has been described in the literature as "extremely unusual in the importance it places on the rights of the family and parents and in the authority it invests in them" (Lavan, 1998, p. 48). Criticism of the Irish Constitution has centred on the emphasis it places on the privacy of the family, sometimes at the expense of children's rights, and how this in turn creates anxiety about child protection

interventions. As Lavan has observed, "On the one hand there is outrage at the apparent failure of social workers to take action to protect children; yet on the other hand, there is public concern at a perceived over-interference by the State in family life" (1998, p. 48). Many inquiry panels, non-governmental organisations, international bodies and governmental committees have called for Constitutional reform to include a statement of children's rights (McGuinness, 1993). The All Party Oireachtas Committee on the Constitution (1996), the United Nations Committee on the Rights of the Child (1998; 2005), Murphy et al. (2005), and the Ombudsman for Children (2006) all have recommended that that the Constitution recognise children as "individual rights holders, neither possessions of the family or State" (Ombudsman for Children, 2006b, p. 12). A referendum on constitutional amendments clarifying children's rights is to be held before the end of 2012.

## CPWSW, ASF and the Health Service Executive

Under the Childcare Act 1991, as amended, particular responsibilities for all children are imposed on the HSE. How that burden of responsibility is to be discharged in relation to children of ASF has not been addressed. Section 24 of the Act places responsibility on the HSE to consider the child's welfare as paramount. It does not, however, stipulate the ways in which the best interests of the child may be assessed; this is left up to the child protection system and its workers. Likewise, under Article 22 of the UNCRC, ratified by Ireland in 1992, refugee children and children seeking asylum are entitled to special protection. This applies to all children whether or not they are by a parent or guardian. The Convention also advocates that all children have a range of basic rights, including the right to a standard of living adequate for the child's physical, mental, spiritual, moral or social development and access to appropriate measures to promote physical and psychological recovery.

There has been very little empirical research on CPWSW with children seeking asylum with their parents. What literature is available focuses on social work involving unaccompanied minors (see for example Christie, 2002; 2003; Humphries, 2004), or the impact of the direct provision system on asylum-seeking children and

their families. Studies conducted by the Irish Refugee Council (IRC) (2001) and Fanning (2002; 2007), for example, highlight the plight of asylum-seeking children and demonstrate the material, emotional and financial deprivation suffered by these children, while Collins (2002) found that parents in direct provision lacked many of the basic amenities necessary to care for their children. According to Christie, however, "As yet no systematic research has been done on social work involvement with asylum-seeking families in direct provision contexts" (2003, p. 228). It is to this under-researched area of social work that the current study contributes by exploring the experiences of CPWSWs with ASF.

#### **Issues of Care and Control**

There is considerable literature highlighting both the context within which CPWSW takes place and the debate around the care and control role of social work. As Williams et al. explain,

Social work occurs in the social, political, economic and cultural context of the nation state. It is subject to the same social forces of globalisation and social change which prevail elsewhere in society within its professional boundaries. State intervention in the lives of the individual and the family has always served a dual function. On the one hand, intervention has meant providing for the destitute and needy, or those deemed to be 'deserving' of help. On the other hand intervention has also meant controlling the behaviour of the 'deviant' or attempting to reform the behaviour of the 'undeserving' poor. Social work has always been at the heart of these contradictory pressures (Williams et al., 1998, p. 43).

Banks (2001) and Hayes and Humphries (2004) also have recognised the ambivalent role that social workers play in society, by both expressing society's altruism (care) and enforcing societal norms (control). That social work is a balancing act has been acknowledged by those responsible for its regulation and for training its practitioners. Additionally, a number of high-profile inquiries into cases of child abuse and neglect have highlighted the problems social workers face when seeking to balance the caring and controlling aspects of their role. These include the Kilkenny Incest Case (1998) and The Roscommon Child Care Inquiry (2010) in

Ireland, and the Climbie inquiry (Laming, 2003) (Laming, 2009) in the UK and the Baby P review of progress in implementing earlier recommendations report.

Debates over the role of the State in family life centre upon two main schools of thought. The first sees the State as having a genuine interest in assisting children and families (Archard, 1993, 2003) and the second sees the State as controlling families and therefore possessing a surveillance role. Donzelot (1980) cited in Thomas Nigel (2002, p.22) has claimed that "assistance to families is intractably inked with surveillance, so that a family's own need is used to bind them to the power system." Archard affirms that "the State has a legitimate interest in the welfare of children which stems from both its role as 'parens patriae' and its 'reproductive' role. Also the State has a legitimate interest in the welfare of children both as human beings to be cared for and as future citizens who must be trained for their eventual roles in society" (1993, p. 154). The essential feature of this doctrine is that the State only becomes a 'parent' in the last instance, with primary responsibility being conceded to the child's own parents. In this model, the State presumes that families are best left free to conduct their affairs in private and that parents will care for and socialise their children appropriately. However, when parents demonstrate that they are incapable of discharging their parental duties, most obviously when they are found to have abused or neglected their child or children, then State intervention is justified. The presumption of family privacy can be disregarded only once this threshold has been crossed.

By contrast, Donzelot (1980). argues that in fact "the primary purpose of State intervention is to control, not just the children and the families who are directly subject to intervention, but all members of working-class families. Assistance to families is linked intractably with surveillance, so that a family's own need is used to bind them into the power system" (cited in Hendrick, 2005, p. 159). Ferguson takes a more nuanced view, arguing that "perspectives which see child protection work as concerned only with disciplining and normalising are based upon a one-dimensional, monolithic view of developments and ignore how people as knowledgeable actors, actively make themselves the subject and not just the

objects of social processes" (1997, p. 221). As evidence, he points to the fact that women and children seek the involvement of expert systems in order to protect themselves from violence.

Academics and policy makers alike appear to disagree about where to place the boundary between the authority of parents and the power of the State to intervene. Likewise, there is widespread disagreement about when the State may intervene if a child's best interests are not being promoted, and whether the State's primary duty should be to children and to their best interests (however defined) which may differ from that of their families, or whether it should be to families as social units that include children. Social workers who work with children and families in a child protection and welfare context find themselves at the centre of these controversies, constantly trying, in their role as mediator between the State and families, to walk a tightrope between supporting parents and carrying out a surveillance role which in some cases leads to them being mistrusted by families.

Parton (1991) has described social work as an ambiguous profession, which acts as a system of social control, and also speaks on behalf of those it is regulating. The problems encountered by social workers in trying to balance these conflicting responsibilities are not new. A study by Scourfield and Welsh, for example, concluded that "the social control and authority role of social workers was complex, with clients constructed within multiple and sometimes conflicting discourses of masculinity and femininity, and that social control is explicit in the child protection social work role" (2003, p. 409). The current study suggests that the role of social workers, while generally challenging, is further complicated when dealing with ASF whose rights and entitlements are in question due to their status. The attitude adopted by most European welfare States towards asylum seekers, who often are perceived as welfare spongers, has been one of hostility, which has led to the development of policies and procedures designed to restrict their entitlement to support. Child protection social workers find themselves at the centre of these controversies, trying to balance the values and principles of their profession with their role as agents of the State. The particular complexities associated with State

intervention in family life in developed countries have been highlighted by Goldson et al.:

While it is generally accepted in 'developed' societies that outside interventions are justified when children are considered to be at risk of serious harm within their families, the issues are rarely clear cut...with the extent and degree of State intervention into families highly contestable and countries having a different emphasis in this respect (Goldson, et al., 2002, p. 137).

Parton has described social work as "an 'ambiguous' profession which operates between, and hence has allegiances to both civil society, in the guise of individuals and families, and the State, in the guise of the court and its statutory responsibilities" (1991, p. 12). This ambiguity is reflected in the debate over which of the parties with whom they interact should social workers consider 'the client'. In other words, is the client the child, its parent(s), or the family as a whole? According to Scourfield and Welsh (2003), within the context of child protection work, the conventional response to this question is that the client is the child, because of the child-centred nature of the work. It is certainly true that "phrases such as 'child-centred', the 'child's needs', 'risk to the child' and 'in the best interest of the child' are important pieces of rhetoric in the language of social work and are used as if they are universally understood" (Fernandez, 1996, p. 23). Scourfield and Welsh have concluded, however, that "while children are the rhetorical object of concern and are claimed to be the principle client, in actual fact the everyday reference to 'clients' tends to mean parents, because it is parents the workers focus on in day-to-day practice" (2003, p. 56).

These debates shape the nature of CPWSW interventions. If, for example, practitioners take a child-centred approach when working with families, this might mean that their intervention will focus on the child, whereas if they take a family-centred approach, the intervention will be focused on working with the whole family. In this way intervention can be said to depend on how the presenting problem is perceived by the social worker and also by the organisation. This also will shape how the conflict between care and control, between the desire to

support and the expectation that practitioners perform a surveillance, monitoring and investigative role will be managed.

## **Dilemmas of Care and Control when Working with ASF**

It is acknowledged in the literature that social work with asylum-seeking children and their families is a growing area of practice and that immigration and asylum seeking is a complex area of practice in terms of the range of situations and families that may fall within its remit. And yet, according to Grady, "there is very little understanding of the needs or circumstances of asylum-seeking families" (cited in Hayes and Humphries, 2004, p. 133).

Within the growing body of literature which explores the role of CPWSWs when working with ASF, most of the arguments centre on how social workers resolve the ethical dilemmas they face in reconciling their care and control roles (see for example Christie, 2003; Humphries, 2004; Dunkerley, 2005; Crawley, 2009). Christie (2002) draws attention to social workers' potentially "collusive" role in the reproduction of national and other boundaries that contribute to the exclusion of particular groups and to the facilitation of others.

Social work has been closely linked to the development of modern nation states, helping to promote specific forms of national citizenship by regulating internal boundaries and negotiating various forms of inclusion and exclusion...social work in Ireland is developing new ways of constructing asylum seekers and refugees as welfare subjects....these new welfare subjects are being maintained at the margins of social citizenship (Christie, 2002, p. 188).

In Christie's view, social work with asylum seekers raises questions about the nature of national welfare States as well as the changing role of the social work profession.

In exploring this topic, Bauman refers to the "gardening state", arguing that "the social professions are like gardeners, maintaining borders and regulating the growth of the different areas of the garden" (1999, cited in Christie 2002, p. 188).

One area of growth regulated by social workers, whether directly or indirectly, is citizenship, which Dunkerley et al. contend "is fundamental to welfare entitlement"; in fact, "it is citizenship that is at stake for asylum seekers" (2005, p. 650).

Prior to the citizenship referendum held in September 2004, Ireland was unusual amongst EU countries in that children of asylum seekers who were born in Ireland automatically acquired citizenship rights. This provision followed the landmark decision in Fajujonu v. Minister for Justice (1990), in which the Supreme Court ruled that parents of Irish-born children had the right to remain and reside in the State. The ruling was based on the argument that the children of such parents were themselves citizens, and as such, had a constitutional right to company, care and parentage within a family unit. On the basis of this ruling, parents of Irish-born children had the same rights to social welfare benefits as any Irish citizen — though if their Irish-born child died the parents would automatically lose their right of residence. The outcome of the citizenship referendum in September 2004, however, paved the way for the Irish Nationality and Citizenship (Amendment) Act 2004, which replaced the *jus soli* principle with *jus sanguinis*. Consequently citizenship was no longer granted on the basis of birth on the island of Ireland, but rather on the basis of a parent's citizenship rights.

The restrictions imposed on asylum seekers due to their lack of citizenship rights continue to evoke criticism from a variety of sources, including the IRC and the FLAC, which have sought to highlight the impact of such policies on children seeking asylum who have been placed in a position of poverty from which they are vulnerable to social exclusion.

In 2009 FLAC reported that "since 2004, families in the asylum process, or children dependent upon parents who are in the asylum process, are no longer eligible for child benefit" (p. 210), a decision which the IRC (2001) and other organisations lobbying for asylum seekers claim is in contravention of Articles 2 and 3 of the Geneva Convention (1951, as amended). Christie (2002) argues that "the Irish

government is developing a two-tier approach to services for Irish children and asylum-seeking children living in Ireland by treating asylum-seeking children and their families less favourably than other children living in Ireland" (pp. 188).

It can be concluded that against the backdrop of such restrictive social policies, it is inevitable that many social workers who work with asylum-seeking families and children will feel conflicted about the role of the State in family life and the role of social workers as agents of the State. Christie (2010) claims that most of the current policies not only conflict with the role of social workers but also contravene Ireland's national and international obligations with regard to the rights of children. The National Children's Strategy (NCS), for example, was initiated in order to advance the implementation in Ireland of the UNCRC (1989), which places the onus on the State parties to ensure that children who are seeking asylum receive appropriate protection and enjoy the applicable rights of the Convention and any further human rights instruments to which the State is a party.

## Article 2 of the UNCRC states that

State parties shall respect and ensure the rights set forth in the Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status. In addition, it asserts that the State should take all appropriate measures to ensure that the child is protected against all forms of discrimination or punishment on the basis of a range of issues, which include their status. (UNCRC, Children's Rights Alliance 2010, p.9)

Among the many objectives set out in the NCS, which is aimed at improving the lives of children in Ireland, is the provision of appropriate accommodation. As already stated the families and children who took part in this study were accommodated within the direct provision centres which are unsuitable for meeting children's needs. This reinforces the point made earlier by Christie about how children of ASFs are treated differently from other children in Ireland in terms of provision of services.

The next section of the literature review considers general ideas on CPWSW and how these relate to CPWSW with ASF within a national and International context. The way in which families and social workers experience CPWSW is determined by two broad and sometimes opposing perspectives that social workers employ. These have been categorised by Gilbert (1997, p. 232) as "the child protection" and "the child welfare" orientations. In an earlier work in which he compared child welfare perspectives in ten different countries, Gilbert concluded that "one of the important variations around which the countries were grouped concerned the extent to which child abuse reporting systems emphasised child protection or family service", and he contended that "these two orientations to practice could be distinguished along several dimensions" (1997, p. 232), as shown below.

**Table 3: Characteristics of Child Protection and Family Service Orientations** 

	Child Protection	Family Service (child welfare)
Problem frame	Individual/moralistic	Social/psychological
Preliminary intervention	Legalistic/investigatory	Therapeutic/needs assessment
State-parent relationship	Adversarial	Partnership
Out-of-home placement	Involuntary	Voluntary

#### Adapted from Gilbert, 1997 (p. 233)

Gilbert concludes that the way in which social workers respond to and intervene in cases of child abuse depends mainly on how the problem is perceived:

In some systems the act of abuse was perceived as a problem that demanded the protection of children from harm by degenerate relatives – 'child-saving' approach. In other systems it was seen as a problem of family conflict/dysfunction stemming from social and psychological difficulties that are not responsive to services and public aid (Gilbert, 1997, p. 232).

Table 4: Models of Child Welfare (Sweden) and Child Protection (Canada)

The Child Welfare Model	The Child Protection Model	
<ul> <li>A greater readiness to intervene</li> <li>Child Welfare is assessment driven</li> <li>'Best interests' are broadly defined to include well-being with family preservation</li> <li>More resources are available to support families and prevent harm</li> </ul>	<ul> <li>Less readiness to intervene and only the most needy are eligible</li> <li>Child Protection is structure driven</li> <li>'Best interests' are narrowly focused on protection and permanency planning</li> <li>Limited resources are directed at reacting to the consequences of harm committed</li> </ul>	

#### Adapted from Khoo et al. (2002, p. 465)

Comparing Child Welfare models in Sweden with Child Protection models in Canada, Khoo et al. (2002) note that

In Canada it has become intolerable politically and socially for children to fall through the cracks or for social workers to fail to protect children. In child protection, the philosophical underpinnings of policy as well as intervention by social workers are built around investigative and legislative concerns...the best interests of the child are more often met through policing parents who have harmed or through placing children in long term care (Khoo et al., 2002, p. 466).

In Sweden, by contrast, "social intervention is founded on the guiding principles of solidarity, parents' rights and upholding the child's best interest within the framework of family preservation. Intervention may begin earlier with more preventative services and more services available to assist children in need" (Khoo et al., 2002, p. 467). Describing the Irish child protection system, Whelan et al. (2010) observe that

[i]n common with other Anglophone countries the Irish child protection system has been evolving in two related directions over the past 15 years. Primarily it has attempted, in theory at least, to move from the increasingly criticized 'traditional' or 'investigative' approach towards what might be described as 'family centred child protection work'... Secondly, the system has adopted some of the more ubiquitous public service managerialist strategies, nowadays describing work with children and families in terms of 'business processes 'and 'operating procedures' to be completed within stipulated timelines and quantified in line with performance measures and quality standards (2010, p. 1).

The differences in orientation between CPSW and CWSW as described by Gilbert (1997) and Khoo et al. (2002) appear clear in theory. However, in practice and based on research by Spratt (2001), which examined the influence of a child protection orientation on practice in child welfare cases, this differentiation poses some challenges for social workers. Spratt's (2001) study highlighted the difficulties faced by social workers in attempting to achieve changes for families through technical change in practice.

The need to manage risk was found to be a pervasive influence on practice not only with families who were subject to child protection investigation but also with those who received child welfare interventions...[T]he patterns of practice in child welfare cases were similar to those in child protection cases, and secondly while the majority of social workers expressed an attitudinal desire to move towards a child welfare orientation, they still prioritised the management of risk in their practice (Spratt, pp. 933-934).

In a follow-up study Spratt and Callan (2004) examined the views of parents who were subject to child welfare interventions. It was apparent that the key determinants influencing the evaluation by parents of the social work response to their referral were the attitudes and performance of the social worker with whom they had contact. "Families viewed those who were skilled in building and sustaining relationships with them as going beyond procedural requirements in their work, sharing information openly and honestly and being trustworthy in carrying out promised tasks" (p. 217). Within the Irish context it has been suggested by Buckley that "the fact that 'welfare' reports currently need to be filtered through the child protection system in the first place suggests that large numbers of referrals are assessed against an abuse benchmark and only relegated to the welfare category once risk has been eliminated" (2008, in Burns and Lynch, 2008, p. 22).

In the literature the difficulties experienced by CPWSWs in maintaining a purely CW focus appear to arise from numerous factors amongst which is the nature of CPWSW itself. In some cases this has been attributed to the negative publicity received historically by both social workers and social work as a profession, mainly

due to high profile scandals involving public inquiries into the abuse of children, which is said by McNulty (2008, p. 123) to have been mostly prevalent in the United States, the UK and Australia. Over the last three decades, the British press in particular has tended to focus its criticism on the competence and motivations of CPWSWs.

A literature review by Galilee (2006) of media representations of social work and social workers found that "[d]ue to the complexity and protracted nature of the work, most social work is of little interest to the media and the wider public. Social work stories only became of interest when major failures occur in the system" (p. 2). Furthermore, Parton's analysis of press reporting of social work in national daily and Sunday newspapers in England between 1 July 1977 and 30 June 1998 revealed that nearly two thousand articles were devoted exclusively to discussions of social work and social services. The 15 most common messages, accounting for 80% of the total, were negative with regard to social work and included the words 'incompetent', 'negligent', 'failed', 'ineffective,' 'misguided' and 'bungling' (Parton, 2009, pp. 68-69).

Kemp (2008) attributes the origins of bad publicity received by CPWSW in the UK to the quality agenda, which

includes processes such as proceduralisation, managerialism, quality assurance, audit, and standardisation and performance management...these processes have diminished the social work profession, reduced its discretion and authority, and framed practice in a narrow and administratively oriented processes of 'tick' boxes and form filling (Kemp, in Burns and Lynch, 2008, p. 97).

Much of the literature also highlights the struggles faced by CPWSWs in trying to reconcile professional standards within what has become a very prescriptive, legalistic and procedural system of care for children and families (Ferguson, 2011; Munro, 2011).

Developments in the area of child protection and child welfare in different countries and jurisdictions have been extensively discussed and critiqued in the literature (Parton, 1997; Wilson and James, 2002; McAuley et al., 2006; Kirton, 2009). The most recent contribution to this literature is The Independent Review of Child Protection in England (Munro, 2011). While it would be premature to judge the effect of this report, what is evident is that its recommendations uphold the return to a relationship-based practice in social work whose origins, according to Ruch (2005), "can be traced back to the emergence of psycho-analytic theory and practice in the 1920s and 1930s, which underpinned the casework practices of the Children's Department in Britain in the 1950s" (p. 114). This practice model, while having its supporters at the time, was not without its critics, who, according to Ruch (2005),

challenged the roots of the psycho-social model in Freudian psychoanalytic theory and its manifestation in the therapeutic alliance with its patriarchal western, class-biased, pathologising, expert-orientated outlook which was deemed to be incompatible with statutory social work contexts. Anti-oppressive **practice** challenged, in particular, the power relations inherent in psycho-social approaches to **practice**. The result of these combined factors was the fall from favour of the psychosocial model (p. 114).

In spite of the criticisms of the earlier models of relationship-based practice, new empirical research and approaches are slowly emerging which highlight the nature of relationships valued by recipients of CPWSW. Some of this research will be explored in the next section of this review.

In respect of this study, however, it is appropriate to state that there is a growing body of literature questioning the relevance of such orientations based on the fact that most of the frameworks were developed within a western context. Hence, their relevance when dealing with non-western families has been contested (see for example Mekada, 2002; Laird, 2008). In an attempt to examine commonalities in the international social work experience, and to suggest a unified ideological approach, Moldovan and Moyo (2007) examined ideological influences on indigenous social work in Zimbabwe in southern Africa and in Moldova in Eastern Europe. They concluded that "social workers were mostly unaware of the

ideological context of their profession and tended to embrace individualistic charity-based social work as the de facto ideological orientation" (p. 468).

Differences in practise orientation are relevant to the present study because ASF are likely to originate from a country in which social work exists at all, differs from that of the host country, if it exists at all. Referring to the practise orientation in the UK in relation to asylum seekers, Bernard and Gupta note that

[t]he child protection system that exists in Britain will be unfamiliar to many African families, especially those more recently arrived, as similar state systems do not exist in most African countries, particularly where socio-economic factors, political instability and violence overshadow intra-familial child maltreatment and effective intervention into child abuse and neglect (Bernard and Gupta, 2008, p. 481).

Furthermore, a study by Brophy et al. (2003, cited in Bernard and Gupta, 2008) concluded that "some minority ethnic parents, including many African parents, saw state intervention in parenting as a complete anathema, and distrust of the state was intense, especially where parents originated from countries in political turmoil and with no child welfare services" (p. 481).

The discussion in this section of the literature review has focused on the two main western practise orientations used by CPWSWs in their interventions with families. The next section will review the literature on the experiences of CPWSWs and families. From the literature reviewed it appears that while practise orientations are important in how social workers intervene with families, how interventions are experienced by families is also dependent on other factors such as the nature of the relationship between the social worker and the family. An Israeli study, conducted by Knei-Paz (2009), on essential elements in the creation of a positive intervention experience by social workers, showed the importance of relationship-based work and found that it was the quality of the therapeutic bond established between the social worker and the client that was the basis for what was perceived as a positive intervention:

The central characteristic of the relations between clients and social workers that were experienced as successful were the quality of the bond that was created between them. The caring aspects of the relationship represented a dominant part of their experience of the relationship with the social agency (Knei-Paz, 2009, pp. 185-186).

## **CPWSW** with Families

To help set the context and identify gaps in the research in the area under examination, it is important to examine the literature which focuses on the experiences of CPWSWs in general before turning to that which focuses on their experiences with ASF specifically. The focus of publications exploring the interaction of child protection social workers and families could be grouped into three broad categories: (1) the qualities, competencies and skills in social workers which families find helpful or unhelpful (see for example Drake, 1996; Corby, 2006; Dumbrill, 2006; Arney and Scott, 2010); (2) the participation of service users in child protection case management (see for example Buckley et al., 1997; Buckley, 2003; Spratt and Callan, 2004); and (3) the view, perceptions and expectations of CPCWS (see for example Dale, 2004; Dumbrill, 2006; Maître et al., 2006; Palmer et al., 2006; Buckley et al., 2008; Buckley et al., 2010).

It has been acknowledged that "[i]n Ireland prior to the late 1990s little was known about the care and control balance in child protection or how it was experienced by either service providers or service users" (Buckley et al., 2008, p. 13). A recent audit of child protection research in Ireland (1990-2009) concluded that "there is a shortage of good quality, robust research on child protection practice in the statutory sector, particularly in respect of social work, which is acknowledged to be central to child protection" (Buckley, 2010, p. v). The research audit also noted that "few research studies focused on the views of child protection service users. Only 4.7% of the statistics focus on the experiences of children and families who are users of the child protection services" (*ibid.*, p. 36). The study acknowledged as a possible limitation "the lack of inclusion of materials that had either not been found by the researchers or not brought to their attention...also small and valuable pieces of unpublished research carried out by

students and practitioners not published or otherwise put in the public domain" (p. 39). A few studies, such as those conducted by Buckley et al. (1997) and Buckley (2008; 2011) and one by Spratt (2004) in Northern Ireland, have specifically researched the views and experiences of service users/parents with regard to social work interventions. Earlier studies conducted in the UK, on the other hand, point to a move towards more participation and service user recognition. According to Buckley (2008),

as the 1970s and the 1980s progressed, a growing awareness of authority in statutory social work gave rise to the recognition that child protection service users needed to have their rights protected. This, in turn, led to an increased emphasis on user involvement as a way of reconciling the tensions between care and control as well as growth in the parental rights movement (Buckley, 2008, p. 13).

In Ireland qualitative research carried out on service users' perspectives of the child protection system in the Republic of Ireland started to emerge from the late 1990s onwards (see for example Buckley et al., 1997; Ferguson and O'Reilly, 2001; Buckley, 2002; 2003; 2008; 2010). Similar studies have also been carried out in Northern Ireland (e.g., Spratt and Callan, 2004).

In relation to the aims of the current study, the themes that emerge from the research and literature which are specific to the experiences of child protection social workers can be divided into two main categories: (1) social work qualities and competencies identified by parents and guardians during the course of intervention, and (2) families' experiences of working in partnership with CPWSWs. While the inherent complexity of building positive relationships between service users and child protection social workers in the context of child protection has been well documented (for example by Drake, 1996; Yatchmenoff, 2005; Dumbrill, 2006; De Boer and Coady, 2007), there is a growing recognition that the quality of the relationship and the 'helping alliance' between worker and service user is a key determinant of the outcome (Ruch, 2005; Dumbill, 2006; Maiter, 2006; Ruch et al., 2010; Stanley, 2010). Ruch, for example, has argued that

the renewed interest in relationship-based practice can be understood in the childcare social context as a response to the call to re-focus practice in this field. Relationship-based practice challenges the prevailing trends which emphasise a reductionist understanding of human behaviour and narrowly conceived bureaucratic responses to complex problems...[I]n so doing practitioners need to be able to cope with the uniqueness of each individual's circumstances and the diverse knowledge sources required to make sense of complex, unpredictable problems (Ruch, 2005, p. 111).

Arguments in favour of relationship-based practice are often born out of humanistic ideologies which focus on the interpersonal dimension of social work and the way families and practitioners relate to each other. From the above discussion it is evident that literature and research on effective practice emphasise the quality of the relationship between the social worker and the service user. This is also true for ethnic-minority families. In an extensive study of child welfare services for ethnic minority families, Thoburn et al. (2005) found that, irrespective of the methods used, the relationship between the family members and the professionals was most influential with regard to the outcome.

In a study of social work with African refugee children and families, Aymer and Okitikpi (2003) found that the reactions of African refugee families to social work intervention fell into two categories which they classified as either 'guarded' or 'open'. They concluded that "forming relationships with those who feel in the guarded group was difficult; they tried to keep their contacts with professionals to a minimum", while the second group was described as "having an open stance to the authorities and professionals" (p. 218). Although both groups were concerned about their uncertain immigration status, their differing attitudes towards professionals led to quite different responses to social work intervention.

Findings from a study by Kohli (2006) highlight other factors which can obstruct the formation of positive relationships, for example, communication difficulties, distrust of social workers as agents of the State, past negative experiences with government officials in their own countries of origin, and families' immigration status. While the literature shows that working in partnership with families receiving CPWS and forming positive relationships is generally challenging, it would

appear that this challenge is even greater when working with asylum-seeking families whose culture is different from that of the host country, and with whom communication might be difficult due to language barriers.

## **Major Themes Identified: Positive Qualities**

In an early study, Drake (1996) organised a focus group which examined the ways in which both social workers and families perceived key child welfare competencies. Interestingly, both groups identified seven key competencies which they considered important to the helping relationship: "consumer-relationship, diversity skills, special population skills, inter- and intra-organisational skills, self-management skills, assessment and intervention skills" (Drake, 1996, p. 265).

A subsequent, English-based study by Dale (2004) involving eighteen families who had received child protection services in a large rural Midlands local authority, support Drake's findings. Service users in this study identified "being supportive, listening carefully and effectively, skills in promoting co-operation, being 'matter of fact' and being human, as core to building a positive working relationship with social workers" (Dale, 2004, p. 152). Another study by Maiter et al. (2006), conducted in Ontario, while acknowledging the power imbalance and sometimes adversarial nature of child protection work, found that "51% of the parents who participated in the study rated caring as the highest quality and most important in their experience of a positive relationship with their social worker [;] genuineness, empathy, listening, a non-judgemental approach and acceptance were also highlighted" (pp. 175-178). Later studies which examined similar issues reached similar conclusions. Table 5 (below), for example, details the qualities that were identified as important by parents who took part in a study in Ontario by De Boer and Coady (2007).

**Table 5: Attitudes and Actions that Build Good Relationships** 

Soft Mindfulness and Judicious Use of Power	Humanistic Attitude and Style that Stretches Traditional and Professional Ways of Being
Being aware of one's power and the	Using a person-to-person, down to
normalcy of client's fear, defensiveness and	earth manner (vs. donning the professional
danger.	mask).
<ul> <li>Responding to client negativity with</li> </ul>	<ul> <li>Engaging in small talk to establish</li> </ul>
understanding and support instead of counter-	comfort and rapport.
hostility and coercion.	<ul> <li>Getting to know the client as a</li> </ul>
<ul> <li>Conveying a respectful and non-</li> </ul>	whole person - in a social and a life-history
judgemental attitude.	context.
<ul> <li>Providing clear and honest explanations</li> </ul>	<ul> <li>Seeing and relating to the client as</li> </ul>
about reasons for involvement.	an ordinary person with understandable
<ul> <li>Addressing fears of child apprehension</li> </ul>	problems.
and allaying unrealistic fears.	<ul> <li>Recognising and valuing the client's</li> </ul>
<ul> <li>Not prejudging the veracity of intake,</li> </ul>	successes in coping.
referral or file information.	Being realistic about goals and
• Listening to and empathising with the	patient about progress.
client's story.	Having a genuinely hopeful/optimistic
<ul> <li>Pointing out strengths and conveying</li> </ul>	outlook on possibilities for change.
respect.	<ul> <li>Using judicious self-disclosure</li> </ul>
<ul> <li>Constantly clarifying information to</li> </ul>	towards developing personal connection.
ensure mutual understanding	Being real in terms of feeling the
<ul> <li>Exploring and discussing concerns</li> </ul>	client's pain and displaying emotions.
before jumping to conclusions.	Going the extra mile in fulfilling
• Responding in a supportive manner to	mandated responsibilities, stretching
new disclosures, relapses and new problems.	professional mandates and boundaries.
<ul> <li>Following through on one's</li> </ul>	

#### Adapted from De Boer and Coady (2007, p. 35).

responsibilities and promises.

The experiences of parents involved in these studies and the qualities they identified as desirable in building a helpful working relationship concur with other international studies and with earlier studies conducted in Ireland (e.g., Buckley et al., 1997). It is interesting although not surprising that many of the social workers involved in these studies struggled to find a balance between their caring and authoritative roles. The extent of this struggle is indicated by the fact that most relationship-based studies, in addition to highlighting qualities which are valued by families in their interactions with social workers, also identify negative qualities which detract from the relationship.

## **Major Themes Identified: Negative Qualities**

Parents taking part in Dale's study, for example, described social workers as "arrogant", "snotty", "bossy" and "couldn't care less", and complained about "the power the social workers have, the big words" (2004, pp. 153-154).

Likewise, Maiter et al. (2006, pp. 70-71) found that many of the parents in their study described social workers as judgemental (46%), cold and uncaring (44%), poor listeners (38%), critical (38%) or insincere (20%), while parents involved in a study by Dumbrill (2006) "regarded child protection services as far more powerful than themselves, a power they believed could be used over them in a coercive and penalising manner or with them as a form of support" (p. 30).

The findings from Dumbrill (2006) contrast with those of De Boer and Coady (2007) who found that the nature of relationships between workers and clients were marked by collaboration, mutual respect and honesty. De Boer and Coady's study underscores the importance of good client-worker relationships in CPWSW and challenges the conceptualisation of child welfare as serving a social control function, with little need for positive relationships and virtually no therapeutic function. Instead, De Boer and Coady suggest that "good relationships are more about ways of being than they are about strategies and techniques...about good human relations in general, treating others with kindness, respect and dignity, being honest and genuine, and striving to understand and work collaboratively" (2007, pp. 39-40). Their conclusions reaffirm those of an earlier study by Spratt and Callan (2004) in which, from the families' perspective, these qualities and the ability to go beyond procedural requirements defined being skilled.

# **Participation and Involvement in the Child Protection Process**

The issue of service user participation has been considered extensively, both in early literature (e.g., Thoburn et al., 1995; Corby et al., 1996; Buckley et al., 1997;) and in more recent publications (e.g., Sundrell and Vinnerlijung, 2004; Bell and

Wilson, 2006; Dumbrill, 2006; Holland and Rivert, 2006; Howe, 2010). Much of the debate in CPWSW about service user involvement centres on power sharing between social workers, children, parents and guardians, especially during case conferences.

According to Corby et al. (1996), one issue is "the appropriateness of parental involvement at meetings that are perceived to be forums for professionals to share information about parents and ascertain their level of commitment to engage with professionals" (p. 490). Dumbrill (2006) questions the authenticity of a partnership with parents, given the power imbalance inherent in CPWSW. Indeed, there is widespread acknowledgement in the literature of the complex nature of CPWSW which can complicate the efforts of workers to form partnerships and good relationships with parents, due to the vulnerable spaces in which families sometimes find themselves. Nevertheless, Howe (2010) warns that "if in response, the worker becomes more defensive, bureaucratic and impersonal, the less likely it is that either party will be open, constructive or collaborative. In their efforts to regain control, increase predictability and reduce stress workers are liable to resort to power procedures, while parents retreat and disengage" (p. 31).

Similar themes and issues emerge from more recent literature and research. Howe (2010) asserts that "in spite of much lip service being paid to the value of good relationships, modern policy and practice, spurred on by its own fears and anxieties, continues to drive parents and professionals further apart. In response to each inquiry into a child's death, the result is more procedures, more targets" (p. 332). The system that Howe describes takes attention away from time that could be better spent building relationships with families. Like many other researchers and commentators (e.g., Maiter et al., 2006; Forrester et al., 2008; Trotter, 2008), Howe highlights the negative impact current systems have on the development of relationships with families, and the need for a relationship-based practice:

When parents and frontline workers meet, many key things happen that cannot be captured, tied down, tick-boxed, computerised and proceduralised...there is a risk that the more workers and their agencies are caught up in the anxiety of following procedures, measuring performances and laying down paper-trails, the more depersonalised will become the relationship between parents and professionals (Howe, 2010, p. 332).

What approach individual countries take in relation to service user involvement and participation, however, appears to be determined by various factors, one being the orientation in CPWSW, as discussed earlier in this chapter. "In Ireland...the principle of family participation in child protection meetings has been universally embedded into practice over the past two decades on the basis that family members are experts and can make a valuable contribution to the design and provision of services" (Buckley 2011, p. 104). While this may be true in theory, in practice the documented experiences of parents and service users, particularly with regard to case conferences, paint a different picture. An earlier study by Buckley et al. (1997), for example, found that "social workers who were interviewed expressed some difficulty in maintaining democratic relationships with families where there was hostility and non-cooperation. They perceived their own powerful positions vis-à-vis the families as determining a false level of partnership at times, where families were left with little choice" (p. 171). Furthermore, that study suggests, "to a great extent, parents were not involved in a meaningful way with the child protection system" (p. 174). In a more recent study by Buckley (2011), families described their experience of participation at child protection meetings as "humiliating", "nerve is wracking", "daunting", "embarrassing", "intimidating, "annoying" and "frightening". This suggests that much remains to be done to make the principle of partnership a reality in practice. In other words Buckley's (2011) study shows that nothing has changed two decades on, in terms of the relationships between social workers and families.

Buckley concludes that "While acknowledging the efforts made to work in partnership with families, the experiences and processes of engagement have often been experienced as coercive, albeit mitigated by the degree of support offered by workers" (2011, p. 108). Her findings replicate those of earlier studies in this area (e.g., Clever and Freeman, 1995; Thoburn et al., 1995; Dale, 2004; Spratt and Callan, 2004; Dumbrill 2006).

Despite variations in individual experience, what is evident from the debate over parental participation in CPSW is that the building of good relationships requires a concerted effort from more than just frontline workers. At the same time, the literature clearly indicates that, because these practitioners are the means through which positive working alliances can be built, they, like families, need to be supported in their work. Additionally, a balance must be struck between ticking boxes and spending time with service users. "Working with parents and children where there are concerns about possible abuse and neglect...requires high calibre practitioners whose strengths are intellectual and emotional as well as practical and procedural" (Howe, 2010, p. 339). In order to cultivate and sustain these qualities, Munro (2011) advocates a strong system of organisational support for social workers and for their professional development. Drawing on Ferguson's work with children and families, she concludes,

The extent to which social workers are able to protect children and take risks depends on the level of organisational support available to them. Workers' state of mind and the quality of attention they can give to children is directly related to the quality of support, care and attention they themselves receive from supervisors, managers and peers (Ferguson 2011, in Munro 2011, p. 105).

Munro further asserts that "changing the way organisations manage frontline staff will have an impact on how they interact with children and families...since there is evidence that workers tend to treat the service user in the same way as they themselves are treated by their managers" (2011, p. 107).

#### **CPWSW** with ASF

Review of the available literature reveals that there have been few studies which specifically focus on the experiences of child protection social workers and asylum seekers. "In Britain, few studies explore the social workers' experiences of working with refugees and asylum seekers in general, and African refugee children and families in particular" (Aymer and Okitikpi, 2003, p. 218). Instead, "Much of the

research into refugees within the UK relates to adults. A great deal of the research that exists on refugee children is often incorporated into material on children from minority ethnic or bilingual backgrounds" (Dunkerley et al., 2005, p. 651), and therefore fails to capture the real issues faced by children accompanied by parents or other adults seeking asylum.

Due to a dearth of specific literature dealing with the experiences of child protection social workers and families, it was necessary to broaden the scope of this review. Most of the studies conducted in Ireland and in other European countries have focused mainly on the needs of unaccompanied children seeking asylum or the response of social services to unaccompanied children seeking asylum (see for example Kidane, 2001; Christie, 2003; Kohli and Mather, 2003; Mitchell, 2003; Kohli, 2006a; 2006b; 2007; Chase, 2008; Blower, 2010; Crawley, 2010). Some studies which have examined social work interventions with asylum seekers do so within a broad context; moreover, these studies often refer to social work within the broad spectrum of the 'social' professions, and not exclusively (Dunkerly et al., 2005). Because of this gap it was necessary to broaden the scope of the review. The role of social workers in relation to asylum seekers has been discussed by Christie (2002; 2003), among others. Christie argues that in Ireland "[t]he role of social work with children seeking asylum with their parent(s)/family in unclear" (2002, p. 196). Humphries (2004) asserts that, "work with asylum-seeking children and young people moves from the profession onto new ground and necessitates post-national approaches that offer pointers for the re-imaging of the profession" (p. 113).

A guide to published research on refugees, asylum seekers and immigrants in Ireland (Cotter, 2004) highlights the need for empirical studies on the specific issue of child protection social workers and families. Current published research in this area in Ireland, as in other countries, focuses mainly on the response of social workers to unaccompanied minors seeking asylum (Christie 2002; 2003; 2010; Collins, 2002; Charles, 2009) and the needs of refugees and asylum seekers (e.g., Cullen, 2000; Chester, 2001; Comhlamh, 2001; Blower 2010). Other studies have

focused on the needs and resettlement of asylum seekers in Ireland (e.g., Cullen, 2000; Fanning et al., 2000; Whyte and Byrne., 2005).

According to Dunkerley et al. (2005), "It may be argued that some of the dilemmas faced by staff in the asylum system are not of a wholly different order from the routine ethical difficulties of working for the welfare of any other poor and marginalised people in a context of profound inequality" (p. 651). The same authors, however, distinguish between issues that can arise for indigenous populations and those that can arise for asylum-seeking families specifically: "Asylum seekers are uniquely marginalised within the welfare state because they lack citizen status and their children and young people are especially vulnerable to some of the most damaging effects of this marginalisation" (p. 651).

A UK study by Aymer and Okitikpi (2003) which focused on the experiences of African children and their families who had been granted refugee status, highlighted "psychological problems, emotional difficulties and health problems, social problems of cultural (adjustment) dislocation, loss of contact with families, language problems, and financial problems. Uncertainties surrounding immigration status often caused anxieties and depression and a sense of isolation" (Okitikpi and Aymer, 2003, p. 218). These findings concur with those of an earlier study by Van der Veer et al (1989), which found that the extent of personal suffering experienced by adults was so great in some cases that they became emotionally unavailable for their children. Furthermore, some of the social workers who took part in the same study acknowledged and recognised that many of the children growing up in the shadow of parental depression, anxiety and uncertainty were unlikely to thrive, and that they and their families were more likely to experience a continuing sense of dislocation, isolation, fragmentation and fear of the unknown. Van der Veer's study also identified problems faced by social workers in relation to age assessment when the age of a child was challenged or when the onus was put on families to provide evidence of the child's age.

Other challenges identified through the study include asylum seekers' perception of social workers as Home Office representatives or immigration officers, and what

social workers in this study identified as a skills and knowledge deficit in their work with asylum-seeking families.

## Theoretical Frameworks Informing CPCWSW with ASF

According to Torode et al. (2001), "there are, broadly speaking, five different frameworks which social workers draw on in their direct practice with 'oppressed' populations: anti-racist practice (ARP), anti-oppressive practice (AOP), anti-discriminatory practice (ADP), interculturalism, multiculturalism, human rights and social exclusion" (p. 14). Other frameworks also include cultural competence (Laird, 2008).

This section of the literature review focuses on multiculturalism, ARP, AOP and ADP. Other relevant frameworks including cultural relativism and cultural competences also are discussed. The issue of gender is explored in the context of AOP/ADP as it relates to the subject of this thesis. Finally, the ecological model and its relevance to this study are considered.

#### Multiculturalism

According to Williams et al. (1998),

The multicultural approach is based on the idea that all cultures are equally valid. The observance of religious festivals, dietary habits and names symbolise a willingness to take note of the cultural attributes of others. Many continental European countries have shown a growing interest in this approach to race relations. In countries like Canada, multiculturalism is the official government policy for safeguarding the place of different ethnic minorities in Canadian society. Politicians in Canada, as in any other country that practices multiculturalism, pride themselves on producing a 'mosaic' in which each culture has its own place (Williams et al., 1998, p. 50).

In Ireland some of the organisations working with asylum seekers and refugees have adopted the multiculturalism model of working, for example, the National Consultative Committee on Racism, which ceased operating in 2005. The multiculturalism approach has been criticised by some commentators on the

grounds that while it purports to support integration, it does so on terms of unequal power-sharing and runs the risk of 'othering' those from minority communities. According to Norwegian social anthropologist Thomas Hylland-Eriksne,

The multicultural approach involves inevitable dilemmas. Thus the acknowledgement of special rights for minority groups to maintain their culture may very well clash with their opportunities to participate on equal terms in the majority society, creating what is termed the multicultural paradox (Hylland-Eriksne, 2002, in Johansson, 2011, p. 537).

The multiculturalism model also has been criticised on the ground that, because the theories which underpin social work were developed primarily in the West and are built upon Western values, social workers may not look beyond the confines of their cultural backgrounds when working with families from other cultural backgrounds. In this sense even though multiculturalism advocates the celebration of all cultures, in practice this may not be easily attained. According to Robinson (1998), "Western theories and methods in social science have become accepted as universal, and are being imposed on non-Western cultures" (p. 315). This observation has led Williams and Soydan (2005) to comment that "If non-Western families do not fit into the Western social worker context there is a risk that they are viewed as more problematic than Western families in a similar situation" (p. 901), or that the case will be referred to a cultural specialist, who is not necessarily a skilled social worker. What's more, "the multicultural approach in combination with Western hegemony in social sciences may prevent social workers from considering searching for knowledge outside their familiar knowledge base" (Johansson, 2011, p. 538). Studies by Barn (2007) and Chand (2005), for example, have claimed that ethnic background is under-explored in relation to child protection in the United Kingdom, where cultural relativism has been blamed for poor practice in a number of high profile cases, including those of Jasmine Beckford (Cooper, 1986) and more recently Victoria Climbie (Laming, 2003).

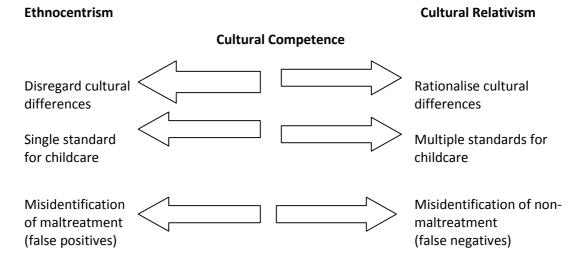
## **Ethnocentrism and Cultural Relativism**

Ethnocentrism describes the view that one's own cultural beliefs and practices are not only preferable but also superior to all others. In contrast, cultural relativism is the belief that each and every culture must be viewed in its own right as equal to all others, and that culturally sanctioned behaviours cannot be judged by the standards of another culture. Cultural relativism has been described as a perspective that is located within the multicultural and anti-racist framework of the 1980s. According to Barn (2007),

this paradigm begins from the premise that all cultures are equally valid and that it is erroneous to operate within a cultural hierarchy which positions some cultures as superior to others. A key fundamental belief of this paradigm is also that, given that all cultures are equal, no one culture has the right to derogate or pronounce judgments, whereby assessments of other cultures are made by treating 'own' culture as the norm and the yardstick and conceptualising others as deviant from that norm and perceived as inappropriate (Barn, 2007, p. 1429).

Putting the multiculturalist paradigm into practice may be a challenge for social workers, however, especially in the absence of universal child rearing standards. Williams et al (1998) suggest that "the only yardstick whereby both individual and family patterns of behaviour are measured and judged as adequate or inadequate is that of the dominant group" (1998, p. 54). At the same time, Wilson and James caution against relying exclusively on either cultural relativism or ethnocentrism, arguing that do so "has serious implications for practice" (2007, p. 133). Figure 9 demonstrates the consequences of unmoderated ethnocentrism and cultural relativism, as described by Wilson and James (2007).

Figure 9: Ethnocentrism and Cultural Relativism



## Adapted from Wilson and James (2007, p. 135)

An unmoderated ethnocentric position disregards cultural differences and imposes a single standard for the evaluation of childcare practices, based on the beliefs and behaviours of the dominant culture; in doing so, it obstructs effective child protection by increasing the risk that unfamiliar cultural practices will be misidentified as child maltreatment. Equally, an unmoderated relativist position suspends all standards and runs the risk of misidentifying maltreatment as culture. As Wilson and James (2007) have observed, "Cultural practices may cause harm; also cultural practices need to be viewed in the context of socio-cultural and environmental change. Because culture is not static but constantly changing, cultural competence must take into account circumstances surrounding culture change. A childcare strategy well suited to one situation may not be suited to another" (p. 1).

Cultural relativism is problematic for CPWSW because as described it is about resisting judgment, not challenging cultural differences and not saying one culture is better than another. But social workers have to make judgments about what is right and what is wrong in terms of behaviours that have an impact on children. Cultural relativism can make that task difficult. The social worker's role is to monitor parenting, to assess it against standards of what is acceptable. To guide

exploration of these challenges, Philips (in Wilson and James, 2007, p. 142) suggests the following questions:

- 1. How can cultural beliefs be respected whilst ensuring that children in all communities are protected?
- 2. Should the effects of racism and disadvantage be understood and accounted for in a child protection context?
- 3. All children deserve to be protected from significant harm, but how should issues of race, ethnicity and culture be considered in decisions about child welfare?

These questions are pertinent to the present study's aim of exploring the experiences of CPWSW and ASF.

## **Human Rights and Social Work: Practice Dilemmas**

The UDHR (1948) is the key starting point for understanding human rights, which Reichert (2007) describes as "those rights which are inherent in our nature and without which we cannot live as human beings...Human rights and fundamental freedoms allow us to fully develop and use our human qualities, our intelligence and our conscience and to satisfy our spiritual and other needs" (p. 6).

In the literature, the debate around human rights is between the universality and the cultural relativism of human rights. As Reichert (2006) explains, "The notion of universality of human rights is contested by critics, who argue that universalism perpetuates colonialist practices" (p. 27). Ignatieff (2001) agrees: "These challenges have raised important questions about whether human rights norms deserve the authority they have acquired, whether their claims to universality are justified or whether they are just another cunning exercise in Western moral imperialism" (p. 102). Others argue, however, that "while universalism implies that some moral requirements are the same for everyone; it does not imply that we all have a moral requirement to be the same or that we have any moral requirement that discourages cultural diversity" (Tilley, 2000, p. 501). By contrast, Harris-Short (2003) and Homing (2004) argue that States should not ask for cultural exceptions

to human rights laws. Instead, cultures should evolve to accommodate human rights standards.

Social workers face many challenges in trying to balance the tenets of human rights law, their own ethical professional principles grounded in social justice, and the realities of restrictions imposed by immigration policies, particularly in their role with asylum-seeking families whose rights are often in dispute. As Hayes and Humphries explain,

The asylum process does not interfere with the rights of others - it merely restricts the rights of the person subject to immigration control...Asylum seekers are not allowed to work. They would like to work but they cannot. They want to be independent but the systems they live in have the opposite effect. They would rather be in society than on the fringes but we demoralise, illegalise and marginalise them to the point where they cannot participate (Hayes and Humphries 2004, p. 92).

Reichert (2007) has argued that "social work principles are intended to ensure that a person in need never goes without shelter or food or medical care...yet social workers often have little choice but to obey the legal guidelines that essentially determine who receives a social benefit and who does not" (p. 3). Under such circumstances, the question for social workers is how to tailor their practice to better fit their mission.

Observing the treatment of refugees and asylum seekers in Australia, Swain (2009) concluded that "Many government policies and regulations regarding refugees and asylum seekers violate the principles of human rights contained in various United Nations declarations and conventions. This means that a social worker may find him or herself in direct conflict with a government agency or the policies or practices of their employer" (p. 303). While Humphries (2004) suggests that the role of social workers in this situation should be one of advocacy, Swain (2009) proposes that social workers become politically informed and morally aware by developing a good understanding of human rights principles and of refugee and asylum seekers' rights under local and international conventions and agreements.

### **Anti-Racist Perspectives**

Anti-racist perspectives (ARP) were developed in the UK where concepts of 'race', racism and anti-racism shaped the debate about ethnic minorities. Concerns about racism first emerged in the social work profession in the 1970s, and during the 1980s and 1990s major social work texts by Dominelli (1988) and Thompson (1993) appeared to guide practice. These concentrated on the oppression of black service users by white social workers in addition to broader issues of discrimination in social services provision. One of the most influential figures in the development of anti-racist practice within the social work profession, Dominelli has suggested that ARP in social work developed in response to the failure of radical, class-based theories to incorporate a black perspective into their analysis of the oppression of poverty. She constructed an anti-racist framework for social work practice based on the theory that racism occurs at three different levels: the individual, the institutional and the cultural. She argues that

Individuals make connections between the social relations they endorse and perpetuate through their attitudes, values and behaviour and the social positions they occupy...Since individuals work in institutions and both are products of the dominant culture, each level is interdependent. Thus racism is constantly reinforced across the individual, institutional and cultural dimensions (Dominelli, 1988, p. 71).

ARP has been criticised for being rooted in 'political correctness' and for treating racism separately from other forms of oppression such as sexism, and to the detriment of other, wider oppressions, such as poverty and inequality of opportunity. "There have also been fears that too strong an emphasis on 'antiracist awareness training' has not enabled social work practitioners and students to de-construct their own attitudes and beliefs in a positive atmosphere, but may have led to negative attitudes going underground instead" (Torode et al., 2001, p. 17). Other criticisms of ARP have focused on the belief that the framework emerged from the philosophy that society is based on power, which may have led to a focus

on cultural issues and issues of colour at the expense of a consideration of structural inequalities (Lavallette, 2011). Anti-racist social work has also been criticised for what some perceive as a preoccupation with language and the use of words associated with political correctness. Others, however, argue that because "misuse of language can lead to oppression, language and discourse is significant with regard to operations of power" (Thompson, 2011, p. 82).

## **Anti-Oppressive and Anti-Discriminatory Practice**

It has been said that "in social work, theories 'emerge' as products of their time and place" (Howe, 1987, p. 167). AOP and ADP frameworks were developed in the context of British social work. Although AOP is often linked with ADP, with which it shares a number of core assumptions, they are broadly speaking two distinct schools of thought. The main difference cited in the literature is that unlike AOP, ADP relies on legislation and policy to achieve change (Dalrymple and Burke, 2006). The nature of the relationship between the two paradigms is suggested by Thompson (1993), who asserts that "it is necessary to tackle discrimination in order to challenge oppression" (p. 153). According to Dominelli, AOP is

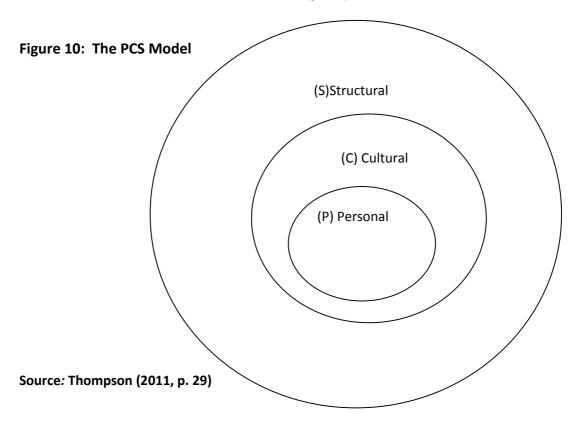
a form of social work practice, which addresses social divisions and structural inequalities in the work that is done with 'clients' (users) or workers. AOP aims to provide more appropriate and sensitive services by responding to people's needs regardless of their social status. Antioppressive practice embodies a person-centred philosophy, an egalitarian value system concerned with reducing the deleterious effects of structural inequalities upon people's lives; a methodology focusing on process and outcome; and a way of structuring social relationships between individuals that aims to empower services users by reducing the negative effects of hierarchy in their immediate interaction and the work they do (Dominelli, 1993, cited in Payne et al., 2002, p. 6).

At the core of this definition is the idea that individuals and groups are disadvantaged by the way in which society is structured. "Anti-oppressive discourse suggests that people belong to mutually exclusive groups, some

powerful and some powerless, who are in conflict" (Jones, et al., 2008, p. 42). As Burke and Harrison (2009) assert,

Within this context social work is seen as an overtly political activity and the primary role of the social worker is not to help people cope with their circumstances but to challenge the cultural assumptions and oppressive social structures that have been instrumental in creating those circumstances. The driving force of AOP is the act of challenging inequalities (Burke and Harrison, 2002, p. 230).

Figure 10 (below) depicts the different levels at which inequality and discrimination operate as described by Thompson (2011), who contends that "if social workers are to work within this model they need to understand for themselves and their clients that discrimination operates at these three levels. They also need to understand the interaction between these three levels" (p. 29).



# **Anti-Oppressive Practice: Strengths and Limitations**

Literature on AOP highlights both its strengths and weaknesses. Since its emergence in the 1980s, AOP "has helped to analyse and respond to social issues and challenges posed by globalisation and international migration. It has helped

social workers to put into action new knowledge about various ethnic minority groups" (Valtonean, 2002, pp. 113-120). AOP has contributed to our understanding of the link between the personal, the cultural and the structural (Danso, 2009), and has helped to reconcile social work values and practice methods by emphasising the value of cultural literacy and cultural competence when workers engage with clients whose cultural backgrounds differ from theirs (Dean, 2001; Furuto, 2004; Williams, (2006). Danso (2009) has suggested that "being culturally competent facilitates the provision of culturally responsive social services to clients. It also enables practitioners to appreciate diversity better and work towards dismantling attitudes and practices that construct differences as a problem" (p. 547). Informed by a commitment to human rights, diversity, access and equity, the role of the social worker within an AOP framework is to assist oppressed people to reverse the situation into which they have been forced (Dominelli, 2002).

AOP is also associated with partnership and empowerment, value-laden concepts whose meanings are contested in the literature. While AOP offers insight into the nature of social work, most scholars agree that it does not provide an adequate basis for understanding what social work actually involves, nor does it fully capture the reality of that work in terms of the diversity and complexity of the relationship between social workers and their clients. Tew (2006), for example, argues that "while in recent years AOP literature has developed a concern with issues of power, particularly with processes of oppression and empowerment, there is little consensus as to what power is...consequently there is confusion as to which direction AOP should go" (p. 547). Proctor (2002) also advocates revisiting theoretical underpinnings in order to understand the complexities of power and powerlessness as experienced by workers and service users in their everyday interactions. This view is shared by Thompson (2011), who suggests that "the actions of staff and managers can help people become more powerful, or may reenforce powerlessness...It is for this reason that an understanding of the power issues is necessary in order to increase the likelihood of a positive, empowering outcome" (p. 88).

Power differential relationships in social work practice pose some dilemmas in relation to AOP. In statutory social work, for example, where the line between care and social control is thin due to strict legal and policy constraints, the ability of social workers to operate in an AOP manner has been highly contested. Wilson and Beresford (2000) dismiss AOP as a 'sacred cow' at odds with the reality of social work: "it is intellectually dishonest for social work to claim that AOP is its key theory when one of its main functions is that of social control. This is not, however, to say that social workers do not do a good job" (p. 554). Other writers have questioned the value of using the term AOP when the actual experiences of families and social workers conflict with the theory. Jones et al. (2008) put this point clearly:

The danger is that, if we are taught that AOP is the foundation of good social work, we will continually feel demoralised, because if social work is defined in those terms we can never do a good job. We may share the values of AOP, but we are unable to fulfil its demands, working with and representing structures that we can do very little to change...We need to find a language and develop theories which can account for how this happens (Jones et al., 2008, p. 40).

Towards this end, Sakamoto and Pitner (2005) argue for the development of a critical consciousness through which to reflect on and challenge practitioner biases, assumptions and cultural world views, accompanied by action to address social injustice. O'Hagan (2001) has criticised as "erroneous and limiting" the way in which culture is defined by ARP and AOP theorists, arguing that "the most serious deficit of ARP and AOP literature is that it contributes nothing towards enabling care professionals to fulfil their statutory obligations in relation to culture and cultural sensitivity; on the contrary, its negativity and hostility to culture make it difficult for those who adhere to it to understand and appreciate the value which clients give to their culture" (p. 131).

In the context of the current study, the question of how to empower in an antioppressive way those who are institutionally oppressed is particularly relevant, given the disempowered status of asylum seekers who have few if any rights in their host country. For many asylum seekers, disempowerment is further complicated by gender.

### **Gender and CPWSW**

There is a growing body of research in the area of gender and child protection work (e.g., Hooper, 1992; Farmer and Owen, 1995; Swift, 1995; Parton, 1997; Corby, 2000; 2006; Lewis, 2000; Scourfield, 2003) which underscores the importance of understanding the gendered culture of child protection work. Two related issues have received particular attention recently: the concentration of interventions focused on women as mothers, and the apparent reluctance, inability or failure of child protection and welfare workers to engage with men as fathers (Daniel and Taylor, 2001; 2006; Mayer et al., 2003). In Ireland, the Kilkenny Incest Investigation (1993), the Kelly Fitzgerald Report (1996), the Monageer Inquiry (2008) and the Roscommon Report (2010) all highlight the complex gender issues inherent in child protection work.

Featherstone (1997) has described social work as "an activity carried out in the main by women with women" (p. 175). The literature reflects this reality. Hooper (1992) and Crogan and Miell (1998), for example, have studied the experiences of women as service users within the child protection system. Abrams and Curran (2004) confirm that social work was traditionally something that went on between women, while Scourfield (2006) asserts that "the history of children's services shows assumptions that the role was one of women working with women. There is a legacy of taking for granted that working in child protection is women's business" (p. 441).

The present study is focused on the experiences of child protection social workers working with adult caregivers and parents. Although efforts were made to achieve gender balance amongst study participants, the available case files involved a limited number of male caregivers, and even in those cases involving both parents, intervention took place mainly with the mothers. Similarly, although a concern for the welfare of children prompts intervention, much of this intervention took place with adults. As a consequence, there are no children in the study sample. This and the gender imbalance already described are limitations which I acknowledge. At the same time, the absence of male caregivers from the study sample reflects the

gendered nature of child protection social work in practice, and explains the 'over focus' on mothers (and the resultant marginalisation of fathers) apparent in the literature (see for example Farmer and Owen , 1995; Daniel and Taylor, 2001; Dale, 2004; Palmer et al., 2006). It also suggests a need for research focused on the experiences of children and fathers.

### Gender and CPWSW with ASF

This chapter now turns to the specific issue of gender and child protection social work with the families who are the subject of the present study. The global population of refugees was an estimated 10 million in 2004, approximately half of whom (49%) are women. Furthermore, 43% of the population of concern to the UNHCR are children under eighteen and 11% are under the age of five (UNHCR, 2005). The different challenges that migration poses for men and women is evident in the literature. According to ORAC, there were 4500 asylum seekers in Ireland in 2006, the year this study commenced. Of these 66.6% were male, outnumbering female applicants by two to one. Unfortunately, there are no official figures available to determine whether women arrive in Ireland with or without their spouse or partner or with children only.

There is growing recognition that asylum processes affect women differently from men. Mbugua (2010), for example, notes that "women often migrate while caring for children and other family members. They may suffer sexual or physical violence from traffickers, migration transporters or fellow travellers" (p. 7). Despite this new awareness and efforts by the UNHCR and by human rights groups to encourage policy makers to take their needs into account, policies introduced by the Irish Government have had a negative impact on women asylum seekers by reducing their entitlements and discouraging new claimants. Women who took part in a study by Mbugua (2010), for example, felt that Ireland's reception and asylum system made it difficult for them to fulfil their roles as spouses, parents, caregivers and protectors. Their experience raises serious concerns about the impact of direct provision not only on parenting and the health and wellbeing of children, but also

more broadly, on the privacy, safety and security of adults and children alike. The women in Mbugua's study also reported feeling that "the stigma and stereotyping of female asylum seekers who are also women of colour had contributed to their being harassed in their communities" (2010, p. 11). Hayes and Humphries (2004) note that "women suffer discrimination as producers of children, as dependents of male partners, as carers in families, [and] as an assumed collection of stereotypical female behaviour. These are all sites of discrimination that serve to increase the vulnerability of the female asylum seeker" (p. 81).

In addition to the gender issues highlighted above, women asylum seekers in Ireland suffer from the impact of new legislative and policy developments discussed earlier, for example the abolition of child benefit allowance. The women who took part in the present study were mostly lone parents, some of whose children had been born in Ireland, and who had lived in Ireland for periods ranging from one to four years. Although the interviews did not focus on their premigration stories, the challenges of settling in and adjusting to a new life in a new country without their usual support networks emerged clearly from the women's narratives.

A number of studies have explored the experience of women in asylum centres. Research conducted by the Refugee Women's Project in Scotland (2009), for example, is based on interviews with 46 women who were using Scottish Refugee Council services. Its report revealed that 22% of them had attempted suicide, and one in five had considered ending her own life in the last seven days. 57% were suffering from Post-Traumatic Stress Disorder which can affect memory and limit one's ability to recall important details such as those required for an asylum claim. 70% of the women surveyed had suffered physical and/or sexual violence at some point in their lives. The findings from this study correspond with those from studies conducted in Ireland. For example research by Smyth and Whyte (2005) on lone mothers seeking asylum highlight the negative impact of stress on the women's psychosocial well-being, the damage caused to their physical health due to lack of

information available to them on reproductive health services, and their social isolation due to a lack of social support.

Responding to "a lack of gender sensitivity in Ireland's reception and asylum system which can expose women who have fled gender-based violence to further risk or abuse or may delay their recovery from traumatic experiences" (2009, p. 25), AkiDwa, an organisation working with migrant women in Ireland, has developed a description of practices which highlight the challenges faced by women entering the asylum process in Ireland. Many of these relate to 'gender insensitivity' – for example, discussing sexual violations and gender-based violence claims during an initial interview – or else arise from the failure to take into consideration women's multiple caring roles in the Irish asylum system, which, for example, does not provide childcare facilities for women while they attend the interview to determine their asylum application.

As Bubeck has observed, "care traditionally is done by women and symbolises femininity" (1998, p. 26). Moreover, "mothering occupies a very particular niche both in academic, psychological and psychoanalytical discourses and in broader popular consciousness" (Turney, 2000, p. 51). In the context of child protection work with ASF, what it means to be a mother is determined by the social, economic and emotional costs associated with fulfilling that role – in other words, by its social context. For those who participated in the present study, the experience of the asylum process, and of the direct provision system particularly, clearly shaped the nature and outcome of their mothering.

It is evident from the literature that social work sees the duty of care as resting primarily if not exclusively with mothers. Since women do the majority of childrearing, they are often blamed for any maltreatment of children – and made to feel the consequences. A study by Farmer and Owen(1998), for example, concluded that "expectations are placed on women that are very different from those placed on men" (p. 546). The study revealed that social workers took a negative view of mothers even when they had approached social services themselves for assistance.

When child protection procedures were invoked in these cases, the mothers felt unjustly condemned; rather than being seen as allies in the protection of their children, they were often treated with suspicion. This was particularly true of cases of abuse in the home. Inclined to see mothers as secondary perpetrators rather than secondary victims, social workers tended to assess them as 'non protective'. This attitude provoked resentment amongst mothers, who felt that their moral fitness as parents was being judged.

While there has been some movement recently towards greater engagement of male parents in the child protection process (see Ferguson and Hogan 2004; 2007; Featherstone, 2006; Kahn, 2006; Dominelli et al., 2011), there is still considerable room for improvement. Scourfield (2006) argues that father involvement should be included not only in social work practice but in social policy also. In relation to the subject of asylum seeking families, practice guidelines published by the Irish Council for Civil Liberties (ICCL, 2000) outline some of the changes that are needed in both practice and policy in this regard, and provide a useful way of looking at gender issues in relation to ASF. Noting that "even though 90% of refugees in the world are women and children, frequently women refugees are seen only as an appendage to a male refugee" (ICCL, 2000, p. 1), the publication urges that gender issues be taken into account when assessing women's asylum claims.

## **Cultural Competence**

This section discusses cultural competence as a model which can inform future CPWSW practice with ASF. Variations within the cultural competence model are firstly discussed, followed by a discussion on its relevance to working with ASF.

The emergence of literature on cultural competence can be traced back to the mid-1990s when, according to O'Hagan (2001), health and social care publications began to contain references to 'culture', 'cultural' and 'cultural competence' (p. 239). More recently, scholars such as O'Hagan (2001), Schuldberg (2005), Sue (2006), Hardina et al. (2007), Laird (2008), Chang and Congress (2009), John et al. (2008) and Lum (2010) have continued to explore the concept. Papadopoulos (2006) offers two explanations for the dearth of culturally sensitive research to inform professional careers. On the one hand there is "the historical domination of the health research agenda by positivist approaches which focus on objective measurement, and place emphasis on facts, prediction and production of value-free, universal truths. Furthermore, most of the research in the UK (and other developed countries) continues to be focused on the majority culture and is undertaken by researchers who belong to the majority culture" (p. 82). Brissert's review of the literature persuaded her that "there is too little interest and related capacity in the child welfare field for elucidating the complexity associated with effectively managing cultural distinctions presented by children and families" (1977, cited in O'Hagan 2001, p. 111).

O'Hagan (2001) claims that "there is no tradition of cultural sensitivity or cultural competence in health or social care professions, neither in their literature nor their practice" (p. 97). In a similar vein, Parrot (2009) refers to several studies that are highly critical of current social work practice in meeting the different cultural needs of service users. The terms 'culture' and 'cultural competence' are, however, highly contested, and for that reason, and because of the significance of culture to the present study, it is important to explore the ways in which culture and cultural competence are currently defined, how practitioners make sense of the concepts, and whether or not one can teach or train social workers to be culturally competent. These are important questions which this section of the literature review will explore.

The importance of cultural competency has been embedded in UK Government policy and in much of the social work literature internationally. Brophy et al. (2003), for example, note that "there is an explicit insistence that cultural competence is a necessary component of effective child protection work among minority families" (p. 37).

A recent study by Harrison and Turner (2011) explored the meaning that social workers in Gailsland, Australia, placed on what they described as a "murky" concept

in practice. The study found that "Although the literature commonly laments the cultural incompetence of social workers...such an individualised focus detracts attention from the broader system and organisational responses needed to respond appropriately to the needs of clients from diverse backgrounds" (p. 333).

The study also focused on cultural training and its contribution to social workers' cultural competency. "All the participants in the study described attending some form of cross-cultural training on the job, but they were equally sceptical about some of its professed benefits while highlighting some of its dangers, such as perpetuating cultural stereotypes" (Harrison and Turner, 2011, p. 347). The issues raised are clearly relevant both to the present study and to social work with culturally diverse people in general. For example, how should the cultural competence of student social workers be measured? How might a social worker be assessed as culturally competent, and by whom would this be judged? Does cultural awareness lead to cultural competence? Participants in the Harrison and Turner study, while acknowledging the need for cultural awareness training, expressed ambivalence about the idea:

It implies an expertise. You assume that there is some kind of benchmark or skill that can be measured. Others asserted that it was not possible to teach cultural competence because of the challenges inherent in doing so, for example...given the different cultures that exist what cultures should be taught? Similarly if culture is not static, how can you teach about a particular culture? For these respondents there were dangers associated with this form of training...such as that people might think they were culturally competent and know everything because they did a course on it...Fears were expressed that such training is often treated as a tokenistic exercise by agencies, i.e. 'you tick it off and then you're done' (2011, pp. 342-344).

By contrast all participants endorsed training in critical thinking, openness, reflection and experiential learning.

In the UK, the emphasis on cultural competence training for social workers appears, in some cases at least, to have fuelled fear and resistance rather than to have encouraged greater cultural competence. Laird (2008) suggests that "this is most evident in areas where training for social workers excludes consideration of cross—

cultural issues beyond a black/white divide" (p. 37). Bowes and Dar (2000) found that "white social workers revealed a lack of knowledge of minority ethnic communities and difficulties were expressed by those white staff about approaching work with minorities. They spoke of being afraid to do their work, not knowing how to approach it, and of their fear of offending" (p. 309). Social workers intervening with South Asian families in the area of child protection, expressing similar anxieties, tended to withdraw from work with service-users and to over-rely on black colleagues. Agencies also admitted to a fear of being labelled racist (Burman et al., 2004, p. 347).

Laird (2008) asserts that "cultural competence is now one of the greatest challenges for the social work profession" (p. 159). This challenge is exacerbated by disagreement within the profession between advocates of an anti-racist approach and those who promote cultural competence as a strategy to eradicate racial discrimination from social work practice.

Those supporting dominant anti-racist approaches argue that focusing on the cultural aspects of ethnic minority experience will undermine endeavours by social workers to challenge racism. They also believe that cultural sensitivity will result in practitioners stereotyping serviceusers and carers from ethnic communities by assuming that they all hold the same values and abide by the same norms of behaviour (Laird, 2008, p. 21).

O'Hagan (2001) has criticised advocates of anti-racist practice for "creating an 'exotic' understanding of people from ethnic minorities whose behaviours provide a source of fascination"; as a consequence, "social workers practising cultural sensitivity [are] so immersed in this exotic profiling that they are rendered incapable of recognising practice issues of social inequality or racial discrimination" (cited in Laird, 2008, p. 38). Laird (2008) argues for a possible marriage between ARP, AOP and cultural competence and draws parallels between the Multi-dimensional Model of Cultural Competence (MMCC) described by Sue (2001) and the conceptual frameworks of Dominelli (1997) and Thompson (2006):

All three authorities highlight the different levels on which prejudice operate. In Sue's (2001) model, Anglo-centric values, attitudes and

norms at the individual, professional, organisational and societal levels result in widespread cultural imposition, which produces inferior and discriminatory services for many people from ethnic minorities. Dominelli (1997) and Thompson (2006) also stress how racial discrimination takes place at these different levels, which then become mutually reinforcing (Laird, 2008, p. 49).

The relationship between the four frameworks is depicted in Figure 11.

Sue (2001)
Multidimentional
Model of Cultural
Competence

Dominelli (2002)
AOP

Personal
Cultural
Stuctural

Figure 11: Parallels between Elements of Four Conceptual Frameworks

# The Multidimensional Model of Cultural Competence

Adapted from Laird (2008, p. 49)

Sue (2001) developed the MMCC to take account both of individual practitioners and of the professional contexts in which they work. She observed that "cultural competence in service delivery requires the removal of barriers at four different levels, the individual, professional, organisational and societal level" (p. 802).

**Table 6: Multidimensional Model of Cultural Competence** 

Level	Barriers
Individual level	Prejudices and misinformation
Professional level	Culture bound theories and methods
Organisational level	Monocultural policies, procedures and practices
Societal level	Invisibility of Anglo-centric monoculturalism

#### Adapted from Laird (2008, p. 46)

This definition of cultural competence is useful for the present study because it liberates and broadens the concept of culture, thus helping practitioners to identify differences between people of the same culture. This is important because one of the criticisms made against previous models of working with minority communities has been that they contain a narrow definition of culture which leads to stereotyping, such as the assumption that all Irish people are alcoholics, or that people from the Indian community are all practising Hindus. This in turn leads to dangerous labelling and an inability to identify differences between individuals. This is an important point in relation to the present study. Individuals, even those who belong to the same cultural group, experience their situations differently. Practitioners must be aware of and open to this, since

Any assumption by a social worker that individuals from a particular ethnic background have fixed characteristics is necessarily racist, regardless of whether those attributes are viewed positively or negatively. The most critical requirement of culturally sensitive social work is to keep open the dialogue between people of different ethnic backgrounds and to ensure that each individual and family emerges as a unique composite of values, beliefs and aspirations. Cultural competence is not about presumption or the deployment of specific information about each ethnic group. Cultural competence is founded on a comprehensive understanding of the broad nature of potential differences between people of diverse ethnic backgrounds (Laird, 2008, p. 43).

Other models used within the cultural competence framework include The Live and Learn Model (Carballeira, 1996, in Laird, 2008) and the ASKED process model of cultural competence (Camphinha-Bacote, 2002).

# The Live and Learn Model of Cultural Competence

This model identifies a series of activities in which practitioners need to engage in if they are committed to fostering positive and culturally appropriate interactions with people from other ethnic groups.

**Table 7: Live and Learn Model of Cultural Competence** 

Activity	Purpose
Like	Develop a keenness and liking for work with people from minority communities.
Inquire	Commit to finding out about the history, beliefs, social norms and family structures of other ethnic groups.
Visit	Adopt the position of a respectful and observant visitor when working with people from other ethnic groups.
Experience	Deliberately seek out social interactions with people from other ethnic groups and establish peer relationships to better understand their cultural background worldview.
Listen	Observe the style used by people from different minority communities in their interactions and endeavour to adopt preferred styles of communication.
Evaluate	Recognise that everyone integrates culture and personality in distinctively individual ways and avoid stereotyping by identifying the attitudes, beliefs and values particular to each service-user or carer.
Acknowledge	Identify the similarities and differences in attitudes, beliefs and values between different family members and any areas of potential conflict with statutory requirements and inform the service-user.
Recommend	Offer service-users and carers a range of intervention approaches and consult on which are most culturally acceptable.
Negotiate	Openly discuss areas of conflict which appear to have a cultural dimension and work towards acceptable compromises.

Adapted and modified from Carballeira (1996, in Laird, 2008, p. 41)

# **ASKED: A Process Model of Cultural Competence**

ASKED is an acronym for Awareness, Skill, Knowledge, Encounters and Desire. This model of cultural competence was developed by Camphinha - Bacote (2002) who argued that "cultural competence is the process of becoming, not a state of being" (p.181).

**Table 8: The ASKED Model** 

Dimension	Method
Cultural Awareness	In-depth self-examination of the practitioner's own cultural professional background and recognition of the practitioner's own biases, prejudices, and
	assumptions about people from minority ethnic communities.
Cultural Skill	Ability to collect cultural data relevant to the service user's needs as part of the assessment.
Cultural	Searching for and acquiring detailed information about cultures and ethnic
Knowledge	groups.
Cultural	Engagement in cross-cultural interactions with service users and carers from
Encounter	culturally diverse backgrounds which modify the practitioner's existing beliefs about a cultural group and dispel stereotypes.
Cultural Desire	The practitioner's motivations to want to rather than have to engage in the
	above four processes – includes a willingness to accept differences and learn
	from people as cultural informants.

Adapted and modified from Laird (2008, p. 42)

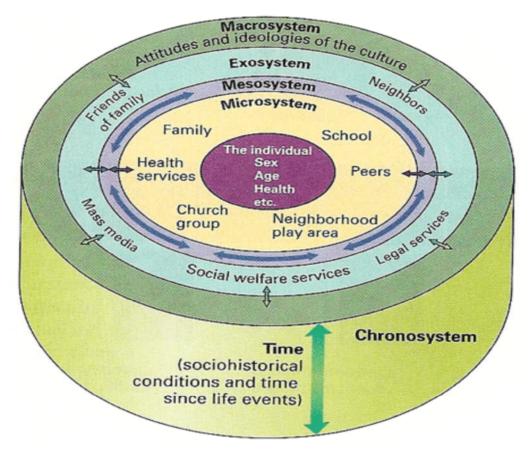
All these dimensions must be worked on simultaneously by the practitioner seeking to become culturally competent (pp. 182-183).

The section above has discussed variations within the cultural competence model. The MMCC is considered most appropriate for the present study because it offers a broader lens through which to explore the experiences of CPWSW and ASF. The Ecological Model (Figure 12), which will be discussed below, also is considered relevant as it too facilitates exploration and understanding of the experiences of CPWSW and ASF within the wider societal context. As indicated by the diverse findings of the studies reviewed, CPWSW is complex and cannot be explained using a single level analysis, because the issues involved are multifaceted. As Lee and Burkam (2001) have emphasised, focusing only on the individual blames the victim. It follows that any study of the experiences of CPWSW and AFS must be placed within a broader context.

## The Ecological Model

Bronfenbrenner (1979) visualised the ecological environment as "a set of nested structures each inside the next, like a set of Russian dolls" (p. 3), at the centre of which is the child.

Figure 12: The Ecological Model



Source: Santrock (2007)

Adapted subsequently by other researchers, Bronfenbrenner's Ecological Model is informed by social systems theories, and helps to locate discussion of child protection social work with ASF within a wider framework. Social work intervention requires a focus that stretches far beyond that of an individual assessment, to address all aspects of a client's situation. As Zastrow (2004) points out, "many times it's not the client's fault that problems exist, rather something outside the client may be instigating the problem" (p. 3). Asylum-seeking families, for example, have been forced to migrate from their countries of origin. The Ecological Model, which places the child at the centre of four interrelated social systems -- the macro, the exo, the meso, and the micro – is holistic and provides a broad framework for understanding the nature of transactions between the person and the different

institutions and systems within his or her environment. By helping to identify and examine all systems contributing to a person's situation and the contextual factors that affect individuals in their daily interaction with their environment, the model enables interventions to be appropriately targeted.

The Ecological Model is beneficial in examining the experiences of ASF as it allows an exploration of the research questions from different angles within the interrelated systems, including the family's living environment, the child protection system, the immigration system, the community, and the government policies that influence child welfare. In considering a framework for working with ASF, Wilson and James (2007) offer a useful explanation of the way in which the Ecological Model can be applied when working with culturally diverse families: "The ecological framework requires those making assessments to take account of a wide range of factors, including children's cultural, socio-economic and ethnic characteristics, as well as the parent-child relationship, and the degree of neighbourhood and community support available to a parent or caregiver" (p. 141).

# **Applying the Ecological Model to Work with ASF**

The Ecological Model describes the interrelationship of all the systems involved with the welfare of the child including the family, which is seen as the most influential part of the child's life and the system with which the child interacts the most. The quality of this interaction and the interrelationships between the various systems influence the child's total well-being. In other words, when families are unable to meet the needs of the child due, for instance, to environmental factors or to poor functioning of the micro and macro-systems, the overall well-being of the child is compromised. Featherstone et al (2010) endorse the Ecological Model, arguing that "parenting must be seen in an ecological perspective that recognises the family as a functional system, the operation of which will be altered by its internal composition and by the external forces" (p. 278).

Applying the Ecological Model when working with CPWSW and AFS within the direct provision system, however, poses many challenges for both social workers

and families. The restrictive, repressive and regulatory confinement of families constrained by direct provision make it almost impossible to ensure meaningful and appropriate practice with ASF. It can be argued, therefore, that while systems theories such as the Ecological Model offer an appealing approach to CPWSW when working with ASF, the restrictions within the asylum seeking system make the work extremely complex and disempowering for both social workers and families.

The Ecological Model is not without its critics. White and Klein (2002), for example, find it impractical, arguing that "it is impossible to have exhaustive information about all the variables that affect a child's life from the micro- through to the macro-system level" (pp. 225-227). The present study does not attempt to identify every factor that affects ASF, however. In reality, most social science research cannot claim to have uncovered every single mystery or to have found all the answers to their subject of inquiry. Nevertheless, despite its limitations, Bronfenbrenner's theory provides a useful framework for exploring the various levels of interactions and influences that have an impact on work with ASF.

## **Limitations of Existing Literature**

While the studies examined in this literature review shed some light on certain issues related to the present study, as previously noted there is very little literature dealing specifically with the experiences of child protection social workers and families.

As noted in Chapter One, Ireland has a unique history of immigration which requires attention in order to contextualise studies of this nature. Whilst acknowledging the existing body of local research and literature focused on the experiences of CPWSW with indigenous families, it must be stated that there is currently a dearth of similar research with ASF. The present study, primarily qualitative in nature, aims to make a contribution to our understanding of the experiences of CPWSWs and ASF in this area with a view to making recommendations for appropriate interventions informed by research findings.

The MMCC provides an opportunity to examine the aims of the present study's research aims as it offers a holistic and broad approach within which to explore relevant issues. Culture is a recurring theme in all the literature that has been reviewed, and also in the findings of the present study. The MMCC is the preferred model to inform this study as it offers a holistic framework and a broad definition of culture.

### Conclusion

This chapter has reviewed the literature relating to CPWSW with ASF and has discussed the theoretical underpinnings of such work. It was observed that there is limited Irish literature in this area. There is a need for research on the experiences of CPWSWs and ASF in order to better understand the issues that arise in the practice of working with families from culturally diverse communities who are in the asylum process. The literature highlights the complexities encountered by social workers and families in their efforts to make sense of each other. These complexities are partly to do with the nature of the relationship and also to do with cultural and language difficulties. Working with families from diverse cultures is an emerging area of CPWSW in community care teams in Ireland and one that poses many challenges, even for countries with a long history of receiving emigrants. In that respect, insights from even a small scale study of this nature make a valuable contribution to our understanding of some of the issues encountered by families and social workers. The next chapter discusses the methodology which was used in conducting the research.

# **Chapter Three: Methodology**

### Introduction

Any good researcher knows that your choice of method should not be predetermined. Rather you should choose a method that is appropriate to what you are trying to find out (Punch, cited in Silverman 2010, p. 10).

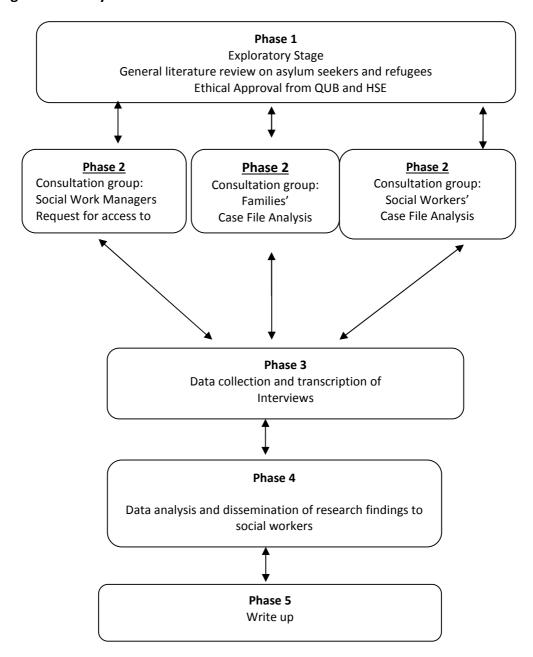
This chapter discusses the data collection and data analysis processes used in this study, the method through which its research aims were pursed, and the specific research questions it explores. The chapter firstly provides an outline of the research process to help the reader gain insight into how the research developed, and later provides a detailed discussion of the 'BNIM' method of interviewing that was used for data collection, and how the Framework Analysis method was used for analysing the data.

The broad research strategy chosen for this study was Action Research because of its potential to engage with both professionals and service users. Exploration rather than imposition or interpretation is the underlying principle guiding this study, whose exploration of the experiences of individual social workers and family members can be situated within the phenomenological research paradigm. A reflexive approach to the empirical studies is incorporated within the analysis of the interviews, in which "the project of credibility is (at least in theory) abandoned in favour of decentring of writers' authority in order to allow voices that are otherwise suppressed or contradictory to emerge" (Seale, 1999, p. 169).

# **Study Outline and Research Phases**

Based on the research aims and questions, the study was divided into five phases, as shown in Figure 13.

Figure 13: Study Outline and Research Phases



Ethical approval for this study was obtained from two sources: The HSE and the Ethics Committee of QUB (see Appendices A and B). The second phase involved consultation aimed at exploring the research territory with a small group of social workers, social work managers (i.e., team leaders and/or principal social workers) and families, and identifying from the outset the issues for these groups. This was helpful in situating the research aims and objectives. Three consultation meetings were held with the identified group of social workers and three meetings with the

identified group of families at key points in the research. Each group was comprised of five representatives from each team. Families' representatives were identified through the help of social workers. One meeting was held with social work managers primarily to make them aware of the research and the time that would be required for social workers to participate in interviews during working hours. It was also necessary to seek permission for social workers involved in the consultation groups to travel to the point of meeting on a weekly basis for preliminary discussions before the research could commence. Social work managers were helpful in supporting the research by identifying social work representatives from their own area who were either interested in the particular area of asylum seekers or whom they felt would make a useful contribution to the consultation meetings. It was agreed that those who took part in the consultation groups would not participate in the main research, as these were considered to be two separate processes involving a potential conflict of interest. The consultation process helped to determine the scope and feasibility of the study, reinforced the need for research in particular areas of social work practice, and assisted development of the research design. After discussion with the consultation groups, it was decided to replace the semi-structured interviews originally planned with an in-depth interview approach known as the Biographic Narrative Interpretive Method (BNIM), which will be discussed in detail under the data collection section. The last stage of Phase Two was obtaining access to case files to assist in the identification and sampling of social workers and families for the main study. Access to case files was negotiated with team leaders in the participating areas.

The third phase was the interviewing process using BNIM techniques. This methodology was employed to achieve an in-depth exploration of the specific experiences of families and social workers through their own personal narratives. Phase Four, data analysis, involved synthesising the various experiences of social workers and families. In this phase, information gained in the first three phases was organised thematically in order to draw out similarities between and divergences within the experiences of social workers and families. This activity had two main objectives: first, to bring together the experiences of social workers and families,

and second, to make recommendations for future practice based on those experiences. The fifth phase involved the dissemination of the research findings, aimed at giving feedback to the host organisation, the HSE, whose workers participated in the research and are the key actors in implementing research findings and improving **practice**. The outcomes of the research will be open to discussion and debate and for validation by the HSE, as initially agreed, and a research report will be presented to the management of the HSE.

## **Research Design and Strategy**

Research design refers to "a framework for the collection and analysis of data. A choice of research design reflects decisions about the priority being given to a range of dimensions of the research process (such as causality and generalisation)" (Bryman, 2008, p. 698). A research strategy, on the other hand, refers to "a general orientation to the conduct of social research" (*ibid*). To explain why a Qualitative Phenomenological research paradigm was considered appropriate for answering the questions posed by the present study, it is useful to locate its research aims and questions within existing research paradigms.

The wide range of research traditions in the social sciences has prompted heated debates on the relative merits of qualitative and quantitative strategies, both of which have their supporters and critics. There are significant differences between these two paradigms in terms of what is considered 'acceptable knowledge'. For example, Positivism is drawn from the scientific school of thought, whose emphasis is on measurement; the researcher guided by this school tries to remain unengaged and as objective as possible. Positivism has been defined as "an epistemological position that advocates the application of the methods of the natural sciences to the study of social reality and beyond...For positivists, only phenomena and, hence, knowledge confirmed by the senses can genuinely be warranted as knowledge. Research is conducted in a way that is value free (that is, objective)" (Bryman, 2008, p. 13). Interpretivists, by contrast, believe that "the researcher has to grasp the subjective meaning of social action, and research is not a value-free process"

(Bryman, 2008, p. 16). Several writers, including Bryman (2008), Bell (2010) and Kumar (2011), have explored the contrast between quantitative and qualitative research. Table 9 below draws out their chief contrasting features.

Table 9: Some Common Contrasts between Quantitative and Qualitative Research

	Quantitative	Qualitative		
1	Numbers / Measurement	Words		
2	Point of view of researcher	Point of view of participants		
3	Researcher distant	Researcher close		
4	Theory testing - deductive	Theory emergent - inductive		
5	Static	Process		
6	Structured	Unstructured		
7	Generalization Contextual understanding			
8	Hard, reliable data	Rich, deep data		
9	Macro	Micro		
10	Behaviour	Meaning		
11	Artificial settings - positivism	Natural settings - interpretivism		

### Adapted from Bryman (2008, p. 393; emphasis added)

The period during which many commentators viewed quantitative and qualitative research as based on incompatible assumptions is often referred to as the 'paradigm wars' (Hammersley, 1992; Oakley, 1999) or the 'paradigm debate' (Creswell and Plano Clark, 2007). Since then, opinion has become less sharply divided. For example, while acknowledging the fundamental differences between the two traditions, Bryman (2008) cautions against hammering a wedge between them too deeply and stresses the importance of competently designed and conducted research, regardless of the approach used. Indeed, the divide between the two paradigms of positivism and interpretivism has been criticised "for sometimes being too simplistic and ignoring a multitude of variations. Several proponents of action research, for example, suggest that this two paradigm view of research emanates from a traditional academic approach and they are critical of its application to professionally based research" (Burton and Barlett, 2009, pp. 14-21). Furthermore, Clough and Nutbrown (2007) suggest that "research studies often move between these two paradigms, selecting the most appropriate for different parts of a study...the issue is not so much a question of which paradigm to work

with but how to dissolve that distinction in the interest of developing a research design which serves the investigation of the question posed through that research" (p. 19). As Shaw and Gould (2001) have observed, each method brings with it a set of advantages and disadvantages. This view is supported by Denscombe (1998) who asserts that gains in one direction will be accompanied by losses in another.

The present study is situated within the qualitative research paradigm, and as such seeks to understand the experiences of social workers and families from their perspectives. A qualitative method of inquiry was chosen as most appropriate for achieving the stated research aims. According to Bryman (2008),

If a researcher is interested in a topic on which no or virtually no research has been done in the past, the quantitative strategy may be difficult to employ because there is little prior literature from which to draw leads. A more exploratory stance may be preferable and, in this connection, qualitative research may serve the researcher's needs better, since it is typically associated with the generation rather than testing of theory (Bryman, 2008, p. 26).

Woods (2006) suggests that "qualitative research focuses on natural settings, and is concerned with meanings, perspectives and understandings...The qualitative researcher therefore, seeks to discover the meaning and how the participant interprets situations and their particular perspective on issues" (p. 2). For this reason, and because one aim of the present study was to 'generate' rather than 'test' theory (Glaser and Strauss, 2007), a qualitative strategy was considered most appropriate.

Nevertheless, some precautions are required when adopting this approach. Qualitative research lends itself to the interpretation of the researcher, which can compromise the objectivity of the research. At the same time, while objectivity is necessary in order to arrive at an impartial, unbiased and accurate interpretation of events (Strauss and Corbin, 1998), reflexivity is required in social research, and as Hammersley and Atkinson (2007) have observed, "there is no way in which we can escape the social world in order to study it" (p. 18). However, while it may be impossible to eliminate interviewer bias, researchers should recognise and

understand the effects of bias on their research. The last chapter of this thesis will address the manner in which objectivity was monitored and maintained by the researcher during the course of this study.

Within a qualitative research strategy, this study takes a multi-methodological approach, which differs from a mixed method or multi-strategy approach in that it does not combine three research strategies, namely 'action research', BNIM and Frame Work analysis. Action research was the overarching theme and BNIM and Framework Analysis were the methodologies guiding the data collection and analysis.

### **Action Research**

The overall framework of this study is 'participatory action research', which was pioneered by Lewin Kurt (1890-1947), a Prussian psychologist. Although its origins are open to dispute, action research has been a distinctive form of enquiry since 1940. The main distinction between action research and traditional forms of research is that, rather than *concentrate on* other people, it is carried out *in partnership* with them. As McNiff and Whitehead (2002) explain, "In traditional (empirical) forms of research researchers do research on other people. In action research researchers do research in company with other people, and others do the same... action researchers speak with other people as colleagues... acting as research participants and critical learners" (p. 15).

Bryman (2008) has defined action research as

an approach in which the action researcher and members of a social setting collaborate in the diagnosis of a problem and in the development of a solution based on the diagnosis. It can take many forms, from the action researcher being hired by the client to work on the diagnosis, to finding a solution to a problem, to working with a group of individuals who are identified as needing to develop a capacity for independent action. The collection of data is likely to be involved in the formulation of the diagnosis of a problem and in the emergence of a solution (Bryman, 2008, p. 382).

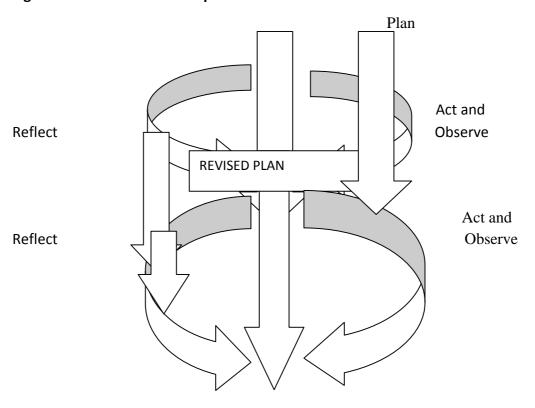
The social work and family representatives who took part in the present study were involved both in the diagnosis of the problem through the consultation process, and subsequently, in the development of recommendations for practice.

## **Action Research Cycles**

There is general agreement that action research is a process which operates in cycles or in a spiral (Figure 14) Kemmis et al. (2004) describe the cyclical process of "planning a change, acting, and observing the process and consequences of the change, reflecting on these processes and consequences, and then re-planning acting and observing, reflecting, and so on" .... (381).

Because exploration rather than explanation was the guiding principle for this study, which focused on the experiences of social workers and asylum-seeking families, action research was considered appropriate for this relatively unexplored area. The process offers a collaborative approach to reflective practice and in the case of the present study enabled the researcher to engage with social workers and families in discussions about their experiences in order to change practice.

Figure 14: Action Research Spiral



#### Adapted and modified from Kemmis et al (cited in Denzin and Lincoln, 2003, p. 382)

The action research spiral described by Kemmis and McTaggart (cited in Denzin and Lincoln, 2000, p. 597) emphasises the process of learning from experience, of being open and responsive to developments and challenges encountered along the way. Action research is suited to the Biographic Interpretative Method of interviewing used in this study, in which post-interview debriefing is central to one's understanding of the interview and to advancing one's competence (Wengraf, et al, 2002). The use of a reflective diary and supervision assisted this researcher in debriefing during the course of the present study.

Some have criticised the use of diagrams showing action research as a continuous process of development for inadvertently promoting a rigid approach to research. Dadds and Hart (2001), for example, argue that "the tidy action research cycle was never that tidy in practices of research...diagrams that indicate stages in research may encourage the view that these show the 'correct' order in which to conduct action research" (p. 7). Describing the philosophical underpinnings of the approach, Macniff and Whitehead (2002) observe that

Action researchers see knowledge as something they do, a living process of development as new understanding emerge...they view knowledge as a process of evolution, surprising and unpredictable. There are no fixed answers. Learning is rooted in experience...a process of critical discernment (Macnifff and Whitehead, 2002, pp. 18-20).

# **Sampling and Access**

Non-probability sampling methods in the form of purposive sampling techniques were employed in the selection of participants for this study. "Such sampling is essentially strategic and entails an attempt to establish a good correspondence between research questions and sampling. In other words, the researcher samples on the basis of wanting to interview people who are relevant to the research questions" (Bryman, 2008, p. 458). In this case the target research population was CPWSWs who had worked with ASF and the families who had worked with those

social workers. It was important to match the social worker to the family in order to draw out the contrasting experiences of families and social workers later in the process.

The sampling frame for this study was restricted to closed case files of ASF who were referred to the four participating HSE offices within the Dublin North-East area prior to June 2005, in which social workers had intervened on either a short or long-term basis.

Participating CPWSWs provided a randomly selected list of closed cases of non-Irish referrals to the Social Work Department, received prior to June 2005. Five cases from each office were randomly selected initially, yielding a total of twenty-five cases. Out of these twenty-five cases, two were selected from each office, forming a final sample of ten participants who later participated in the study. The fifteen who did not participate either no longer fit the criteria, having been either granted refugee status or deported to their COO, or having moved on to a location where they could not be reached. Also, in some cases, families did not give their consent and therefore could not take part in the research. Purposive sampling was used in the selection process. It allowed the selection of cases that illustrated some feature or process in which I had a research interest (Silverman, 2010). In this case the group of interest was ASF and CPWSW.

The sampling criteria used were based on demographic characteristics which include names and addresses of families and social workers, dates of referral and dates when cases closed, nature of concern, country of origin of service family, immigration status, number of people in the household, and language spoken by service user. It had been envisaged that most of this information would be found on the referral forms, but in fact the majority of the basic information needed in order to identify case files was not always recorded. This sometimes necessitated reading through parts of the case file to establish if the particular family met the required criteria. The sampling criteria and rationale for both social workers and families are presented in Tables 10 and 11 respectively.

**Table 10: Sampling Criteria and Rationale (Families)** 

	Sampling Criteria	Rationale
1	Age considerations: the formal age for participation in the study was 18	Ethical approval had not been sought for children to take part in the study.
	and above.	,
2	Time frame: case closed by June	It was important to have a cut-off point for
	2005.	inclusion of cases in the study in view of the
		immigration trends discussed in Chapter
		One.
3	Case Type: asylum seeker (closed cases only)	Only asylum seekers were included because
		they have limited rights. A person who has
		been granted refugee status has equal rights
		to Irish citizens. Only closed cases were
		included to avoid conflicts of interest.
4	Location: family had still to be residing in the	It was important that those included in the
	area or within reachable distance.	samples of social workers or families could
		be reached for interviewing.
5	Willingness to be interviewed	The consent of participants is an ethical
		requirement.

**Table 11: Sampling Criteria and Rationale (Social Workers)** 

	Sampling Criteria	Rationale
1	Contact with families: only social workers who had worked with families selected for interview were included in the sample.	To gain understanding of how social workers and families viewed a specific intervention in which both were involved.
2	Location: social workers had to be still working in the area.	For availability purposes.
3	Case type: only closed cases.	In order to eliminate conflicts of interest.
4	Availability and willingness to be interviewed.	The consent of participants is an ethical requirement.

# **Participants**

A total of twenty participants were involved in the study. Table 12 provides details.

**Table 12: Study Population (Families)** 

Country of origin of research participants	Total number of participants	Adult/ young adult	Immigrat ion status	Office locatio n	No of ethnic groups represented	Gender
Nigeria	N=2	Young adults age(18)	Asylum seeker	Area A	N=2	Female
Congo	N=2	Adults	Asylum seeker	Area B	N=1	Female
South Africa	N=1	Adults	Asylum	Area C	N=1	Female

Nigeria	N=1		seeker		N=1	
Liberia	N=1	Adults	Asylum	Area D	N=1	Female
Nigeria	N=1		seeker		N=1	
Romania	N=1	Adults	Asylum	Area E	N=1	Female
Nigeria	N=1		seeker		N=1	
Total	Total	Asylum	Asylum	Total	Total number	Female
number of	number of	seeker	seeker	numbe	of ethnic	
mixed	participants			r of	backgrounds	
countries				areas=	N= 9	
N=5	N=10			4		

Source: Field Data

**Table 13: Study Population (Social Workers)** 

Country of origin of research participants	Number of participants	Office location	Gender
Ireland	2	Area A	Female
Ireland	2	Area B	Female
Ireland	2	Area C	1 male, 1 Female
Ireland	2	Area D	Female
Ireland	2	Area E	1 male, 1 female
Total numbers	10 participants	5 areas	8 female social workers
			2 male social workers

**Source: Field Data** 

**NB-** Some of the social workers who took part in the study, although identified in the sample as originating from Ireland, had extensive experience working outside Ireland.

# **Case File Analysis**

Access to case files was granted by Principle Social Workers (PSWs) and facilitated by Social Work Team Leaders (SWTLs). In practice, the process of gaining access during the interviews was not always straightforward. For example, if the designated officer was not available when I arrived to collect a file at the time agreed, access was not provided. This resulted in time wasted and a renegotiation of the access process. An important aspect of the case file review was the identification of social workers and families who had worked together, an essential criterion for participation in the study. Not all of those who met this criterion were available to participate, however, having been granted refugee status, or, if unsuccessful in their application, deported. Some families, like some of their social workers, had simply moved away since their cases were closed.

The difficulties in sampling encountered in case file analysis were discussed and reflected upon within the social worker consultation groups. These discussions revealed why some of the information required for this study was not recorded. One of the main reasons was that social workers were only beginning to develop their referral forms to include a category on asylum seekers. In the meantime, the distinction between indigenous families and asylum-seeking families was made primarily on the basis of the applicant's name. If that name was not Irish, the social worker looked for any other information indicating the family's ethnicity or race and immigration status.

This was time consuming because in some cases a non-Irish name could have indicated incorrectly someone with refugee status or an economic immigrant. Consultation groups provided a mechanism through which to identify families more easily. The social workers who participated in the consultation groups were, in most cases, able to confirm the status of the family and its location. In some cases, Community Welfare Officers were consulted in order to confirm the address of the families or whether or not the family was still in the asylum reception centre.

### **Data Collection**

When we aggregate people, treating diversity as error variance in search of what is common to all, we often learn about what is true of no one in particular. Narrative approaches allow us to witness the individual in his or her complexity and recognise that although some phenomena will be common to all, some will remain unique (Josselson, 1995, pp. 32-33).

The method of data collection used during interviews for this study was BNIM, which is based on the interpretivist assumption that individuals construct meaning in their lives through narrative, which is inherently a social interaction. BNIM originated from a narrative biographical method used to study Holocaust survivors in the 1970s (Rosenthal and Fischer 2004); it draws upon the German school of thought from the early 20<sup>th</sup> century and is particularly used to elicit the 'stories' or narratives from the lives of those interviewed (Wengraf, 2001). The steps and

modes of interviewing and analysis employed in BNIM have been developed in the context of interactionist and phenomenological research traditions by Gabriele Rosenthal and Wolfram Fischer-Rosenthal (1991-1998). The approach also draws upon aspects of ethnography. What is of interest to the researcher is what the interviewee decides to tell us, and the way in which the story is told. The interview is structured in such a way that the interviewee has the time and space to develop his or her own narrative contribution. The focus is purely on the experience itself and no questions are asked that refer to anything else, such as post-experience thought or reflections, which has the potential to lead the respondent. Thus BNIM starts from the deliberately narrow position that interview data refer only to a particular research conversation that occurred in a particular place.

In the literature BNIM has been used either to look at a person's whole life or aspects of a person's life. The present study used the method to explore the specific experiences of child protection social workers and refugee families, giving them, rather than the researcher, the power to decide on 'the told story' about the 'lived' experience. By giving space to the interviewee to decide what to tell and how to tell it, BNIM is also in line with the action research approach taken in this study. The value of narrative inquiry lies with its ability to look not only at the story but also at ambiguities, processes and changes within that story (Plummer 2005)

The choice of BNIM for the present study was designed to illuminate the past experiences of social workers and refugee families and the meaning they make of those experiences in order to inform future practice. Likewise, the interviews were not intended to test out certain theoretical frameworks but rather to facilitate the emergence of a theoretical framework from the data derived from interviewees. Using BNIM facilitated this process. "[P]articularly suited for retrospective studies since it asks for experiences and particular incident narratives (PINS), [BNIM] can access vanished and mutated times, places, states of feeling and ways of doing and living" (Wengraf, 2001, p. 169). The method also has a key advantage for interviewing participants known to the interviewer, because it recognises that power relationships do exist, and sets out a robust framework within which the

researcher invites the participant to set the agenda. By staying silent yet demonstrating empathy, researchers who adopt BNIM encourage narratives of the participant's choice.

The BNIM interview is composed of three sub-sessions: Sub-session 1: Initial elaboration of story around topic; Sub-session 2: Extracting more stories from the topics; Sub-session 3: Further questions arising from preliminary analysis of Subsessions 1 and 2.

[T]he second sub-session normally follows after a 15 minute break from the first sub-session. The third sub-session requires at least a preliminary analysis of the results of the first two sub-sessions. The need for the third sub-sessions is variable; it is always useful but may not always be necessary. The first two sub-sessions are normally scheduled on the same day, and may be experienced by the interviewee as a single session while there would be at least a week's interval and perhaps a month or so between the second sub-session and the third one (Wengraf, 2001, p. 119).

The following methodological interview outline describes how I used BNIM interviews for the present study. Because the study is concerned with non-life stories, I decided that only Sub-sessions 1 and 2 of the interview were required to address the research questions and objectives adequately. Each session (interview) is divided into sub-sessions; the first is introduced by a single question aimed at inducing a narrative (SQUIN). In the second part of the interview, the interviewer reflects back to the interviewee by paraphrasing key themes that have emerged from the interview, and elicits further explanation.

At the beginning of the interview, participants are invited to respond to carefully constructed, open-ended questions designed to induce narrative, or as Wengraf (2001) explains, to elicit a 'story' which may offer an opportunity for more interpretative analysis. In BNIM, analysis focuses upon the 'story', which tends to account for 30% of what is said in a typical interview lasting over an hour. The first part of the interview is perhaps the most important as it gives the interviewee time

and space to narrate the story at hand in a way that is meaningful to them. The SQUIN must offer interviewees the opportunity to describe their story in great detail and without intervention, enabling the focus to stay fixed on the interviewee and their contribution. The initial narration continues until the interviewee indicates clearly that they have no more to say. This is followed by a 15-minute break before sub-session 2 of the interview begins.

One of the principles for conducting BNIM interviews is that the researcher may ask only questions that illicit a further description of the experience already told. It is the role of the researcher to treat all parts of the description equally. "By focusing on what is being said, [and by] listening closely for descriptions of the experience that may be enhanced, the researchers' prejudices may be put on one side as the practice of truly listening is engaged fully" (Wengraf, 2001, pp. 118-119). The two SQUINS used in this study are in Appendix G.

## **Recording and Transcription**

Interviews were audio-recorded and transcribed verbatim with the permission of participants. After transcription the process of 'theming' began, which involves dividing the data into sets of segments based on particular content factors or themes. Each segment of data that refers to a particular theme is called a 'meaning sequence'. Depending on the objectives of the interview, the 'theming' process can be either basic or complex. An interview on the subject of loneliness, for example, whose objective is simply to identify themes such as isolation, self-reflection and renewal as they emerge, might require only 'basic' theming.

The theming procedures in this study, however, are more complex, and were conducted in two stages. For two of the interviews which were used as the main interviews, Wengraf's method of identifying text 'chunks' was followed by sorting text according to type as 'description,' 'argumentation', 'reporting' narrative and 'evaluation'. Sub-themes were also extracted from the interviews. Theming is followed by analysis. In this study, a panel was also used to analyse two of the

identified main interviews, one being an interview with a social worker and the other an interview with a family.

## **Data Analysis**

Findings from this study were analysed using both BNIM and Framework analysis, the reasons for which are explained below.

BNIM was used to sort and select narrative extracts for the analysis of two of the main interviews. Framework analysis was then used for the remainder of the interviews to draw out general themes. Because it involves analysis of whole life stories, BNIM typically is used for the analysis of a very small sample (no more than three, usually) of in-depth interviews; it was not feasible to apply the BNIM system of analysis to data from all twenty interviews included in this study. Rather than limiting the scope and depth of analysis to which I was able to subject my data, however, this enabled even greater analytical rigour through the use of a panel, and proved to be an innovative way to use BNIM. When examined in their totality the two interviews to which BNIM was applied, one from a social worker and one from an asylum seeker, uncovered themes which later emerged from the other interviews.

## **BNIM Analysis**

When a panel is used in BNIM analysis the researcher first divides verbatim transcripts into chunks. The other core researchers who sit on the panel then engage in an exercise of blind 'chunking' of these data extracts, an activity which involves developing multiple hypotheses and alternative ways of predicting the next section of text. A key advantage of this approach is its ability to mitigate against the tendency of individual researchers to slide back into their 'defensive self'. Wengraf (2001) suggests that as we all have blind spots, working with others can help fill these gaps in our perception and challenge our assumptions.

Because a key element in BNIM is hypothesising, the use of a panel creates an opportunity for both a hypothesis and a counter-hypothesis about a particular interview to emerge from the analysis, ensuring that any biases that the researcher might have are dealt with. As Wengraf (2001) explains, "The principle of counter-hypothesising is crucial...in order to expand and use your sociological imagination. You will need to move beyond the hypotheses which your intuition and common sense will normally provide and restrict you to" (p. 268).

Data derived from the BNIM interview can be analysed in a number of ways, one of which involves using the grounded theory method developed by Glaser and Strauss.

This involves two stages: first the multiplication of hypotheses around any given datum until the imagination and knowledge of the researchers is exhausted. Second the considerations as to whether the next datum being examined enables any of the previous hypotheses to be justified (Glaser and Strauss, 2009, p. 11).

Data analysis can also be done using analytical methods derived from Gabriella Rosenthal and Wolfram Fischer-Rosenthal. Two forms of analysis take place in this quite structured approach. The first stage, known as Biographical Data Analysis (BDA), is based on the sequence of the told story recorded on the tape. A transcript is produced as are two other documents which describe the chronology of the interviewee's life and the delivery, in the form of responses offered to the interviewer in the course of the interview, of the biographical account. In the second phase of data analysis, known as Thematic Field Analysis (TFA), the interviewer does not address the events, actions or developments that have occurred in a person's life (which are the focus of BDC) so much as the way in which those events and actions were experienced and are now understood from the perspective of the person giving the interview. Data analysis using BNIM is performed by a panel whose role is to facilitate the multiplication of hypotheses in relation to the data presented to it. Wengraf (2001) offers the following description of this stage in the process:

The principal is that there should be a panel of at least two for this task If you can find six people, so much the better. The more different from each other they are the more 'objective' your results are likely to be. This is because such work is best done by a collective of people unlike the researcher and both like and unlike the informant. If you only work on the basis of the mental models derived from and generated in your own personal history and your own 'case-limitations' your one-person-panel sociological imagination will be weak and partial... The more the diversity of those involved the better and more interesting the work of analysis becomes (p.260)

Charmberlayne et al. (2000) also stress the value of a panel of analysts and of peer review:

The more intercultural and cross-cultural the panel, the more 'sleeping assumptions' of any given researcher are likely to be disturbed and raised to consciousness, thereby often forcing a clarification and a rectification of the researcher's theory of subjectivity (Charmberlayne et al., 2000, p. 102).

The panel used for BNIM analysis in this study consisted of the researcher and five other people: a secondary school teacher, an asylum seeker, an undergraduate social care student, a parent who had gained refugee status and was now working as a solicitor, and a lecturer on a social care programme. Drawn from different backgrounds and viewing the data presented in different ways, from both a personal and a professional perspective, the panel helped the researcher to recognise the complexity of the issues being pursued in this study.

# **Framework Analysis**

The method of analysis applied to the eighteen interviews following the completion of the BNIM analysis is known as Framework, which was developed in the 1980s by the UK National Centre for Social Research. Ritchie, Spencer and O'Connor (2003) define Framework as

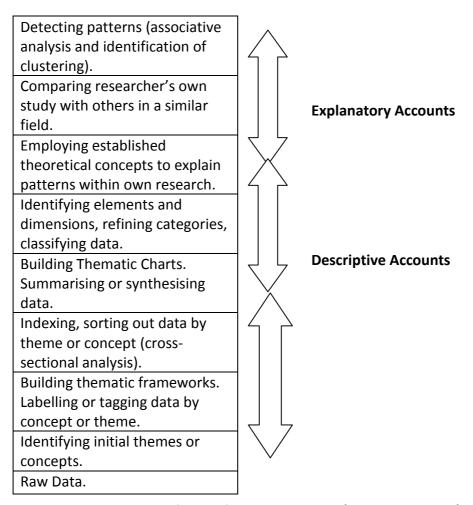
a matrix-based analytic method which facilitates rigorous and transparent data management such that all stages involved in the 'analytic hierarchy' can be systematically conducted. It also allows the analyst to move between different levels of abstraction without losing sight of the 'raw' data (Spencer et al , 2003, p. 220).

Framework was chosen because, firstly, apart from the elimination of the panel, most of its features resemble those of BNIM. As its name implies, "it provides a framework for thematic analysis of qualitative data and a way of thinking about how to manage themes and data" (Bryman, 2008, p. 555). Spencer et al. (2003) maintain that "the ability to move up and down the analytical hierarchy, thinking conceptually, linking and nesting concepts in terms of their level of generality, lies at the heart of good qualitative analysis" (p. 213). They go on to describe the analytical process as requiring

three forms of activity: <u>data management</u> in which the raw data are reviewed, labelled, sorted and synthesised; <u>descriptive accounts</u> in which the analyst makes use of the ordered data to identify key dimensions, map the range and diversity of each phenomenon and develop classifications and typologies; and <u>explanatory accounts</u> in which the analyst builds explanations about why the data take the forms that are found and presented (Spencer et al., 2003, p. 217).

The various steps in this process are represented diagrammatically by Figure 15.

Figure 15: Data Analysis Process/Analytical Hierarchy Data Management



Adapted with slight modification from Spencer et al. (2003, pp. 212-213)

As this diagram shows, these processes are made up of a series of 'viewing platforms', each of which involves different analytical tasks, enabling the researcher to gain an overview and make sense of the data.

#### **Familiarisation with Raw Data**

The process of familiarisation with raw data, sometimes called 'scaffolding', follows transcription, and is akin to building a foundation for a structure. It seeks to identify recurring themes or ideas by reading through the raw data and sorting them into themes and sub-themes. Although time-consuming and tedious, this process brings the researcher back to the interview process and can prove useful as a means of reconnecting with the experiences of the participants as recounted by them. In the

present study, familiarisation involved raw data from eighteen interviews, two having been analysed already using BNIM. The exercise identified a number of recurring themes which later were sorted into main themes and sub-themes. The resulting thematic framework established thirteen broad themes for social workers and eleven broad themes for families. At this stage it was not easy to distinguish between main themes and sub-themes as some of the emerging themes appeared interconnected, but this did become clearer as the process unfolded. With this thematic framework in place, the analysis moved to the next stage, indexing, which draws "both upon the recurrent themes and upon issues introduced in the interviews" (Bryman, 2008, p. 221).

## **Indexing**

Constructing an index is sometimes called 'coding' and is designed to help show which theme or concept is being mentioned or referred to within a particular section of the data. Indexing can be done manually or by using a computer package such as CAQDAS. Indexing for this study was done manually under three headings created within a Word document. The columns were labelled as follows: (1) Raw Data, (2) Indexes, and (3) Anything striking, or quotes from the data that might be used for the final report. Having determined which part or parts of the thematic framework applied to each passage of the data, passages in the data which contained references to more than one theme were identified and 'multi indexed'. Multi-indexing is recommended in cases where "a single passage might have relevance to two conceptually different subjects and carving it up would destroy both its meaning and its coherence" (Ritchie et al., 2003, p. 229).

#### Thematic Charts

Thematic charting is a process which refers to the summarising of the key points of each piece of data - retaining its context and the language in which it was expressed and placing it in the thematic matrix...The key question in charting is how do I summarise the content to best retain the context and essence of the point and without losing the language or voice of the respondent? In the process of synthesis it is important to retain as much as possible the words used by the

respondent during the interview or discussion (Ritchie et al., 2003, p. 231).

The completed index and the learning gained through indexing were used in the next stage of the process to construct a set of thematic matrices. This involved three elements. First, key terms, phrases or expressions from the participant's own language were retained. Next, all data with similar themes were brought together and summarised. The main themes served as headings for each chart. Above each main heading was a specification of whether the data was from social workers or families. Sub-themes were allocated under each main theme and identified by bullet points. Interpretation should be kept to a minimum at this stage so that there is always an opportunity to revisit the original 'expression' as the more refined levels of analysis occur. It is for this reason that the commentary on the verbatim transcription of both social workers and families presented in Chapters Five and Six has been limited in order to allow for the voices of the participants to be heard. Finally, because no material should be dismissed as irrelevant just because relevance is not immediately clear, any material that did not seem to fit under the designed thematic categories was categorised as 'other' to be followed up at a later stage of analysis.

# **Descriptive Analysis**

An initial stage in descriptive analysis refers to unpacking the content and nature of a particular phenomenon or theme. The main task is to display data in a way that is conceptually pure, makes distinctions that are meaningful and provides content that is illuminating. There are three key steps involved: detection, categorisation and classification. The aim of this task is to construct a coherent and logical structure within which to display the content of descriptive elements (Ritchie et al., 2003, p. 238).

This stage of analysis involved the categorisation of the data, examining the thematic charts, and reading across the data in each sub-topic in order to identify different elements, constructs and categories. This was done using different coloured highlighter pens to label pieces of data according to the different phenomena represented by each colour. Extracting data from the thematic charts

and summarising it on a separate sheet helped to identify similarities and differences. Each column on the thematic charts was inspected across all cases, the content and dimensions were identified, and categories were refined to identify broader categories under which data could be classified. At this point, data was labelled in a more conceptual way, at a higher level of abstraction in relation to the thematic charts.

According to Ritchie et al. (2003), "It is recommended when using Framework that the researcher makes a decision about the level of detail captured in the categorisation depending on the objectives of the study" (p. 243). In respect of the objectives of the present study, a decision was made to illuminate the content of categories through verbatim quotations followed by brief commentary. This can be observed in Chapters Five and Six.

## **Explanatory Accounts: Associative Analyses**

In Framework, associative analyses can be conducted in different ways depending on the nature of the study and the emergent patterns within the data and the researcher's own theoretical or epistemological perspective (Ritchie et al., 2003, p. 252). With respect to the aims and objectives of this study, a decision was made to examine its findings within the context of existing empirical studies on social work with asylum seekers and refugees. Conclusions on the findings were reached and recommendations were made.

#### **Ethical Considerations**

Ethical issues considered as part of the research process included access, informed consent, confidentiality and protection against psychological harm. The manner in which these issues would be addressed was incorporated into both the research proposal and the research design. Ethical approval was sought from, and granted by, the Research Ethics Committee of The School of Sociology, Social Policy and Social Work at QUB and the Research Advisory Committee of the HSE. The

requirements set by these governing bodies were adhered to when conducting this research.

It is widely accepted that many refugees and asylum seekers have lived through very difficult and traumatic circumstances before and during the period of fleeing their country of origin. "Because refugees live in politically oppressive conditions or in the midst of war, they may have been subject to discrimination, imprisonment, violence, rape, torture, and death of family members. Refugees often leave under hurried, chaotic and dangerous conditions, in many cases in the midst of armed conflict. Further, refugees do not know when, if ever, they will be able to return to their countries" (Tripodi, 2002, p. 16).

While the ethical principle of 'no harm to participants' applies to all research subjects, it was important to take into consideration specific issues that affect asylum seekers. Participants in this study, for example, were offered information on counselling services available in their areas. Prior to commencing the interview participants were asked to indicate on the consent forms if they had been interviewed for research purposes in the past and if so to specify how many times they had been interviewed and to indicate their willingness or unwillingness to take part in the research. This was considered an important point because unless otherwise indicated the researcher felt it could be harmful to participants to interview them if they had previously undergone an interview. Although it has been argued in the literature that "refugees are quite often glad to tell their histories to researchers, and that the telling of their stories or bearing witness assists in the process" (UNHCR, 2003, p. 14), to safeguard the welfare of participants, particularly those who had been interviewed previously, explicit confirmation of their willingness to participate was sought.

In order to gain their trust and confidence, it was also important to make clear to participants that although I was a social worker by profession, my engagement with them was as a researcher committed to maintaining the confidentiality of the information they shared with me.

"Regardless of how a researcher may seek to conduct proper, ethical research, the process of enquiry and its outcome as knowledge is always embedded in power relationships between the researcher and the researched" (D'Cruz and Jones, 2004, p. 131). Nonetheless I believe that BNIM used to conduct this particular research helped to minimise the power imbalance between the researcher and the research participants by providing participants with the opportunity to disclose only information that they were comfortable disclosing. Any other method would have been interrogative and potentially harmful by virtue of its similarity to the approach used by immigration officers and other officials. Because asylum seekers undergo so many interviews prior to a decision being made in relation to their application for asylum, researchers must be sensitive when conducting interviews with them. Towards this end, participants in this study had the option of choosing the venue for the interview. As a result, they were relaxed when interviews were carried out.

#### **Informed Consent**

Informed consent entails informing the research participants about the overall purpose of the investigation and the main features of the design, as well as of any possible risks and benefits from participation in the research project. Informed consent further involves obtaining voluntary participation of the people involved, and informing them of their right to withdraw from the study at any time during the investigation (Kvale and Brinkmann., 2008, p. 70).

Because asylum seekers and refugees are so vulnerable as a result of their experiences as 'forced' migrants and their restricted status in the host country, it was vital to ensure that in agreeing to take part in this study, participants understood the nature of the agreement. Towards this end participants were given the option to use an interpreter to explain the nature and purpose of the study to them in their own language. None of the participants expressed a need for this, however. All were comfortable with the information provided about the study both verbally and on the consent forms, which were written in plain simple English (see Appendix E,G and H) and were read aloud to the participants in order to address any language or literacy difficulties. Furthermore, to eliminate any ambiguous or

confusing terms prior to first use, the consent form was piloted with the consultation group of families.

## Confidentiality

Linked to the concept of informed consent are the issues of invasion of privacy, confidentiality and anonymity. Sapsford and Abbot (1996, in Bell, 2010) define confidentiality as "a promise that you will not be identified or presented in identifiable form" and anonymity as "a promise that even the researcher will not be able to tell which responses came from which respondent" (p. 12). To ensure the confidentiality of participants in this study, each was given a pseudonym. Electronic versions of data and identifying names were stored on a personal computer which was password protected. Hard copies of interview transcripts and other confidential material were stored in a filing cabinet to which only the researcher had access. Participants were informed that they could withdraw from the research at any point before or during the process, and that if they chose to do so, they were under no obligation to give any reason for their decision. It was made clear to them that they did not have to answer a question if they did not want to and that they could stop an interview at any time. Participants were also advised that the information they gave would contribute to a written thesis and a report which would be in the public domain and that this would mean that there was a possibility that their experiences would be read by different people. They also were told that the aim of the research was to achieve positive change in how social work with asylum seekers was conducted.

While emphasising the researcher's commitment to protecting their confidentiality, the limits of confidentiality were also highlighted. It was explained that if the participants said something that gave cause for concern either for that person or anyone in their care depending on the nature of the problem, I would be obliged, in consultation with the participant, to seek help for them. As a specific example I explained that if the during the process I became aware that a child was at risk I would seek help for the family involved.

#### Access

The approach a researcher takes to gaining access to interviewees and locations or subjects for research depends on whether or not the setting is relatively open – or to use Bryman's terms, 'overt' or 'covert' (2008). Hammersley and Atkinson (1995) draw a similar distinction between settings which are 'public' and those that are not, while Denscombe (1998) refers to 'informal and 'formal' settings. Informed by the definitions provided in the literature referenced above, the HSE can be considered a closed setting to which it is difficult to gain access. As I was a practising social worker employed by the HSE at the time I commenced this research, negotiating access was a relatively simple task. Bryman (2008), however, warns researchers who have secured initial access against complacency, especially when working in closed settings:

But access does not finish when you have made contact and gained the entrée to the group. You still need access to people. Simply because you have gained access to an organization does not mean that you will have an easy passage through the organization. Securing access is in many ways an on-going activity (Bryman, 2008, p. 408).

McNiff et al. (2003) stress the importance of developing good interpersonal skills, especially in the continuous process of negotiating on-going access. For the present research, this process involved the following stages:

- 1. Formal meetings with HSE management, Child Care Managers, Principle Social Workers and Team Leaders from the participating offices.
- 2. Meetings between the research supervisor and line manager to negotiate study plan. One day a week was granted to be renewed annually over the five-year period.
- 3. Access granted by QUB on the 15<sup>th</sup> of June 2006 and by the HSE in July 2006.
- 4. Access had to be renegotiated with the HSE since I ceased employment with the HSE in 2008 prior to completing the study. After reconsideration and reviewing the conditions of the agreed proposal, the HSE ethics committee agreed that the research could continue. The waiting period for this re-approval, however, took at least six months during which time the researcher could not continue with conducting the interviews.

#### Conclusion

The purpose of this chapter has been to give a detailed account of the planning process that led to the research design and the strategies involved in addressing the aims of the study. Among the strategies employed within a participatory action learning process, the most significant was the BNIM approach to data collection using in-depth interviews which generated rich data on the experiences of both social workers and families. The philosophical foundations of BNIM were presented, as was its utility in examining the experiences of CPWSW and ASF; the limitations of the method will be discussed in Chapter Seven. The research process as it related to BNIM was discussed, as were the ethical and practical considerations of using this methodology. Data analysis included the use of both BNIM for two selected interviews and Framework for the other eighteen. Overall the analytical methods and strategies employed in pursuit of the research aims proved appropriate, ensuring both transparency and rigour throughout the research process.

# **Chapter Four: An In-depth BNIM Case Analysis**

"It was a very difficult case, one of those that you go home and you can't forget about, and you don't know if you are doing the right thing." (Alice)

#### Introduction

This chapter presents findings derived from the descriptive accounts of social workers and families. It begins by first presenting the results of two in-depth BNIM analysis interviews, the first with a social worker working with an abandoned child from an asylum-seeking family of African origin, and the second with the abandoned child, who was an adult at the time of the interview. In this regard the case was unique as most interviewees were either parents or guardians, and was chosen for its insight into the perspective of both the young person and the social worker. The second interview was selected for in-depth BNIM analysis because it encompasses themes that recur throughout the other interviews. Both interviews were selected for in-depth BNIM analysis to enable cross-referencing between the participants' experiences.

Rather than searching the interview transcripts for themes already identified in the literature, the transcripts were reviewed by a panel to identify broad themes and sub-themes. These later were compared with findings from other research. This approach reflects this study's exploratory and descriptive orientation which encourages the themes to emerge from the interviewees' narratives and for findings to become clear. Furthermore, while Rubin and Rubin (2005) approve the use of published literature to identify relevant themes in research interviews, the same authors caution against visiting the literature in the initial stage of analysis:

Coding on concepts and themes from published literature requires care. If you use an established theoretical lens as your sole source for

coding categories, you might miss the original insights in your own data; you end up testing someone else's theory rather than building one of your own. In addition, concepts and themes worked out for other studies might not precisely fit your data and you can end up trying to fit your square pegs into their round holes. More important than borrowing concepts and themes from the literature is finding those that emerge from the interviews (Rubin and Rubin, 2005, p. 209).

The use of a panel at this early stage of analysis enabled me to gain initial insights from the data, allowing themes to emerge rather than borrowing concepts and themes from the literature. Testing, checking and validating themes with panel members also facilitated identification of some themes that would otherwise have been missed. In order to ensure 'objectivity' the panel was composed of five members selected for their difference from both the researcher and each other, in accordance with BNIM principles (Wengraf, 2000).

Table 14 below presents themes which were drawn from the social worker's indepth interview; Table 15 presents emergent themes from that of the asylum seeker (a young adult).

Table 14: Themes Emerging from BNIM Panel Analysis (Interview with Social Worker)

	Main Themes	Sub-themes		
1	Trust/Mistrust	Age Assessment		
	What?	How to assess age of children from a different culture?		
	Why?	<ul> <li>Are children the same the world over?</li> </ul>		
	How?	Mistrust linked to lack of documentation		
		Officialdom		
		Asylum seeking status		
		Racism inherent in wider society		
		Stereotypes about Africans, Nigerians, Asylum- Seekers		
		Anti-Racist Practice ADP/AOP		
2	Service Delivery	Reflection on own practice dealing with an unusual Case-diversity		
	What?	<ul> <li>Conflict of own values vs. professional values vs. societal values</li> </ul>		
	Why?	Cultural norms		
	How?	Client/Service User Relationship		
		Empathy vs. Sympathy		
		Legal vs. Cultural Issues		
		Balancing between cultural and legal issues		
İ		Restrictions and safeguards of the law		
		The law in relation to child protection		
		Style and mode of intervention – What Model?		
		<ul> <li>Requiring issues to 'fit in own frameworks'</li> </ul>		
		Objectification of child as case		
		<ul> <li>Possibly coming from a biomedical perspective</li> </ul>		
		<ul> <li>Query focus – Is focus on assessment of child's psychological wellbeing</li> </ul>		
		or entitlement to service?		
		<ul> <li>Is assessment focused on trying to ascertain factual information or</li> </ul>		
		assist with asylum process also?		

		What is the focus of intervention?	
		Style and mode of intervention - What was done? and what was not	
		done?	
		'Functional' Integration vs. Integration	
		Colour blind approach vs. assimilation	
		Specialised or non -Specialised Child Protection Service	
		Query same culture placements-intervention by same	
		social workers' cultures	
		Understanding Asylum Process	
		Immigration Process/System	
		Training	
		Diversity Issues, Cultural Issues, Asylum Process	
		Reflective Practice	
		Reflection on cultural issues in own practice	
		Experiential learning from encounter with different culture	
		Political Correctness	
		Drawing the line between knowing and not knowing	
		Fear of not being politically correct	
		Personal vs. Professional	
		PPD- Self Awareness	
		Personal vs. Professional values	
		Experience vs. lack of experience in job and the impact of this in	
		dealing with 'unusual case	
3	Cultural Differences	Cultural Differences - Consider Broad Definition of Culture	
	and Diversity	Understanding of cultural nuances in relation to differences in child	
	What?	rearing practices	
	Why?	Understanding cultural differences for assessment Different cultural	
	How?	behaviours	
		Diversity	
		Due to cultural differences or perhaps personalities	
		Nature of case problem – in this unusual case	
		Social Worker culture vs. families culture vs. wider societal culture	

#### Social Worker's Interview

This section explores some of the issues that arose for Alice, a social worker working with Andrea, an asylum-seeking child who was abandoned by her stepmother when she was roughly 14 years old. Significant themes from Alice's narrative are presented in an attempt to illuminate her experience.

Alice reconstructed the case from memory, with 'events involving Andrea' prior to being taken into care and subsequently whilst in care. I met with Alice in June 2007 and conducted my interview with her in her office.

From the outset Alice appears apprehensive and somewhat anxious at the prospect of recalling Andrea's case. This is possibly caused by the prospect of retrospective analysis. Initially, she sounds a little unsure, doubtful of her own abilities and defensive about a possible lack of case knowledge. Because of her limited experience of working with someone from an African community, she is clearly

grappling with mixed emotions regarding her knowledge at the time of the actual case and her understanding of the situation at present. There appears to be a conflict between these differing emotions and feelings, from past to present. Alice appears unclear and somewhat unsure in her recollection of the actual amount of time she spent working with Andrea. She also appears nervous and unsure in her attempts to outline the case history. This is directly evident in her word choice and the frequency with which she uses terms such as 'I don't know'.

The reason for this is suggested in the text and relates to the length of time which has passed since the occurrence. Naturally, one would be a little reluctant initially to speak on such a sensitive subject but accompanying case notes and reports would arguably provide support and reassurance for the interviewee. This is not the case here, however, as Alice is relying entirely on memory, without having prepared in advance of the interview, as is evident from her admission that she should have been able to supply Andrea's actual age.

Alice's lack of experience at the time she worked with Andrea merits further exploration. A number of significant issues are highlighted from her account and are developed in the thematic analysis. Alice's lack of professional experience created distance between her and Andrea from the outset. As she put it herself,

Andrea was quite an unusual case, a child abandoned; she was like a test, not a test deliberately but it was em... first time I had that experience. That was my first time to work with someone from an African community. (Alice)

In other words, because she saw the case as a personal challenge to be overcome, Alice was unable to see Andrea as a young person in need of care and assistance. As a consequence, the relationship that developed between them remained detached and impersonal, leading to mutual distrust and a failure of both parties to fully disclose.

A major focus of Alice's distrust is Andrea's age, which she discussed at length with colleagues in the office. Her age mistrust appears to be influenced by a number of

factors, including the scepticism that pervaded Irish society at that time with regard to asylum seekers, and informed public perception that their claims were bogus.

Alice's assumptions about how 14 year olds ought to behave also informed her distrust. As she recounts:

Now the child presented – didn't look 14 at the time. That was another issue of how children the age they look, because we do have a sex band of how children look in our society, in our community – in our culture, I should say that was one thing that I remember we debated at the time of the age aspect. Because there was a lot of things happening at the time about immigration stopping at the border and children pretending to be younger because they knew they would get different treatment ... how did we ever know that they knew that? Were we jumping on this thing that Irish people have of all Nigerians sponge the system because of this thing that we think we know? Things like that in hindsight is something we needed to figure out. (Alice)

A similar mistrust informs Alice's reflections on Andrea's relationship with her parents:

I think Andrea's parents grabbed the opportunity. They deliberately stayed back not to appear with documentation because they wanted her to stay in this country. Don't get me wrong. I am not trying to judge them or anything like that but you know I think they knew that if they showed up they would have to take the child. (Alice)

Besides discussing the issue with colleagues, Alice tried to assess Andrea's age by drawing on her own experience of how teenagers behave in Irish society. Although challenging, this exercise proved to be valuable experience for Alice, who was prompted to think about the way in which children's behavioural is shaped by their culture:

Andrea was quite proper, very well-spoken. She acted more mature than her age. In the office we debated around how a 14-year-old girl could be so proper. We are used to out-of-control teenagers, rebellious teenagers and so on. Andrea was nothing like that. So from that point of view it was quite a different experience. Andrea had very strong discipline rules. I can remember that being a very cultural thing. When she saw foster children misbehaving and not being punished Andrea would take the law into her own hands and do the punishing, slapping the children in the foster placement, and then that became another child protection issue, you know. I was questioning my

knowledge of children, wondering if they were different in other cultures or are they the same the world over? (Alice)

Cultural differences were also revealed through language, as Alice discovered when she contacted Mary, whom she believed to be Andrea's aunt:

Mary was an aunt and in their culture everyone female close to the family is an aunt. Quite the opposite to my understanding of the word we assumed she was a blood relative. Mary denied knowledge of Andrea and it later transpired that this was because Andrea had brought social workers to her house. (Alice)

Working with Andrea also appears to have led Alice to acknowledge, however tentatively, that "maybe the asylum process was difficult as it possibly restricts people's movement." As she recounts,

There is also a line to draw, where someone makes a choice to be in this country. They have, within reason, to abide by the law of this country. It's a freedom of travel and a freedom of choice that we personally have. Maybe I am realising that they don't have the ability to say 'I don't like to live in Ireland, I want to move to England' and we do have the right as Irish citizens where maybe the people from African communities there are here on asylum and they don't have that. (Alice)

The relationship between Andrea and Alice on the whole appears to have been characterised by suspicion, mistrust, misunderstanding and later a distancing or withdrawal from each other. The inability of Andrea's stepmother to produce necessary documentation did not help the situation, as this meant the legal relationship between Andrea and her stepmother could not be established or confirmed. In the end Andrea's stepmother left the country and returned home while Andrea remained in care. The widening of the relationship gap between Alice and Andrea is evident long after the professional relationship concludes as the social worker has no further knowledge of Andrea.

Alice recounted issues of mistrust thus:

To be honest with you, the whole story did not add up. It was very difficult to know a lot of things, and I am not saying the child was lying but you know it was very difficult, when you come across a situation

which is so different. How was I to know that she was telling the truth about her mother abandoning her? Like I said this was a very articulate child who did not act her age. My relationship with Andrea was affected. I don't want to lie. There were lies everywhere. There were a lot of lies. Then you discover a bit of information as you go along. For example, I got to know that her mother was dead, way into the case. Why did she not tell me these things in the beginning? It was just a difficult case. As I said to you...in the end I was not working the case anymore. I don't know if she got her asylum in the end or not. (Alice)

In some instances Alice recounts feeling empathy with Andrea, or perhaps sympathy for her, as the full details of her story emerged. Reacting initially to Andrea's abandonment by her stepmother in a strange country, Alice was moved when she learned subsequently how Andrea came to Ireland – the getting here process – and how her mother had been killed in the street in her own country.

I felt sorry for the child; she had no one to turn to. The aunt who was supposed to be looking out for her had denied knowledge of the child hence there was no guardian or person taking responsibility for this child and she was under 18. Then it transpired that her mother died and she said that her mother got killed through fighting that was going on in the street. She was an only child. When her mother died her father married in a new relationship with the woman she was calling her mother. (Alice)

Alice recounted how her relationship with Andrea became better after Andrea's step-mother left. She brought Andrea to Immigration and sought to connect with her through her cultural groupings. As she recalled,

Once I went to her church and it was a good experience for me because I am not from that church. (Alice)

While professionalism is attributed, to a large extent, to experience in the field, the opposite can also be said of one who is new to professional practice. In this instance Alice's lack of experience is all too evident from deficiencies in her own knowledge, skills and attitudes, deficiencies she acknowledges herself when she says that if she were presented with the same case now, given her experience, her knowledge would be greater.

You will have to bear with me because it's a long time ago since I worked with her and my experience would have...I understand things better now. I will be getting confused...I will be going on about what I understood then and what I understand now. I will be getting them mixed up. That's something to be aware of. So if I got the same case now with my experience now I would probably know more. (Alice)

Alice's experience of the case at the time, and indeed her perspective and decisions, were shaped by her experiences, beliefs, values and attitudes up until that point. Given her inexperience working with any family whose ethnic origin differed from her own, she had no basis for comparison when working with Andrea thus giving rise to fear, anxiety and apprehension. It is possible that Alice's experience would have been more positive had she received training which better prepared her for cases like Andrea's. On the other hand, it is possible that no training could have prepared a novice practitioner adequately for such a complex and challenging case. While there is evidence of a degree of self-reflection on Alice's part, much is of a dialogic rather than critical nature. There is much evidence, for example, of inner debate or possibly argumentation in her narrative:

I was wrestling internally in the office with, you know, this is a different experience, this is different circumstances. They don't have the same system as us...but it was the legal bit that matured me a bit in my knowledge of social work, not trying to please everyone just because they are from a different culture. (Alice)

Alice herself acknowledges the extent to which her expectations influenced her response to A's story.

I was suspicious at the start because it just was a story that was not fitting into my little boxes. (Alice)

Alice's 'little boxes' are indicative of an institutional resistance to exploring new ways of working. Such resistance is disempowering, both of individual social workers and of the institution itself, and is at odds with the profession's reputation as an authority. One way to re-empower social workers is by developing their self-awareness as practitioners; how this can be accomplished against a backdrop of increasing workloads and other pressures is a complex issue and outside the scope of this study, but is definitely worthy of further attention.

Alice clearly struggles to reconcile her obligation to be simultaneously sensitive to her client's culture, cognizant of the law, compliant with professional standards for the practice of social work in Ireland, and responsive to the fact that the norms by which Irish society was defined in the past are changing all the time. Her remarks regarding the practice of slapping children illustrate this challenge.

It's just a constant battle of balancing between culture and the law. But then when you go down in history our parents were slapped. A lady the other day slapped her child and said I don't want her to become like an Irish child. I feel I have to respect that mother's wishes but we have zero tolerance for slapping. (Alice)

Alice's s first experience working with an African ASF brings the issue of cultural difference to the table. From her account it is evident that cultural stereotyping is widespread. The assumption that Africans are both backward and malleability culturally informs the theory that over time, with correct instruction, 'they' can and should become like us; 'we' used to slap our children, but we know better now. Alice's account clearly implies that 'they' need to be educated in 'our ways', at least to a functional level of integration.

This education will involve working with the 'Black =African=Nigerian' families but need not necessarily be carried out by an African, just someone who is aware that 'they' speak loudly, roll their eyes, are animated in conversation but are not necessarily being rude. Whatever "cultural deficiencies" there are in these families, they can be easily rectified:

I think we need specialised services for African families. What I mean is that we need money spent on someone who educates African families to do what we want done, in order to prevent children coming into care. It would also be good to have a law that says no hitting your child. (Alice)

Describing her experience and concerns about the difference between child-rearing practices amongst the African families with whom she worked and those of Irish families, Alice stated:

I watch how they lift their children. It's very aggressive, the movements in the African families are rough and it's just how they go on. With Irish families if they are rough with a child you know that is not always how they go on. (Alice)

At the same time Alice seems to have tried to make sense of the behaviour she observed in African families, even when she found it peculiar:

I do work hard to observe patterns. They make noises when they are cooking and some of them use gestures. I stop them and ask them about some of the gestures they use so that I can make an accurate assessment. If they keep rolling their eyes I ask them, as in, I am watching you. For me it means you are annoyed about something so I try to check out because I want to see if it is a rude thing they are doing to me or what or am I getting it? Because you know these things can mean anything. (Alice)

Such cultural stereotyping is further revealed in Alice's use of words and phrases which establish a fundamental difference between 'us' and 'them' (e.g., 'our society', 'our community', 'our culture') and emphasise the need for functional integration in relation to African families. 'They' need to learn 'our' ways; they don't necessarily need an African to teach them, just someone who knows what we need done to prevent children from coming into care. In her narrative Alice also seems to suggest that because a less caring attitude towards children is typical of Africans, 'we' must supply the tools and skills they need to become more functional. The division is further compounded by the unconscious identification of Irish people as those who are native to Ireland to the exclusion of other nationalities. While this is not explicitly stated, the language chosen suggests such an association. A sense of distrust prevails over the relationship as the child withholds information regarding her family. This is mirrored by Alice's suspicions surrounding the case story presented. Such suspicions about the case of an abandoned child are one of many complex issues pertaining to this story. While abandonment is not an issue that tends to arise in Alice's daily work that it was an element in this case raises important questions for the profession. For example, should issues affecting minority groups continue to remain on the fringes of social work education and practice? Is it reasonable to omit from the training

social workers receive instruction designed to raise their awareness of issues that they are likely to encounter only infrequently?

As Alice points out, "all of that had to be figured out". But 'figuring it out' on the job, so to speak, places social workers at a disadvantage in managing such cases effectively. In the case of Andrea, the relationship between key worker and child was negatively affected as a result of Alice's unpreparedness to address the issues with which she was faced. Africa is depicted as a dangerous place in Alice's narrative. During the interview, Alice recounts that tentative plans were made for her to travel with Andrea to her country of origin to look for her parents, but that this did not transpire for fear of a threat to her life.

My line manager said I was to go to Nigeria to find the parents but I was told I would be killed. (Alice)

Although there is an assumption in Alice's narrative that 'racism' is, in effect, a skills-deficit which can be addressed to a certain extent with the benefit of hindsight, she realises that her attitude towards Africans and/or people with dark skin is more deeply rooted than she might initially have supposed and hence, less easily removed.

I always liked to think I was very culturally aware, and that I did my anti-discriminatory practice and I did my anti-racist practice, but I didn't know when I was working with them if I didn't have the typical media feelings of racism, of 'I was white, she was black.' It was not that basic — though it was a little deeper than that where I was addressing my own, em... am I assuming a lot here? That was a feeling I was going through at the time. (Alice)

Alice's uncertainty about her own attitudes and their impact on her practice compounded the lack of confidence she felt due to her unfamiliarity with abandonment issues, and complicated her frustration with a process focused on 'documentation' to the detriment of the child:

We were torn between thinking, if you were the guardian of this child within your culture, and you left this child alone in a foreign land for weeks, how can we trust that you really were her guardian? I did not think that Andrea had a child protection reason for being in care. The solicitors needed documentation and to be honest with you, I can tell you now that seems to be the only reason why the child was in care. I was often disheartened by the whole thing, em...The Health Board; they could not fight the case for the child not to be in care. It was all about documentation and this guardianship. (Alice)

Overall Alice's narrative demonstrates the conflict faced by social workers in trying to intervene with ASF. In this particular case the dilemma is both legal and cultural, exacerbated by organisational aspects of the work. Caught in the middle of it all was the child, Andrea. It would appear that although these challenges are not unusual in social work, they do become more complex when working with ASF.

## **Summary and Discussion**

A number of potent themes are evident in the case of Alice, and her involvement with Andrea, which have already been highlighted in tables 14 and 15. To sum up, Alice's description of her intervention with Andrea illuminates a number of powerful themes, including ambivalence, indifference, and reflection in action and on action, and the struggle and need to know and understand cultural differences. What emerges is the Alice's realisation that her response to Andrea was based on cultural stereotypes. Alice demonstrates a clear need to know and understand different cultures, by observing and making sense of the kinds of behaviours that are probably alien to her. It appears, however, that her frame of reference has been shaped by the media and the wider society which made it difficult for her to avoid stereotyping Andrea. After all, practitioners are products of the environment and society in which they live.

In Irish society, the perception that all applications for asylum are bogus is widespread, as is the presumption that 'asylum seekers' are by definition African, which itself equates to Nigerian. The researcher, who is 'black African', is, therefore, automatically assumed by Alice to be to be Nigerian.

The age of eighteen is significant for all young people, whether they are in the care system as an asylum seeker or not. It is the age at which a child becomes legally an

adult and in most cases marks a time for moving on. In the case of Andrea, however, it was the point at which she could no longer have the protection of the State or the full care order that had protected her from deportation for all those years. Now that she was legally an adult, future decisions about whether or not she should remain in the State could now be made without the involvement of a social worker. How well prepared Andrea was for this transition is suggested by Andrea's own narrative.

## **Asylum Seeker's Interview**

This section focuses on Andrea's descriptive account of working with Alice. In the following pages I present Andrea's narrative and analyse the particular issues and themes which emerge from it.

Andrea, a young woman of African origin, looks back at her experience as a young refugee in Ireland and her involvement with child protection social workers. Her account begins with how she first came to their attention. According to Andrea, medical professionals became aware that she had been abandoned by her mother following a number of phone calls to the family's house. Andrea was then placed in temporary foster care by the HSE and remained in care until she reached the age of eighteen. Andrea spent over a year with her one foster family and almost three years with another, with a six-month interval between placements spent in Bed and Breakfast accommodation. What follows is an analysis of the descriptive account of Andrea's narrative. Table 15 highlights themes that emerged from her account.

Table 15: Themes Emerging from BNIM Panel Analysis (Interview with Asylum Seeker)

	Themes	Sub-themes
1	Andrea's Experience of	Isolation
	Abandonment	No knowledge of whereabouts of mum/step mum
		Resilience
		Paying bills and responsibility
		Mum later returned
		No documentation to prove A was her daughter
2	Andrea's Experience of	Referral Process
	Process of Service	Referred by hospital

	Delivery	Taken by social worker from school to foster home
	Delivery	Placement in foster care; moves and changes in foster
		care, B&B, short-term, long-term care
		Social workers very nice; provided everything except  dealing with any long and institute.
		dealing with asylum application
3	Andrea's Experience of	Freedom
	Foster Placement	Could do whatever she liked
		Positive relationship with long -term foster carers
		Better than if placed with an African family
		Explicit reference constantly made to 'my' Irish
		foster-carers no names mentioned.
		Comparison made between Irish foster family and
		African family
		Cultural transference/enculturation
		Weird/not used to Irish life style
		Adaptation- At the end of the day I had to adapt
		culturally different/cultural displacement
		Cultural adjustment
		Intercultural dynamic
		Isolation and disengagement- religious community
		regarded as family not foster family
4	Asylum Process	Difficulties arising from the asylum seeking process
		Asylum application not dealt with
		• Isolation; social worker and foster carers did not
		speak about asylum application
		Uncertainty over asylum outcome at the age of
		eighteen and possibility of deportation
5	Culture	Cultural adjustment
		Intercultural dynamic/adaptation
		Adjustment to living with new culture
		Two extremes in Irish culture and African culture; one
		is said to be laid back and another too strict

# Young Person's Narrative

I guess it was in 2003-2004 or something when my mum kind of abandoned me. So I was living on my own, you know, paying bills and everything. And then my little sister, step-sister, was supposed to get a vaccination for like 6 months, but, you know, she was not around for it. The hospital called the house and they found out that there was nobody at home and there wasn't any parents there for me. I was on my own. She had gone (Andrea)

On first observation, the narrative presented in the early stage of the interview is notably sketchy. Andrea begins her narration with a vague and somewhat distant recollection of how she first came into care. Reading Andrea's account, one might conclude that she was extraordinarily self-reliant, with no real sense of alarm at having been left on her own, and that the memory of having been 'kind of

abandoned' isn't too painful. Another interpretation, however, is that Andrea is distancing herself from the events that led to her being placed in State care. Her brief and matter-of-fact summary of what must be such an emotionally laden and highly personal topic suggests that Andrea has removed herself emotionally, not only from the experience itself, but also from the mother figure. It could be argued, of course, that detachment is a perfectly natural response in an abandoned child, all of whose energy will necessary be focused on basic survival. Under such circumstances, detachment becomes a coping strategy, a form of avoidance learning that allows the child to ignore, even if only temporarily, its emotional needs. This detachment in large part explains Andrea's lack of detailed information about her family background and the circumstances through which she came to be abandoned. The theme of detachment continues right through Andrea's account of her experience of foster care in Ireland:

I was put in Health Board foster care. It was kind of weird because I was not used to the lifestyle. I was kind of not used to an Irish family and all that, so I kind of found it really weird and stuff like that. But that's what happened to me...the social workers had to get involved. (Andrea)

She acknowledges her lack of familiarity with what she refers to as the 'Irish family lifestyle'. Andrea's description of the first day she spent with an Irish foster family illustrates how ill-prepared she was for her sudden immersion in the culture of a family different from her own:

[W]hen I got there it was just after school, the social worker picked me up from school and I was just wondering, I was like, what am I doing here? And then she took me straight to Dun Laoghaire, you know, and they were like 'you are going to be here for a while'. I didn't have any clothes with me. I didn't have anything. The next day I had to go shopping, you know. I wasn't used to their food. I wasn't used to interacting with them. Although I saw them in school but that was about it. I wasn't used to living with them. But by the end of the day I had to still adapt because I did not know how long I was staying for, you know. (Andrea)

Andrea's account is infused with her sense of alienation, isolation and disengagement from 'them'. This isolation is evident too in Andrea's account of her experience as a child asylum seeker:

The social workers were very nice and everything, but there was one particular issue that I felt they didn't treat right. When I came into this country, we were going through a process of asylum-seeking...as soon as I was put into foster care nobody actually, you know, talked about that. So I was kind of left on my own, doing my own thing, like. (Andrea)

Andrea's isolation and alienation clearly relate to her displacement, or more precisely, her cultural displacement. Efforts were made by Andrea's social worker to place her with an African family through a friend of Andrea's mother, but concerns about that family's ability to care for Andrea prevented this from happening. This does not appear to have been a problem for Andrea, however, who believes that her placement with an Irish foster family offered her greater freedoms than any African family would have allowed, particularly with regard to homework, domestic chores, bedtimes and boyfriends.

If I had been put with an African family there was no way I was going to be so free doing whatever I want. If my mother was there if you come back from school you have to do your homework. With the Irish it's free. I could do whatever I wanted to do. If I was in my own house I would not have been able to do all the things I was doing. My mum would scold me and tell me to go to sleep around 7. But it was different. I felt I could do what I wanted to do. I could go to bed whenever I wanted to. I had a lot of freedom. (Andrea)

In this sense, the failure of social workers to place her with a black family was, from her perspective, a lucky escape:

The social workers, they were going to put me with a black family. One of my mother's friends was going to foster me. I don't know how the Health Board do their research. The woman who was going to foster me the social workers said to her she couldn't foster me...they were like, 'you don't even look after your little daughter, you don't even stay with her. You send her to your sister. How are you going to look after Andrea if she is in your care?' That's how I didn't stay with her. And I

was very happy because with an African woman she would have dealt with me seriously. She would have made me clean the house. (Andrea)

Comparing her Irish foster family with the typical African family, Andrea goes on to say,

In my foster family with the Irish family, my foster mum, she did not make me do anything. All I did was get up in the morning, have my bath and go out. If I can't come back home I call her and I say such and such is happening and she let me stay out the night. That is it and I come back at night or whatever. If I was with a black woman she would tell me come back a certain time and I have to be back. I was very happy with the Irish family, they were perfect people and very nice to me. There are some African people who are nice like the Irish but 99% of them you have to clean the dishes, you have to wash the plate and you have to do everything. They use you as their house help. You know yourself how black people are. (Andrea)

Among the most striking aspects of Andrea's account is the fact that none of 'the Irish' to whom she refers are named. Their role is functional. 'They' are not as strict as African mothers would be. The Irish are 'perfect people' because they don't discipline their children. The Irish are 'nice' from Andrea's perspective but that quality appears to come from their imposing no boundaries and not really caring what she does:

Irish people, if you tell them you have a boyfriend they will say, 'No problem, bring him home'. If you open your mouth and tell an African woman that you have a boyfriend, they are going to kill you that day. She will go telling all her friends Andrea did this, Andrea did that. I just wanted a quiet life, you know. (Andrea)

Despite the advantage her foster care placement afforded in terms of her personal freedom, Andrea does appear to experience moments of confusion about where she belongs, and how to navigate between two extremely different cultures at an age when her values and beliefs are being formed. Even though Andrea is happy with 'the Irish family', she does not think of her foster family as her family. The African church is her real family in Ireland:

I have no family here. I go to the church here for the past 6 years. They know me there and I like going there. Since I have no family here, they are like my family. (Andrea)

Although Andrea's application for asylum was being processed during her time in foster care, the progress of that application was never discussed with her. According to her narrative, Andrea attempted to discuss her asylum application with her social worker but without success. Although she believes her application failed due to an oversight on the part of the social worker, and seems to believe that social workers could have assisted her through the process, she still refuses to blame them for its outcome:

I don't think it's their fault. I have been here for more than 6 years now and they didn't treat that part very well, but I don't think it's their fault, you know. I think they don't understand the system very well. Nobody seems to know anything about it. I can't really blame them for that. I think the social workers should have made a follow-up and asked me what status in this country and at least asked me do you want to say in this country or go home? But nobody said anything till I was 18. Then all of a sudden I just got a letter from the Minister of Justice telling me I can't stay in the country anymore. So since then I have been fighting that, you know, and then I have a lawyer, we are trying to fight the decision. They have looked into my file and they have said there is no good reason why I should be in the country. So I don't know what will happen with me next. I just have to wait and see. Apart from that the social workers gave me everything I wanted. They were very nice to me. (Andrea)

Andrea's account possibly reflects the nature of services provided for children like her in Ireland. A good many expensive resources are described. There are highly-paid social workers, foster families who impose no discipline or direction, lawyers and civil servants and, yet, in the middle of it all is a child whose carers do not seem to know what her status is in the whole process. What is striking is that things seem to happen to this young woman with little or no consultation. She appears to be in the middle of a chaotic process which is shaping her life, the outcome of which will be of enormous consequence, yet there is no sense that she was ever asked about her past experiences, her present needs or her future ambitions. She has been in Ireland for more than a third of her life, yet in some ways she is still in limbo: whether legally, economically, socially, culturally or emotionally, she has not

yet fully entered the country. Andrea appears to be an extraordinarily resilient young woman although emotionally quite repressed, due perhaps to her being confined in a limited space. Her sister gets a mention in the first answer and is not referred to again. It's not clear if she is Andrea's stepsister or natural sibling. Her birth mother is not mentioned nor is her father who is entirely absent from the picture. She appears glad not to have been returned to her mother/stepmother.

Although she appears to have affection for her Irish foster family post-placement, there is a clear lack of emotional attachment in this young woman's life. Even though Andrea is now a legal adult, her legal status as an asylum seeker remains in dispute. She has crossed the temporal boundary between childhood and adulthood and can, therefore, legally be deported. This threat of deportation keeps her in limbo, and other aspects of her circumstances are also unclear. Her main source of emotional and social solace appears to be her church. Compared with the life she might have led in Africa, or indeed as a foster child living with an African family in Ireland, her experience in Ireland has been liberating, and yet she longs possibly for family, for stability, and to belong.

While the care system does provide some form of stability, in other ways it appears disjointed, even chaotic, as evidenced by the care she received from the HSE – i.e., an initial period of temporary placement followed by temporary accommodation in a Bed and Breakfast, and ending with a comfortable placement with a foster family which ended as soon as she reached eighteen, whereupon she lost her entitlement to State protection and immediately faced possible deportation. The level of care Andrea received raises questions about the exact nature and purpose of State intervention with asylum-seeking children who are at risk in this country. In fact both the child protection and asylum seeking processes, as experienced here by a child immigrant and young refugee, could be accused of inflicting a degree of personal suffering from which social problems inevitably ensue.

Andrea's narrative illuminates a number of structural, procedural and operational challenges within the current practice of child protection work with asylum-seeking

children in Ireland. Her experience with child protection workers also highlights some of the challenges facing social workers in the management of care. One might say this narrative reveals a system of neglect which is reflected in recent reports on child neglect in the HSE. These difficulties thus feed into the larger pragmatic issue on how best to protect and care for children who are at risk.

## Justification for Inclusion of Young People's Testimony

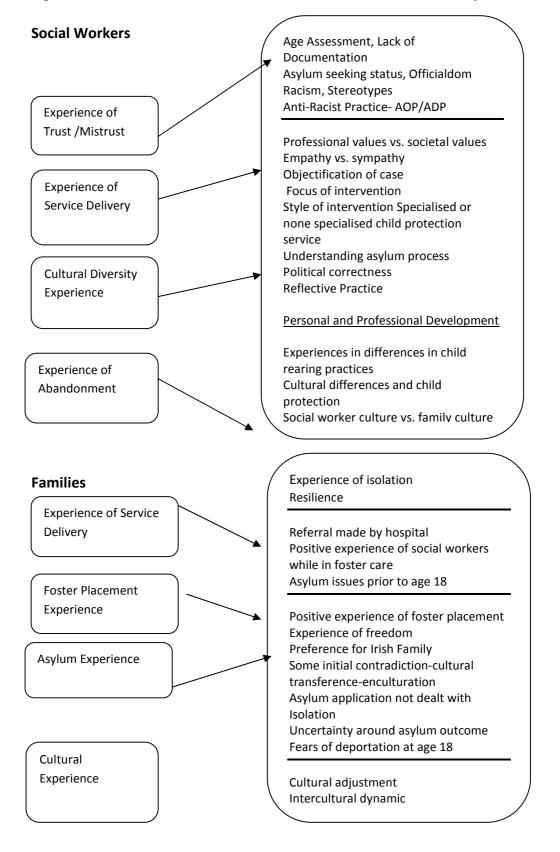
The difference between the young people interviewed and the adult carers interviewed must be acknowledged. Adult carers are the subject of scrutiny, monitoring, surveillance, assessment; children/young people are not. But this very difference highlights a crucial question for those involved in CPSW, namely, whether to place their professional focus on the family or the child. Because no child exists in isolation but rather as a member of a family, this question applies regardless of the racial, ethnic or other background of the cases to which SWs are assigned. Individual practitioners will be guided not only by their perception of the case and the circumstances which led to SW intervention, but by their organizational brief – i.e., the guidance or instruction they receive from the organisation for which they work regarding the proper balance between the care and control functions of their role. The young people interviewed for this study occupy that contested space. While they have no experience of being parents, they do have experience of being parented. Inclusion of their testimony illuminates the tension between taking a child-focused or family-focused approach.

The next chapter presents the findings from the twenty cases with ten social workers and ten families with the purpose of identifying further themes, analysing interactions within them, and situating them in the context of existing literature and theory.

## **Summary and Discussion**

The relationship identified between the core themes and subthemes which emerged from the BNIM panel analysis of the family interview and the social work interview are summarised in diagrammatic form in Figure 16.

Fig 16: Core Themes and Subthemes Drawn from BNIM Panel Analysis



The aim of the present study is to explore the experiences of CPWSW and ASF. The design of the study aimed to cross-reference the participants' experiences. Based on the summary of findings presented above, it can be concluded that some of the themes identified clearly interweave while others are exclusive and specific either to the social worker or to the family member. It can also be concluded that even similar themes are expressed and experienced differently by social workers and family members. Some of the experiences described were shared by social services users and practitioners generally, while some experiences were specific to asylum seekers and those who work with them. For example, Alice and Andrea both address the issue of service delivery, but a clear difference exists in the way that service delivery was experienced by each of them. As the service provider, the social worker's emphasis was on the 'unusual' nature of the 'case', which was complicated by the intersection of legal and professional issues such as the proper management of cultural difference, age assessment and other documentation requirements and immigration status. As a service user, the young adult seeking asylum describes an experience of service delivery that centred mainly on her foster placement and her relationship with the social worker. She spoke well of both, and although there were issues that she grappled with, such as settling into an Irish family and the need for cultural adjustment, the placement appeared to meet her needs and offer a degree of freedom which, according to the young person, would not have been possible in an African family. While some of the findings from the experiences of both the young person and the social worker are specific to young people seeking asylum and to social workers working with asylum seekers of this type, there are a number of similarities between the situation of such young people and children in care generally. This suggests that the findings may have wider relevance.

Pinkerton (1999) points out, for example, that "young people leaving care often face significant challenges", whether they are asylum seekers or not; "care leavers have to deal with a double transition – of adolescence to late adolescence or young adulthood (p. 25). In Andrea's case she had to deal not only with this transition but also with the bigger issue of impending deportation brought on, as she herself

described it in her narrative, by social workers not having addressed her immigration issues prior to her turning eighteen. For Alice, the experience of working with Andrea highlighted the inherent problems with delivering a service within a framework which was not designed with asylum seekers in mind. As already discussed, Alice's being new to the practice of social work and lacking appropriate training for working with such a client group was itself an issue which complicated the challenge of dealing with a child from a different culture, and caused her to question her beliefs about childhood and wonder if children were the same the world over or not. There is much to be learned from the experiences described by the two participants in this case in terms of what defines the social worker / service user relationship.

Note: Chapters 5, 6 and 7 currently embargoed by the author

## **Chapter Eight: Concluding Reflections**

#### The Insider / Outsider Dichotomy

The journey of the study, including its rationale, research questions and methodology as well as the data from the analysis of the interviews, requires reflection. The concept of reflexivity questions the researcher's subjectivity. This is an important aspect of both the BNIM method used in this study, and of the Action Research process of planning, acting, observing and reflecting. Qualitative inquiry as a whole requires this researcher to look at her frame of reference in undertaking the research.

In Chapter One I acknowledged my own personal and professional background as both an insider and an outsider. As an immigrant social worker, I was initially a student practitioner in University College Cork (1988-1993) and later worked as a CPWSW in the HSE (2002-2008). My experience, both personal and professional, influenced my decision to study the experiences of CPWSW and ASF. Breen (2007) dismisses the concept of the insider-outsider dichotomy which she describes as "simplistic and … unlikely to capture the role of all researchers", arguing that "the role of the researcher is better conceptualised on a continuum, rather than as an either/or dichotomy" (p. 163). She was, of course, generalising. I believe that the idea of the insider/outsider neatly captures my position in this particular research.

Reflecting on my role as a researcher, I have come to view myself not as being in one camp or the other or even somewhere in between, but as a bridge joining the two experiences. Because I am both an insider and outsider, I have a wider insight into social work than just an experience of child protection. Although never an asylum seeker, I am an immigrant. I have insight into elements of the problems that face ASF, from my experience of being brought up within an African culture, albeit never subject to the asylum process and direct provision. This gives me a

cultural but not a social congruence with ASF. To that extent I am perhaps a partial insider but I am also a partial outsider. At the time of conducting the interviews for this research, I was no longer working in the Child Protection Team, but rather in fostering. More recently I have worked as an academic. My simultaneous engagement with Irish society as both an insider and an outsider has allowed me to form a bridge between the spaces occupied by ASF and CPWSWs; my own regular travel across that bridge has given me a clearer understanding of the stories of both the professionals and the families from their separate places. In this regard my insider/outsider status is an important advantage I bring to the research. The bridge spans the separate spaces of individual lack of understanding which lead to the inability to develop a better and appropriate CPWSW service for ASF.



Figure 25: Part Insider/Outsider Bridge

Sydney Harbour Bridge (adapted from Wikipedia)

Kanuha (2000) suggests that "Among the primary motivating factors that distinguish the outsider and insider researcher are the construction and meaningfulness of the researcher as subject-object – that is, whereas all researchers necessarily reflect on their relationship to the research project, the native researcher is grounded implicitly and situated at all moments in the dual and mutual status of subject-object, she is both the subject of her study and the participant object being studied" (p. 441). The biggest challenge for me in this study was the recognition during the process that I was or had been what I was studying – namely, a CPWSW. Fine (1994) describes this experience particularly well: "We attempt more often to 'walk the margins' that separate ourselves as researchers from those whom we research; the native researcher is the margin" (cited in Kanuha, 2000, p. 442).

As I look back on the journey of this research I realise it was at times mentally and emotionally discomforting because of my position. Managing the interviewing process and listening to some of the deeply personal and emotional experiences of families was often disconcerting. Some echoed my own experience as an immigrant. I too had been subjected to racial discrimination or stereotyping, for example, and was often taken for a Nigerian because I was black. At the same time, listening to the stories of social workers, I heard echoes of my own professional experience. Some comments made by both CPWSWs and ASF fitted uncomfortably with my own personal and professional ideas, and caused me to reflect on my own assumptions on issues I had previously taken for granted. I was surprised, for example, when a young girl who had been abandoned expressed the following view regarding cross-cultural foster placement:

You know yourself what black families are like; they make you work so hard, like a slave. With my Irish foster family, I did not have to wash dishes, I had a boyfriend and they allowed me to see him. If I told an African family I had a boyfriend they would have killed me. (Andrea)

The pros and cons of same culture foster placement have been widely debated in the literature. Before beginning this research, I would have been of the opinion that this was best practice, but have since come to wonder if this may not be so. It certainly was not the belief of one of the young people in this study, which makes for an interesting finding.

Comments by social workers could be equally disconcerting. I was taken aback, for example, when one remarked,

With some of the African families from African communities, when they are speaking their tones are higher, their mouths are wider. So there is more movement in their face, I am not saying it in a bad way but, for an Irish mother communicating to me like that they are not shouting you know what I mean, you know it's not shouting. (Alice)

This generalisation of African families illuminated for me not only the dangers associated with generalisations and stereotyping, but also the social workers' lack of self-awareness. The worker's comment was not meant to offend, but heard from the perspective of a black person, it had this affect, as indeed the comment about 'pennies for black babies' that I heard when I first came to Ireland would have done, had I understood it at the time.

One of the strengths of the BNIM method is its ability to allow participants to tell their stories in a very open way. My participants certainly did so. It also appears that to the participants I was a researcher doing research. The possible perception they would have of me as a Black African Woman and Social Worker did not inhibit them in telling their stories. Among the challenges and limitations of the study is possibly my own subjectivity, which I tried to manage through the reflective diary and in supervision. Both my supervisors offered much needed guidance, support and challenge in this area. They helped me think through my assumptions.

Although its small sample size limits the extent to which its findings can be generalized, the strength of this small-scale study is in its depth. Ideally, a larger

study should now be developed based on this study to take this important area a step further and explore the area of cultural and linguistic misunderstanding between CPWSW and ASF.

The researcher/social worker boundary was challenging for me in terms of managing the research process. I would have liked to have probed more, but the BNIM method of interviewing limits the questioning to the issues raised by the interviewee. Listening to certain experiences and the difficulties encountered by families was challenging primarily because as a social worker, I had knowledge of the issues families were raising but could only discuss the issues within the confines of the interviewing methodology. One such discussion occurred when a parent posed a direct question:

I cannot understand why if they thought I was a bad mother they took only one of my children, the older one, and they left me with these little ones, why did they not take them all? If I can kill that one how come I can't kill all of them? (Cora)

Such questions regarding the actions and decisions of CPWSWS were difficult to hear, without answering. One parent had a child who had been taken into care at age 13. Now 15 and in the care of the HSE, she was drinking, smoking and going to clubs. As a result, her mother questioned the fundamental value of social work intervention.

They took my child and wanted to give me back a monster, how can they claim they are protecting children? Yes I slapped Justine but they totally ruined her life. Now she was pregnant at 16, she was smoking, drinking and out late at night. This thing would never have happened in my house. In my culture girls do not behave this way. (Cora)

During the initial stages of using the BNIM method, my self-reflection on similar events was distracting, and it was difficult to focus on the interviewing process. In this respect the most reflective learning I had was the need to separate my own experiences from those of the study's participants. Initially I had believed this would be an easy task because of my social work background and training. Because

the role of a researcher is so different from that of a practitioner, however, I encountered some unexpected difficulties, which I had to learn to manage as a partial insider and researcher through subsequent reflection and during supervision. Another conflict associated with this dual role was apparent both in the participants' narratives and in situations in which I did not pursue certain statements made by participants. In most cases these were statements in which I was assumed to know what the participant meant. For example,

I am not trying to be racist or anything like that, but you know what I mean. (Alice)

There are some African people who are very nice, they are like Irish people, but 99% of them they make you clean, they use you as their home help, you know what I mean, you know yourself how black people are. (Andrea)

There is that whole trust thing; families don't trust social workers. You know yourself; you know what I mean (Edgar).

While it was possible to probe some of these assumptions, it was not always possible to probe all such statements due to the BNIM style of interviewing which requires the researcher to probe some but not all that is said in the interviewee's narrative. I believe my status as a black social worker and researcher was beneficial to the research process. The fact that I was black did not prevent in any way either the social workers or the families from expressing their often generalised preconceptions about black people. This may have been because this was not an issue for them. Once they engaged in telling their stories they did so without inhibition. When interviewing social workers I was probably seen more as a social worker than a black researcher and in this way my partial insider/outsider status assisted in the research by allowing participants to be more open than they might have been with a white researcher who was not a social worker.

Despite the criticisms of the insider/outsider dichotomy (Kanuha, 2000; Hodkinson, 2005; Breen, 2007), my own view is that "there are strengths and limitations to both inside and outside research" (Brooks, 2000, cited in Breen, 2007, p. 164). Furthermore it is my belief that the position of part insider/outsider I adopted in

undertaking this research was predetermined by my own personal and professional location. It was important for me to be true to the obvious position in which I found myself, in order to deal appropriately with the issues that arose within the research process. These issues concerned bias, ethical dilemmas and meeting statutory obligations.

#### Conclusion

Though not generalisable, the findings from this study pave the way for future research in Ireland in this area. Available figures from the last census show a drop in the numbers of immigrants to Ireland, but this does not mean that the issues raised in this study are no longer significant, as Ireland remains a multicultural society. It is therefore important that further research can inform practice in this area which needs to continue to be developed. There is also the continuing weakness in the revised CFNGPWC over the importance of the relevance of cultural and linguistic difficulties in CPWSW. There needs to be further investigation into the inherent care and control role of CPWSW. Further research could determine where to strike the balance in support and investigative duties imposed on CPWSW under the Child Care Act 1991, as amended. It may be necessary to consider a different model of Child Protection and Welfare than that currently used so as to separate the caring and controlling functions of the role. If one looks at another sensitive area in social regulation such as equality, the model adopted in Ireland is one that has given the advocacy role to the Equality Authority and put the investigative role to the Equality Tribunal, thus separating the care role from the regulatory and investigative role.

## Appendix A Ethical Approval - Health Service Executive (HSE)

# Appendix B Ethical Approval - Queen's University Belfast (QUB)

#### **Appendix C Information Sheet for Families**

There are very few studies regarding the experiences of child protection social workers and asylum seekers in Ireland. You are being invited to take part in such a study, as your experience is valuable and can help others like you. In order to decide whether you want to take part or not, please take time to read this information leaflet, feel free to discuss it with any other people and ask the researcher any questions about the research.

You can contact me on tel: 086 0526797: or email: colletta.peta01@qub.ac.uk

#### What is the purpose of this study?

To understand the experiences of child protection social workers and asylum-seeking families of working together. Its aim is also to contribute to the development better services for families.

#### Why do we need such a study?

Because for there are few studies of this kind. It is hoped this study could reveal the real issues that arise for social workers and asylum seeking families in working with each other. It is also important for families and social workers to have an opportunity of talking about their experiences because recommendations for appropriate guidelines can be made out of whatever they say.

#### Who is conducting the research?

The research is conducted by Colletta Peta, a social worker, experienced in the field of child protection and currently employed by the Health Services Executive. The study is supported by Gails Univeristy Belfast, Northern Ireland where Iam currettly a PhD student. **Who will participate in the research?** 

Any family member over the age of 18 years who is an asylum seeker and has been involved with child protection social workers. Social workers who worked with such a family are also being invited to take part in the research.

#### What does your participation in this study involve?

A number of families who have been involved with social workers will be invited to meet with Colletta Peta for an interview to talk about their experience of working with the social worker. Details about the interviews and venue will be agreed upon with each participant. The interviews will last one hour or more depending on how much the participant wants to talk. Interviews will not last more that two hours. For the first phase of the research Colletta will meet with family members who will form part of a working group. A similar group of social workers will also be established. This group will be selected from those wishing to contribute their experience in such a group. On the family members side this group will help Colletta to establish if there are issues for families in working with social workers. The same will happen with social workers in their working group they will also talk about what issues arise for them when working with asylum seeking families. People from this group will not take part in the overall research.

Colletta plans to tape-record interviews which will help her take notes in order to write up the research report. If you do not agree, you have the right to refuse being tape recorded. Colletta might ask to take some notes of what you say. If you are not agreeable to this either you can say so.

#### Will information be kept confidential?

All personal information that you provide during the research will be strictly confidential. All information will be anonymous, which means that your name and address will not be kept or made available to anyone. The final written report or the research will not contain your real name or any other details which could identify you. The only exception is if you disclose information to the researcher that you or a child may be at risk. If this happens, Colletta will talk to you about the need to inform people responsible for your protection and what she suggests should be done.

#### Are there any risks involved if you take part in this study?

It is envisaged that the risks involved are low, however sometimes people can become upset recalling and talking about their experiences. If this happens Colletta will talk to you about supports that are available to help you and how you can access them.

#### Do I have to take part in the study?

The decision to take part in the research is entirely up to you. If you agree, you are very welcome and your experience is appreciated. You only have to complete a consent form so that Colletta will know that you are interested. If you do not want to participate, thank you all the same for taking the time to read this information leaflet.

#### What can I do if I decide to take part and there is something Iam not happy about?

Please feel free to discuss any concerns you might have during the study. You have the right to withdraw from the research study at any time and you do not need any give any explanation.

#### **Contact Details:**

Researcher: Colletta Peta - 086 0526797 - collettapeta01@qub.ac.uk

**Health Service Executive Fostering Team** Stapleton Place

Dundalk

Co. Louth: Tel -042-9392200 Fax-042939222265

Thank you for taking time to read this information sheet.

#### **Appendix D Information Sheet for Social Workers**

A research study regarding the experiences of child protection social workers and asylum-seeking families in the context of working together is being conducted by Colletta Dalikeni, a social worker, in the Fostering team- Wilton House, Dundalk. The study is supported by the Health Service Executive and by Queens University Belfast. Colletta is undertaking the study on a part time basis.

The purpose of this research is to bring an in-depth understanding of the experiences of social workers and families of working together. It also aims to explore how services could be improved so they should more adequately respond to the needs of asylum-seeking families. The study will make recommendations for practice guidelines for social workers.

One of the first stages of the study consists of reviewing case files to gather demographic data on families. Also setting up a consultation group of social workers who will be involved on consultative basis from the design of the research to the dissemination of findings. Social workers interested in this part of the research process will be invited to do so prior to the research commencing. Further details regarding consultation groups will be provided in due course.

The researcher is interested in interviewing social workers who have had the experience of working with asylum seeking families only. As regards confidentiality issues, the researcher ensures anonymity of information provided and complex confidentiality about its use.

Your experience and expertise is of great importance for the development of this study, however it is entirely your decision whether you wish to participate. In order to participate in the research I will require your informed consent. I am seeking your consent for me to:

- (a) Tape record the interview or take notes
- (b) To voluntarily take part in the research (i.e. to be interviewed)

I will send you a form requesting your informed consent, you can return it to me no later that the  $20^{th}$  of March. If I do not hear from you by the due date I will follow up with a telephone call or email to check if you are still interested. If you consent I will follow-up by contacting you to arrange an appointment. If you do not consent there will be no further contact with you.

The information you provide will be an important part of the research findings. Everything discussed is strictly confidential. The interviews will take between 1-2 hours and you will be given a choice of where you wish to be interviewed. Your office can be a possible venue if you wish. Permission has been obtained by the researcher from team leaders for interviews to take place during working hours

At the end of the study, a report of the research findings will be disseminated to the (HSE) and to families through the consultation groups. Should you have any queries, please feel free to contact me on my contact details below:

Colletta Dalikeni- Tel 086-0526797 or by email at <a href="mailto:collettapeta01@qub.ac.uk">collettapeta01@qub.ac.uk</a> **Thank you for taking time to read this information sheet.** 

#### **Appendix E Consent Form for Families**

#### **Consent Form for Parents and Guardians**

Research Topic: Making Sense of Each Other: Lived Experiences and Told Stories of Child Protection Social Workers and Asylum Seeking Families.

#### **Declaration of Participant:**

I have been asked to consent to participate in a study designed to find out the experiences of parents and guardians of children who have been in contact with child protection/welfare social workers in the HSE Dublin North Eastern Area.

I have read/have had read to me this consent form. I have had the opportunity to ask questions and my questions have been answered to my satisfaction.

I understand that the information I will give will be influential in the development of culturally sensitive practice guidelines for social work with refuges and asylum seekers.

I freely and voluntarily agree to take part in this research

I have been made aware that all information shared is confidential except if I say something to the researcher that indicates that someone is being harmed or might be harmed, the researcher is obliged to speak to someone in the H.S.E. and they will let me know first before doing so.

I understand that all information I give will be presented anonymously and that and that participation is voluntary and I can withdraw at any time.

I understand that my taking part in this research will in no way affect my relationship with the HSE- North East or any decisions made by the HSE and the child protection/Welfare Services about my family or me.

I have received a copy of this agreement and I understand that should I not wish to participate in the study, this will not affect my future treatment.

I give my informed and voluntary consent to take part in this research. I acknowledge that I have received a copy of this form.

PARTICIPANT'S NAME:	
CONTACT DETAILS:	
PARTICIPANT'S SIGNATURE:	
DATE:	

STATEMENT OF INVESTIGATOR'S RESPONSIBILITY: I have explained the nature and purpose of this research study. The type of interviewing style, and the risks that may be involved. I have offered to answer any questions should the interviewee have any questions about the research. I believe that the participant understands my explanation and has freely given informed consent.

PRINCIPAL INVESTIGATOR'S NAME:	
CONTACT DETAILS:	
RESERACHER'S SIGNATURE:	
DATE:	

Thank you for your participation and contribution to the research

### **Appendix F Consent Forms for Social Workers**

Research Topic: Making Sense of Each Other: Lived Experiences and Told Stories of Child Protection Social Workers and Asylum Seeking Families.

i confirm that i agree give my informe	ed consent to take part in the above named
research study. I have read the inform	mation sheet regarding the research and fully
understand it.	
Name of Cocial Waylon	
Name of Social Worker	<del>-</del>
Address:	
Telephone Number:	
Email Address	
Signed	
Date:	
Office Location	

Thank you for your participation and contribution to the research

## Appendix G Consent Forms for Social Workers (Consultation Groups)

## Research Title: Making Sense of Each Other: Lived Experiences and Told Stories of Child Protection Social Workers and Asylum- Seeking Families

I have been asked to take part in a study of experiences of child protection social workers of working with asylum seeking families in the H.S.E. Dublin North East area.

I understand I am involved in the research on a consultancy basis. This means that I will not take part in the main research.

I realize that my role is to assist with the research design and possible development of practice guidance in accordance with research findings

I am aware that I will attend up to 4 meetings during the course of the research as required.

I understand that I will be required to work with the researcher and 3 other social workers from the participating areas in the research

If I must withdraw from the group for any reason, I will inform other group members in advance and assist in finding a replacement.

The researcher has offered to answer any questions I have about the research

I understand that the information I contribute to the group will be treated as strictly confidential and that neither myself nor clients that I might talk about will be identified b their names in their research thesis or any report.

The researcher has informed me that both my Team leader and Principal social worker are in agreement to my attendance to the meetings during working hours and that the research has received ethical approval from both the HSE and Gails University Belfast

I give my voluntary and informed consent to participate in the consultation group for this study.

Signed <sub>-</sub>	 	 	 	
Date			 	

## Appendix H Consent Forms for Families (Consultation Groups)

Research Title: Making Sense of Each Other: Lived Experiences and Told Stories of Child Protection Social Workers and Asylum- Seeking Families

I have been asked to take part in a study of experiences of child protection social workers of working with asylum seeking families in the H.S.E. Dublin North East area.

I understand I am involved in the research on a consultancy basis. This means that I will not take part in the main research.

I realize that my role is to assist with the research design and possible development of practice guidance in accordance with research findings

I am aware that I will attend up to 4 meetings during the course of the research as required.

I understand that I will be required to work with the researcher and 3 other family member representatives from the participating areas in the research

If I must withdraw from the group for any reason, I will inform other group members in advance and assist in finding a replacement.

The researcher has offered to answer any questions I have about the research

I understand that the information I contribute to the group will be treated as strictly confidential and that neither myself nor anybody else will be identified by their names in the research thesis or report

I give my voluntary and informed consent to participate in the consultation group for this study.

Signed	
Date	 

#### Appendix I BNIM SQUIN For Social Workers and Families

#### **Social Workers**

As you know, I am interested in the experiences of child protection social workers who have worked with refugees or asylum-seeking families. So can you please tell me the story of your intervention with the X family? I am interested in all the events and experiences that were important to you personally. I will listen first, I will not interrupt. I will just take some notes in case I have any questions after you have finished. Please take the time you need. We have got about 1-2 hours or more if need be. I will tell you if we are running out of time. Please begin wherever you like.

#### **Families**

As you know, I am interested in the experiences of families of working with child protection social workers. So can you please tell me the story of your intervention with social worker K. I am interested in all the events and experiences that were important to you personally. I will listen first, I will not interrupt. I will just take some notes in case I have any questions after you have finished. Please take the time you need. We have got about 1-2 hours or more if need be. I will tell you if we are running out of time. Please begin wherever you like.

#### Appendix J ASF Case File Synopses

#### Case 1: Andrea (Young Person)

Eighteen years old and originally from Nigeria, Andrea was abandoned by her mother in 2003-2004, at the age of 14. Andrea came to the attention of the Child Protection team following a visit by the public health nurse to her house because her mother had recently had a baby. The public health nurse became aware that Andrea was living on her own; she was concerned and reported the matter to Social Services. The hospital at which Andrea's mother had given birth also had been trying unsuccessfully to get in contact with her for a follow up. On one occasion Andrea answered the house phone and informed the nurse at the hospital that she did not know her mother's whereabouts and that she had not seen her in weeks. The hospital authorities also became concerned and contacted social services. When social services intervened Andrea was placed in foster care because at the time she was a minor. I met with Andrea in June 2007 soon after her 18<sup>th</sup> birthday. Andrea's Social Worker was Alice.

#### **Case 2: Bridget (Young Person)**

Bridget and her two brothers aged 7 and 11 were trafficked into Ireland in 2003. Bridget was aged 14 at that time. The children came to the attention of social services through immigration officials who found them on a train near a border trying to come into Ireland. Bridget informed immigration officers they had come to Ireland to escape from an area in which both their parents had been killed. Their great aunt had paid traffickers to bring them to Ireland. The three children were brought to social services by immigration officers. The children were placed in foster care. At the time of interviewing in 2007 Bridget was aged 18 and no longer in foster care. Her brothers were still in foster care. Bridget's Social Worker was Bernice.

#### Case 3: Cora

Originally from the Democratic Republic of Congo, Cora was living in a direct provision centre in Ireland for a year with her three children (Gerard, aged 6, Thomas, aged 9, and Justine, aged 13) who were attending a local school in the area. Following a misunderstanding, Cora struck Justine, causing her bruising to the face. When Justine went to school the teacher asked her what had happened and she explained that her mother beat her up because she would not help with cleaning up. It was alleged that Justine also used to steal the little money Cora had in the house. The school reported the incident to social services. When social workers visited Cora at the direct provision centre she insisted this was her way of disciplining and she would continue to discipline this way as this was how children were trained in her country. Cora refused to cooperate with social workers and insisted if a similar situation arose she would treat it in exactly the same way.

Justine was subsequently placed in foster care. Cora's Social Worker was Claire.

#### Case 4: Dorothy

Dorothy sought asylum in Ireland in 2002 with her two nieces (Melissa, aged 4, and Susan, aged 12), for whom she'd been caring since her sister's death as a result of ethnic fighting in her country. At the time of interviewing, the family were living in direct provision. Fearing that they would not be able to cope because they could not speak English, Dorothy had not sent the children to school, but having been waiting several years for her application to be processed she had become depressed looking after the children all day. Sometimes she would leave them alone in the centre for long periods, or lock herself in a room and send the children out to play. On one occasion Dorothy went out for a whole day, leaving Susan to look after Melissa. Alerted by another resident, centre officials contacted social services after the child was observed crying uncontrollably and they were unable to locate Dorothy. Dorothy's Social Worker was Denise.

#### Case 5: Ellen

Ellen and her partner Peter had come to Ireland from South Africa in 2004, and were living in direct provision with their two children, aged 2 and 5. Social Services intervened after Peter, who had been the main carer of the children, absconded from the direct provision centre when immigration officers came to notify him of the family's pending deportation. Peter was said to have swum into the nearby sea and could not be found. Ellen, who suffered from mental health problems, was unable to care for the children. She used to hit the children all the time and on one occasion was observed pulling her hair out and eating it. When social workers were called she did not engage with them. She wanted the children but could not take care for them. Social workers suspected Ellen was clinically depressed. Ellen's Social Worker was Edgar.

#### Case 6: Florence

Florence had been a community political activist in Nigeria, her country of origin. A mother of two children, aged 5 and 7, she came to Ireland in 2003 to seek asylum and was living in direct provision when I interviewed her. For religious reasons Florence was refusing to eat food from the main dining hall where all the other residents were fed. She also refused to allow her children to eat there. On one occasion when the children ate from the centre's canteen Florence was seen slapping them. The children were observed crying in school and told the teacher they were hungry because their mother would not allow them to eat in the dining room. When contacted by social services Florence insisted that unless she could cook her own food she would not eat from the main dining room or allow her children to eat from it. Social workers were advised by the authorities at the centre that cooking facilities would not be provided for individual residents and that all residents had to eat in the main dining hall. Florence's children were eventually admitted into care. Florence wanted her children back but remained unwilling to comply with the rules around food. Florence's Social Worker was Felicity.

#### Case 7: Grainne

Grainne came to Ireland in 2004 to seek asylum with her two children, aged 6 and 9, and was living in direct provision when I interviewed her. Originally from Liberia, Grainne was under threat because her husband was a political activist. Political unrest was a constant feature of life in Liberia; during the conflict there Grainne had suffered gender violence, and spoke of having seen terrible killings and bloodshed. Social services became involved with Grainne because she would not allow her children to go to school out of fear that something bad would happen to them. Because of her mental health problems, Grainne found it difficult to cope with the delays in processing her asylum application. Constantly anxious, she took her frustration out on her children whom she slapped all the time. Grainne was facing possible deportation at the time I interviewed her. Her Social Worker was Gail.

#### Case 8: Hazel

The mother of 4-year-old twins, Hazel came to Ireland in 2002, and was living in direct provision at the time I interviewed her. She was seeking asylum to escape the practice of female genital mutilation, to which she claimed she had been subjected and from which she was trying to save her daughters. She suffered from fear of deportation. Social workers intervened because Hazel used to leave her children home alone. When questioned about this by social workers, Hazel told them she felt that she did not need to supervise her children when they were playing outside with others. She found herself losing her temper with the children if she was around them constantly, and sometimes would wander off by herself after sending them out to play, believing that other adults around the centre could look after them. Hazel's Social Worker was Harriet.

#### Case 9: Ida

Fearing that her sons, aged 10 and 12, would be used as child soldiers after children from her area were abducted by rebels, Ida came to Ireland in 2002 from Burundi. Ida came to the attention of social services because she was refusing to send her children to school. Ida maintained that her children had told her that other children in the school were calling them names because they were living in the direct provision centre. Also, because Ida could not afford to buy food for the children's lunch boxes, the children often went to school with no lunch. Ida spoke very little English and was both afraid and unable to bring her concerns to the school authorities. Ida's Social Worker was Ian.

#### Case 10: Jennifer

Jennifer came to Ireland to seek asylum in 2003 and was living in direct provision. Two of her children, aged 3 and 6 months, arrived with her; two other older children remained in her country of origin. Jennifer was seen begging at the local shopping centre on numerous occasions with her children, whom she insisted on keeping with her while she begged. When asked by social workers why she was begging, Jennifer said that she wanted money for extra food for herself and her children. After numerous warnings by the Gardaí Jennifer was arrested. Although she was still breastfeeding her baby, he and her other son were placed in foster care on the day she was arrested. Jennifer had to travel to Dublin to the immigration office to sign in every day, pending deportation. Jennifer's Social Worker was June.

# Appendix K Articles of the Universal Declaration of Human Rights

Article 1	Right to Equality
Article 2	Freedom from Discrimination
Article 3	Right to Life, Liberty and Personal Security
Article 3	Freedom from Slavery
Article 4	Freedom from Torture and Degrading Treatment
Article 5	
	Right to Recognition as a Person before the Law
Article 7	Right to Equality before the Law
Article 8	Right to Remedy by Competent Tribunal
Article 9	Freedom from Arbitrary Arrest and Exile
Article 10	Right to a Fair Public Hearing
Article 11	Right to be Considered Innocent until Proven Guilty
Article 12	Freedom from Interference with Privacy, Family, Home and
	Correspondence
Article 13	Right to Free Movement In and Out of the Country
Article 14	Right to Seek and Enjoy in Other Countries Asylum from Persecution
Article 15	Right to a Nationality and Freedom to Change it
Article 16	Right to Marriage and Family
Article 17	Right to Own Property
Article 18	Freedom of Belief and Religion
Article 19	Freedom of Opinion and Information
Article 20	Right to Peaceful Assembly and Association
Article 21	Right to Participate in Government and in Free Elections
Article 22	Right to Social Security
Article 23	Right to Desirable Work and to Join Trade Unions
Article 24	Right to Rest and Leisure
Article 25	Right to an Adequate Living Standard
Article 26	Right to an Education
Article 27	Right to Participate in the Cultural Life of the Community
Article 28	Right to Social Order and Ensuring Human Rights
Article 29	Community Duties Essential to Free and Full Development
Article 30	Freedom from State or Personal Interference in the Above Rights

Source: United Nations High Commissioner for Refugees (1999b)

# Appendix L Ireland's Response to Refugees and Asylum Seekers (1935-2004)

In the second se	
1935	Aliens Act /Nationality and Citizenship Act
	These two Acts provided the domestic, legal framework for
	processing refugee applications until the Refugee Act (1996).
1939	2,610 Aliens in Ireland – 1,297 from the USA, 326 from Germany, 189
	from Italy, 160 from France, and 126 from Russia.
1939-1945	538 Aliens accepted – most from Germany and Austria
1946	Aliens Order
	A hierarchy of visa applications applied, precedence was given to
	those from the USA, Belgium, Holland, France, Liechtenstein, and
	Scandinavian countries.
1951	846 Refugees in State. This number fell to 450 in 1953.
1956	Ireland signed the Convention relating to the Status of Refugees.
	530 Hungarians arrived; most of these used Ireland as a transit
	country and subsequently settled in North America.
1973-1974	120 Chileans arrived; most returned to Chile when democracy was
	restored.
1979	212 Vietnamese arrived and were resettled in Ireland. Their numbers
	rose to 408 in 1989 under the Family Reunification programme.
1985	26 Iranian Bahai arrived.
1989	Prohibition of Incitement to Hatred Act.
1992	178 Bosnian refugees accepted; they later are joined by family
	members and others.
1993	362 asylum applicants -until 1993, annual applicants averaged 50
1994	The number of asylum applicants began to increase significantly
1996	Refugee Act
1998	Employment Equality Act
1999	Immigration Act
	1000 Kosovan Albanians accepted
2000	Equal Status Act
	Refugee Act 1996 (as amended) on 20 November 2000
	Illegal Trafficking Act
2003	Immigration Act 2003
2004	Immigration Act 2004

# Appendix M Issues Arising during Consultation Meetings with Social Work Managers, Social Work Representatives and Family Representatives

Social Work Managers	I. Issues in relation to different child-rearing practices     Discipline of children     Semale genital mutilation     Agreement by social work managers that the present study would contribute knowledge in this area of social work practice as it is a new area to community care teams. Access to social workers and case files was provisionally agreed.
Social Work Representatives	<ol> <li>Issues of dealing with diversity; fears of being accused of being discriminatory</li> <li>Distrust of families by social workers</li> <li>Documentation from families</li> <li>Language barriers</li> <li>Differences in child-rearing practices</li> <li>Lack of knowledge of the asylum process and services for asylum seekers</li> <li>Cultural issues</li> <li>Language barriers; the use of interpreters</li> <li>Working with immigration officers</li> <li>Lack of appropriate training to deal with specific issues</li> </ol>
Families Representatives	1. Experiences of being treated as a homogenous group 2. Perception that social workers did not see beyond their skin colour 3. Cultural misunderstandings 5. Different experiences of social work intervention: some considered positive and some not so positive 6. Difficulties in making social workers understand the challenges of the asylum process; a sense that it would be good if social workers had insight into the process 7. Language problems 8. Problems of integration into Irish society prior to granting of refugee status; this situation changed when one was not living in direct provision 9. Differences in child-rearing practices

## **Appendix N A History of Mistrust: Why and Whom Refugees Mistrust**

The Period	Why	The Decision to Flee	Reaching Safety and a
of Threat	Refugees Mistrust		Place of Asylum
Due to process		Primary 'ontological security'	Survival
restructuring son	ocial order of a	(Richmond, 1994:19) or assumptive world is	Due to past refoulement at
(Zolberg,1983,1	1989)	destroyed	boarders
Due to breakdo society, e.g. for	own of trust in mer Yugoslavia	Secondly 'ontological security' is threatened (Richmond, 1994:19)	Fear of betrayal
Seen friends/fa killed or torture		Perceive a split of the social contract between the	Opposition groups may be from different 'vintage' (Kunz, 1973)
May be 'in hidi	_	government and the individual	May have different past or present political allegiances
Has been forcik without compe	•	Anticipatory or acute distinction (Kunz,1973)	
May have lost t system e.g. Zim			
Whom Refugee	es Mistrust	Members of other ethnic or	Various agents, e.g. travel,
		religious groups. Informers, spies, government agents,	facilitators, passport brokers, other brokers (although may
		Military intelligence	be forced to trust them)
Reaching Safet	y and a Place	Refugee Camp Experience	Reception Into a Host
of Asylum	nact	Survival	Country (UK)  UK process of formal and
Survival Due to refoulement at	•	May perceive UNHCR as	informal social exclusion
Fear of betraya		inaccessible diplomats and	begins
Opposition gro		NGO personnel as careerist –	осына
from different		neither empathetic to their	Negative experiences of
1973)	<b>5</b> ( ,	circumstances	hostile encounters
May have diffe	rent past or		
present politica	al allegiances	Camp committee may contain	If RSP or RCO received Home
		same members as opposition	Office funding may be
		groups. Possible existence of	perceived as agent for
		secondary persecution by	government
Resettlement		non-state agents  Post Resettlement	
	me country are	Past experiences.	
reproduced in 6	exile.	May begin to trust some individuals?	
		Depends upon discrimination	
		encountered	

Members of other ethnic or	Various agents, e.g. travel,	Government officials Other
religious groups. Informers	facilitators, passport brokers,	uniformed officials, soldiers
pies, Government agents,	other brokers (although may	and border guards. Other
Military intelligence	be forced to trust them	ethnic or religious groups,
		Opposition groups in exile,
		Other exile groups
UNHCR NGOs Camp committees, Other ethnic or religious groups, Opposition groups in exile Exile groups	Immigration officials < Home office officials, Host population, RSPs and/or RCOs "Everybody"	Home Office, Host population in area of resettlement, Housing providers, Sections of own 'community', Political extremists
Home office ,		
Host population in area of		
resettlement or secondary		
migration		
Political extremists		
'Officials'		

Source: Hynes (2003)

## **Appendix O A History of Mistrust: Why Refugees Are Mistrusted**

## and Who Mistrusts Them

The Period of	Why	The Decision to Flee	In flight
Threat	Refugees Mistrusted		
-Due to perceiv political connect -Due to process restructuring so	ctions s of	-Creates a split of the social contract between the government and the individual -Barriers to exit in some	-Rural contest: may be considered to be spies and/or members of other ethnic or religious groups
nation-state (Zo 19831989		countries, e.g. North Korea -Anticipatory or acute distinction (Kunz1973)	-Urban context: due to deterrence measures enacted through laws and airline regulation
Reaching Safety Asylum	and a place of	Refugee Camp Experience	Reception in a host county (UK)
-Refugee Status Determination not consider the definition -Opposition gro from a differen (Kunz 1973) -Different past allegiances	process may em to fit within oups may be out 'vintage'	UNHCR: At an individual level may not believe case history. At a group level may mistrust numbers provided  International NGOS may consider them to be within their 'target group' or may not consider them to be 'real refugees	-May be perceived as being 'bogus' or 'undeserving'(Sales 2002:243) '-Culture of suspicion' (JWI et al, 1998) -Home Office 'Culture of disbelief Media
Resettlement (	•	Post Resettlement	
May be perceiv 'bogus' or 'undo 2002:243 Media Irresponsible st politicians	eserving'(Sales	If granted 'refugee' or ELR status may begin to be trusted Discourses in media about links with terrorism, etc Unable to work	
Who Mistrusts		Who Mistrusts Refugees	Who Mistrusts Refugees
Own governme agents Members of oth religious groups	her ethnic or	Own government and their agents	Rural context villagers met en route: e.g. Burmese students walking to boarders Urban context airline staff
Government of -Other uniform soldiers and bo -Opposition gro -Other exile gro	ed officials, - rder guards oups in exile oups	-Host governments -UNHCR -International NGOs -Member of other ethnic or religious groups -Opposition groups in exile -Other exile groups	-Immigration officials -Government and individual politicians -Home Office - and local media -Sections of national population
Government an politicians Home Office National and Lo Sections of National	ocal Media	Government National and Local media Sections of national and local population	

Source: Hynes, (2003)

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